



Public Health
England

Protecting and improving the nation's health

National Infection Service Specialist Microbiology Network

Public Health Laboratory Manchester

Public Health Microbiology Services user handbook

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-leading science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

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Published November 2018
PHE publications
gateway number: 2018585

PHE supports the UN
Sustainable Development Goals



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1. Role of the PHE Specialist Microbiology Network within the National Infection Service

Public Health England's National Infection Service (NIS) incorporates epidemiologists, microbiologists, infection specialists, modellers, statisticians and other disciplines required to deliver a world-class service. Working with partners in the UK and internationally, the collective aim is to protect the population from infectious disease and reduce the burden of infectious disease.

PHE has 4 specialist microbiology laboratories across England. Each lead laboratory provides:

- microbiology support for the investigation, management and control of infection and outbreaks of communicable disease both during and out of normal working hours
- expert medical and scientific microbiological advice, including access to PHE experts locally and nationally as necessary
- a wide range of diagnostic, specialist and reference tests
- national standard methods and PHE testing algorithms
- clear guidance for users
- surge capacity to deal with large (up to 500 specimens per day) unanticipated outbreaks at short notice; PHE can also provide additional capacity for larger testing numbers and access to specific typing if required to define the epidemiology of outbreaks
- support for both regional and national capacity to respond to specific events of potential public health importance (for example London 2012 Olympic and Paralympic Games)
- assistance during field investigations by processing clinical samples
- testing for look-back exercises for health protection teams (HPTs), acute NHS trusts, CCGs, and local authorities
- reporting of laboratory results within specified turnaround times for diagnostic specialist and reference tests; results will be communicated by electronic means wherever possible and may be supported by paper reports as required or appropriate – these services will be provided to all customers (HPTs, NHS trusts and CCGs)
- standard interpretive comments as a part of test reports
- senior clinical and scientific staff will add specific interpretation and further advice relevant to individual patient needs or for public health significance
- mechanisms for the proper handling, storage and security of all samples and documentation at all times; this will be carried out in accordance with PHE guidelines, national guidelines and regulatory/legal requirement

- efficient and timely communications with public health organisations, both within the PHE (including HPTs) and externally – for example local authorities and primary care groups/clusters involved in communicable disease control
- assistance in maintaining an efficient communication network with all public health and NHS organisations involved in communicable disease control in the North West of England

All PHE laboratories have Clinical Pathology Accreditation/ISO 15189 Accreditation. The Food, Water and Environment (FW&E) laboratories are all recognised as EU Official Testing Laboratories and are accredited by UKAS.

2. Role of the Public Health Laboratory

In addition to its clinical diagnostic microbiology role, the PHE lead laboratory in Manchester provides a range of public health microbiology services. These include:

- a full range of tests to investigate any event or outbreak of possible public health significance in the community
- advice on the best diagnostic strategies to be adopted
- advice on interpretation of test results and investigations that may be helpful
- support to incident/outbreak investigation teams
- prompt communication of results in agreement with published turnaround times
- follow up/clearance testing of patients or contacts of patients in whom organisms of public health importance are detected
- support for trusts/HPTs in the specialist investigation of healthcare-associated infection

These public health microbiology services are available to:

- environmental health officers
- staff in health protection teams
- consultants in communicable disease control
- local authority staff and directors of public health
- clinical commissioning groups
- NHS hospitals
- private hospitals
- hospital infection control teams
- acute trusts
- primary care groups

The laboratory is linked to a network of specialised PHE NIS laboratories across England. This network includes laboratories testing food water and environmental samples and the major reference units at PHE Colindale and PHE Porton. This user manual describes the provision of and access to Public Health Microbiology services and gives contact details for the laboratory and its key personnel. It is also available on the PHE website at:

www.gov.uk/guidance/north-west-public-health-laboratory-services

A separate laboratory user manual is available which documents the clinical diagnostic and research services provided by the Manchester laboratory at: <https://mft.nhs.uk/the-trust/other-departments/laboratory-medicine/manchester-medical-microbiology-partnership/repertoire-of-tests>

Please note that support and access to food, water and environmental microbiology services can be obtained from a designated PHE FW&E laboratory (refer to Section 9).

