

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 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.

Complete instructions for specimen submission can be found at <a href="www.bitly.com/flu-orlab">www.bitly.com/flu-orlab</a>, and are summarized here for convenience.

#### **Specimen Selection:**

Oregon Health Authority asks that all Oregon hospitals submit influenza-positive specimens to OSPHL:

- 1. **Required:** For any specimen exhibiting **atypical features** (e.g., un-subtypeable) for further characterization.
- 2. Requested: For all hospitalized patients.
  - For this surveillance, "hospitalized" is defined as patients admitted to your facility and includes 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 if original samples are not available or viable.

## **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.
- Collect an approved specimen type.<sup>1</sup> 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) tube.

**Do not** submit Molecular Transport Media (MTM) because it inactivates the virus and cannot be used for all public health surveillance.

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

<sup>&</sup>lt;sup>1</sup> Acceptable Specimen Types:

<sup>-</sup> Lower Respiratory: nasal aspirate, nasal wash, bronchoalveolar lavage, bronchial wash, tracheal aspirate, sputum, lung tissue.

<sup>-</sup> For influenza H5N1 collection, refer to the OSPHL Test Menu.

- Break off the shaft, leaving the swab tip inside the tube. If using dual swabs<sup>1</sup>, 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
  - The identifiers on the tube **must** match the identifiers provided on the Test Request Form.
- 5. Complete the required paperwork detailed below.

### **Test Request Form:**

Complete either the:

- A) Influenza or SARS-CoV-2 Surveillance Line List (xlsx / pdf).
- B) OSPHL Virology/Immunology Test Request Form, available at <a href="https://www.bitly.com/phl-forms"><u>www.bitly.com/phl-forms</u></a>.
  - 1. Complete one request form for each specimen tube.
  - 2. Complete all required fields.<sup>2</sup>
  - 3. In the "Tests Requested" section, in the "Molecular" section, choose "MOL IA/IB QUAL: Influenza RT-PCR Screen."<sup>3</sup>

## **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°C, and 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

<sup>&</sup>lt;sup>2</sup> Required fields include: patient name; date of birth; sex/gender; county of residence; submitting facility; ordering clinician; date of collection; specimen source; test requested

<sup>&</sup>lt;sup>3</sup> 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 Hologic Aptima NAAT as circumstances require.