PROVIDER HEALTH ADVISORY

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Reporting and Testing Recommendations for 2018-2019 Influenza Season

As the 2018-2019 influenza season approaches, please note the following updates and recommendations regarding reporting and testing. Timely adherence to diagnostic testing guidelines and reporting requirements enables all of us to better understand and respond to flu in San Luis Obispo County. The following are key diagnostic testing and reporting recommendations from the County of San Luis Obispo Public Health Department for the 2018-2019 influenza season. (Note that while state reporting recommendations have changed, local recommendations remain unchanged and are consistent with previous years.)

Reporting Influenza
- Mandatory: Fatal cases in persons aged 0-64
- Mandatory: Cases occurring in institutions, such as correctional or long-term care facilities
- Voluntary (strongly encouraged): Cases requiring intensive care in persons aged 0-64
- Reporting methods: CalREDIE, or fax Severe Influenza Case History Form to 805-781-5543, or call 805-781-5500 and speak with communicable disease nurse.

Influenza Surveillance
The SLO Public Health Laboratory is soliciting the submission of specimens (naso-pharyngeal swab in M4 Viral transport medium; Influenza RT-PCR, Test # 50000) for seasonal influenza virus surveillance free of charge.

New: Order Test # 50010 for an Influenza RT-PCR with reflex for a Respiratory PCR Panel (Test # 6310, separate charge) in the event of a negative influenza result.

Please submit:
- Hospitals: Specimens from patients who are hospitalized with influenza-like illness (ILI) and/or placed in an ICU—regardless of rapid test result.
• Community Health Care Providers (and hospital out-patients): Specimens from patients with ILI and a positive rapid influenza test.

To avoid a fee, note on the lab test requisition:
• Hospitals: That the patient has been admitted and if placed in ICU (For example: Admitted 12/15, Moved to ICU 12/17)
• Out-patients: Rapid test result (For example: rapid A+,B-).

The requested submission of these specimens will allow public health officials to determine the starting point and the relative frequency of influenza transmission, and to provide guidance to the medical community regarding the efficacy of antiviral therapy. Influenza virus activity is currently at a low level as it has been for the summer months.

The SLO Public Health Laboratory participates as a member of the California Respiratory Laboratory Network and is capable of detection of new influenza virus strains or variants as well as the H5N1 strain and the H7N9 strains.

Reminder: Rapid influenza diagnostic tests (RIDTs) can be falsely positive when influenza is less common and falsely negative when influenza is widespread. For hospitalized patients with suspected influenza, the California Department of Public Health recommends prompt empiric therapy with a neuraminidase inhibitor while awaiting results of rRT-PCR testing.

Specimen Collection and Handling
• Upper respiratory samples for routine RT-PCR include: nasal swabs, nasopharyngeal (NP) swabs, throat swabs, nasal aspirate, nasal washes, NP wash, or NP aspirate.
• Lower respiratory tract samples should also be obtained for hospitalized patients. RT-PCR samples include: bronchoalveolar lavage, bronchial wash, tracheal aspirate or lung tissue.
• Dacron-tipped swabs placed in 2-3 ml of viral transport media. (Note that cotton or calcium alginate swabs are not acceptable for PCR testing.)
• Specimen collection is best within 24-72 hours of symptom onset.
• Refrigerate at 4°C and ship on ice packs. If unable to submit within 72 hours, store at -70°C or below and ship on dry ice.
• SLO County Public Health Laboratory influenza specimen collection and transport instructions are also available at www.sloPublicHealth.org/lab.

Reminder: Mandatory Influenza Vaccination of All Health Care Workers in SLO County
As a reminder of the August 20, 2018 letter to all health care facilities: Dr. Penny Borenstein, Health Officer for the County of San Luis Obispo, is requiring employers to require of all unvaccinated health care workers, that, in addition to signing an influenza vaccine declination statement, a mask be worn while on duty during influenza season. This order is effective August 20, 2018, is ongoing, and applies to each influenza season unless the order is rescinded or modified. Influenza vaccine must be received by the health care worker by November 1, 2018; after that time, a health care worker must have either received the vaccine or signed a declination and be wearing a mask.