

OREGON Submitting Specimens for 2025-2026 HEALTH SARS-CoV-2 & Influenza Surveillance

Respiratory specimens submitted to the Oregon State Public Health Laboratory (OSPHL) for influenza surveillance are part of the CDC-WHO collaboration. Selected specimens are submitted to CDC for further characterization. The project helps generate a comprehensive understanding of the influenza and SARS-CoV-2 viruses circulating internationally and informs vaccine development. Your participation in this program is requested and greatly appreciated.

Specimen submission is particularly important as the multistate outbreak of avian influenza A(H5N1) in animals continues. Monitoring for novel influenza A virus infections in humans is critical to determine whether these viruses are moving from animals to humans and spreading between humans. These activities remain important components of national efforts to prevent the emergence of new viruses with pandemic potential.

Please submit as many qualifying specimens as you are able. We understand that, in some cases, the timing of collection and storage may mean that a specimen may not meet submission criteria.

Surveillance Project Differences:

	SARS-CoV-2 Surveillance	Influenza Surveillance
Specimen Selection	Random sample of SARS-CoV-2 positive specimens with Cycle threshold (Ct) values < 28.1 Submit up to 10 specimens per week.	Required: Submit any specimen exhibiting atypical features (For example: unsubtypeable) for further characterization. Requested: Submit all influenza-positive specimens from hospitalized patients ² .
Paperwork	Complete an Influenza or SARS-CoV-2 Sequencing Surveillance Line List for each submission. Choose between the Patient-Identified (xlsx / pdf) or Minimal Data (xlsx / pdf) versions. Complete all required columns for each specimen. Do not use Test Request Forms for this surveillance.	Complete either: A) Influenza or SARS-CoV-2 Surveillance Line List (xlsx / pdf). B) OSPHL Virology / Immunology Test Request Form, available at www.bitly.com/phl-forms. Complete one request form for each specimen tube. 1. Complete all required fields. ³ 2. In the "Tests Requested" section, in the "Molecular" box, choose "MOL IA/IB QUAL: Influenza RT-PCR Screen."4
Test Menu	https://bit.ly/covid-ngs	https://bit.ly/flu-orlab

¹ If the method does not report Ct values, send the available samples.

² For this surveillance, "hospitalized" is defined as patients admitted to your facility and those who would typically be admitted but are boarded in other areas. (For example, the emergency department) For patients hospitalized with influenza who previously tested positive, facilities are encouraged to recollect a respiratory specimen for molecular testing at OSPHL upon admission if original samples are not available or viable.

³ Required fields include: patient name; date of birth; sex/gender; county of residence; submitting facility; ordering clinician; date of collection; specimen source; test requested

⁴ This is the best selection currently on the test request form. OSPHL will first test using the <u>CDC SARS-CoV-2 & Influenza A/B Multiplex Real-Time RT-PCR</u> or the <u>Hologic Aptima NAAT</u> as circumstances require.

Specimen Collection:

- 1. Collect specimens as soon as possible after symptom onset, ideally within 3-5 days but no later than 7 days after onset.
- 2. Collect an approved specimen type.⁵ Use swabs made with a Dacron polyester tip or a flocked swab on a plastic shaft. (Not accepted: wooden shaft swabs; cotton tip swabs; swabs with calcium alginate)
- 3. Place swab in the Viral Transport Media (VTM) or Universal Transport Media (UTM) tube⁶. **Do not** submit Molecular Transport Media (MTM) because it inactivates the virus and cannot be used for all public health surveillance.
 - Break off the shaft, leaving the swab tip inside the tube. If using dual swabs¹, place both swabs inside the same vial.
 - Tightly secure the cap of the container of media containing the specimen.
 - Failure to break off swabs will cause media to leak and the specimen to be unsatisfactory for testing.
- 4. Label the specimen tube.
 - Each tube must be labeled with at least **two** unique patient-specific identifiers. For example: full patient name, date of birth, patient ID, or medical record number
 - Identifiers on the tube **must** match identifiers provided on the Test Request Form.
- 5. Complete the required paperwork detailed in the table above.

Specimen Preparation, Storage, Handling:

- 1. Place each specimen tube in the sealable pocket of a separate specimen biohazard bag.
 - Be sure that the cap on the specimen tube is securely fastened.
 - Do not place multiple tubes in the same specimen bag.
- 2. If using, fold Test Request Form for one specimen in half and place it in the outer pocket of the specimen biohazard bag with the patient information facing outward.
 - **Do not** place requisitions in the same compartment as the specimen.
- 3. Store specimens at **refrigerated temperatures (2-8°C) for up to 3 days** pending transport. Transport the specimen in a container that can maintain 2-8°C during transport, such as a Styrofoam or hard sided cooler with a frozen gel pack.
 - Send specimens twice weekly if possible. This helps OHA meet testing and sample submission timelines.
 - If specimen cannot be received at OSPHL within three (3) days of collection, freeze the specimen(s) at -20°C, preferably at -70°; ship on dry ice as soon as possible.
 - Note: Even though specimens collected into VTM/UTM can often be stored at room temperature, surveillance specimens must maintain cooler temperatures because they may be sent to CDC for further characterization, including cell culture.

Shipping & Contact Information:

Oregon State Public Health Laboratory Virology/Immunology Testing Section 7202 NE Evergreen Pkwy; Suite 100 Hillsboro, OR 97124 503-693-4100

⁵ Acceptable Specimen Types:

Upper Respiratory: nasopharyngeal swab, nasal swab, throat swab, dual/combination swabs (2 swabs from accepted specimens in one tube).

⁻ Lower Respiratory: nasal aspirate, nasal wash, bronchoalveolar lavage, bronchial wash, tracheal aspirate, sputum, lung tissue.

⁻ For Influenza H5N1, conjunctival specimens are also accepted. Refer to the Influenza Test Menu.

⁶ For SARS-CoV-2 surveillance, sterile saline is also accepted.