Montana Department of Public Health and Human Services <u>Diagnostic Testing</u> for Suspect Influenza, 2023-24 Season Laboratory Guidance

The Montana Public Health Laboratory offers accurate and timely molecular (RT-PCR) testing for Influenza A & B, as well as subtyping and genotyping for Influenza positive specimens. Early diagnosis of influenza can reduce the inappropriate use of antibiotics and provide the option of using antiviral therapy, while subtyping and genotyping provides additional data about the strains that are circulating in your jurisdiction.

Specin	nen Collection
	Specimens should be collected within 24-72 hours of symptoms onset. After 3 days, the viral shedding is reduced,
	and may no longer be detectable, depending on the assay.
	Respiratory Specimens (nasopharyngeal swabs, throat swabs, nasal swabs, combination NP/Throat swabs) must be
	submitted in Universal Transport Media (UTM) or Viral Transport Media (VTM) in a cold condition.
	Failure to submit in UTM or VTM will cause the specimen to be rejected as an "Unsatisfactory Specimen".
	Do not submit a swab or residual fluid that has been used for Rapid Influenza Diagnostic Tests (RIDTs); these will
	be rejected as an unsatisfactory specimen. A second swab must be collected and submitted in UTM.
	NOTE: Make sure the transport media is being stored appropriately. Some transport media can be stored at room
	temperature, and others must be stored refrigerated. After the specimen has been introduced to the transport media,
	the specimen should be stored cold and transported to the MTPHL in a cold condition. Please freeze if there is going
	to be a delay in transport >3 days.
	Specimens can be transported via courier or mail as a Biologic Substance, Category B, and should be received within 48 hours of collection.
Rapid I	Influenza Diagnostic Tests (RIDTs)
	The sensitivity of RIDTs for detecting Influenza, when compared with viral culture or RT-PCR, range from 50-
	70%, according to package inserts. A negative RIDT result does not rule out an Influenza virus infection.
	Specificities, as stated in package inserts range from 90-95%.
	Depending on the prevalence of Influenza in the community, positive and negative predictive values vary
	considerably. False positives are more likely to occur when disease prevalence is low, and false negatives
	are more likely to occur when disease prevalence is high.
	MTPHL will confirm positive RIDT results by RT-PCR. If the specimen is positive for Influenza A, subtyping will be
	performed. If the specimen is positive for Influenza B, genotyping will be performed to identify the lineage.
	Specimens that are <u>rapid-test negative</u> for Influenza from patients exhibiting symptoms of influenza-like illness (ILI) should
	be confirmed by a more sensitive test (RT-PCR) if determined by the clinician to be highly suspect of Influenza.
	MTPHL also offers a respiratory panel (Influenza A, Influenza B, SARS-CoV-2, and RSV) for patients exhibiting symptoms of ILI. (select " Resp Panel " on the online portal)
Fees	
	stic influenza testing is still being offered at a reduced rate for the 2023-2024 season. The fee for an Influenza A and B
	creen (CPT code 87502) will be \$60. All Influenza A positive specimens will be subtyped (CPT code 87503; \$35) and all za B specimens will be genotyped (CPT code 87503; \$35) to identify the lineage.
A viral F	Respiratory Panel is also available at a reduced rate. (CPT code 87631; \$65). Viral culture is no longer available at MTPHL.
Online	Requisition Form
	On the online order screen, select "Inf A-B PCR", not "Inf PCR Surv" (this is for surveillance only).
□ apr	Please complete all requested information, including the clinical information questions that pop-up on the screen, as propriate.
Turn A	round Time

If you have any questions, please call the Montana Public Health Laboratory at 1-800-821-7284.

☐ Turnaround time is expected to be less than 48 hours from specimen receipt, although this time may vary.