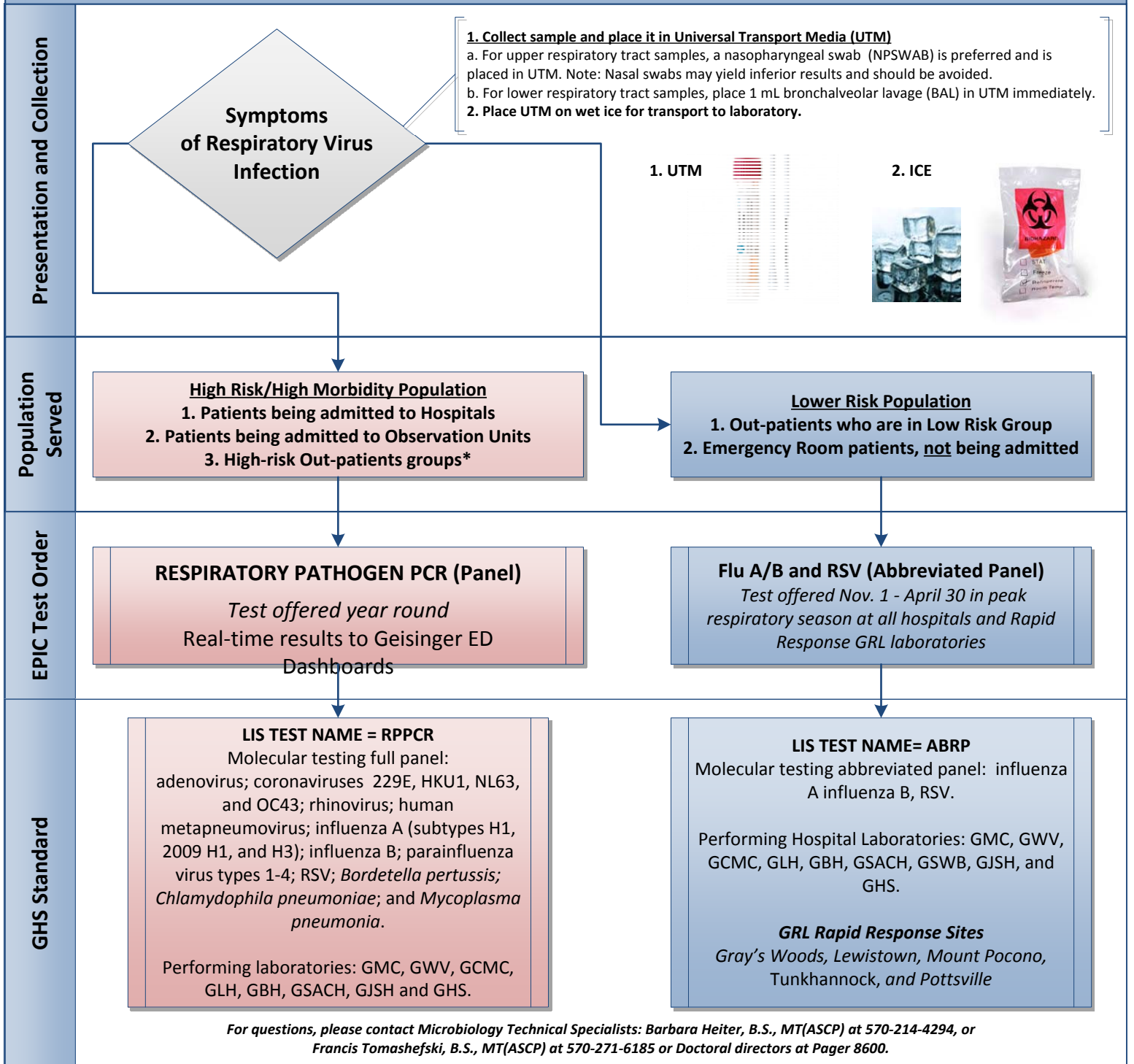


2018-2019 Approved Respiratory Pathogen Testing Algorithm

Geisinger Medical Laboratories

Order UTM with flocked swab from GHS Supply Chain, Part # or via your GML Customer Care Representative



***Note: Exceptions to algorithm can occur after a laboratory waiver is received (call pager 8600)**

During May 1- Oct 31: There is a rare chance of detecting influenza or RSV; for diagnostic purposes, the full molecular panel is standard.

*** Groups at high risk for influenza complications**

- Children <2 years* and Adults ≥65 years of age
 - Persons with chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematologic (including sickle cell disease), metabolic (including diabetes mellitus), neurologic, neuromuscular, and neurodevelopmental disorders (including disorders of the brain, spinal cord, peripheral nerve and muscle such as cerebral palsy, epilepsy, stroke, intellectual disability [mental retardation], moderate to severe developmental delay, muscular dystrophy, or spinal cord injury)Immunosuppression (including immunosuppression caused by medications or by human immunodeficiency virus)
 - Women who are pregnant or postpartum (within two weeks after delivery)
 - Children <19 years of age and receiving long-term aspirin therapy
 - Native Americans and Alaskan Natives
 - Morbidly obese (body mass index [BMI] ≥40 for adults or BMI >2.33 standard deviations above the mean for children)
 - Residents of nursing homes and other chronic care facilities*
- Although all children <5 years of age are considered to be at higher risk for complications of influenza, the highest risk is for those <2 years of age, with the highest hospitalization and death rates among infants <6 months of age.
- Adapted from: Influenza Division, National Center for Immunization and Respiratory Diseases, CDC. Prevention and control of seasonal influenza with vaccines. MMWR Recomm Rep 2013; 62:1.*