3. Key contacts

Who to contact during normal working hours:

In the event of a suspected outbreak or incident, please use the following contact number(s) in the first instance so that appropriate arrangements for investigation can be made:

Laboratory outbreak co-ordinator (Mark Neilson)

Telephone no: 0161 276 6734 if unavailable please contact 0161 276 5686 / 5699

Dr Andrew Fox 077362 44920/07825 827147

3.1 Medical advice

During working hours, any of the medical/scientific staff will be happy to help you with any enquiries that you may have. Our secretarial staff will put you through to the most appropriate person to answer your call.

Manchester Public Health Laboratory:

For Virology advice -

Virology secretary: 0161 276 8854 (automatic telephone filtering system, select option 2 for medical advice)

For Bacteriology advice –

Bacteriology secretary: 0161 276 8854 (automatic telephone filtering system, select option 3 for medical advice)

For Outbreak Advice:

Dr Andrew Fox 077362 44920/07825 827147

3.2 General enquiries

For enquiries about laboratory results please phone the results enquiry telephone lines:

Manchester Public Health Laboratory: 0161 276 8854 (automatic telephone filtering system, select option 1 for result enquiries)

PHE FW&E Laboratory, York: 01904 468948

3.3 Key laboratory personnel and contact details

PHE Lead Public Health Microbiologist

Dr Andrew Fox

Email: Andrew.fox@phe.gov.uk

Contact number: 077362 44920/07825 827147

Head of Service

Dr Andrew Turner

Email: andrew.turner@phe.gov.uk

Contact number: 0161 276 8853

Duty microbiologist

Contact number: 0161 276 5686

Duty virologist

Contact number: 0161 276 8853

Laboratory head of operations

Rachel Jones

Email: rachel.jones2@mft.nhs.uk

Contact number: 0161 276 5747

Microbiology laboratory manager

Laura Grice

Email: Laura.grice@phe.gov.uk

Contact number: 0161 276 5747

Virology laboratory manager

John Marsh

Email: john.marsh@phe.gov.uk

Contact number: 0161 276 8838

PHE Food, water and Environmental Microbiology Service, York laboratory

Block 10, The National Agri-Food Innovation Campus

Sand Hutton

York YO41 1LZ

Unit Head

Heather Aird

Email: heather.aird@phe.gov.uk

Contact number:

Mobile:

Laboratory manager

Mark Swindlehurst

Email: mark.swindlehurst@phe.gov.uk

Contact Number: 01904 468948

Out of Hours Service

Manchester Public Health Laboratory:

The Laboratory provides an emergency out of hours service (including weekends and bank holidays) for urgent medical advice and to discuss the need for the receipt and processing of urgent specimens.

This can be arranged by contacting the on call microbiologist or virologist through the hospital switchboard 0161 2761234

Or

PHE Lead Public Health Microbiologist

Dr Andrew Fox: 077362 44920/07825 827147

PHE FW&E Laboratory, York

Out of Hours please contact 01904 468948

4. Laboratory location, working hours and access details

Manchester Public Health Laboratory
The laboratory specimen reception is at:

Microbiology Specimen Reception Postal Address:
2nd floor PO Box 209
Clinical Sciences Building 2 Clinical Sciences Building
Clinical Sciences Centre Manchester Royal Infirmary
Manchester Royal Infirmary Manchester
Oxford Road
Manchester
M13 9WZ

Laboratory working hours
Monday to Friday 8.30am to 5pm
Weekends and Bank Holidays 8.30am to 12.30pm

You can find site maps at:

www.cmft.nhs.uk/childrens-hospitals/plan-your-visit/map-and-directions.aspx
www.cmft.nhs.uk/published/UserUpload/file/Maps/Map%201%20Nov%202010.pdf
Website: www.phe.gov.uk

PHE FW&E Laboratory, York
Block 10, The National Agri-Food Innovation Campus
Sand Hutton
York YO41 1LZ

Laboratory working hours
Monday to Friday 8.30am to 6pm
Weekends and bank holidays 8.30am to 5pm

Outside of these hours the laboratory runs an on call service for urgent work. This can be arranged by contacting the on call staff through the hospital switchboard

Please contact the laboratory in advance of submission, with details of the incident/outbreak and investigations required.

Please notify the laboratory of the log/outbreak identifier if 1 has been assigned. All non-urgent specimens should arrive in the laboratory within the hours specified. Contact on call staff for specific delivery arrangements out of hours.

