TO:   Clients of URMC Labs  

FROM:   Marilyn A. Menegus, Ph.D.  
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We are providing you with the following information to aid in selection of respiratory virus testing during the coming respiratory virus season and to clarify turnaround time expectations. Outbreaks of Influenza and Respiratory Syncytial Virus (RSV) occur annually during the winter months. When influenza activity peaks in our community, the state or local health officials declare ‘the active influenza season’. The declaration prompts an increase in the respiratory precautions associated with influenza prevention and also prompts us to increase the frequency of PCR (polymerase chain reaction) testing for Influenza A, Influenza B and RSV from one to two to three to four runs per day. PCR provides the best sensitivity and specificity and also a reasonably rapid turn-around-time.

- For the majority of patients, the Influenza A&B / RSV PCR assay is the most effective first-line test for detection of Influenza and RSV infections in winter. The Focus Simplexa Direct Influenza A&B / RSV PCR simultaneously detects and distinguishes among the three viruses. Specific viruses cannot be ordered separately.

During the active season, PCR testing will be performed on all shifts. ED and inpatient specimens are prioritized. Outpatient specimens will be run in batches on the day shift with a turn-around-time within a day of receipt. As the season unfolds, test times may change.

- For the most vulnerable and ill patients (ie. immunocompromised and intensive care patients), we offer the Respiratory Viral PCR Panel, a PCR that detects eleven viral pathogens. This multiplex assay from BioFire includes Influenza A and B, RSV, Adenovirus, Parainfluenza 1-4, Human Metapneumovirus, Coronavirus and Rhinovirus/Enterovirus. Orders for this assay include all listed viruses; specific viruses cannot be ordered separately. Only one patient specimen can be tested at a time and the results require one hour for processing.

- Comprehensive virus culture is available for other viruses and lower respiratory specimens.

SPECIMENS AND COLLECTION  
The recommended specimen for all tests is a nasopharyngeal (NP) swab placed in Universal Viral Transport Media (UTM). Viral transport media M5 (VTM) is also acceptable. To optimize collection, use a flocked swab, which are packaged with the UTM. Multiple respiratory swabs can be placed into a single tube of transport media.

NP washes and aspirates, sputum, BAL and bronchial washes for virus culture should be transported in sterile containers.
Collection container information:

- **SMH Inpatients**
  Obtain UTM from the Microbiology Lab by calling (585) 275-7801

- **Off-site Clients**
  Obtain UTM by filling out a lab supply & document order form.
  Fax to (585) 295-9622 or call Client Services at (585) 758-0510, option 3

- **Highland Hospital**
  Obtain UTM from the Microbiology Lab by calling (585) 341-6818

  For additional information at Highland Hospital contact:

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

**Copies of this memo**

Copies of this memo may be 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 URMC**: 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.

**Questions or additional information**

Please contact the Virology Lab supervisor, Cindy Mellen:
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