

Department of Health and Human Services Health and Environmental Testing Laboratory 221 State Street

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111:1-800-00

Powassan and Deer Tick Virus

Laboratory Submission Information Sheet

Reporting of suspect case to Maine CDC	•Yes: Powassan and Deer Tick Virus are a Notifiable Condition. If you have not already done so, please report suspect or confirmed cases to the Maine CDC via the disease reporting line: 1-800-821-5821 (24hrs/day 7 days/week.)
Required To Submit Laboratory Specimen	•NO •HETL Arbovirus submission form IS REQUIRED travel history within 3 months prior to symptom onset is pertinent information. •Date of Onset IS REQUIRED.
Required Information	•Information on requisition must include: suspected organism, patient name, DOB, date of collection, specimen source or type, submitter name and contact information. •Important: all specimens must be labeled with patient name and be accompanied by a HETL requisition.
Specimen Requirements	•Cerebral Spinal Fluid (CSF) (0.5ml minimum, 1ml preferred) or Whole blood in EDTA, lavender top (at least 0.5mL). Samples should be kept at 4°C for short term storage and may be frozen (-70°C) for long term storage. Collect specimen in a sterile leak proof container. Avoid contamination of CSF with blood.
Collection Instructions	•Spinal Fluid: Collect acute specimens 2–10 days after onset of symptoms in sterile container. •Whole Blood: Collect acute specimen 3–10 days after onset of symptoms in a sterile EDTA tube •CSF and blood specimens should be stored and shipped cold (2 - 8°C)
Turn Around Time	•Results should be expected within 1 - 2 business days of specimen receipt
Unacceptable Conditions	• Specimens received without a form and clinical details or with insufficient material to analyze. • Rejection Criteria: CSF diluted in Viral Transport Media (VTM), specimen not refrigerated or not frozen, incorrect specimen type. Blood specimens that are clotted.
Results	Powassan virus RNA DETECTED or NOT DETECTED. Deer Tick virus RNA DETECTED or NOT DETECTED. All results will be reported only to submitter as stated on requisition via mail or fax.
Laboratory Testing Fee	•\$110 (Fee waived if testing is part of an outbreak investigation by Maine CDC)
Applicable CPT Codes	•87798
Additional Information	•Bacteriology at 207-287-1704, Virology, Respiratory, Arbovirus, and Serology at 207-287-1722 •Molecular Biology, Sequencing, and Foodborne at 207-287-5769 •Mycobacterium and Rabies at 207-287-1706 •CT/GC at 207-287-6244