5. NHS laboratories and access to public health testing in the North West

NHS laboratories that have provided local public health outbreak support as part of their NHS functions should continue to do so.

All NHS laboratories have responsibilities for health protection which includes providing support for the investigation of local outbreaks in their catchment area, through:

- contributing to the formulation of local contingency plans and participation in exercises
- detection of local outbreaks through monitoring laboratory findings
- detection and prompt reporting of unusual occurrences of public health significance
- providing initial laboratory support for outbreaks, incidents and look-back exercises as appropriate
- attendance of appropriate staff at local community control of infection meetings and incident/outbreak control team meetings
- advice on appropriate investigations, interpretation of results etc
- forwarding of appropriate specimens to reference laboratories

If outbreak specimens are normally sent to the local NHS Laboratory, then this practice can continue.

Initially diagnostic patient specimens are likely to be examined at the local NHS laboratory, however, once an outbreak has been recognised and declared by the HPT (Health Protection Team) or other appropriate authority there should be a discussion between the initial investigating (NHS) laboratory or HPT with the lead public health microbiologist/public health scientist or duty consultant microbiologist in the regional laboratory to decide on testing of additional specimens and the method of transport. If either the number of specimens expected is likely to exceed the capacity of the local NHS laboratory or requires specialist tests then the specimens should be referred to the regional PHE laboratory.

If a local NHS laboratory is unable to provide this support at any time, for whatever reason, PHE will make arrangements to ensure that these services are provided. If any difficulties with existing or new arrangements are encountered please contact the lead Public Health Microbiologist on (077362 44920/07825 827147) or Head of Operations [0161 276 5747] who will make sure that arrangements are securely in place.

6. Definition of a Public Health Microbiology Specimen

A public health microbiology specimen is usually submitted to determine the cause and extent of an outbreak in a community (institution, family group or the wider community) or to see whether an observed cluster of cases is related and constitutes an outbreak.

Specimens may also be submitted to detect spread and contain and/or prevent an outbreak (for example diphtheria, group A streptococcus).

Patient specimens may also be submitted for clearance purposes (for example faeces for *Escherichia coli* O157) or to detect carriage of pathogens in asymptomatic individuals (for example *Salmonella typhi*)

The list below provides some of the circumstances in which public health specimens may be submitted (this list is not exhaustive):

- in the investigation of an outbreak (for example diarrhoea and vomiting in a nursing home or other institution)
- suspected food poisoning in a group or community
- respiratory symptoms in an institution for example suspected Influenza
- to check for clearance of certain pathogens (see above) in individuals working in high risk situations (for example food handlers, those working with children or other vulnerable groups)
- screening of contacts of index cases for example diphtheria, poliomyelitis
- look-back exercises for example carriage of blood borne viruses in a health care worker
- TB contact tracing
- investigation of a cluster of cases of for example Legionnaires' disease, which could have a common source

Such specimens are usually submitted at the request of:

- senior staff of a health protection team (HPT)
- an environmental health officer
- at the request or on behalf of the director of public health or consultant in communicable disease control
- at the instigation of the lead public health microbiologist for example for specialist typing in the investigation of episodes of health care associated infection

7. Collection of specimens

In order to provide the best quality results, it is essential that good specimens are collected properly and at the appropriate time. It is also important that they are transported to the laboratory safely and without undue delay (See Appendix 1 for safety considerations).

Inappropriate specimens or those that are inadequately labelled (see request form), damaged or leaking are liable to be discarded. Should this occur, every attempt will be made to inform the sender so that a second specimen can be collected.

Both the request form and specimen container must be labelled with:

- patient's full name
- the date the sample was taken
- patient's date of birth
- patient's postcode (request form only)

The above will assist us in the surveillance of communicable diseases. Please provide full details of where to send the result and who to contact if we need to report an urgent, significant result. Please provide an Outbreak Number if available.

Sample collection and submission:

Please ensure that all details are completed on the request form before it is given to the patient. Ask the patient to complete all details on the specimen container before collecting the specimen.

