



UK Health
Security
Agency

Guidance for the referral of influenza samples to the Respiratory Virus Unit, UK Health Security Agency, Colindale

Appendix 1. Checklist for referral of influenza

Checklist

References to tables and sections refer to the [main guidance](#).

Which samples to select for referral

- Out of season: regional and collaborating public health laboratories (PHLs) refer all influenza positives (up to 5 per week from a clinical NHS lab)
- In epidemic period: PHLs refer up to **25 subtyped samples per week to RVU**
 - include all influenza positive samples from categories A to E (priority 1) and complete the batch with samples randomly selected from category F (see Table 1)
- In epidemic periods, other NHS laboratories conducting their own subtyping may refer **up to 5 samples per week to RVU**, following priority listing in Table 1

☐ Has the relevant section in the guidance been checked for sample referral?

- see section for regional and regional and collaborating PHLs
- see section for NHS laboratories
- see section for testing to inform patient management
- see section on referral of unsubtypeable or Ct mismatch samples

☐ Is the current version of the [Typing of Influenza Strains E3 referral form](#) being used?

☐ Is the sample an acceptable referred sample type?

- see guidance for [acceptable referred samples](#)
- send primary sample (>400µL) in viral transport medium, not in lysis buffer, and of adequate viral load, for surveillance purposes (unless Priority 1)
- include reference number, sample type, date of collection and date sent to UKHSA

☐ For samples being referred as UNSUBTYPEABLE or unexpected CT MISMATCH

- has subtyping (H1pdm09/H3 +) been attempted? If not, this is classified as NOT SUBTYPED
- does clinical risk assessment indicate potential zoonotic exposure? If so, send urgently
- is this due to a known assay performance issue? If so, only send whilst issue remains under active investigation
- include details of typing and subtyping assays used in referring lab

☐ If antiviral susceptibility testing requested, has this been discussed with the reference

laboratory before sending sample?

- if no, call reference laboratory first to discuss

☐ Has the relevant safety information been provided on the E3 form?

- do you suspect that the patient is infected with a Hazard group 3 or 4 pathogen?
- is there foreign travel history?

☐ Has all relevant patient information been included on the E3 referral form?

- include details of ICU/HDU/ECMO or fatal case
- include travel history or animal or bird contact

☐ Have the sending laboratory results (influenza and other respiratory virus co-detections) been provided?

- influenza type or subtype? Any co-detections?
- assay used and Ct/Cn values where generated MUST be included

☐ Has the patient received the current season flu vaccine? Has the patient received anti-influenza antivirals in the past 14 days?

- if yes, provide details on the E3 referral form

☐ Is the referred sample from an influenza outbreak?

- if yes, provide details of the name or type of setting and CIMS reference (if known) on the E3 referral form

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