

TO: Clients of URMCLabs

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SUBJECT: 2010 – 2011 Winter Respiratory Virus Season

DATE: October 28, 2010

Many viruses are distinctly seasonal. Each year at this time we provide you with an updated review of laboratory test offerings for the “winter” viruses. Changes for this winter are highlighted below. Respiratory virus testing options for the 2010-2011 season include:

PCR for Influenza A, Influenza B and RSV (Prodesse™)

Policy change: PCR detects all three viruses, tests cannot be ordered individually

- High sensitivity and specificity
- 1 day turn-around time
- Test does not differentiate sub-types of Influenza A (H1, H3 etc)
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Rapid antigen detection by EIA for Influenza A and B and/or RSV (Quidel™)

Policy change: Rapid antigen testing (also called EIA) must be specifically requested. If request is only “RSV” or “Flu”, the PCR will be performed.

- PCR automatically performed on rapid test negative specimens.
- 2009-2010 in-house generated data for rapid antigen tests:
 - Specificity >98% compared to PCR
 - Sensitivity Influenza A ~50% compared to PCR
 - Sensitivity Influenza B ~30% compared to PCR
 - Sensitivity RSV~ 60% compared to PCR
- 2 hour turn-around time for the ED; tested multiple times daily for non-ED patients
- Test does not differentiate sub-types of Influenza A
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Comprehensive respiratory virus testing

Policy change: PCR for Influenza A and B and RSV will be included in comprehensive viral testing.

- Culture for Parainfluenza Virus, Adenovirus, Rhinovirus, Cytomegalovirus, Herpes Simplex Virus, Enterovirus & Varicella-Zoster Virus also included.
- Although most cultures are incubated for 14 days, most positives are reported in 3-7 days.
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NOTES:

- PCR and rapid testing will begin when either Influenza or RSV are detected by our community surveillance program. See websites below for current community information.
- Testing algorithm may be changed in response to high prevalence of virus in the community in order to provide the fastest and most reliable results to our providers.
- Positive results will be faxed or phoned to the patient location, except for E.D.
- Influenza A positive results can be further characterized if clinically indicated. To request the Influenza A sub-typing, call the Clinical Virology Laboratory at 275-7801.

SPECIMENS

Nasopharyngeal (NP) swabs, NP washes and aspirates, nasal swabs, sputum, BAL and bronchial washes are tested. Swab(s) can be placed into a single viral transport (VTM) for all testing. To optimize swab collection we recommend the use of a flocked swab.

- **SMH Inpatients:** Obtain VTM and flocked swabs from the Microbiology Lab by calling (585) 275-7801
- **Off-site Clients:** Obtain VTM and flocked swabs by using a lab supply & document order form. Fax to (585)295-9622 or call Client Services @ (585)350-2600, option 3
- **Highland Hospital:** Obtain VTM and flocked swabs from the Microbiology Lab by calling (585) 341-6818.

For additional information at Highland Hospital, contact Microbiology Section Head:

Woody_Cichanowicz@urmc.rochester.edu Phone: (585)341-6695

Copies of this memo are found at all web locations listed below. Intranet sites include links to respiratory virus report activity graphs. The graphs show our seasonal laboratory data from week to week.

- Intranet URM: FLUsource (under "Provider Guidance", SMH Winter Virus Memo)
 - Intranet Highland Hospital: FLUsource
- Public access www.urmc.rochester.edu/pathology_lab_medicine/clinical_labs/
Refer to news and publications section, provider notifications and memos.

For questions or additional information, please contact the Virology Lab supervisor, Cindy Mellen:

Phone: (585) 275-7801

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