These must include:

- first and second name
- date of birth

7.1 Faeces

The specimen size should be at least 5ml/5 grams. The following methods can be used to collect a specimen:

- the patient or carer should wear disposable gloves
- toilet paper can be crumpled into the toilet bowl or suspended across the toilet bowl in a cross to make a sling
- a clean plastic container can be positioned in the toilet bowl
- contamination with urine should be avoided

- a portion of faeces can then be collected with the spoon provided in the specimen pot and transferred to the specimen container
- the specimen pot should then be placed inside the plastic screw top container, and sealed into the plastic pre-paid postal envelope along with the outbreak request form (see section 8.4)
- all materials used to collect the specimen should be placed in a plastic bag which is sealed before disposal in the refuse bin

Please ensure that all details on both the specimen and accompanying request form are completed. Failure to do so may lead to rejection of the specimen.

Please give full clinical details and brief details of the outbreak on the request form. In outbreak situations or when unusual pathogens may be implicated, it is essential to discuss the request with 1 of our consultant microbiologists/public health scientist before submission of specimens.

Faecal samples will be examined for the presence of:

- Salmonella
- Shigella
- *E. coli* O157
- Campylobacter,
- Cryptosporidium and Giardia species if clinically appropriate
- *C. difficile* in all patients over the age of 65 years and where clinically indicated for example in nursing home or care home outbreaks

Please discuss with a member of the laboratory staff should you suspect any of the following pathogens:

- *Vibrio cholerae*
- Diarrhoeagenic *E. Coli* (other than *E.coli* O157)
- *Yersinia enterocolitica*
- enteric parasites

Please also discuss with a member of laboratory staff if you suspect food poisoning due to:

- *Staphylococcus aureus*
- *Clostridium perfringens*
- *Bacillus cereus*

Should the clinical history suggest infection with viral pathogens, this too should be clearly indicated on the request form.

When a viral aetiology is suspected Faeces for Virology will be routinely investigated for Norovirus/Rotavirus and a full enteric panel including Adenovirus, Astrovirus and Sapovirus.

7.2 Throat/Pharyngeal swabs

For detection of carriage of *Neisseria meningitidis*, the swab should be taken through the mouth (sweeping posterior pharynx behind the uvula).

For detection of group A streptococcus, swab the tonsillar area.

For detection of *Corynebacterium diphtheriae*, nose and throat swabs should be submitted. If infection with *C. diphtheriae* is suspected on clinical grounds, a microbiologist should be contacted without delay. (ie without waiting for confirmation by culture). **A suspected case of diphtheria requires urgent public health action.**

7.3 Viral respiratory specimens

Occasionally outbreaks of influenza occur in institutions. The incident management team will advise when specimens from these outbreaks need to be submitted. Please seek the advice of the virology laboratory on what specimens are required and how these should be submitted.

'Flu' kits can be obtained from the laboratory (these include instructions for collection).

7.4 Sputum

Please contact the laboratory to discuss the submission of specimens. Should you need to submit sputum specimens to examine for the presence of mycobacteria, for example in cases of suspected tuberculosis, please contact laboratory consultant medical staff for advice and discussion before submitting any specimens.

7.5 Urine

Fresh urine specimens (in a clean universal container) may be required for the diagnosis of Legionnaires' disease.

7.6 Serum

Specimens of clotted blood may be required for:

- investigation of clusters of atypical pneumonia
- look back exercises to detect the transmission of blood borne viruses, by arrangement with laboratory/incident or outbreak management team

8. Methods of specimen submission

8.1 Direct submission to the laboratory

For specimens other than faeces please contact the Virology Laboratory on 0161 276 8854 (select option 2).

This method of submission is available to all local authorities submitting samples to the laboratory.

8.2 Submission to the laboratory via GP surgeries

It may be possible for local authorities to submit samples via local GP surgeries. This is only possible where it has been clearly established that local GP surgeries submit samples to the Manchester laboratory.

8.3 Submission to the laboratory via post

Specimens should be submitted to the laboratory by post provided they are packaged according to current postal regulations, this includes first class pre-paid postage to the regional laboratory (see section 7.1). Details of postal packs are given in Appendix 3.

8.4 Details of how more postal packs can be obtained

Environmental Health Departments, Health Protection Teams will be provided with postal transport packs for these purposes. These packs contain the appropriate packaging materials, outbreak request form, and instructions for use. Any specimens sent by post must comply with infectious substances transport regulations: www.who.int/ihr/publications/who_hse_ihr_2012.12/en

Further supplies of faeces postal sample packs, outbreak request forms and specimen containers are available on request from donna.johnson@phe.gov.uk or clare.ward@phe.gov.uk

8.5 Submission to the laboratory using an agreed PHE courier

In special circumstances for example the nature or scale of the outbreak, please contact the laboratory to discuss and organise courier transport, additional specimen containers and any other materials.

