



## Instructions for Submittal of Isolation Samples for Suspected Respiratory Outbreaks

**CLINICAL SAMPLES:** NP swabs, nose & throat swabs and nasal washes and aspirates are useful samples for isolation of suspected viral respiratory pathogens. Acute and convalescent blood samples (red top, tiger top or serum separator tubes) can be useful to identify the cause of an outbreak in retrospect.. Acute blood samples can be screened for Chlamydia or mycoplasma. Convalescent blood samples (without a corresponding acute sample) is of limited value.

- Timing.** Ideally specimens should be obtained during the acute phase of illness (within 48-72 hours of onset).
- Number of Samples.** For meaningful laboratory results four (4) to six (6) acute isolation specimens is usually sufficient to determine if a virus is the cause of the outbreak. We are willing to accept a maximum of ten (10) samples per outbreak.
- Storage and Transportation.** Swabs for virus isolation should be put in 1-2 ml of viral transport medium (to preserve viral infectivity), refrigerated at 4<sup>0</sup>C and sent to the laboratory on a cold pack within 48 hours. Samples that cannot be delivered to the laboratory within 48 hours should be stored and transported at -70<sup>0</sup>C.
- Samples should be sent in accordance with the regulations for shipping diagnostic specimens (Packing Instructions 650). This includes marking the outside of the package as “Biological Substance – Category B” and adding a diamond-shaped UN3373 label.