

Appendix 4 (ARMY LABORATORY REPORTING REQUIREMENTS) TO ANNEX R TO OPERATION ORDER 15-XX (2014 - 2015 INFLUENZA PREVENTION PROGRAM: SURVEILLANCE AND VACCINATION) – USAMEDCOM

1. **General.** This Appendix provides details on the requirements for laboratory influenza test result reporting in support of the Army Influenza Prevention Program: Surveillance.

2. **Reporting**

a. MTF Commanders will ensure laboratories provide weekly respiratory viral workload data to the Laboratory Program Manager Office weekly beginning 01 October through 01 May, IAW reference (h).

b. Data required by the MEDCOM Laboratory Program Manager and the USAPHC are gathered using standardized CHCS ad hoc program described below. Ad hoc reports capture rapid antigen test (RAT) results, as well as any viral culture or polymerase chain reaction (PCR) results posted to CHCS. Each MTF laboratory will receive a copy of the ad hoc reports, amend accordingly to fit their MTF, and continually transmit data for the duration of the influenza season.

(1) All MTFs should have two people trained to run and distribute respiratory ad-hocs.

(2) MEDCOM and USAPHC POCs will distribute the required CHCS ad hoc programs to the relevant laboratories during teleconference training that will occur at least 30 days prior to 1 OCT.

(3) Each CHCS ad-hoc output should contain the following variables:

NAME
FMP
SSN
DOB
PAT_CAT
REFERRAL_LOC
HCP
ACCESSION
SPECIMEN
DRAW_D_T
TEST
RESULTS_VIRUS
CERT_D_T

c. All MTFs will ensure that weekly ad hoc reports for respiratory specimens are sent to the Office of the MEDCOM Laboratory Program Manager and the USAPHC NLT

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1700 hours each Monday. Reports shall be encrypted and emailed to John Ambrose (john.f.ambrose4.civ@mail.mil) and Dr. Bill Nauschuetz (William.f.nauschuetz.civ@mail.mil) by 1700 Eastern Time each Monday (Tuesday when Monday is a holiday).

d. US Army Medical Centers microbiology laboratories and Brian Allgood Army Community Hospital have the equipment and CDC assays to perform subtyping of influenza virus isolates. As directed by the Laboratory Program Manager, in collaboration with USAPHC, these laboratories will perform subtyping and provide subtyping results on a percentage (to be determined) of their influenza positive specimens.