



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

Date: January 24, 2024

To: Medical Laboratory Directors, Local Health Officers and Healthcare Providers

From: David Blythe, MD MPH *DB*
Director, Infectious Disease Bureau

Robert A. Myers, Ph.D. *R.A.M.*
Director, Laboratories Administration

Re: Discontinuing Enhanced Influenza and Viral Respiratory Pathogen Surveillance Program Effective 01/24/24

Effective January 24, 2024, enhanced seasonal influenza/viral respiratory pathogen surveillance season will be refocused, and it will no longer be necessary to submit all positive influenza and viral respiratory pathogen specimens your laboratory identifies to the MDH Laboratory for further typing and characterization. We are now requesting that only a subset of these positive specimens, as detailed below, be submitted to MDH for testing.

In recent weeks viral respiratory activity in Maryland increased substantially with a predominance of influenza A H1N1 infections and a smaller number of influenza A H3N2 infections. Additionally, the number COVID-19 infections has also increased considerably in recent weeks. Enhanced viral surveillance was implemented early in the viral respiratory pathogen transmission season to quickly identify and further characterize the influenza and other viral respiratory viruses circulating in the State. Now that the prevalence of influenza and SARS-CoV-2 has increased, a smaller representative subset of both influenza and SARS-CoV-2 positive specimens is appropriate for surveillance. However, we would still request that all specimens for other viral respiratory pathogens other than influenza or SARS-CoV-2 still be submitted to the MDH Laboratory for further characterization.

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 in-patient) 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

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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/VIRAL PATHOGEN 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 A and up to ten (10) SARS-CoV-2 positive specimens per week. All specimens that have tested positive for non-influenza /non-SARS-CoV-2 viral respiratory pathogens can still be submitted to the MDH Laboratory for further characterization.

As always, we request the immediate submission of specimens from any suspected 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 (contact your local health department to confirm criteria are met and to coordinate the submission of these specimens to the State Laboratory).

Please visit our website (<https://health.maryland.gov/laboratories/Pages/Influenza.aspx>) and select Specimen Submission Guidelines for Suspect Influenza Virus Infection (10-31-2023) for the logistical details of submitting influenza specimens to the MDH Laboratory. You can also contact us at (443) 681-3924 or (443) 681-3905 for questions regarding changes to surveillance the testing program.

Your participation in the enhanced influenza/viral respiratory pathogen surveillance program is greatly appreciated. The specimens submitted to the MDH Laboratory for testing provide valuable insights into the nature and progression of the transmission of viral respiratory pathogens in Maryland and provide vitally important information to national and international influenza surveillance networks.

Thank you for all your efforts so far and for your cooperation and understanding in this matter.

cc: Dr. Nilesh Kalyanaraman
Dr. David Blythe
Dr. Monique Duwell
Dr. David Crum
Mr. Brian Bachaus
Ms. Curi Kim
Ms. Maya Monroe