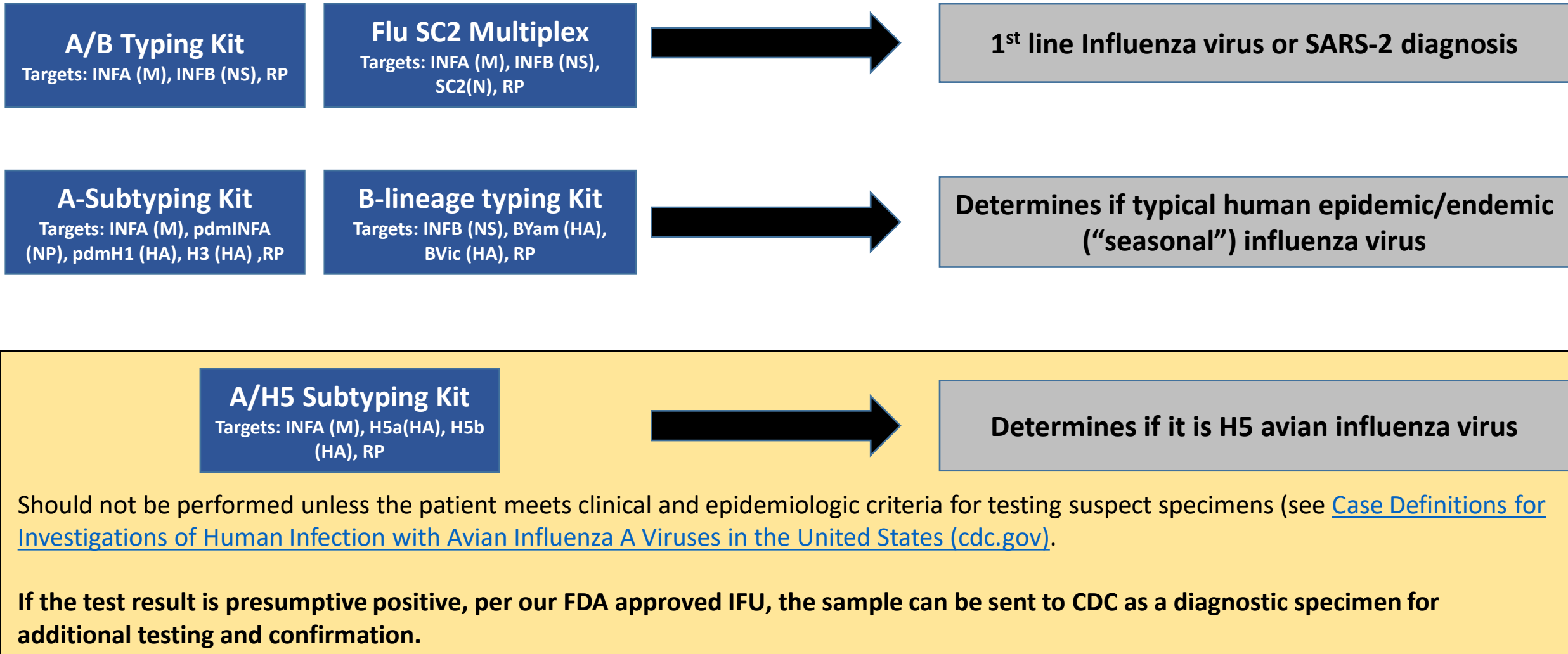
