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Pathology User Manual Microbiology Investigations Nasopharyngeal Aspirates

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AUTHOR:	Jonathan Lewis (Senior Biomedical Scientist)
APPROVED BY:	Paul Randell (Head Biomedical Scientist)
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Nasopharyngeal aspirates (NPA's)

During working hours Monday to Saturday, we will test NPA's requesting RSV as they are received. Please continue to phone to inform us that they are on their way and if any are particularly urgent. At WGH Monday to Friday, please ensure specimen arrives at WGH specimen reception by 17:00 (Please inform laboratory and send specimen before 11:30 on Saturday mornings at SRH or 12:30 at WGH).

Out of hours at weekends (& B/H), these can be batch processed during our routine call out mid-morning (10:15) and early evening (18:30). We will need to know that they have been sent, so that we can look for the specimens amongst the other specimens received. So please phone the on-call microbiology Biomedical Scientist to let them know and ensure the specimen is sent so that it arrives in the laboratory by 10:15 mid-morning and 18:30 early evening. At WGH ensure the specimen arrives at specimen reception by 12:30.

At other times, specimens will only be processed out-of-hours if there is clinical urgency (i.e. you are planning to use antivirals if specimen is positive). This must be discussed with the duty Microbiology doctor prior to request.

Indications

Used for the detection of Respiratory Syncytial Virus (RSV).

Optimal time and method of collection

Nasopharyngeal exudate may be obtained using a fine bore suction catheter inserted through the nose. The exudate is collected in a sterile plastic trap or a sterile clear plastic universal container and placed into a sealed plastic bag for transportation to the laboratory.

Limitations of laboratory examination for RSV

- A negative test result does not exclude infection with RSV. Therefore, the laboratory findings must be used in conjunction with clinical findings to make an accurate diagnosis.
- The laboratory examination method detects both viable and non-viable RSV.
 Test performance depends on antigen load in the specimen and may not correlate with cell culture performed on the same specimen.
- Inadequate specimen collection or low levels of virus shedding may result in suboptimal performance and may yield false negative results.
- The monoclonal antibodies used in the examination method may not detect all antigenic variants or new strains of RSV.
- Negative RSV test results are not intended to rule out other microbial caused respiratory infections.