Maryland
DEPARTMENT OF HEALTH
Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

Laboratories Administration
Robert A. Myers, Ph.D., Director

Date: January 30, 2020

To: **M**edical Laboratory Directors, Local Health Officers and Healthcare Providers

From: Robert A. Myers, Ph.D.
Director, Laboratories Administration

Re: **Discontinuing Enhanced Influenza Virus Surveillance Effective January 30, 2020**

Effective today, January 30, 2020, enhanced viral surveillance will be refocused and it will no longer be necessary to submit **all** positive influenza A and B clinical specimens to the Maryland Department of Health (MDH) Laboratory for virus typing and further characterization. We are now requesting that only a subset of specimens, as detailed below, be submitted to MDH for testing.

In recent weeks influenza activity in Maryland increased substantially, with a predominance of influenza B (Victoria) infections followed by a slightly smaller proportion of influenza A(H1) viruses now circulating. Enhanced viral surveillance was implemented early in the influenza season to quickly identify and further characterize the influenza viruses circulating in the State. Now that prevalence of influenza has increased and there is high correlation between the results of commercially available rapid influenza diagnostic tests (RIDTs) and the CDC Flu rRT-PCR diagnostic panel that the MDH Laboratory performs.

Therefore, effective today, submission of specimens for influenza testing for routine surveillance purposes are now limited to the following conditions:

1) FOR ALL HEALTH CARE PROVIDERS:

Upper and/or lower respiratory tract specimens from hospitalized (admitted for observation or as an inpatient) with influenza-like illness (ILI), where ILI is defined as fever (>37.8°C or >100°F AND cough or sore throat) or patients with severe respiratory illness of an unknown etiology regardless of the results of initial influenza testing. Specimens should also be submitted in cases of pneumonia in a healthcare worker or influenza-associated pediatric death.

2) FOR PARTICIPANTS IN MDH INFLUENZA SENTINEL LABORATORY AND SENTINEL HEALTH CARE PROVIDERS:

Sentinel laboratories or health care providers who have enrolled in the MDH influenza surveillance network should continue to submit routine surveillance specimens to the MDH Public Health Laboratory, limiting these submissions to no more than ten (10) influenza positive specimens per week.

As always, we request submission of specimens for any potential novel influenza A virus infections. Submission of specimens from patients with recent swine exposures will be accepted for timely influenza A H3N2v diagnostic testing. Also, arrangements for priority testing to possibly detect avian influenza viruses, such as influenza A H7N9 and H5N1, can still be made if patients meet recommended clinical and epidemiological criteria.

Visit our web site: https://health.maryland.gov/laboratories/Pages/Novel-Influenza-A.aspx for instructions for requesting novel influenza A testing and contact your local health department to confirm criteria are met and to coordinate the submission of these specimens to the MDH Laboratory.

Please see the revised guidelines (dated January 3, 2018) for the logistical details of submitting influenza specimens to the MDH Laboratory:
https://health.maryland.gov/laboratories/docs/Specimen%20Submission%20Guidelines%20for%20Syspect%20Influenza.pdf

You can also contact us at (443) 681-3924 or (443) 681-3923 for questions regarding changes to surveillance testing program.

Your participation in the enhanced influenza surveillance program was greatly appreciated. The specimens that were submitted to the MDH Laboratory for testing provided valuable insights into the nature and progression of the influenza transmission season.

Thank you for your cooperation and understanding in this matter.

:sns

cc: Frances Phillips, RN, MHA
David Blythe, MD, MPH
Monique Duwell, MD, MPH
David Crum, MD, MPH
Brian Bachaus, MS