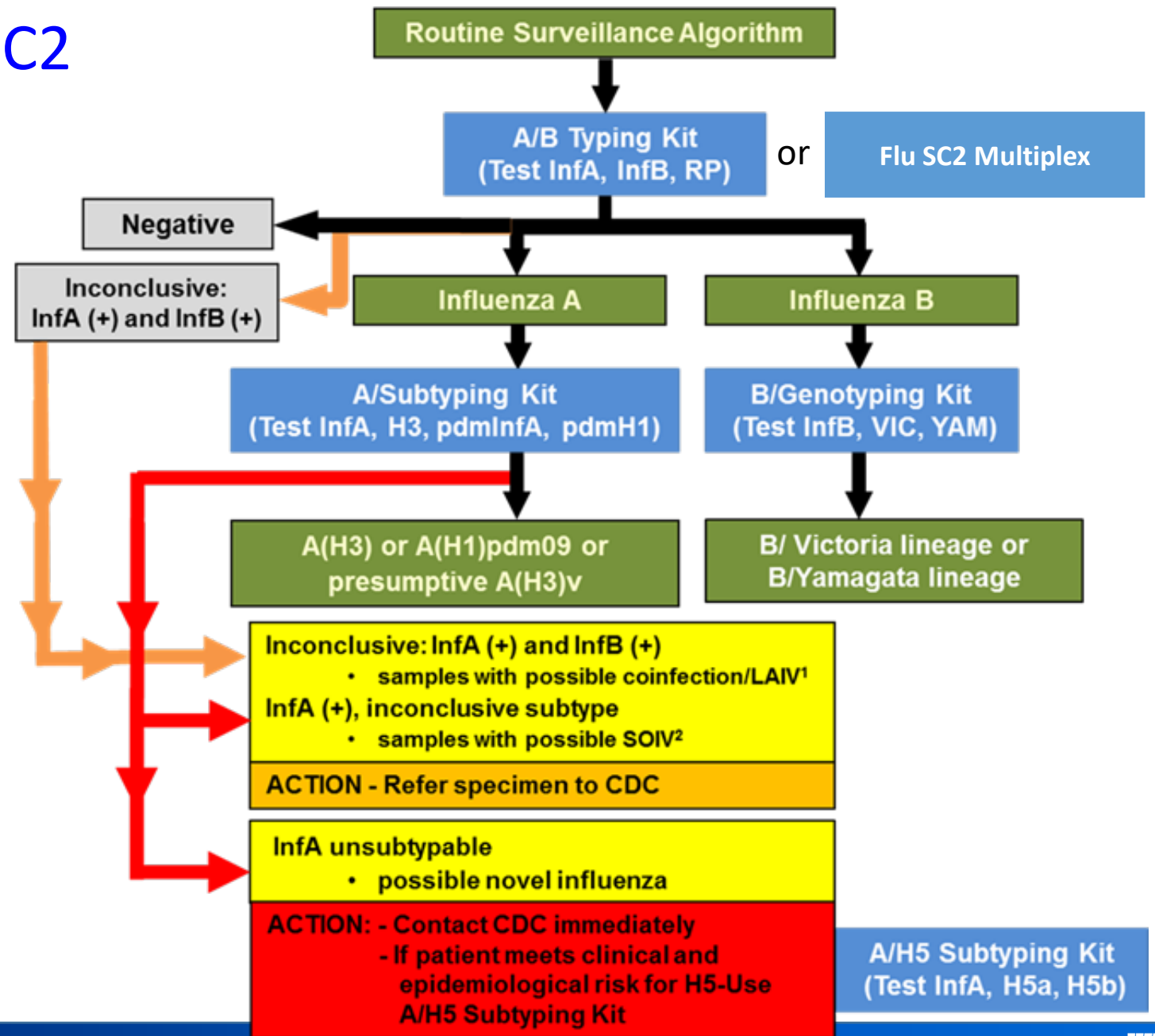


