# Specimen Collection and Submission Instructions

**West Nile Virus / St. Louis encephalitis (Version 1)**  
Page 1 of 2

<table>
<thead>
<tr>
<th>Specimen Type</th>
<th>Collection Time</th>
<th>Collection Frequency</th>
<th>Collection Procedures</th>
<th>Transport Media</th>
<th>Shipping &amp; Handling (S&amp;H)**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td></td>
</tr>
</tbody>
</table>
| Serum         | CSF: 3 days post onset of symptoms.  
Serum: 8 days post onset of symptoms. | NA | **Blood**: Collect at least 4 ml in a red top or red-gray top tube.  
**Minimum serum volume**: 2 ml.  
**CSF**: Collect at least 1 ml in a sterile leak-proof container.  
**Minimum CSF volume**: 1 ml. | NA | **Transport device**: Red top or red-gray top tube (blood / serum) or sterile leak-proof container (CSF).  
**Transport**: 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.  
**Storage**: Refrigerate at 2-8°C up to one week after collection. For long-term storage, freeze at -20°C.  
**Rejection Criteria**: Please see general rejection criteria on page 2. |
| CSF           | NA             | NA                  | NA                   | NA             |                              |

*Preferred specimen type, if applicable  **All specimens must be shipped meeting IATA, OSHA, and USPS requirements.  NA: Not Applicable  

*Last Revised: March 2015*
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

*Preferred specimen type, if applicable  **All specimens must be shipped meeting IATA, OSHA, and USPS requirements.  NA: Not Applicable  Last Revised: March 2015