

<b>Title:</b>	<b>UCD National Virus Reference Laboratory User Manual</b>		
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# 1. INTRODUCTION

This manual is designed to give an overall view of the services provided by the UCD National Virus Reference Laboratory (NVRL). The laboratory provides a national diagnostic and reference service for clinicians investigating virus infections. The current workload involves over 500,000 tests per annum. The laboratory is fully accredited by Clinical Pathology Accreditation (UK) Ltd., the World Health Organisation as a National Laboratory for Poliovirus and Influenza, Measles and Rubella. An ‘out of hours’ service is available to deal with urgent testing requirements, such as screening of solid organ donors, testing of those requiring renal dialysis and investigation of sources of needle-stick injuries. This ensures a continuity of service with laboratory investigations available 365 days a year on a 24-hour basis. Requests for this service must be approved at the requesting hospital by the relevant Consultant Microbiologist / Pathologist and by the NVRL ‘on call’ clinician. A wide range of diagnostic tests are performed routinely but others are available by prior arrangement. The tests available are outlined in this document.

**Professor William Hall**

**August 2011**

## 2. GENERAL INFORMATION

### 2.1 Laboratory Address

National Virus Reference Laboratory  
University College Dublin  
Belfield  
Dublin 4  
Ireland

### 2.2 Hours of service

Normal Opening Hours: Monday to Friday: 8.00 a.m. - 5.30 p.m.

### 2.3 Out of Hours Service

An “out of hours service” is available for urgent laboratory investigation. Before testing can proceed it must be approved by a Consultant Microbiologist/ Pathologist at the requesting hospital. On weekdays any request for investigation after 10 pm must be approved by the NVRL On Call Clinician (087 9806448)

The on-call service can also be accessed outside normal hours by contacting VoxPro Telephone call back service on No. 021 4521935. When using this number the following information is required:

- a) Name of caller
- b) Contact number
- c) Hospital source
- d) Message

#### **Urgent Investigations available “on-call” are as follows:**

**Solid organ donor screening:** Serological investigation for HIV (HIV Ag/Ab), Hepatitis B (HBsAg, anti-HBc) Hepatitis C (HCV Ag and anti-HCV), HTLV (anti-HTLV I/II), Toxoplasma, CMV and Syphilis.

**Source of needlestick injury investigation:** Serological investigation for HIV (HIV Ag/Ab) and Hepatitis B (HBsAg,). HCV investigations are performed the next working day a “baseline” sample collected from the recipient will be stored at the NVRL.

**Screening of patients before first renal dialysis session:** Serological investigation for HIV (HIV Ag/Ab), Hepatitis B (HBsAg, anti-HBc) Hepatitis C (HCV Ag and anti-HCV).

**Determination of VZV Immune status** Investigation must be approved, following discussion with On-Call Clinician.

**Unbooked deliveries:** Investigations for evidence of maternal infection, such as HIV and HBV, will be performed as required

**Immuno-compromised patients:** Investigation must be approved, following discussion with On-Call Clinician.

**NOTE:** Additional urgent investigations will only be performed following discussions with the NVRL On call clinician

**Results will be telephoned to the requesting doctor. To ensure immediate transmission of results, it is ESSENTIAL that the request form accompanying the specimen specifies the requesting doctor's name and bleep no./ phone no (mobile number if possible).**

Clinical advice is available “out of hours” by contacting the NVRL ‘on call’ clinician at 087 9806448.

## **2.4 Blood and Tissue Establishment (BTE)**

A dedicated laboratory was established within the NVRL to fulfil the requirements of the European Communities (Quality and Safety of Human Blood and Blood Components) Regulations (*S.I No 360 of 2005*).

The BTE acts as the confirmatory laboratory for blood donor samples reactive during screening at the Irish Blood Transfusion Service. In addition the laboratory screens blood donations collected for autologous transfusion.

For samples to be tested in the BTE a Service Level Agreement is necessary between the NVRL and the referring centre. The sample collection and transport criteria for samples investigated in the BTE laboratory differs from other samples referred to the NVRL. For further information please contact Jeff Connell: e.mail: jeff.connell@ucd.ie.

## **2.5 General Contact Details**

**General Telephone:** +353 - 1 - 716 4401

**Fax:** +353 - 1- 2697611

**E-mail:** [nvrl@ucd.ie](mailto:nvrl@ucd.ie)

**Website:** <http://www.ucd.ie/nvrl>

## **2.6 List of Contacts**

Telephone enquiries for patient results are available between 9a.m and 5.30 p.m. Monday-Friday. The telephone numbers to contact are outlined below. Results are reported (hard copy and in many cases electronically) as soon as they are authorised. Many reports are issued to the hospital pathologist and therefore it is advisable to check with your pathology department before calling NVRL. Any queries relating to service provision or the User Manual should be directed to the Quality Assurance Officer.

Where clinical, scientific and administrative advice is required please use the provided listing.

Name	Extension
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Director	Professor William Hall	716 1236
Laboratory Manager	Deirdre Burke	716 1328
Assistant Director	Dr. Jeff Connell	716 1321
Consultant Microbiologist	Dr. Brendan Crowley	416 2968
Principal Clinical Scientist	Dr. Suzie Coughlan	716 1359
Quality Assurance Officer	Cleo Talbot	716 4420
Systems Manager	Brian O'Grady	716 1346
Facilities Manager	Brian Keogan	716 1235
	NVRL On Call Clinician	087 9806448
	Patient Result Queries	716 4413/ 4414 / 4415
	Clinical / Urgent Queries	716 1349 /1240

## 2.7 Complaints

Please contact the Quality Assurance Officer.

## 2.8 Laboratory Fees

A list of charges, which is updated annually, is provided to the HSE. Telephone enquiries can also be made to 01 716 4403/1342.

## 2.9 Referred Work

For the purposes of additional or confirmatory investigations, samples may be referred to an external laboratory. See list below

<b>Pathogen</b>	<b>External Laboratory</b>
<i>Arbovirus</i> <i>Viral Haemorrhagic Fever</i>	Health Protection Agency Porton Down, Salisbury, Wiltshire. SP4 0JG
<i>Toxoplasma</i> ( <i>Toxoplasma</i> referrals occur based on clinical details and initial results obtained in the NVRL)	Toxoplasma Reference Laboratory Public Health Wales Microbiology ABM, Singleton Hospital, Swansea. SA2 8QA
<i>Leptospira</i> ( <i>Leptospira</i> referrals occur based on clinical details and initial results obtained in the NVRL)	Leptospira Reference Unit Dept. of Microbiology & Immunology The County Hospital Union Walk Hereford HR1 2ER

<p><i>Lymes (Borrelia burgdoferi)</i>(Lymes referrals occur based on clinical details and initial results obtained in the NVRL)</p>	<p>Southampton HPA  Level B South Laboratory Block,  Southampton General Hospital  Southampton  SO16 6YD</p>
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### 3. TESTS AVAILABLE

#### 3.1 Urgent Laboratory Investigation

Requests for **URGENT** investigation must be arranged by phone (01 716 1349/1240) with the NVRL clinical team.

