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Laboratory Services

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**NATIONWIDE
CHILDREN'S®**

When your child needs a hospital, everything matters.

Respiratory Syncytial Virus On the Rise

Respiratory syncytial virus, or RSV, is a common and highly contagious illness that infects nearly every child at least once before they are two years old. The infection, however, is more severe in early infancy. Until recently, there was no good prevention plan for parents to put into action. Now, everything has changed.

What Is RSV?

RSV initially presents much like a cold or the flu, but it can become serious very quickly and is the most common reason for infant hospitalizations in the United States. Most infants who are hospitalized with RSV were previously healthy. Mild symptoms include coughing, sneezing, runny nose, fever, and decreased appetite. Severe symptoms can include wheezing, difficulty breathing, and sometimes requirement for oxygen therapy.

Quick Facts About RSV:

- RSV is most common during the winter respiratory virus season (November – March) but may vary depending on what part of the country you live.
- RSV most commonly spreads from contact with infected respiratory secretions that allows the virus to get inside the eyes, nose, or mouth through unwashed hands. Occasionally it can spread from droplets produced with coughing or sneezing.
- 2 out of 3 babies will get RSV before their first birthday.
- RSV can go from mild, cold-like symptoms to hospitalization in less than a week.
- Though hospitalization happens in only 1%-2% of RSV cases, it can't be predicted which babies, even the healthiest ones, will be hospitalized.
- Babies are sixteen times more likely to be hospitalized with RSV than with the flu.
- RSV can lead to respiratory illness in babies, including lung infections like bronchiolitis and pneumonia.

A New Immunization

In July 2023, the United States Food and Drug Administration (FDA) approved nirsevimab (brand name: Beyfortus™), a single dose, long-acting monoclonal antibody medication to prevent severe RSV in infants and some high-risk children. Although not a vaccine, it was added to the Centers for Disease Control and Prevention's (CDC's) child immunization schedule and Vaccines for Children program.

The recommendation from the CDC is for all infants born during or entering their first RSV season and are younger than 8 months of age to receive one intramuscular dose of nirsevimab. Children who are 8 to 19 months old in their second RSV season and at an increased risk for severe RSV should also get one dose. Research has shown that a single dose of nirsevimab is safe and highly effective.

In addition to nirsevimab, the FDA has approved, and CDC has recommended an RSV vaccine to pregnant mothers at 32 to 36 weeks of pregnancy to prevent serious RSV disease in young infants. If the mother received the RSV vaccine more than 2 weeks before delivery, then the infant does not need nirsevimab except if at very high risk of having a severe RSV infection.

October 16, 2023 Pablo Sanchez, MD

You can view current surveillance data by going to our Laboratory Services homepage and clicking on the Respiratory Pathogens Report: <https://www.nationwidechildrens.org/specialties/laboratory-services>

Pathology Spotlight: NCH Medical Director, Dr. Kathleen Nicol, Receives Career Contribution Award



The Career Contribution Award is given to a member of the medical staff of Nationwide Children's Hospital who has made substantial contribution over multiple years to the success of the institution's mission, hospital operations or functions of the medical staff.

The award acknowledges contributions and efforts well beyond those ordinarily encompassed in the member's scope of professional duty. The 2023 recipient of the Career Contribution Award is Dr. Kathleen Nicol, which she received on September 27.

When asked about a memorable highlight of her career, Dr. Nicol shared: "I appreciate the opportunities that I have going to clinics, Interventional Radiology and the units – being a team member and participating in the clinical care of patients that we treat and having the chance to educate as well as learn."

Accolades:

- Medical School, University of Louisville School of Medicine, Louisville, KY, 1989-1993
- Internship, Pediatrics, University of Louisville, 1993-1994
- Resident, Wake Forest University Baptist Medical Center, Winston-Salem, NC, 1994-1998
- Fellowship, Pediatric Pathology, Nationwide Children's Hospital, Columbus, OH, 1998-1999
- Clinical Professor, The Ohio State University College of Medicine and Public Health, Department of Pathology, 2012-present
- Medical Director, Nationwide Children's Hospital, Point of Care Testing and Offsite Laboratories, 2001-present
- Section Chief, Clinical Laboratories, Nationwide Children's Hospital, 2009-present
- Ohio Association of Blood Banks, President, 2004-2006
- Central Ohio American Red Cross, Director of Medical Advisory Committee, 2001-present
- Faculty Leadership Award, Department of Pathology & Lab Medicine, 2019
- Educator of the Year, Department of Pathology & Lab Medicine, 2013
- Caffey Award for Outstanding Basic Science Research Paper, Society of Pediatric Radiology, 2004



eSwab Replacement of Traditional Bacterial Culture Swabs

The Microbiology Laboratory will begin converting to the eSwab® collection/transport for the majority of bacterial culture collections. As you order swabs from us you will start to see these arriving in January. Please note that Copan swabs will continue to be acceptable for all testing that we are converting to eSwabs®. Use eSwab® as you would the traditional bacterial culturette swab except for cultures suspected or screening for *Neisseria gonorrhoeae* (GC), which includes GC screens from eye, genital and throat sources.

The traditional dual swab (Copan) will continue to be used for:

- Routine genital culture or GC screen
- Eye/Throat screen for GC
- Pre-Op Staph aureus MRSA screen (SANPCR)
- Molecular Group A Strep

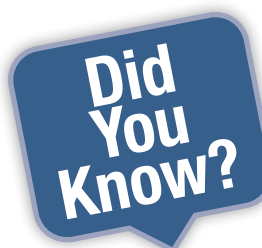
eSwab® is not an acceptable collection/transport device for:

- Viral collections
- Influenza A/B, RSV, SARS CoV-2
- Molecular STI testing
- Point of Care testing
- Respiratory Pathogen Panel
- Stool swab collection
- Vaginitis Panel
- Rapid Strep A (GASM, RMGAS)

NOTE: The eSwab® container holds Liquid Amies Fluid which maintains the viability of diverse bacteria for up to 48 hours. **Do not send a dry eSwab® as this will lead to unsatisfactory results.**

2024 Client Survey

We want to hear from you! Please take a few minutes to complete our 2024 Client Survey. These will be arriving in the mail towards the end of January. Results can be returned to us by fax. All surveys returned by **February 28, 2024** that include the practice name, will be entered into a drawing to receive a box of Cheryl Cookies for your office.



Cold Weather Specimen Storage

Now that winter has arrived, it is important that samples placed in a lockbox outdoors prior to transport to the laboratory be maintained at the appropriate temperature. If refrigerated samples are stored in the lockbox, a non-frozen cold pack stored at room temperature should be placed in the lockbox to maintain the samples at the refrigerated temperature. The cold pack should not be frozen, since you do not want refrigerated whole blood samples to freeze. Many laboratory tests performed at Nationwide Children's Laboratory Services require adequate refrigeration of specimens. By following this lockbox practice, you will help insure the integrity of the samples and ultimately obtain reliable laboratory results.

Upcoming Outdates on Viral Media

A current circulating lot of viral media that is being provided to clients outdates on January 31, 2024. Please review your viral media closely and place additional orders in January as needed.



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How can Nationwide Children's Laboratory Services help your practice?

If you would like to become a client or learn more information about Nationwide Children's Laboratory Services, contact us at (800) 934-6575 or visit our website at **NationwideChildrens.org/Lab**. Would you like to receive the Nationwide Children's Laboratory Services Newsletter electronically? Please e-mail us at **LaboratoryServices@NationwideChildrens.org** and let us know!

Lab Account Representatives are available via email to assist with any questions or concerns.

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