

## Specimen Collection and Submission Instructions West Nile Virus / St. Louis encephalitis (Version 2)

Page 1 of 2

Specimen Type	Collection Time	Collection Frequency	Collection Procedures	Transport Media	Shipping & Handling (S&H)**
Blood	<b>CSF:</b> 3 days post onset of symptoms.  <b>Serum:</b> 8 days post onset of symptoms.	NA	<ul style="list-style-type: none"> <li>• <b>Blood:</b> Collect at least 4 ml in a red top or red-gray top tube.</li> <li>• <b>Minimum serum volume:</b> 1ml (2 ml preferred).</li> <li>• <b>CSF:</b> Collect at least 1 ml in a sterile leak-proof container.</li> <li>• <b>Minimum CSF volume:</b> 1 ml.</li> </ul>	NA	<ul style="list-style-type: none"> <li>• <b>Transport device:</b> <ul style="list-style-type: none"> <li>○ Blood/serum: Red top or red-gray top tube.</li> <li>○ CSF: Sterile leak-proof container.</li> </ul> </li> <li>• <b>Transport:</b> Refrigerate and ship cold (2-8°C) on ice packs to arrive at WAPHL during business hours within one week of collection. If previously frozen, ship on dry ice. Ship as Category B.</li> <li>• <b>Storage:</b> Refrigerate at 2-8°C up to one week after collection. For long-term storage, freeze at -20°C.</li> <li>• <b>Rejection Criteria:</b> Please see general rejection criteria on page 2.</li> </ul>
Serum					
CSF					

**General Rejection Criteria (for additional details, see S&H)**

- Unaccepted specimen type.
- Not refrigerated or frozen properly.
- Insufficient specimen volume.
- Leaky specimen.
- Did not obtain LHJ approval.
- Failure to follow specific S&H requirements.

**NOTE:**

Specimens will not be processed until ALL of the following information are provided on requisition form:

- Patient name, patient's county of residence, second identifier, and date of onset.
- Two matching identifiers on both the tube and the laboratory requisition form.
- Specimen type, date of collection, and test requested.
- Submitter name, address, and telephone/FAX numbers.

**Collection kit availability**

Not available.

**Comments**