#### 3.2 Routine Laboratory Investigation

<b>Pathogen Tested</b>	<b>Investigation</b>
Adenovirus	<a href="#">Culture</a>
	<a href="#">Direct Immunofluorescence</a>
	<a href="#">Electron Microscopy</a>
	<a href="#">Molecular Qualitative</a>
	<a href="#">Molecular Quantitative</a>
Arbovirus Group	<a href="#">Immunofluorescence</a>
Astrovirus	<a href="#">Electron Microscopy</a>
Borrelia burgdorferi (Lyme Disease)	<a href="#">Serology</a>
Chikungunya	<a href="#">Molecular Qualitative</a>
	<a href="#">Immunofluorescence</a>
Chlamydia trachomatis	<a href="#">Molecular Qualitative</a>
Coronaviruses (EXCL SARSCOV)	<a href="#">Electron Microscopy</a>
Cytomegalovirus (CMV)	<a href="#">Culture</a>
	<a href="#">Molecular Qualitative</a>
	<a href="#">Molecular Quantitative</a>
	<a href="#">Serology</a>
Dengue virus	<a href="#">Serology</a>
Enterovirus	<a href="#">Culture</a>
	<a href="#">Molecular Qualitative</a>
Epstein Barr virus (EBV)	<a href="#">Serology</a>
	<a href="#">Molecular Quantitative</a>

<b>Pathogen Tested</b>	<b>Investigation</b>
Hantavirus	<a href="#">Serology</a>
Hepatitis A virus	<a href="#">Serology</a>
Hepatitis B virus	<a href="#">Molecular Quantitative</a>
	<a href="#">Genotypic antiviral resistance testing</a>
	<a href="#">HBV genotyping</a>
	<a href="#">Pre-core mutant analysis</a>
	<a href="#">Serology</a>
Hepatitis C virus	<a href="#">Molecular Quantitative</a>
	<a href="#">Genotypic testing</a>
	<a href="#">IL-28</a>
	<a href="#">Serology</a>
Hepatitis D virus	<a href="#">Serology</a>
Hepatitis E virus	<a href="#">Serology</a>
Herpes Simplex Virus 1, 2 (HSV)	<a href="#">Serology</a>
	<a href="#">Culture</a>
	<a href="#">Spin amplified Immunofluorescence</a>
	<a href="#">Direct Immunofluorescence</a>
	<a href="#">Molecular Qualitative</a>
Herpes group viruses	<a href="#">Electron Microscopy</a>
HHV-6	<a href="#">Molecular Qualitative</a>
Human Immunodeficiency Virus 1, 2 (HIV)	<a href="#">Molecular Quantitative</a>
	<a href="#">Genotypic Tropism determination</a>
	<a href="#">Genotypic antiviral resistance testing</a>
	<a href="#">Serology</a>

<b>Pathogen</b>	<b>Investigation</b>
Human T-Lymphotropic Virus (HTLV) I, II	<a href="#">Serology</a>
	<a href="#">Molecular quantitative</a>
Influenza Virus	<a href="#">Direct Immunofluorescence</a>
	<a href="#">Molecular Qualitative</a>
	<a href="#">Genotypic antiviral resistance testing</a>
Influenza virus (H5)	<a href="#">Molecular Qualitative</a>
Leptospirosis	<a href="#">Serology</a>
Measles virus	<a href="#">Culture</a>
	<a href="#">Molecular Qualitative</a>
	<a href="#">Serology/ Saliva</a>
<i>Molluscum contagiosum</i>	<a href="#">Electron Microscopy</a>
Mumps virus	<a href="#">Culture</a>
	<a href="#">Molecular Qualitative</a>
	<a href="#">Serology</a>
<i>Neisseria gonorrhoeae</i>	<a href="#">Molecular Qualitative</a>
Norovirus	<a href="#">Electron Microscopy</a>
	<a href="#">Molecular Qualitative</a>
Orf virus	<a href="#">Electron Microscopy</a>
Papovavirus	<a href="#">Electron Microscopy</a>
Parainfluenza virus	<a href="#">Direct Immunofluorescence</a>
	<a href="#">Culture</a>
Parvovirus B19	<a href="#">Serology</a>
	<a href="#">Molecular</a>

<b>Pathogen</b>	<b>Investigation</b>
Polyoma virus (JC)	<a href="#">Molecular Qualitative</a>
	<a href="#">Molecular Quantitative</a>
Polyoma BK virus	<a href="#">Molecular Quantitative</a>
Respiratory Syncytial virus (RSV)	<a href="#">Culture</a>
	<a href="#">Direct Immunofluorescence</a>
Rhinovirus	<a href="#">Culture</a>
Rotaviruses	<a href="#">Electron Microscopy</a>
Rubella	<a href="#">Serology</a>
Syphilis ( <i>Treponema pallidum</i> )	<a href="#">Serology</a>
<i>Toxoplasma gondii</i>	<a href="#">Serology</a>
Varicella Zoster virus (VZV)	<a href="#">Direct immunofluorescence</a>
	<a href="#">Spin Amplified Immunofluorescence</a>
	<a href="#">Molecular Qualitative</a>
	<a href="#">Serology</a>
Viral Haemorrhagic Fevers	<a href="#">Serology</a>
West Nile Virus	<a href="#">Serology</a>

**Table 1** indicates the laboratory investigations available. To access the details of the sample type, transport conditions, testing frequency, sample volume, request form and turnaround time please double click on the investigation beside the pathogen named. The minimum turnaround time for a single test is calculated from day of receipt of specimen to date of issue of report in working days. Any sample arriving after 12.00midday will be regarded as arriving the next working day. Please note that additional days are required for confirmation of reactive samples. Samples referred to other reference laboratories will further extend the test turnaround time.

### **3.3 Additional Laboratory Testing**

If **additional laboratory testing** is required by the referring clinician on a sample previously referred, please contact the laboratory to investigate the feasibility of using the initial specimen for analysis. Additional testing will only be performed on receipt of a written or faxed request.

### **3.4 Packing the Specimen for Transport**

The requirements stated below are in accordance with the European Agreement concerning the International Carriage of Dangerous Goods by Road (UNADR) and apply to all specimens or samples directed to the NVRL. It is the responsibility of the referring site to ensure compliance with these requirements.

### 3.4.1 Procedure for the Transport of Diagnostic Specimens (Non Infectious)

1. Specimen to be sent should be stored in a secure (preferably plastic) primary container.
2. Wrap the container in tissue or cotton wool, which will act as absorbent material in event of any spillages.
3. This will be placed in a biohazard bag.
4. Place the biohazard bag with the sample in a padded (jiffy bag) envelope.
5. Label the envelope with a hazard warning label, "Diagnostic Specimen".
6. Place the name, address and contact number of the destination laboratory on the outside of the envelope. Please avoid use of staples for closure of packages, as these present a safety hazard to the laboratory staff.
7. Place the name, address and contact number of the originator on the outside of the envelope or transport container.
8. The specimen can be transported under the appropriate temperature conditions.

### 3.4.2 Procedure for the Transport of Infectious or Suspected Infectious Specimens

1. Specimens or samples suspected or known to contain risk group 3 or 4 Pathogens are classified as infectious and are packaged and transported accordingly as outlined below.
2. Specimens or samples to be sent should be stored in a secure (preferably plastic) primary container.
3. Wrap the container in tissue or cotton wool, which will act as absorbent material in event of any spillages.
4. Place the wrapped primary specimen or sample container inside of the plastic container of the UN-approved Class 6.2 package type.
5. Place the container inside the cardboard box.
6. The box should contain a label "Infectious Substance". Write the name of the suspected microbe being transported in brackets.
7. Place the name, address and contact number of the destination laboratory on the outside of the box.
8. Place the name, address and contact number of the originator on the outside of the box.
9. Complete a transport document and provide a copy to the licensed courier.

