The predominant virus is influenza A, followed by rhinovirus and respiratory syncytial virus.

Influenza activity is sharply increasing; those typed are nearly exclusively FluA H3.

CDC Alert: 52% of the influenza A (H3N2) viruses collected and analyzed in the US from October 1 through November 22, 2014 are antigenically drifted from the vaccine strain, thus causing decreased vaccine effectiveness.

Please remember to use ABRP (FluA/B/RSV abbreviated PCR panel) for Outpatients and Emergency Room patients not being admitted. At GMC, nearly 50% of all RVPCRs on outpatients are influenza A-positive, which is detected by the ABRP assay. The algorithm on page 2 provides guidance for optimal stewardship of laboratory services.
2014-2015 Approved Respiratory Pathogen Testing Algorithm
Geisinger Medical Laboratories, Danville, PA

Symptoms of Respiratory Infection*

All In-Patients, Emergency Room (ER) Admissions and Observation Units, and outpatients in high risk groups

EPIC Order RVPCR
(#Full respiratory panel)

EPIC Order ABRP
(Abbreviated panel Influenza A/B and RSV only)
Test offered Nov. 1 - April 30 in peak season for influenza A/B and RSV

Out-patient with no high-risk conditions; ER patients not being admitted

EPIC Order RVPCR
(Molecular testing, full panel)

TEST RVPCR
Molecular testing, full panel

TEST RSV Rapid Ag automatically performed when < 6yr, (all GHS sites) for IP or OP

TEST RVPCR
(Molecular testing full panel: adenovirus; coronaviruses 229E, HKU1, NL63, and OC43; rhinovirus; human metapneumovirus; influenza A (subtypes H1, 2009 H1, and H3); influenza B; parainfluenza virus types 1-4; RSV; Bordetella pertussis; Chlamydia pneumoniae; and Mycoplasma pneumonia.
Performing laboratories: GMC, GWV, GCMC, and GBH. GSACH sent to GMC.

TEST = ABRP
Molecular testing abbreviated panel: influenza A influenza B, RSV (performed at GMC for all sites)

Age Decision

Patient < 6 years old
(No. 1 – April 30)

No, In-Patient, > 6yr

YES

No, Out-patient, > 6yr

GHS Standard

TEST RVPCR
Molecular testing full panel

Positive In -patient

Positive Out -patient

TEST RVPCR
Molecular testing full panel

STOP No further testing

Negative In-Patient

Negative Out-Patient

GHS Standard

TEST RVPCR
Molecular testing full panel

TEST ABRP
(Abbreviated panel Influenza A/B and RSV only)

Negative

Out-Patient

URI = upper respiratory infection
LRI = lower respiratory tract infection
UTM = universal transport media w/ flocked swab
NP = nasopharyngeal
BAL = bronchoalveolar lavage
RSV = respiratory syncytial virus
ED = Emergency Department

For questions about respiratory pathogen testing, please contact Microbiology Technical Specialists: Lisa Scicchitano, B.S., MT(ASCP) at 570-214-4294, or Francis Tomashefski, B.S., MT(ASCP) at 570-271-6338 of Doctoral directors: Dr. Donna Wolk, MHA, Ph.D, D(ABMM) at 570-271-7467 or Dr. Raquel Martinez, Ph.D, D(ABMM) at 570-271-6338.

*Note: Exceptions to algorithm can occur with laboratory waiver, e.g., patients in high risk groups
*May 1- Oct 31: rare chance of detecting influenza/ RSV; for diagnostic purposes, the full molecular panel is standard.
Resp Flow diag Nov thru Apr.vsd

dmwolk, rmartinez: 12/30/2013, rev 2/5/14, rev 11/07/14