PHE lead Public Health Microbiologist

Dr Andrew Fox

Email: andrew.fox@phe.gov.uk

Contact number: 077362 44920/07825 827147

Head of Unified Service

Dr Andrew Turner

Email: andrew.turner@phe.gov.uk

Contact number: 0161 276 8853

Laboratory Head of Operations

Rachel Jones

Email: rachel.jones2@mft.nhs.uk

Contact number: 0161 276 5747

9. Investigation of local outbreaks

Environmental Health Officers, Health Protection Teams and General Practitioners can continue to refer specimens for investigation of individual cases of infection and small community out-breaks using their local NHS laboratories if this has been their practice.

If an outbreak control team is convened by the Health Protection Team and specimen numbers exceed or are likely to exceed the capacity of the NHS laboratory then the specimens should be referred to the Regional PHE Public Health laboratory, after discussion with a senior member of the PHE laboratory staff. Mechanisms for the continued investigation of the outbreak will then be agreed by the outbreak control team.

As soon as an outbreak is recognised (of whatever size) the HPT/Regional PHE laboratory will assign an outbreak number/identifier and this should be used to identify specimens associated with the outbreak or incident.

If an outbreak is identified initially by an Environmental Health Department (EHD) or Health Protection Team the outbreak specimens should be referred to the Regional PHE Public Health laboratory in Manchester under an outbreak number/identifier if 1 has been allocated by the EHD or HPT.

For ILog numbers

Bacteriology, please contact **0161 276 6734**

Virology, please contact **0161 276 8843**

If a food or water source is implicated then advice on sampling and sample submission should be sought from a Food Examiner at a PHE FW&E Laboratory. The PHE operates a courier system for the collection and transport of FW&E samples to the laboratory.

The contact details of the York laboratory are:

PHE FW&E Microbiology York Laboratory

PHE FW&E Laboratory, York

Block 10, The National Agri-Food Innovation Campus

Sand Hutton

York YO41 1LZ

01904 468948

10. Other communicable diseases

Less common infections may require different specimen types or have less distinct storage and transport needs. In such circumstances, please consult with laboratory staff before taking and submitting specimens.

11. Test turnaround times

Manchester Public Health Laboratory:

Information on tests carried out and approximate turn-around-times can be found in our laboratory handbook which is available at:

<https://mft.nhs.uk/the-trust/other-departments/laboratory-medicine/manchester-medical-microbiology-partnership/repertoire-of-tests>

Alternatively information can be obtained direct from the laboratory. Please call 0161 276 5686.

For communication on high priority specimens or any concerns during regular working hours, please call 0161 276 5686/5699.

PHE FW&E Laboratory, York
Please call 01904 468948

12. Reporting results

Results will be reported as hard copy printouts or electronically to Cumbria and Lancs, and FW&E and distributed by established routes. Urgent results will be telephoned by agreement.

Should results be required urgently, please notify the laboratory prior to sending the sample. If results need to be phoned through this must also be requested prior to submitting the sample(s); a contact name a telephone number should be provided.

Appendix 1. Sample submission

1.1 Health and safety

The specimen containers, outbreak form and postal transport systems provided by the laboratory should be used. The individual requesting or taking specimens from patients known to be infectious must ensure that both the outbreak form and specimen container are appropriately labelled.

It is essential, where the requester knows or strongly suspects that the patient is infected with a dangerous pathogen that this specific information is provided with every specimen or request form.

1.2 Packaging of specimens

Specimens should be placed in the appropriate specimen container, which must be securely closed and any accidental spillage cleaned immediately, with an appropriate chlorine containing disinfectant (see below for details). The specimen container should then be packaged as described in section 7.1.

Where a needle has been used to obtain the specimen, the needle should be disposed of safely into an approved sharps container at the point of use, and not included in the packet transported to the laboratory.

Packaging of specimens from patients should be placed in the appropriate specimen container, which must be securely fastened and any accidental spillage cleaned immediately with an appropriate chlorine containing disinfectant:
10,000ppm available chlorine for blood spillage (do not use on urine spills)
1,000ppm for surface disinfection.

NB undiluted domestic bleach contains 100,000ppm available chlorine.

