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RESPView Pathogen Surveillance 2014-2015

- The positive percent of respiratory virus tests are holding steady at 51% (602 positive cases out of 1173 test requests in CDC week 3).
- The predominant virus continues to be influenza A (62%), followed by a rise of respiratory syncytial virus (14%).
- Influenza activity dropped slightly in week 2, but continues to increase in week 3.
- CDC week 3 marks the first Flu A H1N1 2009 strain detected. Of the typed influenza strains, Seasonal FluA H3 continues to predominate (64%).



REMINDERS

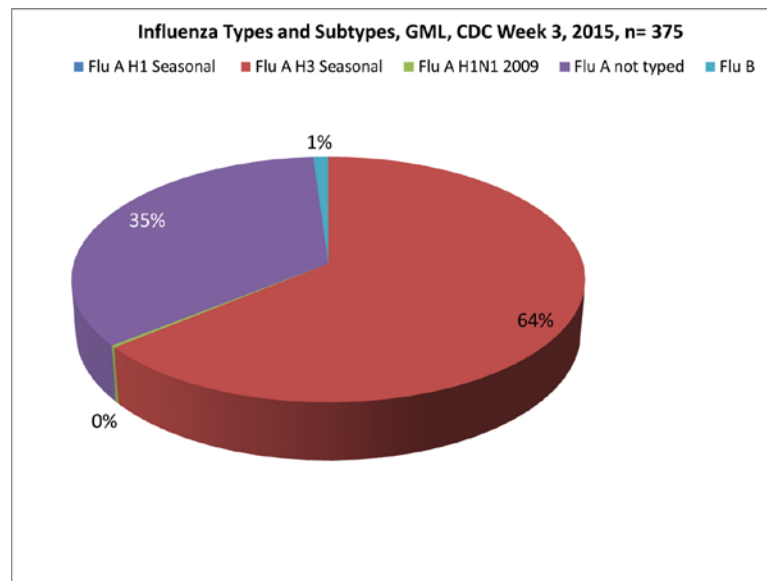
Choose **ABRP** (FluA/B/RSV) for Outpatients and Emergency Room patients not being admitted.

USE **RVPCR** (full respiratory panel) for in-patients or immunocompromised and other at risk out-patients

Please help reduce duplicate orders. The laboratory is observing a large volume of duplicate orders for RVPCR. Please check EPIC before ordering to reduce unnecessary testing or uncollected specimens.

For questions about respiratory pathogen testing, please contact Microbiology Technical Specialists, Lisa Scicchitano, B.S., MT(ASCP) at 570-214-4294, Francis Tomaszefski, B.S., MT(ASCP) at 570-271-6185, Dr. Donna Wolk, MHA, Ph.D, D(ABMM), System Director, Clinical Microbiology at 570-271-7467 or Dr. Raquel Martinez, Ph.D, D(ABMM), Associate Director, Clinical Microbiology at 570-271-6338.

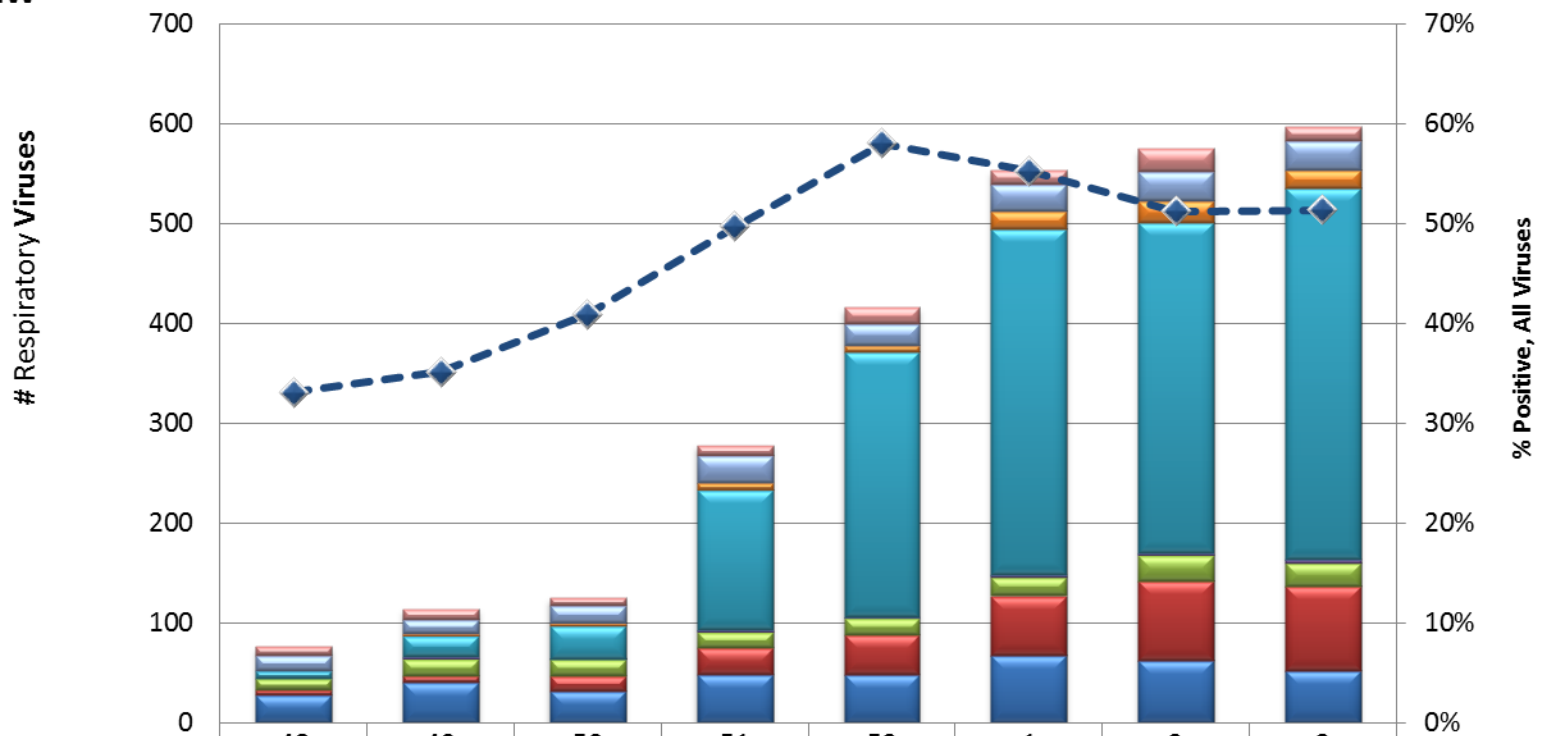
Questions: For newsletter questions, contact Christy Attinger at (570) 271-6338.



Please avoid placing duplicate orders.

Specimen sources are required on all laboratory tests.

**GML RespVIEW
2014-2015**



CDC Respiratory Week, 2014-2015	48	49	50	51	52	1	2	3
adenovirus	9	11	8	10	17	14	23	14
coronavirus	15	14	17	28	21	27	29	29
hum. metapneumovirus	0	2	3	7	7	18	22	19
influenza A	8	21	33	140	265	346	331	371
influenza B	0	2	1	2	1	3	2	4
parainfluenza	11	17	16	16	17	18	26	24
respiratory syncytial virus	5	7	15	27	40	60	80	84
rhinovirus	28	40	32	48	48	67	62	52
◆ % Positive Rollup (right axis)	33%	35%	41%	50%	58%	55%	51%	51%

Weekly GML RespVIEW: Respiratory Virus Distribution CDC Week 3, 2014-2015

