

## COLLECTING SPECIMENS FOR INFLUENZA A (H1N1) 09

**Who to test:** Severely ill patients requiring oseltamivir treatment, or those with underlying conditions predisposing to severe illness.

Note: the Laboratory has limited capacity and may need to prioritise which samples can be processed.

**Collect samples** promptly to avoid prolonged exposure of staff and other patients, so the patient can be transferred or discharged home.

- Wear mask, gloves and gown.
- A standard surgical mask is satisfactory.
- Wear protective glasses if available.

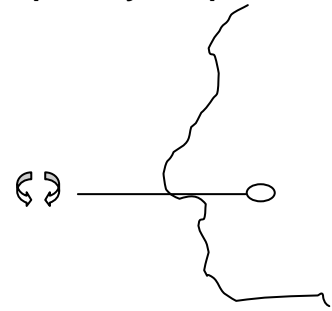
**Nasopharyngeal swabs are the best specimen.**

**Throat swabs may be taken if nasal specimens are unobtainable.**

### **Gloves and masks are recommended when obtaining respiratory samples**

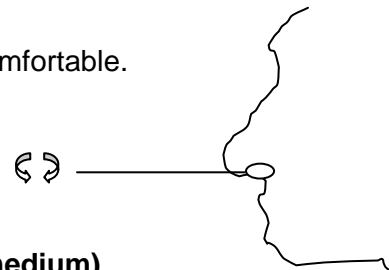
#### **NASOPHARYNGEAL SWABS:**

Do this test first as it is the most uncomfortable.  
Rest back of the patient's head against wall or bed.  
**Use flexible pernasal swab.**  
Insert swab 4-5cm into nose in horizontal direction.  
Rotate swab three times each way.  
Put swab **back dry** into its plastic tube.



#### **LOW NOSE SWABS:**

Use rigid virus swab from green top tube.  
Insert swab 2cm into nose, but not so far as to be uncomfortable.  
Rotate 2-3 times each way.  
Put swab into virus transport medium e.g. the green tube.



#### **SWAB TYPE:**

##### **Please use green swabs available (viral transport medium)**

Alternative swab types must have dacron, polyester or nylon tips and aluminium, plastic or wire shafts.

Examples are: black top Chlamydia swab MW120, flexible wire blue top MW160 and the Microrheologics plastic flocculated swab as used for Influenza surveillance.

It must be sent as a **dry swab** or in a **special virus transport medium**.

**Virus testing cannot be done on swabs sent in a bacterial transport medium such as Charcoal, Amies, and Gel, or on swabs with wooden shafts.**

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