**A licensed courier must be used for the transport of infectious or suspected infectious specimens.**

## 4. REQUEST FORMS

Requests for specimens requiring **urgent** investigation must be either faxed to the laboratory clearly stating the referring Doctors name and contact details (bleep or mobile) and reason for urgent investigation or arranged by phone with the NVRL Clinical team. The accompanying sample and request form must be clearly labelled '**urgent**' and **have a contact name and number (bleep/mobile number) for reporting.**

NVRL request forms

[GP Request Form](#)

[General Virology Request Form](#)

[Viral Serology Request Form](#)

[Biocontainment Facility Request Form](#)

[HIV Viral Load Assay Form](#)

[Hepatitis C Virus RNA Investigation Form](#)

[Chlamydia trachomatis and Neisseria gonorrhoeae PCR test Form](#)

[Measles IgM Oral Fluid Assay Form](#)

[Mumps IgM Oral Fluid Assay Form](#)

[Influenza Form](#)

[HIV Genotypic Resistance Assay Request Form](#)

[HIV Tropism Determination Request Form](#)

may be downloaded from the NVRL website ([www.ucd.ie/nvrl/nvrl\\_how\\_send.html](http://www.ucd.ie/nvrl/nvrl_how_send.html)).

## 5. SPECIMEN RETENTION POLICY

In accordance with the guidelines of the Royal College of Pathologists (UK), Institute of Biomedical Sciences and National Pathology Accreditation Advisory Council (Australia) the NVRL will retain all serum/plasma specimens for 4 months following issue of final report unless otherwise arranged. The exceptions to this policy are antenatal samples and reactive syphilis specimens, which are retained for 1 year. In addition, serum taken after needle-stick injury or otherwise hazardous exposure will be retained for 2 years.

## 6. REPORTS

Hard copy reports are important documents and should be promptly distributed to the requesting clinician. Telephoned results will be given in cases of urgency to an identified person from the requesting source. For reasons of confidentiality **it is the policy of the NVRL not to fax or e-mail reports**. Copy reports will only be issued on receipt of a written request. Reports can be transmitted electronically via Medibridge please contact the NVRL for further information.

## 7. REQUESTING GUIDE

The following 'Requesting Guide' may assist in identifying possible viruses/agents involved. More detailed information is available on the NVRL website ([www.ucd.ie/nvrl](http://www.ucd.ie/nvrl)).

Requests for 'Viral screen', 'routine virology' or 'atypical screen' without accompanying clinical information will not be processed. Failure to supply the required information will lead to delays in reporting.

Provisional Diagnosis/	Possible Virus /Agent / Disease
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<b>Symptoms</b>	
<b>AIDS &amp; HIV</b>	Human Immunodeficiency Virus (HIV)
<b>Arthralgia</b>	Rubella virus Parvovirus B19 <i>Mycoplasma pneumoniae</i> Brucella
<b>Central Nervous System</b>	Enterovirus Mumps virus Herpes Simplex virus (HSV) Varicella Zoster virus (VZV) Measles virus Dengue Virus
<b>Conjunctivitis</b>	Adenovirus Herpes Simplex virus (HSV) Enteroviruses <i>Chlamydia trachomatis</i>
<b>Diarrhoea/Vomiting</b>	Rotavirus, Adenovirus Astrovirus Calicivirus Norovirus (Small round structured viruses)
<b>Genital infection</b>	Herpes Simplex virus (HSV) <i>Chlamydia trachomatis</i> Syphilis ( <i>Treponema pallidum</i> )
<b>Hand, foot &amp; mouth disease</b>	Coxsackie A16 virus
<b>Heart disease</b>	Coxsackie group B virus Q Fever ( <i>Coxiella burnetti</i> ) Chlamydia Group <i>Mycoplasma pneumonia</i>
<b>Immune Status</b>	Hepatitis A & B virus Varicella Zoster virus (VZV) Rubella virus Mumps virus Measles virus Parvovirus
<b>“In Utero” infections</b>	Rubella virus Cytomegalovirus (CMV) Parvovirus B19 <i>Toxoplasma gondii</i> Varicella Zoster virus (VZV)
<b>Lymphadenopathy &amp; Glandular fever</b>	Epstein Barr virus (EBV) Cytomegalovirus (CMV) <i>Toxoplasma gondii</i>

<b>Organ donors</b>	Hepatitis B & C viruses Human Immunodeficiency Virus (HIV) Cytomegalovirus (CMV) <i>Toxoplasma gondii</i> Human T-Lymphotropic Virus (HTLV) <i>Treponema pallidum</i> (TPHA)
<b>Paraparesis</b>	Human T-Lymphotropic Virus (HTLV) Enterovirus
<b>Pleurodynia</b>	Coxsackie group B viruses
<b>Skin Rashes</b>	Q Fever ( <i>Coxiella burnetti</i> ) Chlamydia Group <i>Mycoplasma pneumonia</i> Syphilis ( <i>Treponema pallidum</i> ) Enterovirus
<b>Stomatitis</b>	Herpes Simplex virus (HSV) Enterovirus

Other investigations may be carried out by arrangement. Please do not hesitate to call the NVRL if further assistance is required

# Adenovirus Culture

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**Test:** Adenovirus detection using culture techniques

**Sample Types applicable:**

- Broncho –alveolar Lavage (BAL)
- Nasopharyngeal Aspirate (NPA)
- Throat Swab
- Stool

**Specimen Collection/Transport Conditions:**

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM) or equivalent medium.
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.
- A broncho-alveolar lavage should be transported in a sterile container.

Stool samples

2 to 5g should be transported in a sterile universal container. Transport medium is not required.

Eye swabs

Conjunctival swabs and scrapings for virus isolation should be taken into VTM or equivalent medium.

Specimens should be transported without delay, ideally at 4°C.

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Adenovirus Direct Immunofluorescence

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**Test:** Adenovirus detection using Direct Immunofluorescence

**Sample Types applicable:**

- Nasopharyngeal Aspirate (NPA)
- Sputum
- Broncho –alveolar Lavage (BAL)

**Specimen Collection/Transport Conditions:**

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM).
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.
- A broncho-alveolar lavage should be transported in a sterile container.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Adenovirus Electron Microscopy

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**Test:** Adenovirus detection using Electron Microscopy

**Sample Types applicable:**

- Stool Sample
- Biopsy Tissue
- Post Mortem tissue

**Specimen Collection/Transport Conditions:**

Stool samples

2 to 5g should be transported in a sterile universal container. Transport medium is not required.

Post - mortem or Biopsy specimens

Fresh unfixed tissues should be collected aseptically from the sites of probable infection using separate sterile instruments to cut and remove each sample. Place each sample in a separate sterile container and clearly identify each sample type. Specimens should be transported without delay, ideally at 4°C.

Scabs or biopsy material for electron microscopy should be sent in a sterile dry bottle.

Rapidly frozen tissue may also be sent for electron microscopy.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Adenovirus Molecular Qualitative

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**Test:** Adenovirus detection using Molecular Qualitative Techniques

**Sample Types applicable:**

- Eye Swab
- Stool
- Throat Swab

**Specimen Collection/Transport Conditions:**

Eye swabs

Conjunctival swabs and scrapings for virus isolation should be taken into VTM or equivalent medium.

Specimens should be transported without delay, ideally at 4°C.

Stool samples

2 to 5g should be transported in a sterile universal container. Transport medium is not required.

**Testing Frequency:** Twice Weekly

**Turnaround Time:** 5-7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Adenovirus Molecular Quantitative

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**Test:** Adenovirus detection using Molecular Quantitative Techniques

**Sample Types applicable:**

- EDTA whole blood
- Plasma
- Clotted blood
- Serum

**Specimen Collection/Transport Conditions:**

EDTA whole blood/Serum/Clotted blood/plasma

Samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (EDTA or clotted blood) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture.

**Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days.

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Arbovirus Group

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**Test:** Arbovirus detection using immunofluorescence

**Sample Types applicable:**

- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results
6. **N.B.** Clinical details and travel information

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

**Note:** Arbovirus tested

- a) Non US screen: West Nile Virus, Venezuelan Encephalitis Virus, Japanese Encephalitis Virus, Yellow Fever, Dengue Virus.
- b) US screen: West Nile Virus, Western Encephalitis Virus, Eastern Encephalitis Virus, St. Louis Encephalitis Virus, Powassan Virus, La Crosse Virus.

Travel history particularly important to choose the appropriate Arbovirus screen. Please notify laboratory if the patient has received Yellow Fever Vaccine as cross reactivity can be observed within Arbovirus screening assays resulting in false positive results due to non specific cross reactivity.

## **Astroviruses Electron Microscopy**

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**Test:** Astroviruses detection using Electron Microscopy

**Sample Types applicable:**

- Stool

**Specimen Collection/Transport Conditions:**

Stool samples

2 to 5g should be transported in a sterile universal container. Transport medium is not required.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Borrelia burgdoferi (Lymes Disease)**

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**Test:** Borrelia burgdoferi (Lymes Disease) Serology

**Sample Types applicable:**

- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) or serum (> 1ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** 2-3 times weekly

**Turnaround Time:** 5 working days.

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results
6. Clinical details in relation to rash /tick bite etc

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Chikungunya immunofluorescence

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**Test:** Chikungunya detection using immunofluorescence

**Sample Types applicable:**

- Serum
- Clotted Blood
- Plasma
- EDTA Whole blood

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results
6. **N.B.** Clinical details and travel information

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Chikungunya Molecular Qualitative

---

**Test:** Chikungunya detection using molecular qualitative

**Sample Types applicable:**

- Plasma
- EDTA Whole Blood

**Specimen Collection/Transport Conditions:**

Plasma/EDTA Whole blood

Plasma samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, **EDTA** whole blood can be sent to the NVRL but must arrive within 24 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results
6. **N.B.** Clinical details and travel information

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Chlamydia trachomatis

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**Test: *Chlamydia trachomatis* Molecular Qualitative**

**Please note:** Samples requested for *Chlamydia trachomatis* investigations will also be tested for *Neisseria gonorrhoea*.

**Sample Types applicable:**

- Endocervical Swab
- Urethral Swabs
- Urine Specimens
- Eye swabs
- Rectal Swabs

**Specimen Collection/Transport Conditions:**

Details on specimen collection for combined *Chlamydia Trachomatis* (CT) and *Neisseria gonorrhoeae* (GC) testing are included in the APTIMA collection device kits provided by the NVRL.

**Only specimens collected in APTIMA collection devices can be tested in the NVRL.**

**Testing Frequency:** 4 times a week

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Coronavirus Electron Microscopy

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**Test:** Coronavirus detection using electron microscopy techniques

**Sample Types:**

- Stool
- Respiratory Secretions

**Specimen Collection/Transport Conditions:**

Stool

2 to 5g should be transported in a sterile universal container. Transport medium is not required. For detection of coronavirus, specimens should be transported to the laboratory as soon as possible post collection. Alternatively specimens may be stored at 4°C for up to 72 hrs before dispatch.

Respiratory Secretions

Please contact the laboratory

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Cytomegalovirus (CMV) Culture**

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**Test:** Cytomegalovirus (CMV) detection using Culture

**Sample Types applicable:**

- Biopsy Specimens
- Other specimen types by arrangement

**Specimen Collection/Transport Conditions:**

Scabs or biopsy material for electron microscopy should be sent in a sterile dry bottle. Rapidly frozen tissue may also be sent for electron microscopy.

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Cytomegalovirus (CMV) Molecular Qualitative**

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**Test:** Cytomegalovirus (CMV) detection using molecular qualitative techniques

**Sample Types applicable:**

- Cerebrospinal Fluid (CSF)
- Urine
- Broncho- alveolar Lavage (BAL)
- Amniotic Fluid
- Blood Spot (Guthrie card)

**Specimen Collection/Transport Conditions:**

Cerebrospinal Fluid (CSF)

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Urine

10ml of urine should be sent in a sterile container. Specimens should be transported without delay, at 4°C.

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM) or equivalent medium.
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.
- A broncho-alveolar lavage should be transported in a sterile container.

**Testing Frequency:** Daily

**Turnaround Time:** 2 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Cytomegalovirus (CMV) Molecular Quantitative

---

**Test:** Cytomegalovirus (CMV) detection using molecular quantitative techniques

**Sample Types applicable:**

- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Plasma

Plasma samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state.

EDTA

Alternatively, **EDTA** whole blood can be sent to the NVRL but must arrive within 24 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Cytomegalovirus (CMV) Serology

---

**Test:** Cytomegalovirus (CMV) detection using serology techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- Plasma
- EDTA Whole blood

**Specimen Collection/Transport Conditions:**

Clotted Blood/Serum/ Plasma/ EDTA Whole blood

For serological investigations serum/plasma samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Dengue Serology

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**Test:** Dengue detection using serology techniques

**Sample Types applicable:**

- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results
6. **N.B.** Clinical details and travel information

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Enteroviruses Culture

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**Test:** Enteroviruses detection using culture techniques

**Sample Types applicable:**

- Stool
- Throat Swab
- Pleural Fluid

**Specimen Collection/Transport Conditions:**

Stool samples

2 to 5 g should be transported in a sterile universal container. Transport medium is not required.

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM). VTM can be obtained from the NVRL

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly

## Enteroviruses Molecular Qualitative

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**Test:** Enteroviruses detection using molecular qualitative techniques

**Sample Types applicable:**

- Cerebrospinal Fluid (CSF)
- Stool
- Throat swab

**Specimen Collection/Transport Conditions:**

Cerebrospinal Fluid

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Stool samples

2 to 5 g should be transported in a sterile universal container. Transport medium is not required.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Epstein Barr Virus (EBV) Molecular Quantitative

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**Test:** Epstein Barr Virus (EBV) detection using molecular quantitative techniques

**Sample Types applicable:**

- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Plasma

Plasma samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state.

EDTA

Alternatively, **EDTA** whole blood can be sent to the NVRL but must arrive within 24 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Epstein Barr Virus (EBV) Serology

---

**Test:** Epstein Barr Virus (EBV) detection using serology techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- Plasma
- EDTA Whole blood

**Specimen Collection/Transport Conditions:**

Clotted Blood/Serum/ Plasma/ EDTA Whole blood

For serological investigations serum/plasma samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Twice weekly

**Turnaround Time:** 5 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Hantavirus Serology

---

**Test:** Hantavirus detection using serology techniques

**Sample Types applicable:**

- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Hepatitis A Virus Serology**

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**Test:** Hepatitis A Virus detection using serology techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- Plasma
- EDTA Whole blood

**Specimen Collection/Transport Conditions:**

Clotted Blood/Serum/ Plasma/ EDTA Whole blood

For serological investigations serum samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Hepatitis B Virus Molecular Quantitative

---

**Test:** Hepatitis B Virus detection using molecular quantitative techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Serum and plasma

Samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA or RNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (EDTA or clotted blood) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Weekly

**Turnaround Time:** 7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Hepatitis B Virus Genotypic antiviral resistance testing**

