**INSTRUCTIONS FOR SPECIMEN COLLECTION FOR RESPIRATORY VIRUS TESTING**

**INFLUENZA SENTINEL SURVEILLANCE SITES**

**MOLECULAR DIAGNOSTICS LABORATORY**

**MA STATE PUBLIC HEALTH LABORATORY**

**305 SOUTH STREET, JAMAICA PLAIN, MA 02130**

**Specimen Types:**

Specimens should only be collected on patients who meet the following criteria: Acute onset of influenza-like illness within the previous 72 hours with symptoms of fever >100°F (37.8°C), and a cough or sore throat. Fever does not have to be present at the time of specimen collection.

1. A single **nasopharyngeal (NP)** swab is the preferred specimen for influenza.   
   **Note:** Flu negative NP swabs will be reflexed to the BioFire Respiratory Panel.
2. A **throat (TS)** swab is acceptable only for influenza testing.
3. For atypical or suspect antiviral resistant influenza, contact the MDPH Immunization Program at (617) 983-6800 prior to specimen submission for special instructions.

**Storage of Respiratory Virus Kit:**

Prior to use, **refrigerate** **the VTM/UTM at 4°C** and **separately freeze** the outer mailing fiberboard cylinder containing the ice pack and aluminum container. **To order Respiratory Virus Specimen Kits, call (617) 983-6800.**

**Specimen Collection Instructions for Nasopharyngeal (NP) Swabs:**

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| 1. Assemble all supplies including the respiratory virus kit, gloves, patient label, etc.      1. Tilt the patient’s head back slightly and gently insert the sterile NP swab into the nasal passage until a slight resistance is met. 2. Rotate the swab 2-3 times and hold in place for 5 sec to ensure maximum absorbency. 3. Insert the NP swab into the cold VTM/UTM, snapping the excess shaft at the break point to fit inside the tube. Firmly secure the cap. 4. Label the specimen with the patient’s name, DOB, specimen type and date of collection-ensure this information matches the information on the submission form. UNLABELED SPECIMENS WILL BE REJECTED 5. Place the VTM/UTM tube in the inner aluminum container (provided) and cap. Seal the specimen submission form in a plastic bag and place along with the inner aluminum container(s) in the outer fiberboard cylinder or box (provided) containing the frozen ice pack.   **Specimen Collection Instructions for Throat Swabs (TS):**   1. With the throat swab, swab the posterior pharynx and tonsillar areas, avoiding the tongue   (tongue depressor may be helpful). The mucosa behind the uvula and between the tonsils should also be gently swabbed with a back-and-forth motion.  Proceed with step 4 above. |  |

**Test Requisition Form:** Complete **all applicable information** on the [Respiratory Surveillance Submission Form](http://www.mass.gov/eohhs/gov/departments/dph/programs/state-lab/services/specimen-submission-forms.html), in sections 1-11.  ***Use one form for each specimen.*** For atypical or suspect antiviral resistant influenza, contact the MDPH Immunization Program at (617) 983-6800 prior to specimen submission.

**Shipping Instructions:** Ship specimens without delay on frozen ice packs**. NOTE: Specimens collected >5 days from symptom onset are unsuitable for testing. If samples will be shipped to SPHL >3 days from collection or on a Friday but are collected within 5 days, they should be frozen at <-20ºC and shipped with ice packs on Monday and notated on submission form.** Specimens should be sent to HSLI via the testing facility's courier or UPS CampusShip (ILINet sites). If neither option is feasible, contact an Immunization epidemiologist at (617) 983-6800 for specimen courier pickup.

**Ship to**: **Attention**: Molecular Diagnostics Laboratory

MA State Public Health Laboratory

305 South Street

Jamaica Plain, MA 02130

**Special Notes:** Test reports will be sent by ELR or fax plus mail to the submitting facility once testing is completed.

**Questions:** Contact Massachusetts Immunization Program at (617) 983-6800.