Enhanced Surveillance for Acute Flaccid Paralysis

The California Department of Public Health (CDPH) is currently conducting enhanced viral testing and surveillance for patients with acute flaccid paralysis. We are seeking information and specimens on patients meeting the following case definition:

Acute flaccid paralysis, including absent or significantly diminished reflexes in one or more limbs **AND**

- MRI showing grey matter involvement of the spinal cord **OR**
- EMG showing anterior horn cell disease
- With or without accompanying mental status changes
- Without a confirmed traumatic, neoplastic, or vascular etiology

To optimize laboratory testing, we are requesting the following sample types, collected as close to onset date as possible:

- ☐ CSF (2-3cc, if available)
- ☐ Acute phase serum, collected ***prior to*** treatment with IVIG (2-3cc in red or tiger top tube)
- ☐ Nasopharynx swab (in viral transport media)
- ☐ Throat swab (in viral transport media)
- ☐ Stool (quarter-sized amount in sterile wide-mouth container)

Please note that these specimen guidelines differ from those outlined for standard Neurologic Surveillance and Testing (NST) submissions.

All other submission requirements are identical to those of NST, including the 2-page case history form and the requirement that submitters obtain approval from NST staff prior to submission. Submitters are also required to notify their local health departments of all cases tested through NST. Specimens will not be tested until the case has been reported to the local health department.

Samples can be sent on dry ice or cold packs to the below address for delivery Monday through Friday:

ATTN: Specimen Receiving
Viral and Rickettsial Disease Laboratory
850 Marina Bay Parkway
Richmond, CA 94804

If you are aware of a case meeting the above definition, or you are interested in submitting patient samples, please contact Heather Sheriff (heather.sheriff@cdph.ca.gov; 510-307-8608) or Patrick Ayscue (patrick.ayscue@cdph.ca.gov; 510-620-5847).