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**Test:** Hepatitis B Virus Genotypic antiviral resistance

**Sample Types applicable:**

- Clotted blood
- Serum

**Specimen Collection/Transport Conditions:**

Serum and plasma

Samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (clotted blood) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Hepatitis B Virus Genotyping

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**Test:** Hepatitis B Virus Genotyping

**Sample Types applicable:**

- Clotted blood
- Serum

**Specimen Collection/Transport Conditions:**

Serum and plasma

Samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (clotted blood) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Hepatitis B Virus Pre- core mutant analysis

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**Test:** Hepatitis B Virus Pre- core mutant analysis

**Sample Types applicable:**

- Clotted blood
- Serum

**Specimen Collection/Transport Conditions:**

Serum and plasma

Samples for molecular investigation should be separated from whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (clotted blood) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Hepatitis B Virus Serology

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**Test:** Hepatitis B Virus using serology techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Clotted Blood/Serum/ Plasma/ EDTA Whole blood

For serological investigations serum/plasma samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Hepatitis C Virus IL-28 testing

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**Test:** Hepatitis C Virus IL-28 testing

**Sample Types applicable:**

- Clotted blood
- Serum
- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Serum and plasma

Samples for molecular investigation should be separated from whole blood within 4-6 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral RNA. These samples should be despatched to the NVRL in a frozen state.

EDTA

Alternatively, whole blood (EDTA or clotted blood) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Note: Patient consent is required prior to performing IL-28 testing.**

**Testing Frequency:** Weekly

**Turnaround Time:** 7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Hepatitis C Virus Molecular Quantitative

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**Test:** Hepatitis C Virus detection using molecular quantitative techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Serum and plasma

Samples for molecular investigation should be separated from whole blood within 4-6 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral RNA. These samples should be despatched to the NVRL in a frozen state.

EDTA / Clotted Blood

Alternatively, whole blood (EDTA or clotted blood) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Note:** In cases where HCV genotyping is also required an additional 1ml volume of sample should be sent to the NVRL.

**Testing Frequency:** 3 times weekly

**Turnaround Time:** 7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlight

# Hepatitis C Virus Genotyping

---

**Test:** Hepatitis C Virus Genotype

**Sample Types applicable:**

- Clotted blood
- Serum
- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Serum and plasma

Samples for molecular investigation should be separated from whole blood within 6 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral RNA. These samples should be despatched to the NVRL in a frozen state.

EDTA

Alternatively, whole blood (EDTA or clotted blood) can be sent to the NVRL but must arrive within 6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Note:** Please note 1ml volume is required for HCV genotyping. In cases where HCV molecular quantitative testing is also required an additional 1ml volume should be sent to the NVRL.

**Testing Frequency:** Weekly

**Turnaround Time:** 10 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Hepatitis C Virus Serology

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**Test:** Hepatitis C Virus using serology techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- EDTA Whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Clotted Blood/Serum/ Plasma/ EDTA Whole blood

For serological investigations serum/plasma samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Hepatitis D Virus Serology

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**Test:** Hepatitis D Virus detection using serology techniques

**Sample Types applicable:**

- Clotted bloods
- Serum

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Weekly

**Turnaround Time:** 10 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Hepatitis E Virus Serology

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**Test:** Hepatitis E Virus detection using serology techniques

**Sample Types applicable:**

- Clotted blood
- Serum
- EDTA Whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Clotted Blood/Serum/ Plasma/ EDTA Whole blood

For serological investigations serum samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Weekly

**Turnaround Time:** 10 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Herpes Simplex Virus 1,2 (HSV) Culture**

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**Test:** Herpes Simplex Virus (HSV) 1,2 using Culture techniques

**Sample Types applicable:**

- broncho-alveolar lavage (BAL)
- Throat swabs

**Specimen Collection/Transport Conditions:**

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM). VTM can be obtained from the NVRL
- A broncho-alveolar lavage should be transported in a sterile container.

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

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## **Herpes Simplex Virus 1,2 (HSV) Direct Immunofluorescence**

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**Test:** Herpes Simplex Virus (HSV) 1,2 using direct Immunofluorescence technique

**Sample Types applicable:**

- Vesicle Fluid/Scrapings on slide

**Specimen Collection/Transport Conditions:**

Vesicular Fluid

Vesicular fluids and cellular material from the base of lesions should be collected during the first 3 days after vesicle eruption. Vesicle fluid may be aspirated using a needle and syringe and released into a sterile bottle. Alternatively a sample can be collected using a swab which is then placed into VTM. The base of the lesion can be opened and then scraped with a sterile scalpel and the cellular material washed into VTM.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Herpes Simplex Virus 1,2 (HSV) Spin Amplified Immunofluorescence**

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**Test:** Herpes Simplex Virus (HSV) 1,2 using spin amplified immunofluorescence technique

**Sample Types applicable:**

- Please contact the laboratory

**Specimen Collection/Transport Conditions:**

Please contact the laboratory

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Herpes Simplex Virus 1,2 (HSV) Molecular Qualitative**

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**Test:** Herpes Simplex Virus (HSV) 1,2 using molecular qualitative technique

**Sample Types applicable:**

- CSF
- Viral Swab

**Specimen Collection/Transport Conditions:**

CSF

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

**Testing Frequency:** Daily (CSF)/3 times Weekly (Swab)

**Turnaround Time:** 2 working days (CSF)/5 working days (Swab)

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Herpes Simplex Virus 1,2 (HSV) Serology**

---

**Test:** Herpes Simplex Virus (HSV) 1,2 using serology techniques

**Sample Types applicable:**

- Clotted Blood
- Serum

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Herpes Group Virus Electron Microscopy**

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**Test:** Herpes Simplex group virus using electron microscopy techniques

**Sample Types applicable:**

- Clotted Blood
- Serum

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## HHV 6 Molecular Qualitative

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**Test:** HHV6 virus using molecular qualitative techniques

**Sample Types applicable:**

- CSF
- Saliva
- Plasma
- EDTA Whole blood

**Specimen Collection/Transport Conditions:**

CSF

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Saliva

Please contact the laboratory

Plasma/EDTA Whole blood

Please contact the laboratory

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Human Immunodeficiency Virus (HIV1) Molecular Quantitative

**Test:** HIV 1 detection using Molecular Quantative techniques

**Sample Types:**

- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Plasma

Plasma samples for molecular investigation should be separated from whole blood within 6 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral RNA. These samples should be despatched to the NVRL in a frozen state. Chillette portable containers are recommended for transport of frozen specimens.

EDTA

Alternatively, **EDTA** whole blood can be sent to the NVRL but must arrive within 6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** 3 times weekly

**Turnaround Time:** 5 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Human Immunodeficiency Virus (HIV) Genotypic antiviral resistance testing

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**Test:** HIV Genotypic detection using antiviral resistance techniques

**Sample Types applicable:**

- EDTA whole blood
- Plasma

**Specimen Collection/Transport Conditions:**

Plasma

Samples for molecular investigation should be separated from EDTA whole blood within 6 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral RNA. These samples should be despatched to the NVRL in a frozen state. Chillette portable containers are recommended for transport of frozen specimens.

EDTA

Alternatively, whole blood (EDTA) can be sent to the NVRL but must arrive within 6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Weekly

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Human Immunodeficiency Virus (HIV) Genotypic tropism testing

**Test:** HIV Genotypic tropism

**Sample Types applicable:**

- EDTA whole blood (HIV viral load result <1,000c/ml before testing performed)
- Plasma (HIV viral load > 1,000c/ml before testing performed)

**Specimen Collection/Transport Conditions:**

Plasma

Samples for molecular investigation should be separated from EDTA whole blood within 6 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral RNA. These samples should be despatched to the NVRL in a frozen state. Chilled portable containers are recommended for transport of frozen specimens.

