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Influenza virus infections

Slowly but certainly, influenza virus infections are increasing in California. The SLO Public Health Laboratory has detected three A positives in the past week—one 2009 Pandemic H1N1, two seasonal H3 - and one B positive, the first detections of 2011. Two of these have been hospitalized, with one to the ICU. Important issues:

- A properly collected specimen (a nasal wash, or if not possible to collect a nasal wash, a throat swab) collected in a M4 viral transport medium is still the only transport medium specimen we can accept for the CDC–developed reverse transcription PCR assay; saline is NOT acceptable as it has not been validated by the CDC.
- The "Infuenza Requisition" used in 2009-2010 season is NOT required, but can be used as well as a regular requisition for test ordering.
- There is still no charge for specimens submitted from a patient who is rapid flu-test positive.
- Based on reports from other California county public health departments, patient infections at this stage of the season are likely to be caused by seasonal H3N2, 2009 pandemic H1N1, and Influenza B virus.
- Selected specimens are being referred to the State Laboratory (Viral and Rickettsial Disease Laboratory, VRDL) for culture and enhanced characterization of viral culture isolates.

Message to Hospital Laboratories from the California Department of Public Health

CDPH would like to thank all of you who are participating in the enhanced surveillance for severely ill cases (e.g. those that require intensive care or who die) aged 0-64 years with laboratory-confirmed influenza. Many of the reported cases have had respiratory specimens discarded before further testing can be done; because the initial diagnosis in the hospital is often made by non-molecular rapid tests, the subtype is never identified.

CDPH strongly encourages confirmatory influenza testing by PCR and sub-typing for these severely ill cases. CDPH encourages local health department laboratories to work closely with hospitals to obtain prompt notification of these cases and to save any residual respiratory specimens for further confirmation and characterization at your public health laboratory. This information is critical to help CDPH monitor what influenza types and subtypes are circulating in California and causing illness.

Ordering physician/practitioner signatures on requisitions

Special Bulletin #3 providing guidance to providers who are seeing patients with MediCare, MediCal or CenCal insurances is being sent separately from this monthly bulletin as a fax transmission and by email.

ICD-10 codes

On October 1, 2013 the ICD9 codes will be retiring and ICD10 codes will become the new set of codes for billing third party payors. Healthcare claims must be upgraded to version 5010 by 1-1-2012. Everyone who transmits electronic claims must switch to this new version. The change to ICD10 codes does not affect CPT coding for outpatient procedures. It is recommended that providers begin preparing for this change by assessing their system needs and working with their current vendors and payers. CMS will allow time for testing from 1-1 to 12-31-2011. Not all insurances will be accepting the new version until later - CenCal Health will only accept the current version.
For additional info on this change refer to the CMS website: www.cms.gov/ICD10/.

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