Patients must have influenza-like illness (*fever and respiratory symptoms without other apparent cause*). Contact IDPH or SHL for guidance in the event of an ILI outbreak.

**When to submit specimens to SHL:**
- **Labs performing rapid antigen tests:** Submit specimens until one rapid A and one rapid B is confirmed by RT-PCR at SHL *
- **Labs performing molecular tests:** May submit 2-3 positives per week to contribute to surveillance *
- **Hospitals:** Submit specimens on hospitalized patients with Influenza-Like Illness and without other apparent cause regardless of rapid antigen test results
- **ILINet Sentinel Providers:** Submit specimens on patients with ILI per IDPH guidelines

**What specimens to submit to SHL:**
- **Specimen types**
  - 1. Nasal swab and throat swab combined into one tube OR 2. Nasopharyngeal swab
  - Do not submit swabs or specimens that have been used for rapid testing
  - Must be in viral transport medium (OK to use any type of viral transport media, but not bacterial transport media)

SHL will run PCR for Influenza A and B and if positive will: Determine A subtype (H3 or 2009 H1N1 pdm) or Determine B lineage (Victoria or Yamagata)

*SHL confirmatory influenza testing serves the following purposes:
  1) Demonstrates influenza virus presence when prevalence is low and when the positive predictive value of rapid tests is low. Demonstrates regions in Iowa where influenza virus is circulating.
  2) Identification of the types and strains of influenza circulating in communities for treatment considerations and next season’s vaccine. Allows for characterization of new or antigenic variant viruses and match to current vaccine.

Surveillance testing is provided at no cost and is partially supported by a grant from the Centers for Disease Control and Prevention. Thank you for your support of this program.

**NOTE:** This algorithm is subject to change based on the public health needs as the influenza season progresses.