EDTA

Alternatively, whole blood (EDTA) can be sent to the NVRL but must arrive within 6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Weekly

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Human Immunodeficiency Virus 1,2 (HIV) Serology**

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**Test:** HIV 1,2detection using Serology techniques

**Sample Types:**

- Serum
- Clotted blood
- Plasma
- EDTA Whole blood

**Specimen Collection/Transport Conditions:**

Clotted Blood/Serum/ Plasma/ EDTA Whole blood

For serological investigations serum/plasma samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Human T-Lymphotropic Virus (HTLV) I,II Molecular Quantitative**

**Test:** HTLV I,II detection using molecular quantitative techniques

**Sample Types:**

- EDTA Whole Blood

**Specimen Collection/Transport Conditions:**

EDTA Whole blood

For the above molecular investigation a container of EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Human T-Lymphotropic Virus (HTLV) I,II Serology**

---

**Test:** HTLV I,II detection using serology techniques

**Sample Types:**

- Serum
- Clotted blood

**Specimen Collection/Transport Conditions:**

Serum/Clotted blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Influenza Virus Direct Immunofluorescence

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**Test:** Influenza detection using direct immunofluorescence techniques

**Sample Types:**

- Nasopharyngeal Aspirate
- Sputum
- Throat washing
- Broncho – alveolar Lavage (BAL)

**Specimen Collection/Transport Conditions:**

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM) or equivalent medium.
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.
- A broncho-alveolar lavage should be transported in a sterile container.

**Testing Frequency:** Daily

**Turnaround Time:** 2 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Influenza Virus Molecular Qualitative

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**Test:** Influenza detection using molecular qualitative techniques

**Sample Types:**

- Broncho-alveolar Lavage
- Nasopharyngeal Aspirate
- Nasopharyngeal Swab
- Throat Swab
- Throat Washings
- Flaccid swabs

**Specimen Collection/Transport Conditions:**

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and nasopharyngeal swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM). The use of flaccid swabs may improve yield of respiratory virus
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.
- A broncho-alveolar lavage should be transported in a sterile container.

**Testing Frequency:** Daily in season/Twice a week not in season

**Turnaround Time:** 3 working days (in season)/5 working days (not in season)

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Influenza genotypic antiviral resistance testing**

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**Test:** Influenza genotypic antiviral resistance testing

**Sample Types:**

- Broncho-alveolar Lavage
- Nasopharyngeal Aspirate
- Nasopharyngeal Swab
- Throat Swab
- Throat Washings
- Flaccid swab

**Specimen Collection/Transport Conditions:**

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and nasopharyngeal swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM) or equivalent media. Flaccid swabs may improve the yield of respiratory viruses.
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.
- A broncho-alveolar lavage should be transported in a sterile container.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

**Please note** that additional patient history and treatment history is required.

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Influenza Virus (H5) Molecular Qualitative**

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**Test:** Influenza (H5) detection using molecular qualitative techniques

**Sample Types:**

- Nose/Throat swabs

**Specimen Collection/Transport Conditions:**

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and nasopharyngeal swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM) or equivalent medium. The use of flaccid swabs may improve yield of respiratory virus

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

**Note:** Please note that the laboratory must be notified prior to dispatching the sample. Please contact the clinical team on 01 7161321/ 01 7164440.

## Leptospirosis Serology

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**Test:** Leptospirosis detection using serology techniques

**Sample Types:**

- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Serum/Clotted blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Twice weekly

**Turnaround Time:** 4 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Measles Virus Culture

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**Test:** Measles detection using culture techniques

**Sample Types:**

- Cerebrospinal Fluid
- Nasopharyngeal Aspirate
- Throat Swab

**Specimen Collection/Transport Conditions:**

CSF

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Respiratory Secretions

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM).
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Measles Virus Molecular Qualitative

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**Test:** Measles detection using molecular qualitative techniques

**Sample Types:**

- Saliva (Oral Fluid)
- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Saliva

Oral fluid (saliva) specimens should be collected using a foam swab supplied by the NVRL or using commercially available collection devices such as OraCol™ or OraSure™. Please contact the laboratory for further information.

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Weekly

**Turnaround Time:** 5 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

**Note:** Please include clinical details i.e. details of rash onset.

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Measles Virus Serology

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**Test:** Measles detection using serology techniques

**Sample Types:**

- Saliva (Oral Fluid)
- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Saliva

Oral fluid (saliva) specimens should be collected using a foam swab supplied by the NVRL or using commercially available collection devices such as OraCol™ or OraSure™. Please contact the laboratory for further information.

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Weekly

**Turnaround Time:** 4 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Molluscum contagiosum Electron Microscopy**

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**Test:** Molluscum contagiosum detection using electron microscopy techniques

**Sample Types:**

- Biopsy Tissue
- Skin
- Vesicle Fluid/Scrapings

**Specimen Collection/Transport Conditions:**

Biopsy Tissue

Fresh unfixed tissues should be collected aseptically from the sites of probable infection using separate sterile instruments to cut and remove each sample. Place each sample in a separate sterile container and clearly identify each sample type. Specimens should be transported without delay, ideally at 4°C.

Scabs or biopsy material for electron microscopy should be sent in a sterile dry bottle.

Rapidly frozen tissue may also be sent for electron microscopy.

Vesicular fluids/Scrapings/Skin

Vesicular fluids and cellular material from the base of lesions should be collected during the first 3 days after vesicle eruption. Vesicle fluid may be aspirated using a needle and syringe at the base of the opened vesicle can then be scraped with a scalpel. The cellular material and/or the vesicle fluid should be smeared onto the centre of a clean microscope slide and air-dried. Do not fix this material for Electron Microscopy. Place the slide in a plastic slide carrier for transport.

Conjunctival swabs and scrapings for virus isolation should be taken into VTM. Specimens should be transported without delay, ideally at 4°C.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Mumps virus Culture

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**Test:** Mumps virus detection using culture techniques

**Sample Types:**

- Cerebrospinal Fluid
- Throat swab
- Urine
- Saliva

**Specimen Collection/Transport Conditions:**

Cerebrospinal fluid

If possible, collect 1ml into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Throat swab

Please contact the laboratory.

Urine

10ml of urine should be sent in a sterile container. Specimens should be transported without delay, at 4°C.

Saliva

Oral fluid (saliva) specimens should be collected using a foam swab

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Mumps virus Molecular Qualitative**

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**Test:** Mumps virus detection using molecular qualitative techniques

**Sample Types:**

- Serum
- Clotted blood
- Saliva

**Specimen Collection/Transport Conditions:**

Saliva

Oral fluid (saliva) specimens should be collected using a foam swab supplied by the NVRL or using commercially available collection devices such as OraCol™ or OraSure™. Please contact the laboratory for further information.

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Weekly

**Turnaround Time:** 5 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Mumps virus Serology

---

**Test:** Mumps virus detection using serology techniques

**Sample Types:**

- Serum
- Clotted blood
- Saliva

**Specimen Collection/Transport Conditions:**

Saliva

Oral fluid (saliva) specimens should be collected using a foam swab supplied by the NVRL or using commercially available collection devices such as OraCol™ or OraSure™. Please contact the laboratory for further information.

