## Advice on sampling during an outbreak of acute respiratory illness

Which samples are taken will be guided by clinical and epidemiological assessment and will be situation dependent.

Samples should be taken as soon as possible from cases with the most recent onset of symptoms. Up to five should be taken if possible

<u>Viral swab - nasal and/or throat</u> – these are special viral swabs. You can obtain these from your local acute Trust or your HPT. If sent by the HPT, they will send you separate instructions on how to take the swab and where to send it for analysis.

Sputum for bacterial culture – for those with chesty cough who are able to produce sputum.

<u>Urine samples</u> - Please use <u>plain</u> urine bottles for Pneumococcal antigen (urinary) + Legionella antigen (non-boric acid or other chemical i.e., NOT the one used for urine culture). Can use same type of container used for sputum); from all symptomatic residents.

## Labelling

You will need **one form for EACH test** as they are all done in different areas / locations of the labs. However, If viral nasal *and* viral throat swabs are taken from the same patient, these can be place in the same pack.

For all samples sent, please ensure the following is on request forms:

- Name, Date of Birth, Address of Patient and Name & postcode of Care Home / School etc.
- HPZone number (HPT reference number)
- Onset date of symptoms
- Any antibiotics taken
- Clinical details e.g. dry or productive cough, runny nose, pyrexia (temperature), worsening shortness of breath etc
- Date swab taken