Guidance for use of CDC Influenza IVD Kits



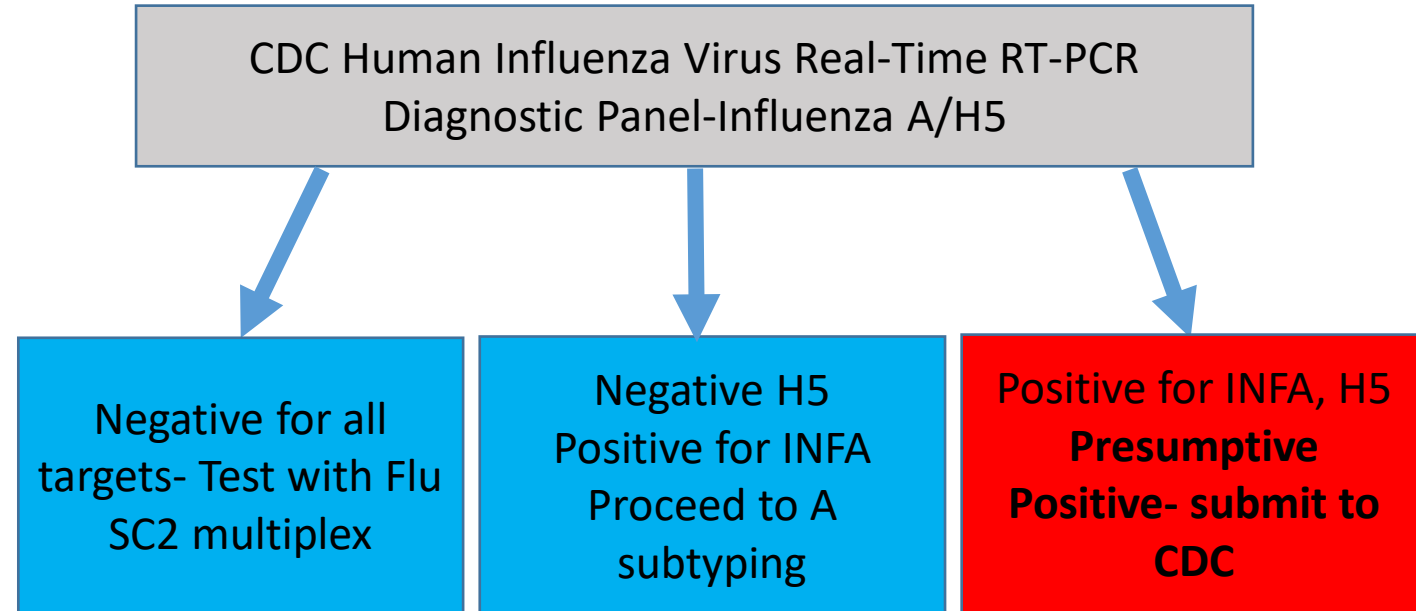
Dx Algorithm with the Flu-SC2 multiplex assay

- The Flu SC2 Multiplex can be used interchangeably with the A/ B typing kit.
- ***Note: H5 test should only be administered to those specimens that are A positive, unsubtypeable or from patients with known exposure to H5 infected animals/ people***