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** Weekly

**Turnaround Time:** 5 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Neisseria gonorrhoeae

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**Test:** *Neisseria gonorrhoeae* detection using Molecular Qualitative techniques

**Please note:** Samples requested for *Chlamydia trachomatis* investigations will also be tested for *Neisseria gonorrhoeae*.

**Sample Types applicable:**

- Endocervical Swab
- Urethral Swabs
- Urine Specimens
- Eye swab
- Rectal swab

**Specimen Collection/Transport Conditions:**

Details on specimen collection for combined *Chlamydia Trachomatis* (CT) and *Neisseria gonorrhoeae* (GC) testing are included in the APTIMA collection device kits provided by the NVRL.

**Only specimens collected in APTIMA collection devices can be tested in the NVRL.**

**Testing Frequency:** 4 times a week

**Turnaround Time:** 3 working days.

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Norovirus Electron Microscopy

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**Test:** Norovirus detection using electron microscopy techniques

**Sample Types:**

- Stool

**Specimen Collection/Transport Conditions:**

Stool

2 to 5g should be transported in a sterile universal container. Transport medium is not required. For molecular detection of norovirus, specimens should be transported to the laboratory as soon as possible post collection. Alternatively specimens may be stored at 4°C for up to 72 hrs before dispatch.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

6. Patient's Name
7. Date of birth
8. Hospital No.
9. Date and time of collection
10. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Norovirus Molecular Qualitative

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**Test:** Norovirus detection using molecular qualitative techniques

**Sample Types:**

- Stool

**Specimen Collection/Transport Conditions:**

Stool

2 to 5g should be transported in a sterile universal container. Transport medium is not required. For molecular detection of norovirus, specimens should be transported to the laboratory as soon as possible post collection. Alternatively specimens may be stored at 4°C for up to 72 hrs before dispatch.

**Testing Frequency:** Daily in season/Weekly out of season

**Turnaround Time:** 3 working days in season/5 working days out of season

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Orf Virus Electron Microscopy

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**Test:** Orf Virus detection using electron microscopy techniques

**Sample Types:**

- Biopsy Tissue
- Skin
- Vesicle Fluid/Scrapings

**Specimen Collection/Transport Conditions:**

Biopsy Tissue

Fresh unfixed tissues should be collected aseptically from the sites of probable infection using separate sterile instruments to cut and remove each sample. Place each sample in a separate sterile container and clearly identify each sample type. Specimens should be transported without delay, ideally at 4°C.

Scabs or biopsy material for electron microscopy should be sent in a sterile dry bottle.

Rapidly frozen tissue may also be sent for electron microscopy.

Vesicular fluids / Scrapings/Skin

Vesicular fluids and cellular material from the base of lesions should be collected during the first 3 days after vesicle eruption. Vesicle fluid may be aspirated using a needle and syringe at the base of the opened vesicle can then be scraped with a scalpel. The cellular material and/or the vesicle fluid should be smeared onto the centre of a clean microscope slide and air-dried. Do not fix this material for Electron Microscopy. Place the slide in a plastic slide carrier for transport.

Conjunctival swabs and scrapings for virus isolation should be taken into VTM or equivalent medium. Specimens should be transported without delay, ideally at 4°C.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Papovavirus Electron Microscopy

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**Test:** Papovavirus detection using electron microscopy techniques

**Sample Types:**

- Biopsy Tissue
- Urine

**Specimen Collection/Transport Conditions:**

Biopsy Tissue

Fresh unfixed tissues should be collected aseptically from the sites of probable infection using separate sterile instruments to cut and remove each sample. Place each sample in a separate sterile container and clearly identify each sample type. Specimens should be transported without delay, ideally at 4°C.

Scabs or biopsy material for electron microscopy should be sent in a sterile dry bottle.

Rapidly frozen tissue may also be sent for electron microscopy.

Urine

10ml of urine should be sent in a sterile container. Specimens should be transported without delay, at 4°C.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Parainfluenza Culture

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**Test:** Parainfluenza detection using culture techniques

**Sample Types:**

- Nasopharyngeal Aspirate
- Throat Washing

**Specimen Collection/Transport Conditions:**

Nasopharyngeal Aspirate/Mouth Washings

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM) or equivalent medium
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Parainfluenza Direct Immunofluorescence

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**Test:** Parainfluenza detection using direct immunofluorescence techniques

**Sample Types:**

- Nasopharyngeal Aspirate
- Throat Washing

**Specimen Collection/Transport Conditions:**

Nasopharyngeal Aspirate/Mouth Washings

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM).
- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

# Parvovirus B19 Molecular Quantitative

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**Test:** Parvovirus B19 detection using molecular quantitative techniques

**Sample Types:**

- EDTA whole blood
- Amniotic fluid
- Plasma

**Specimen Collection/Transport Conditions:**

Plasma / EDTA Whole blood

Samples for molecular investigation should be separated from EDTA whole blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral RNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (EDTA) can be sent to the NVRL but must arrive within 24 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

Amniotic Fluid

Please contact the laboratory

**Testing Frequency:** Weekly

**Turnaround Time:** 7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Parvovirus B19 Serology

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**Test:** Parvovirus B19 detection using serology techniques

**Sample Types:**

- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Serum/Clotted blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Polyoma virus (JC) Qualitative**

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**Test:** Polyoma virus detection using molecular qualitative techniques

**Sample Types:**

- Cerebrospinal fluid
- Urine
- Serum/Whole Clotted Blood

**Specimen Collection/Transport Conditions:**

Cerebrospinal fluid

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Urine

10ml of urine should be sent in a sterile container. Specimens should be transported without delay, at 4°C.

Serum/Whole Clotted Blood

Serum/Clotted Blood

Samples for molecular investigation should be separated from Clotted blood within 24 hours of venepuncture and frozen immediately at –20°C to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood can be sent to the NVRL but must arrive within 24 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Twice Weekly

**Turnaround Time:** 7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Polyoma virus (JC) Quantitative**

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**Test:** Polyoma virus detection using molecular quantitative techniques

**Sample Types:**

- Cerebrospinal fluid
- Urine
- Serum/Whole Clotted Blood

**Specimen Collection/Transport Conditions:**

Cerebrospinal fluid

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Urine

10ml of urine should be sent in a sterile container. Specimens should be transported without delay, at 4°C.

Serum/Whole Clotted Blood

Serum/Clotted Blood

Samples for molecular investigation should be separated from Clotted blood within 24 hours of venepuncture and frozen immediately at –20°C to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood can be sent to the NVRL but must arrive within 24 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** Twice Weekly

**Turnaround Time:** 7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Polyoma virus (BK) Quantitative**

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**Test:** Polyoma virus detection using molecular quantitative techniques

**Sample Types:**

- Serum
- Clotted Blood
- EDTA whole blood
- Plasma
- Urine

**Specimen Collection/Transport Conditions:**

Serum/Clotted Blood / Plasma / EDTA Whole blood

Samples for molecular investigation should be separated from EDTA whole blood/Clotted blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (EDTA) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture. **Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

Urine

10ml of urine should be sent in a sterile container. Specimens should be transported without delay, at  $4^{\circ}\text{C}$

**Testing Frequency:** Twice Weekly

**Turnaround Time:** 7 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Respiratory Syncytial virus (RSV) Culture**

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**Test:** Respiratory Syncytial virus detection using culture techniques

**Sample Types:**

- Nasopharyngeal Aspirate
- Sputum

**Specimen Collection/Transport Conditions:**

Nasopharyngeal Aspirate / Sputum

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Respiratory Syncytial virus (RSV) Direct Immunofluorescence**

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**Test:** Respiratory Syncytial virus detection using direct immunofluorescence techniques

**Sample Types:**

- Nasopharyngeal Aspirate
- Sputum

**Specimen Collection/Transport Conditions:**

Nasopharyngeal Aspirate / Sputum

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Nasopharyngeal secretions should be aspirated into a sterile plastic mucous extractor. Transport the mucous extractor with the secretions to the NVRL.

