

**National Disease Surveillance Program – II. Disease Summaries, OMB 0920-0004
National Respiratory and Enteric Virus Surveillance System (NREVSS)
NREVSS Laboratory Assessment**

**Department of Health & Human Services
Centers for Disease Control and Prevention (CDC), Atlanta, Georgia, 30333
NREVSS Laboratory Assessment Form Approved OMB 0920-0004**

Date of interview:		Interviewer Name:				
Laboratory Name:				Lab ID:		
City:		State:	Zip Code:			
Contact Person:		Position:				
Contact Number/Email:						
Type of institution:						
Hospital affiliated	Clinic or physician's office	Private commercial	Reference	University	Military	Government

Objective: To determine the methods of testing and the contributing factors in changes to testing practices for laboratories reporting to NREVSS.

Section I: Demographics

1. Approximately how many respiratory specimens (e.g. NP/OP swabs, sputum, BALs, NP aspirates) does your laboratory test during the winter season? _____ specimens in peak week
2. (For reference labs only?) What is the geographic location from which your specimens are collected? For example, only specific states?
3. Approximately, what percentage of the specimens tested by your lab are from the following:

Patient type

Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden to CDC, Do not send the completed form to this address. OMB No. 0920-0004

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- a. Inpatient _____% / Unknown
- b. Outpatient _____% / Unknown

Age categories

- c. Pediatric (0 – 18 years) _____% / Unknown
- d. Adults (18 years and older) _____% / Unknown

4. Do other institutions send specimens to your laboratory for testing? If so, please describe.

5. Does your institution send specimens to other laboratories for testing? If so, please describe.

Section II: Testing Procedures

6. Which of the following multiplex PCR respiratory virus assays are used in your lab? (circle all that apply)

- EraGen GenMark Seegene Luminex FilmArray
- Qiagen Fastrack Other (Please List _____)

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7. For each of the following 12 viral agents, please indicate the methods of detection your lab uses (Y/N).

	Immunoassay			Nucleic Acid Amplification Test / PCR				Culture		
	Rapid	IFA	EIA	"Home Brew"*		Commercial**	Commercial**	Conventional	Shell Vial	None
				CDC	Other					
(Example)	N	Y	N	N	N	Y	6/2013-Switched from Luminex resp panel to Genmark resp panel	N	Y	N
Influenza										
RSV										
Rotavirus										
Adenovirus										
hMPV										
Rhinovirus										
Enterovirus										
PIV1										
PIV2										
PIV3										
PIV4										
Coronavirus										

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*Produced In-house**Please indicate product name if commercial assay is used. Also indicate if a commercial assay was recently introduced or recently discontinued .

Notes/explanations regarding testing practices:

8. Do you use a standard protocol or physician order in selecting testing methods? If standard protocol, please describe.

9. Do your testing practices for RSV and influenza change between the on- and off-seasons? Please describe.

10. Do you test for RSV all year? Yes / No / Unknown

- a. If not, at what time of year do you generally start testing for RSV?
- b. At what time of year do you generally stop testing for RSV?
- c. At which factors influence this decision?

11. Do you test for influenza all year? Yes / No / Unknown

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- a. If not, at what time of year do you generally start testing for influenza?
- b. At what time of year do you generally stop testing for influenza?
- c. At which factors influence this decision?

12. Have your laboratory's routine testing practices changed in the past 5 years? If so, in which ways? What factors have influenced these changes?

Section III: Data Recording and Reporting Practices

13. How do you keep records of test results (e.g. MS Excel, Access, paper ledger)?

14. Do you have any issues or suggestions regarding reporting data to NREVSS?

15. Additional comments or suggestions:

Supplemental Questions

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Would you change anything about the NREVSS data entry or submission process?

How do you feel about NREVSS security (your lab ID, password, etc.)? Any problems to report?

How often do you view the public NREVSS website? Any suggestions regarding the content presented?

What is the best way to reach your lab? (Phone, Email, Fax, Mail, other)

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