

NEW TEST ANNOUNCEMENT

MML JACKSONVILLE

NOTIFICATION DATE: April 10, 2013 **EFFECTIVE DATE:** April 23, 2013

INFLUENZA VIRUS TYPE A AND TYPE B, MOLECULAR DETECTION, PCR #800353

USEFUL FOR:

Rapid and accurate detection of influenza A, influenza B in a single test.

METHODOLOGY: Multiplex Real-Time Polymerase Chain Reaction (RT-PCR)

REFERENCE VALUES: Not Applicable

SPECIMEN REQUIREMENTS: Specimen source is required.

Submit only 1 of the following specimens:

Preferred:

Specimen Type: Aspirate

Sources: Nasal or nasopharyngeal **Container/Tube:** Sterile container

Specimen Volume: 0.5 mL

Specimen Type: Swab

Sources: Nasopharyngeal or throat

Container/Tube: Nasopharyngeal swab (rayon mini-tip swab) or throat swab

Specimen Volume: Entire specimen

Additional Information: Swab may be placed in M5 media for transport.

Acceptable:

Specimen Type: Nasopharyngeal washing

Container/Tube: Sterile container

Specimen Volume: 0.5 mL

Specimen Type: Respiratory

Sources: Bronchial washing, bronchial brushing, or broncho-alveolar lavage

Container/Tube: Sterile container

Specimen Volume: 0.5 mL

SPECIMEN STABILITY INFORMATION:

Specimen Type	Temperature	Time
Varies	Refrigerated	14 days

CAUTIONS:

- Given that influenza A and B and respiratory syncytial virus (RSV) can cause identical appearing clinical illness, this test should typically be ordered as a panel that includes both influenza A/B and RSV (800322 Influenza Virus Type A and Type B, and Respiratory Syncytial Virus (RSV), molecular Detection, PCR).
- This test has been designed to minimize the likelihood of false-positive test results. However, should false-positive results occur, risks to patients could include a recommendation for quarantine of household or other close contacts, a recommendation for patient isolation that might limit contact with family or friends, the ability to work, or the ability to receive certain medical care, prescription of an antiviral drug or other therapy, or other unintended adverse effects.
- The sensitivity of the assay is very dependent upon the quality of the specimen submitted.
 Nasopharyngeal or nasal specimens provide optimal detection of influenza A and B
 RNA. However, the test is validated for use with most upper and lower respiratory specimens, including nasal swabs, throat swabs, broncho-alveolar lavage specimens, and bronchial brushings/washings. Tracheal aspirates are not acceptable for testing due to the viscous nature of these specimens.
- This test should not be performed unless the patient meets clinical and epidemiologic criteria for testing.
- The test is specific for influenza A, influenza B, therefore, the results do not exclude the possibility of infection with other respiratory viruses. Influenza C virus is not detected by this assay.
- This assay detects influenza A virus RNA, but does not distinguish between the different subtypes of influenza A.
- Negative results do not preclude infection with influenza A, influenza B viruses and should not be used as the sole basis for treatment or other patient management decisions.
- This assay detects both viable and nonviable virus. Test performance depends on viral load in the specimen and may not correlate with cell culture performed on the same specimen.

CPT CODE: 87502

DAY(S) SET UP: Monday through Sunday **ANALYTIC TIME:** Same day/1 day

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager or Greg Renkly, MML Laboratory Technologist Resource Coordinator Telephone: 800-533-1710