September 29, 2023

Subject: 2023-2024 Influenza Surveillance

Dear colleague,

Kentucky’s influenza season is quickly approaching and increased reporting will be required as the season progresses. Influenza testing, surveillance, and reporting are important for monitoring trends of disease and informing public health recommendations. Once again, the Kentucky Department for Public Health (KDPH) is requesting submission of a subset of respiratory specimens that have tested positive for influenza. Please be sure to submit the specimens in viral transport media to the KDPH Division of Laboratory Services (DLS).

To generate a comprehensive picture of the antigenic, genetic, and antiviral properties of influenza viruses that are emerging and/or actively circulating in the U.S. and worldwide, it is required that DLS submit a specified number of virus surveillance specimens to the CDC. Therefore, it is imperative that virus specimens be submitted to DLS to identify optimal vaccine candidates in the upcoming influenza season.

Rapid Influenza diagnostic (RIDT) and PCR testing may be used to help with diagnostic and treatment decisions for patients in clinical settings, such as whether to prescribe antiviral medications. The following criteria should be used to determine which specimens to submit to DLS for influenza testing by RT-PCR:

- Up to 5 influenza virus positive specimens per week, a mix of influenza A and B if available, regardless of test method performed (in addition to the specimens meeting the below criteria).
- Specimens that are negative by RIDT when community influenza activity is high and laboratory confirmation of influenza is desired.
- Specimens that are positive by RIDT and the community prevalence of influenza is low, and a false positive result is a consideration.
- Specimens from a patient who had recent close exposure to pigs or poultry, or other animals, and novel influenza A virus infection is possible (e.g., influenza viruses circulate widely among swine and birds, including poultry, and can infect other animals such as horses and dogs).
- Hospitalized patients with suspected influenza. Influenza testing is recommended for hospitalized patients, however empiric antiviral treatment should be initiated as soon as possible without the need to wait for any influenza testing results.
• **More information from CDC can be found at:**
  
  https://www.cdc.gov/flu/professionals/diagnosis/index.htm and  
  https://www.cdc.gov/flu/professionals/info-for-labs.htm

Also, please remind facilities about the importance of continued surveillance and reporting of certain types of influenza events:

• All influenza deaths, regardless of patient’s age, should be reported to public health authorities.  
• Outbreaks of two or more cases of influenza or influenza-like illness (ILI) in a long-term care facility should be reported to the local health department or the State Influenza Coordinator in accordance with 902 KAR 2:065.  
• Information regarding pregnant women with severe complications from influenza, including ICU admission or death should be reported to public health authorities.  

Flu kits along with pre-paid mailers are available from DLS free of charge. Specimens can be shipped via the DLS funded courier (preferred – also used for pickup of Newborn Screening specimens), or by FedEx overnight delivery. The requisition form for ordering lab kits, as well as collection and shipping guidance, can be accessed via this web link: https://chfs.ky.gov/agencies/dph/dls/Pages/default.aspx.

For additional questions regarding flu test kit requests and shipping options contact Leigh Ann Bates (LeighAnn.Bates@ky.gov; 502-782-7703 or 502-564-4446). For additional guidance on specimen collection, handling, and testing, please contact Teresa Fields (Teresa.Fields@ky.gov; 502-782-7718 or 502-564-4446).

Your contribution to this important public health effort is appreciated. If you have any questions regarding influenza surveillance, please contact Carrie Tuggle (Carrie.Tuggle@ky.gov; 502-352-5800).

Thank you for your partnership,

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