Testing for People Exposed to Animals with Confirmed H5

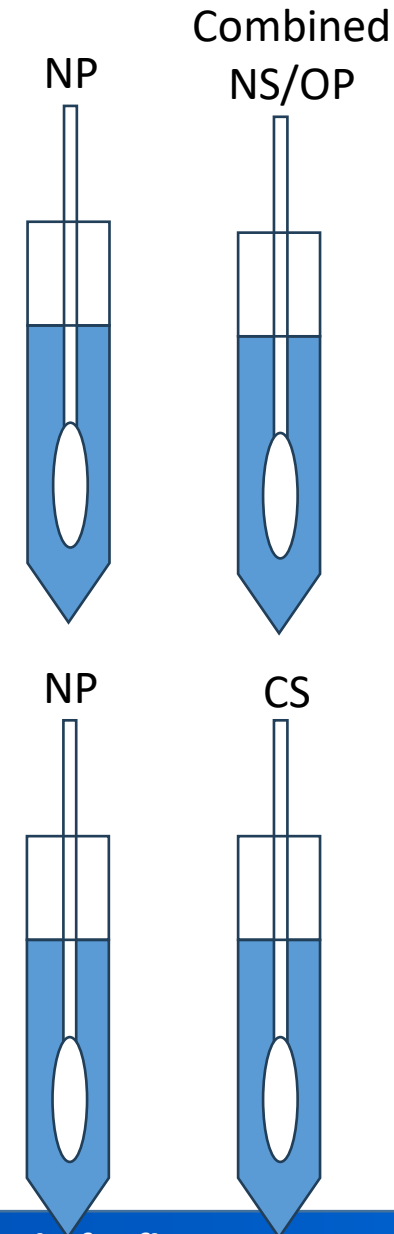
- CDC guidance:
 - [Information for People Exposed to Birds Infected with Avian Influenza Viruses | Avian Influenza \(Flu\) \(cdc.gov\)](https://www.cdc.gov/flu/avianflu/influenza-infection-in-people.htm)
 - Samples from symptomatic people exposed to infected animals with confirmed H5 can be tested **DIRECTLY** with the CDC A/H5 Kit
 - **Option –Test A/B typing, A subtyping, A/H5 simultaneously-Testing with CDC influenza panel does not have to be sequential**



Specimen collection H5

Respiratory

- For testing of individuals that meet clinical and epidemiologic criteria for influenza A(H5N1) with respiratory illness, preferably two specimens should be collected a 1. a nasopharyngeal (NP) swab and 2. a combined nasal swab oropharyngeal swab (e.g., two swabs combined into one viral transport media vial) and minimally a single NP swab should be collected



Conjunctivitis

- Individuals that meet clinical and epidemiologic criteria for influenza A(H5N1) with conjunctivitis (with or without respiratory symptoms) should have two swabs collected as well: 1. a conjunctival swab and 2. an NP swab.

H5 Guidance continued

A/H5: Specimens with presumptive positive or inconclusive results

- A specimen is only presumptively positive for influenza A/H5 if both targets (InfA, H5) are positive.
- A result is inconclusive for A/H5 if the test is positive for A/H5 and is negative for INFA.
- **Please submit any sample with an H5 positive marker IMMEDIATELY to CDC for further evaluation**
- Reminder, please refer to any H5 positive in correspondence as “presumptive” until it is confirmed at CDC

Specimen Notification and Shipping to CDC

***Respiratory Specimens that are Influenza A positive, but have inconclusive results using Influenza A Subtyping or Influenza B Lineage Kits**

Notify CDC **IMMEDIATELY** (flusupport@cdc.gov) and send the following clinical specimens to CDC **IMMEDIATELY** for diagnostic testing and/or further characterization:

- Influenza A positive (InfA Ct value <35), negative for H1pdm or H3 (“unsubtypable”)
- Presumptive positive for other subtypes (e.g., H5)
- Inconclusive indicating an atypical/novel influenza A virus

CDC Contact

Marie Kirby, Ph.D.

Team Lead, Genomics and Diagnostics Team

VSDB/ID

Phone: 404-718-7689

Fax: 404-639-2350

Email: flusupport@cdc.gov

Email: pbi0@cdc.gov

Diagnostic Specimen Submission

Complete two forms:

1) **Influenza Specimen Submission Form** and indicate the following specific information:

- **Reason for Submission:** Diagnosis
- **If Clinical Specimen:** Indicate specimen type
- **Type/Subtype:** Inconclusive
- **Comments:** Provide any relevant rRT-PCR data

2) **CDC Specimen Submission Form, CDC 50.34**, which is required for all diagnostic submissions when results can be reported back to a patient or healthcare provider.

Note: Send completed form(s) and tracking information electronically to flusupport@cdc.gov. Include hard copies of both forms in the shipment.

Ship to:

Marie Kirby, Ph.D.
Centers for Disease Control and Prevention
Influenza Division, H23-6 (Unit 198)
c/o STAT
1600 Clifton Rd, NE
Atlanta, GA 30329