

SAMPLE COLLECTION FOR ZONOTIC INFLUENZA DIAGNOSIS

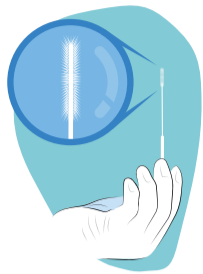
(INFLUENZA A/H5 AND OTHER ZONOTIC INFLUENZA VIRUSES)

To ensure accurate diagnosis of zoonotic influenza viruses, it is imperative to collect the correct specimen and to ensure the quality of the sample.

Sample Collection

Collection of specimens must be done using flocked nylon swabs and placed immediately in 3 ml of viral transport medium (VTM).

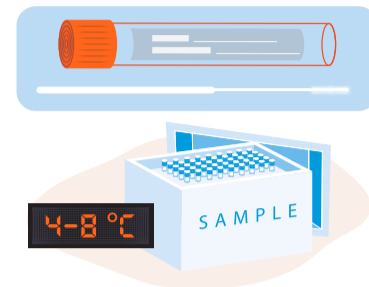
Swabs with cotton tips and wooden shafts are not recommended.



Samples should be collected by trained personnel and considering all biosafety instructions including the use of personal protective equipment appropriate for respiratory viruses.



Label the collected tubes properly. Specimens should be collected as close to illness onset as possible (ideally within 3-4 days after onset of clinical symptoms) and refrigerated (4-8 °C) promptly after collection.

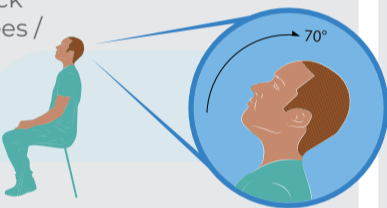


Types of specimens and procedure

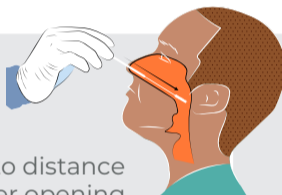
Nasopharyngeal Swab is the ideal upper respiratory tract specimen for influenza testing. Yet for zoonotic influenza A/H5, it has been observed that a nasopharyngeal swab may result negative, while a **Conjunctival Swab** may test positive. For this reason, in zoonotic influenza A/H5 suspected cases or among exposed individuals with conjunctivitis symptoms, it is suggested to consider collecting a conjunctival swab *in addition* to the nasopharyngeal swab.

Nasopharyngeal Swab

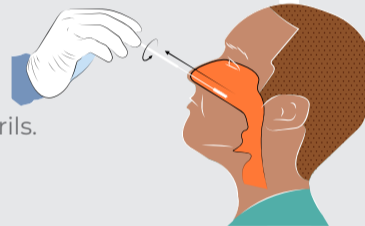
Head back 70 degrees / sitting person



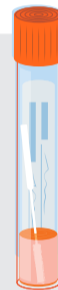
1 - Insert swab into nostril. (Swab should reach depth equal to distance from nostrils to outer opening of the ear.) Leave swab in place for several seconds to absorb secretions.



2 - Slowly remove swab while rotating it. Use the same swab for both nostrils.

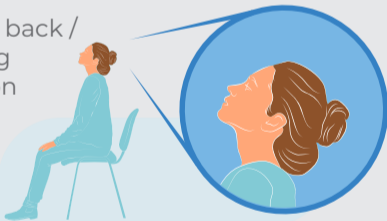


3 - Place tip of swab into sterile viral transport media tube and snap/cut off the applicator stick.

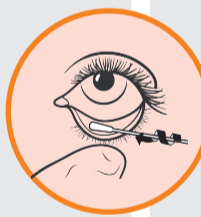


Conjunctival Swab

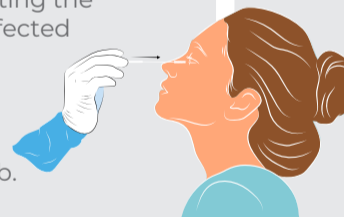
Head back / sitting person



1 - Gently pull down the lower eyelid of the patient's affected eye to expose the conjunctival tissues lining the inside of the eyelid and covering the white part of the eye.



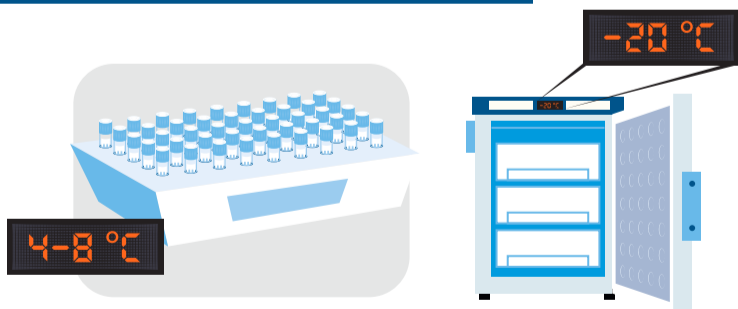
2 - Gently swab the conjunctiva, rotating the swab over the affected area 2 to 3 times. If both eyes are affected, repeat the procedure using a new swab.



3 - Place tip of the swab into sterile viral transport media tube and cut off the applicator stick.

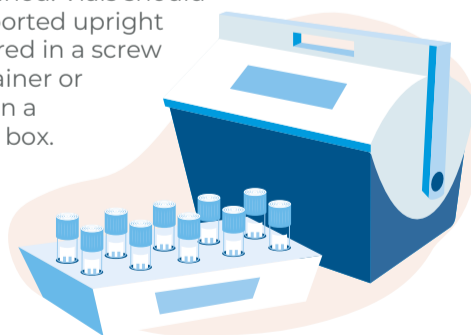


Sample Storage and Transport



Samples should be kept refrigerated (4-8 °C) and sent to the laboratory (central, national or reference lab) where they should be processed within the first 24-72 hours from the collection. If samples cannot be sent within this period, they should be kept frozen at or below -20 °C.

During transport to the reference laboratory ensure that the cold chain is maintained. Vials should be transported upright and secured in a screw cap container or in a rack in a transport box.



Shipment of suspected samples to reference laboratories or collaborating centers for further analysis must ensure compliance with all international standards for air transportation (IATA). For shipping support and/or further information, please contact laboratoryresponse@paho.org