HEPATITIS A VIRUS TESTING GUIDANCE

Appropriate Clinical Specimens for Laboratory Testing*

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<td>Genotyping</td>
<td>Serum (EDTA or citrate plasma also acceptable) from HAV IgM positive patients</td>
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* Only patients with symptoms consistent with hepatitis and an anti-HAV IgM positive test result will be considered for genotyping.

These molecular testing results are not for clinical diagnosis and are to be used for epidemiological purposes only.

Hepatitis A virus typing will be performed only when requested by a public health jurisdiction. Local health jurisdictions should arrange for shipment of HAV IgM-positive blood specimens from the health care facility or commercial laboratory.

Enhanced hepatitis A surveillance to detect potentially outbreak associated cases

- A large hepatitis A outbreak is ongoing in California. The majority of patients in this outbreak report experiencing homelessness and/or using illicit drugs, particularly in the setting of limited sanitation.
- Prioritize obtaining specimens for case-patients with the following risk factors:
  - Experiencing homelessness or unstable housing.
  - Injection or non-injection drug use.
  - Being in an area where significant transmission of hepatitis A virus is occurring during the exposure period.
  - Due to ongoing outbreaks of hepatitis A infection among men who have sex with men (MSM) in the United States, please obtain blood specimens for hepatitis A case-patients who are MSM.

Acceptable Sample Type: Serum or Plasma

- Collect 5 ml of blood in a red top or serum separator tube. EDTA and citrate blood tubes are also acceptable.
- Capillary blood (finger or heel stick) can be used for pediatric patients, if necessary; at least 3-5 capillary tubes are needed.
- Only patients with symptoms consistent with hepatitis and an anti-HAV IgM positive test result will be considered for genotyping.

- Do not freeze the tube before serum or plasma has been removed. Centrifuge the tube to separate blood cells from serum or plasma prior to shipment. Aseptically transfer serum/plasma to a sterile tube that has an externally threaded cap with an o-ring seal.
- The minimum volume for testing at VRDL is 0.5 ml.

Specimen storage and shipping

- Store specimens at 4°C and ship on cold pack within 24 to 72 hours.
- For longer storage, store and ship at -70°C or colder.

Specimens should only be shipped to VRDL at the request of the local health jurisdiction. To ship specimens requested by a local public health laboratory:

- Complete the VRDL general purpose specimen submittal form for each specimen (available from VRDL Specimen Submittal Forms web page):
  - Include date of jaundice onset (or symptom onset, if no jaundice) and whether person is linked to a confirmed case.
  - Include CalREDIE ID# if available.
  - Include information on risk factors or travel history.
For recent vaccine recipient, include vaccination date.

- Send submittal form by secure email to VRDL.submittal@cdph.ca.gov; include hard copy with specimens.
- Email package tracking number to expedite processing.

**Ship approved specimens to:**

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Specimen Receiving
CDPH VRDL
850 Marina Bay Parkway
Richmond, CA 94804
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**Notify CDPH that specimens are being submitted** by emailing VRDL.submittal@cdph.ca.gov and vpdreport@cdph.ca.gov.
Please include patient name and date of birth, and name and phone number of investigator in your jurisdiction who can provide additional information, if needed.

**Other resources**

- CDPH Hepatitis A disease web page
- Hepatitis A case investigation “quicksheet”
- Information on hepatitis A outbreak in California

**Questions** about specimen collection, submittal, or shipping: Please contact the VRDL Medical and Epidemiology Liaison Section at (510) 307-8585 or VRDL.submittal@cdph.ca.gov.

For questions about whether hepatitis A testing is appropriate or a priority, please contact the CDPH Immunization Branch at (510) 620-3737 and ask to be referred to the epidemiologist on-call, or email vpdreport@cdph.ca.gov.