



Nebraska Epidemiology

Nebraska Department of Health and Human Services □ P.O. Box 95026 □ Lincoln, NE 68509-5026
Epidemiology Reports are available on the Nebraska DHHS Website at: <http://www.dhhs.ne.gov>

Fax

TO: Nebraska Clinical Laboratories
FROM: Robin M. Williams, DHHS Influenza Surveillance Coordinator
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e-mail: robin.m.williams@nebraska.gov
Thomas J. Safranek, M.D.
State Epidemiologist
RE: Weekly Influenza Surveillance Request
DATE: October 21, 2009

Dear Nebraska Laboratory Personnel:

Thank you for your continued participation with influenza surveillance.

Update on testing recommendations:

- All fatalities related to influenza-like illness (ILI) should have tissue and other clinical specimens forwarded to the Nebraska Public Health Lab regardless of the result (+/-) of the rapid influenza test. <http://www.cdc.gov/h1n1flu/tissuesubmission.htm>
- Sentinel influenza surveillance providers are asked to submit up to 3 nasopharyngeal specimens on patients with ILI per week per office to the Nebraska Public Health Lab.
- All providers in NE are encouraged to submit nasopharyngeal specimens to the Nebraska Public Health Lab for any/all pregnant patients seen with ILI. We are especially interested in having any hospitalized pregnant women with ILI tested by influenza PCR at the Nebraska Public Health Lab regardless of the result (+/-) of the rapid influenza test.
- Hospitalized patients with suspected influenza should undergo a diagnostic workup using rapid flu tests, viral culture or PCR testing through the hospital's in-house and reference laboratories. Commercial laboratory testing for influenza PCR (LabCorp, Quest/Focus Laboratories) and respiratory viral culture is currently available, and should be utilized when indicated.
- **Any patient admitted to the Intensive Care Unit (ICU) with influenza-like illness (ILI) should have a nasopharyngeal specimen forwarded to the Nebraska Public Health Lab regardless of the result (+/-) of the rapid influenza test.**
- Any hospitalized patient for whom influenza diagnostic laboratory testing can not be obtained through their reference laboratory can be tested through NPHL. Contact your local health department to arrange for this testing; complete a requisition (<http://www.dhhs.ne.gov/puh/epi/flu/docs/flunphltestrequisition.pdf>); keep the specimen refrigerated and in viral transport media following collection; indicate on the requisition that the patient is hospitalized; do not delay in shipping to NPHL (contact NPHL client services for advice on expedited courier service 1-866-290-1406).

We are asking for surveillance data from labs by noon, the following Tuesday, after the surveillance week. The surveillance week begins at 12:01 AM on Sunday and runs through midnight on Saturday (e.g., August 30-September 5 is a surveillance week). **We STRONGLY encourage ALL laboratories to report to the on-line website.**

Please enter data for tests that were finalized during the seven days that started at 12:01 am on **Sunday, Oct.11, 2009** and ended at midnight on **Saturday, Oct.17, 2009**. The website can be accessed at: <https://han.ne.gov/survey/SurveyDispatcher>
PIN code: flulab2009. **If you have already submitted data for this week, thank you.**

FAX

TO: Robin Williams, DHHS Influenza Surveillance Coordinator

Fax: (402) 471-3601 Phone: (402) 471-0935

Name of Flu Surveillance Lab Contact Person: _____

Phone Number (_____) _____

Organization/Laboratory _____

County _____ (double check data entry)

PLEASE CHOOSE THE CORRECT SURVEILLANCE WEEK ON THE WEBSITE!!!

Total Test Volume _____

Positive for Influenza A _____

Positive for Influenza B _____

Rapid Diagnostic Tests

_____ 3M™ Rapid Detection Flu A+B Test,(3M)

_____ Directigen EZ Flu A+B, (Becton-Dickinson)

_____ BinaxNOW Influenza A&B, (Inverness)

_____ OSOM® Influenza A&B (Genzyme)

_____ QuickVue Influenza A+B Test, (Quidel)

_____ SAS FluAlert, (SA Scientific)

_____ TRU FLU, (Meridian Bioscience)

_____ XPECT Flu A&B, (Remel)

_____ Other Influenza Test (please specify): _____

Respiratory Syncytial Virus (RSV)

Total Volume _____

Positive for RSV _____