**Testing Frequency:** Daily

**Turnaround Time:** 2 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Rhinovirus Culture

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**Test:** Rhinovirus detection using culture techniques

**Sample Types:**

- Throat Swab

**Specimen Collection/Transport Conditions:**

Throat swabs

Respiratory viruses are extremely thermo labile and therefore should be transported to the laboratory at 4°C without delay. The quality of the sample is a major determinant in identifying the causative agent.

- Throat swabs and other swabs are obtained by swabbing the affected site and then breaking the swab into Viral Transport Medium (VTM). VTM can be obtained from the NVRL

**Testing Frequency:** Daily

**Turnaround Time:** 14 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Rotavirus Electron Microscopy

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**Test:** Rotavirus detection using electron microscopy techniques

**Sample Types:**

- Stool

**Specimen Collection/Transport Conditions:**

Stool

2 to 5g should be transported in a sterile universal container. Alternatively specimens may be stored at 4°C for up to 72 hrs before dispatch.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Rubella Serology

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**Test:** Rubella detection using serology techniques

**Sample Types:**

- Serum
- Clotted Blood
- Saliva
- Plasma
- EDTA Whole blood

**Specimen Collection/Transport Conditions:**

Serum/Clotted blood/Plasma/EDTA Whole blood

For serological investigations serum samples/plasma samples (>1ml) or container of clotted blood/EDTA Whole blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Syphilis (*Treponema pallidum*) Serology**

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**Test:** Syphilis detection using serology techniques

**Sample Types:**

- Serum
- Clotted Blood
- Cerebrospinal fluid

**Specimen Collection/Transport Conditions:**

Serum/Clotted blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

Cerebrospinal fluid

If possible, collect 500µl into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Toxoplasma gondii Serology**

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**Test:** Toxoplasma gondii detection using serology techniques

**Sample Types:**

- Serum
- Clotted Blood
- Plasma
- EDTA Whole Blood

**Specimen Collection/Transport Conditions:**

Serum/Clotted blood/Plasma/EDTA Whole Blood

For serological investigations serum samples/plasma (>1ml) or container of clotted blood/EDTA Whole Blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Varicella Zoster virus (VZV) Direct Immunofluorescence**

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**Test:** Varicella Zoster virus detection using direct immunofluorescence techniques

**Sample Types:**

- Vesicle Fluid

**Specimen Collection/Transport Conditions:**

Vesicle Fluid

Vesicular fluids and cellular material from the base of lesions should be collected during the first 3 days after vesicle eruption. Vesicle fluid may be aspirated using a needle and syringe and released into a sterile bottle. Alternatively a sample can be collected using a swab which is then placed into VTM. The base of the lesion can be opened and then scraped with a sterile scalpel and the cellular material washed into VTM.

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Varicella Zoster virus (VZV) Spin amplified Immunofluorescence**

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**Test:** Varicella Zoster virus detection using spin amplified immunofluorescence techniques

**Sample Types:**

- Please contact the laboratory

**Specimen Collection/Transport Conditions:**

Please contact the laboratory

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Varicella Zoster virus (VZV) Molecular Qualitative**

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**Test:** Varicella Zoster virus detection using molecular qualitative techniques

**Sample Types:**

- Cerebrospinal fluid
- Skin swab
- Vesicle Fluid

**Specimen Collection/Transport Conditions:**

Cerebrospinal Fluid (CSF)

If possible, collect 1ml into a sterile container for virus isolation and molecular investigation. Transport medium is not required. Specimens should be transported without delay, at 4°C.

Skin Swab/Vesicle Fluid

Vesicular fluids and cellular material from the base of lesions should be collected during the first 3 days after vesicle eruption. Vesicle fluid may be aspirated using a needle and syringe and released into a sterile bottle. Alternatively a sample can be collected using a swab which is then placed into VTM. The base of the lesion can be opened and then scraped with a sterile scalpel and the cellular material washed into VTM.

**Testing Frequency:** Daily (CSF)/Weekly (Skin swab/Vesicle Fluid)

**Turnaround Time:** 3 working days (CSF)/5 working days (Skin swab/Vesicle Fluid)

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## **Varicella Zoster virus (VZV) Serology**

---

**Test:** Varicella Zoster virus detection using serology techniques

**Sample Types applicable:**

- Serum
- Clotted Blood
- Plasma
- EDTA Whole Blood

**Specimen Collection/Transport Conditions:**

Serum/Clotted blood/Plasma/EDTA Whole Blood

For serological investigations serum/plasma samples (>1ml) or container of clotted blood/EDTA Whole Blood (5-10 ml) be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder)

**Testing Frequency:** Daily

**Turnaround Time:** 3 working days (VZV only request)/ 7 working days (Occupational Health screen)

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone numbers for urgent results

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

## Viral Haemorrhagic Fevers

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**Test:** Viral Haemorrhagic detection using molecular qualitative techniques

**Sample Types applicable:**

- EDTA
- EDTA Whole Blood

**Specimen Collection/Transport Conditions:**

Plasma/EDTA Whole blood

Samples for molecular investigation should be separated from EDTA whole blood/Clotted blood within 24 hours of venepuncture and frozen immediately at  $-20^{\circ}\text{C}$  to maintain the integrity of the viral DNA. These samples should be despatched to the NVRL in a frozen state. Alternatively, whole blood (EDTA) can be sent to the NVRL but must arrive within 4-6 hours of venepuncture.

**Specimens anti-coagulated with heparin are not suitable for PCR.** Please ensure that whole blood samples for PCR arrive at the NVRL by 3.30 p.m.

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results
6. **N.B.** Clinical details and travel information

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.

**Note:** Viral Haemorrhagic fever (vhf) testing is only done by prior arrangement with clinical team and as per guidelines at:

[www.hpsc.ie/hpsc/A-Z/Vectorborne/ViralHaemorrhagicFever/Guidance/](http://www.hpsc.ie/hpsc/A-Z/Vectorborne/ViralHaemorrhagicFever/Guidance/)

The NVRL must be notified before dispatch from hospital of any suspect VHF specimens. Please contact the laboratory on 01-7161321/7164440.

## West Nile Virus

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**Test:** West Nile Virus detection using serology

**Sample Types applicable:**

- Serum
- Clotted Blood

**Specimen Collection/Transport Conditions:**

Serum / Clotted Blood

For serological investigations serum samples (>1ml) or container of clotted blood (5-10 ml) should be sent to the NVRL. Blood collected by venepuncture should be allowed to clot. Care should be taken to ensure that the blood samples are fully clotted prior to storage or transport at 2 to 8 °C. Samples not required for testing within 72 hours should be removed from the clot and stored frozen (-15°C or colder).

**Testing Frequency:** By arrangement

**Turnaround Time:** By arrangement

**Additional Information:** The following essential information should be documented in a legible manner on the specimen container.

1. Patient's Name
2. Date of birth
3. Hospital No.
4. Date and time of collection
5. Contact name and telephone number for urgent results
6. **N.B.** Clinical details.

All of the above details are mandatory when completing request forms and requesting tests on twins or patients with the same surname. Addressograph labels are permitted. The address where results are to be sent should also be clearly highlighted.