



SPECIMEN COLLECTION FOR: Influenza A and B Antigen (FLU) & RSV Antigen Testing

September 14, 2009

Specimen requirements:

- The **nasopharynx** is where virally infected cells (ciliated epithelium) can best be sampled. This is not the nose or throat, but is beyond the nasal turbinates.
- In children, the nasopharynx is most effectively sampled by **NP aspiration** with a catheter or by bulb/syringe **NP wash** using sterile saline.
- **Nasopharyngeal (NP) swab** may be submitted, using a fine tipped swab with a flexible shaft, and placing the swab into 1 ml saline or viral transport medium (such as red-capped MicroTest Transport or other as supplied by BRL).
- Specimens should be refrigerated after collection.
- A nasal swab is not an acceptable specimen and cannot be tested. Please do not mislabel an NP swab as a nasal swab as it will not be tested.
- These tests include a backup viral culture regardless of antigen result.



Nasopharyngeal aspirate (preferred)

- Tilt patient's head back as shown
- Attach catheter to suction apparatus
(size 8 French for infants, 10-12 for children,
14 or larger for adults)
- Instill several drops of saline into each nostril
- Place catheter through nostril to posterior nasopharynx
- Apply gentle suction, rotating catheter while withdrawing
- Repeat using other nostril

Nasopharyngeal swab

- Tilt patient's head back as shown
- Bend shaft to follow curve, insert swab through nostril to posterior nasopharynx
- Rotate swab a few times to obtain infected cells
- Repeat using other nostril

Labeling Specimens:

Indicate collection site as nasopharyngeal or "NP" on specimen and requisition when ordering. Label specimen with patient's full legal name and either date of birth or medical record number.

Results:

Positive results for both RSV and Influenza A/B will be called.