

Notification Date: September 26, 2023 Effective Date: October 31, 2023

Influenza Virus Type A and Type B, and Respiratory Syncytial Virus (RSV) RNA, Molecular Detection, PCR, Varies

Test ID: HPFLU

Useful for:

Simultaneous detection of influenza A virus, influenza B virus, and respiratory syncytial virus in upper or lower respiratory tract specimens from individuals with flu-like illnesses

Methods:

Multiplex Real-Time Polymerase Chain Reaction (RT-PCR)

Reference Values:

Undetected

Specimen Requirements:

Preferred:

Specimen Type: Nasopharyngeal swab

Container/Tube: Sterile container with transport media

Specimen Volume: Entire specimen with a minimum of 1.5 mL (maximum 3 mL) of transport media.

Collection Instructions:

- 1. Collect specimen by swabbing back and forth over mucosa surface to maximize recovery of cells.
- 2. Swab must be placed into viral transport media (eg, M4-RT, M4 or M5), saline, or phosphate buffered saline (PBS). **Media should not contain guanidine thiocyanate (GTC).**

Acceptable:

Specimen Type: Oropharyngeal (throat) swab, nasal mid-turbinate, or nares/nasal swab

Supplies:

- -Culturette (BBL Culture Swab) (T092)
- -Mid-turbinate (MT) Swab (Copan FLOQSwab) (T864)
- -Swab, Sterile Polyester (T507)

Container/Tube: Sterile container with transport media

Specimen Volume: Entire specimen with a minimum of 1.5 mL (maximum 3 mL) of transport media.

Preferred: BBL Culture Swab, COPAN Mid-turbinate Swab

Acceptable: Dacron-tipped swab with plastic handle

Collection Instructions: Swab must be placed into viral transport media (eg, M4-RT, M4, or M5), saline, or

PBS. Media should not contain guanidine thiocyanate (GTC).

Specimen Type: Lower respiratory tract

Sources: Bronchoalveolar lavage (BAL), bronchial washings, endotracheal aspirate, sputum

Container/Tube: Sterile container Specimen Volume: 0.6 mL

Additional Information: Do not aliquot into viral transport media.

Specimen Stability Information:

Specimen Type	Temperature	Time
Varies	Frozen (preferred)	14 days
	Refrigerated	72 hours

Cautions:

This test has been designed to minimize the likelihood of false-positive test results. However, should false-positive results occur, risks to patients could include a recommendation for quarantine of household or other close contacts, a recommendation for patient isolation that might limit contact with family or friends, the ability to work, or the ability to receive certain medical care, prescription of an antiviral drug or other therapy, or other unintended adverse effects.

The sensitivity of the assay is very dependent upon the quality of the specimen submitted. A nasopharyngeal swab is the preferred specimen type for optimal detection of respiratory syncytial virus (RSV) RNA.

The test is specific for influenza A virus, influenza B virus, and RSV; therefore, the results do not exclude the possibility of infection with other respiratory viruses. Influenza C virus is not detected by this assay.

This assay detects influenza A viral RNA but does not distinguish among the different viral subtypes.

"Undetected' (negative) results do not preclude infection with influenza A virus, influenza B virus, or RSV and should not be used as the sole basis for treatment or other patient management decisions.

This assay detects both viable and nonviable virus. Test performance depends on viral load in the specimen and may not correlate with cell culture performed on the same specimen.

The assay has not been US Food and Drug Administration approved for detection of influenza A H7N9, though comparison of primer and probe sequences indicates that the assay will detect the H7N9 viral subtype.

CPT Code:

87631

Day(s) Performed: Monday through Sunday Report Available: Same day/1 to 3 days

Questions

Contact James Conn, Laboratory Resource Coordinator at 800-533-1710.