1.3 Packaging of 'high risk' specimens

Specimens from patients in the 'infection risk from blood' category should be placed in the appropriate specimen container, which must be securely fastened and any accidental spillage cleaned immediately with an appropriate chlorine containing disinfectant: 10,000ppm available chlorine for blood spillage (do not use on urine spills) 1,000ppm for surface disinfection.

NB: Undiluted domestic bleach contains 100,000ppm available chlorine.

This should be placed in a clear plastic double ('marsupial') self-sealing bag with 1 compartment containing the request form and the other the specimen. The specimens should then be placed in a second (outer) plastic bag and appropriately

labelled. All specimens and forms should be clearly labelled with an 'Infection risk from blood' label.

1.4 Transport of specimens

Specimens packaged as above must be transported to the laboratory in a robust, lidded, washable transport box. Do not use ordinary envelopes or 'jiffy' bags for transportation. Do not staple or puncture polythene bags.

See appendix 4

1.5 High risk incidents and safety


Universal precautions should be observed and appropriate personal protective equipment worn when specimens are collected (sterile gloves to take blood, masks, protective eyewear and a plastic apron if splashing of blood or other body fluids is likely to occur). Any inoculation incidents (needlesticks or contamination of conjunctiva, mucous membranes or broken skin, with blood or body fluids), must be reported as soon as possible – within 2 hours – to your occupational health service so that any required action can be instituted promptly.

This procedure must be followed whether or not the patient is perceived to be high risk.

Appendix 2. Outbreak request form

Public Health England Regional Public Health Laboratory Manchester request form for clinical public health samples only:

PHE PUBLIC HEALTH LABORATORY MANCHESTER request form



Public Health / Outbreak Investigation

Public Health Laboratory Manchester
2nd Floor, Clinical Sciences Building 2
Manchester Royal Infirmary
Oxford Road Manchester M13 9WL

Phone: 0161 276 6734/8854
www.phe.gov.uk
DX 6962410 Manchester 90M

Please write clearly in black ink
*denotes mandatory field

REQUESTING OFFICER

Report to be returned to:

Postcode

Phone Ext

Local authority PHE

Investigating Officer

Contact Phone .Ext

ILog number

Copy report to

Address

Postcode

PATIENT/SOURCE INFORMATION

NHS number

*Surname

*Forename

Sex male female

*Date of birth Age

Patient's address

Postcode

SAMPLE INFORMATION

Sample type Faecal Blood Urine Other

If other please specify:

Date of collection Time

Priority status

Is food being submitted?

Yes

No

Do you suspect that the sample you are referring could contain a Hazard Group 3 pathogen? Yes No Unsure

Please state the presumptive identification

Hazard group 3 (HG3)

S. typhi S. paratyphi A, B or C E. coli 0157

Other HG3 M. tuberculosis

CLINICAL DETAILS

Diarrhoea

Vomiting

Fever

Rash

Blood in stool

Has the patient had a recent history of foreign travel? Yes No

Country

Date returned to UK

Is this a:

Follow up case


Household case

Sporadic case

Single organism investigation

Contact

LAB USE ONLY

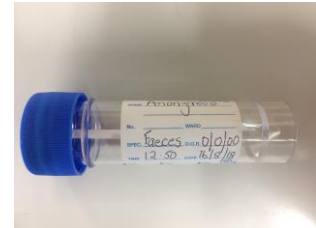


All requests are subject to PHE standard terms and conditions

Manchester 2 April 2016

Appendix 3. Postal packaging instructions for faecal samples

1. Place the faeces specimen inside the blue-capped sterile universal container, making sure you do not overfill the container (fill NO more than 1/2 full, up to the third line on label). Ensure the lid is securely closed.



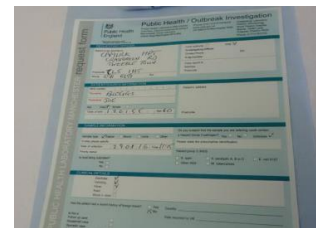
2. Please ensure that you complete the label on the sample container clearly with the patient's first name, surname, date of birth, date and time the specimen was taken.



3. Place the sealed faeces pot into the white plastic transport container along with the absorbent pad, and ensure the black 'O' ring is in place before securely fastening the lid.



