PROVIDER HEALTH ADVISORY

Date: October 20, 2021

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Reporting and Testing Recommendations for Surveillance of Seasonal Influenza Alongside SARS-CoV-2 in 2021–2022

As of October 3rd, surveillance of influenza has begun. Please note the following updates and recommendations. 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 2021–2022 influenza season.

Reporting Requirements
- Mandatory: Laboratory-confirmed influenza-associated fatal pediatric cases in persons aged 0–17 years.
- Mandatory: Respiratory syncytial virus (RSV)-associated fatal cases aged 0–4 years.
- 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 years.
- 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.
- Form URL: cdph.ca.gov/CDPH%20Document%20Library/ControlledForms/cdph9070.pdf

Influenza and Coronavirus (SARS-CoV-2) Surveillance
The SLO Public Health Laboratory is soliciting the submission of specimens (nasopharyngeal [NP] swab in viral transport medium) for surveillance testing free of charge.
- Requisitions should be marked with “Influenza/COVID-19 surveillance”.
- A test order of SARS-CoV-2/Influenza PCR (order code #51000) will be assigned.

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

To avoid a fee, note on the lab test requisition:
• Hospitals: Dates of hospitalization, and transition to ICU (e.g., “Admitted 12/15/21, Moved to ICU 12/17/21”).
• Community and Outpatient Health Care Providers: Rapid or PCR test result (e.g., “Rapid A+ 12/15/21”, or “PCR B+ 12/15/21”).

Submitted 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 on the efficacy of antiviral therapy.

The SLO Public Health Laboratory participates as a member of the California Respiratory Laboratory Network and can detect the H5N1 and H7N9 strains, as well as new influenza virus strains. Since May of 2021, the laboratory has also been sequencing positive COVID-19 specimens to determine the lineage of circulating strains for epidemiologic surveillance.

**Influenza Testing**

Laboratory testing with real-time reverse-transcription polymerase chain reaction (rRT-PCR) is the preferred testing method when there is strong clinical suspicion of influenza, even if the rapid test is negative. Influenza testing by rRT-PCR is encouraged in these situations:
• Hospitalized, intensive care unit (ICU), and/or fatal cases with ILI.
• Acute respiratory outbreaks.
• ILI in any person where history of travel—or exposures within 10 days of symptom onset—suggest concern for variant or novel influenza infection.

Influenza rRT-PCR testing is available at the SLO Public Health Laboratory. Specimens should be collected within the first 24–72 hours of symptom onset and no later than 5 days after onset.

Reminder: Rapid influenza diagnostic tests (RIDTs) can exhibit false positives and negatives. 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 influenza and SARS-CoV-2 RT-PCR are as follows:
  • NP swab (preferred), nasal swab, or throat swab in viral transport medium
  • NP wash/aspirate or nasal wash/aspirate in a sterile container
• Lower respiratory tract samples may also be obtained for hospitalized patients, including:
  • Bronchoalveolar lavage or sputum in a sterile container
  • Dacron- or polyester-tipped swabs placed in 2–3 mL of viral transport media. (Note: cotton or calcium alginate swabs are not acceptable for PCR testing.)
• Specimen collection is best within 24–72 hours of symptom onset.
• Refrigerate at 2–8 °C.
• 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
Per the letter sent to all health care facilities on October 6, 2021: Dr. Penny Borenstein, Health Officer for the County of San Luis Obispo, is requiring all health care facilities/organizations adopt and implement a policy requiring all health care workers receive the annual influenza vaccine OR sign a written declination and wear a surgical or N-95 mask while on duty during the flu season. Influenza vaccine must be received by the health care worker by November 1, 2021; after that time, a health care worker must have either received the vaccine or signed a declination and be wearing a medical grade mask.