4. Complete the request form clearly and as fully as possible (including the ILog number if part of an outbreak).



5. Place this white container into the bag on the back of the form. Remove the brown/orange strip to fold and seal the bag.



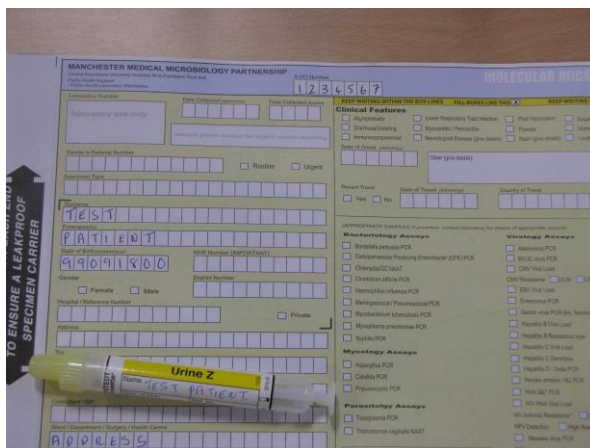
6. Place in the outer pre-paid addressed opaque plastic envelope (UN3373) and seal closed.



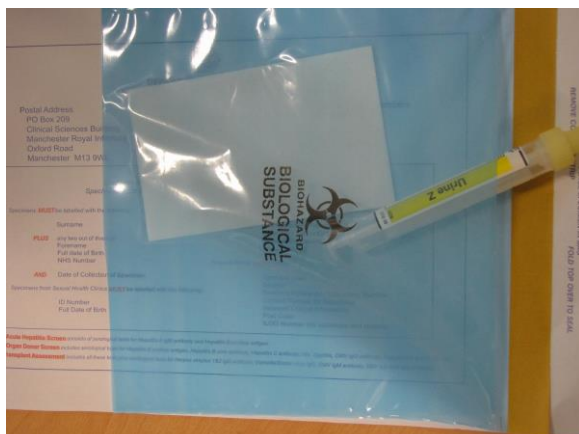
7. Place the sealed plastic envelope in the nearest Royal Mail post box.

Appendix 4. Postal packaging instructions for Flu Kit samples

1. Collect the samples required using the materials provided.
2. Label the samples with the patient's details:
 - first name and surname
 - date of birth
 - sample collection date
3. Complete the request forms:
 - patient details – first name and surname, date of birth, NHS number if possible
 - sample collection date
 - location/address for the reports
 - ILog field with the number allocated to your outbreak – please phone [0161 276 8843](tel:01612768843) to obtain an ILog number
4. Ensure the patient details on the request form and the sample match



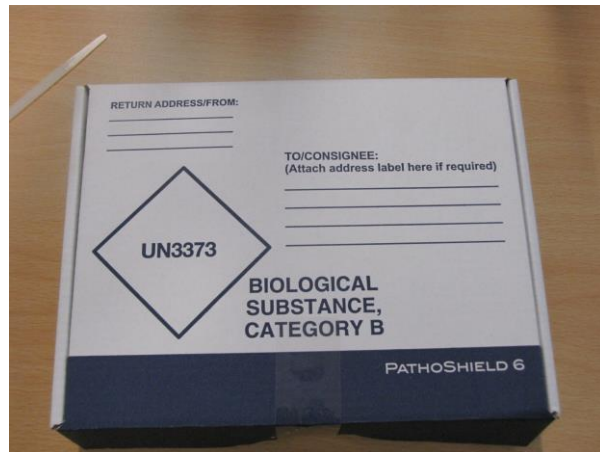
5. Place the sample in the bag attached to the request form and seal the bag



5. Roll up the request form and place it in the sample return pouch; 3 samples and forms should fit in the pouch



7. Place the pouch(es) in the outer containment box and seal with tape



8. Place in the outer pre-paid addressed opaque plastic envelope (UN3373) and seal closed



9. Add your Return Address to the back of the grey postal bag
10. Send the package to PHL Manchester by Royal Mail

Additional specimen types that may be submitted to laboratory

Swabs can be submitted to the laboratory for testing. Please note that there are different types for viral and bacteriology (MC&S) investigations.

These samples must be transported to the laboratory using the mechanism given for faecal samples (appendix 3).



Viral swab

Snap off into red capped tube containing viral transport medium



Swab for MC&S

Swab is placed into long transport tube containing charcoal agar