

I'm not a bot



Testing for norovirus

This website uses text-to-speech software called ReachDeck to read and / or translate its content. To use ReachDeck, you must allow ReachDeck cookies; the ReachDeck icon will then appear at the bottom of your screen. You can find out more about how ReachDeck uses cookies or change your cookie preferences at any time by going to our cookies page. Your visit Our services Get involved Work for us About us Contact us ReferencesChhabra P, de Graaf M, Parra GI, et al. Updated classification of norovirus genogroups and genotypes [published correction appears in J Gen Virol. 2020 Aug;101(8):893]. J Gen Virol. 2019;100(10):1393-1406. doi:10.1099/jgv.0.001318 SourcesCannon JL, Barclay L, Collins, NR, et al., Genetic and Epidemiologic Trends of Norovirus Outbreaks in the United States from 2013 to 2016 Demonstrated Emergence of Novel GII.4 Recombinant Viruses. J Clin Microbiol. 2017; 55(7): 2208-2221. doi:10.1128/JCM.00455-17. Correction Costantini, V, Grenz, L, Fritzingner, A, et al., Diagnostic Accuracy and Analytical Sensitivity of IDEIA Norovirus Assay for Routine Screening of Human Norovirus. Clin. Microbiol. 2010;48(8):2770-2778; doi:10.1128/JCM.00654-10 Jonckheere S, Botteldoorn N, Vandecandelaere P, et al., Multicenter evaluation of the revised RIDA® QUIICK test (N1402) for rapid detection of norovirus in a diagnostic laboratory setting. Diagn Microbiol Infect Dis. 2017;88(1):31-35. doi:10.1016/j.diagmicrobio.2017.02.006. Kirby, A, Gurgel, RO, Dove, W, et al., An evaluation of the RIDASCREEN and IDEIA enzyme immunoassays and the RIDAQUIICK immunochromatographic test for the detection of norovirus in faecal specimens. J Clin Virol. 2010;49(4):254-7. doi:10.1016/j.jcv.2010.08.004 Barclay, L, Cannon, JL, Wikswo, ME, et al., Emerging Novel GII.16 Noroviruses Associated with Multiple Capsid Genotypes. 2019;116(5):535. doi:10.3390/v11060535 The Motorsport Images Collections captures events from 1895 to today's most recent coverage. Discover The CollectionCurated, compelling, and worth your time. Explore our latest gallery of Editors' Picks.Browse Editors' FavoritesExperience AI-Powered CreativityThe Motorsport Images Collections captures events from 1895 to today's most recent coverage.Discover The CollectionCurated, compelling, and worth your time. Explore our latest gallery of Editors' Picks.Browse Editors' FavoritesExperience AI-Powered CreativityThe Motorsport Images Collections captures events from 1895 to today's most recent coverage.Discover The CollectionCurated, compelling, and worth your time. Explore our latest gallery of Editors' Picks.Browse Editors' FavoritesExperience AI-Powered CreativityThe Motorsport Images Collections captures events from 1895 to today's most recent coverage. Drinking liquids that contain a lot of sugar, such as soft drinks and some fruit juices, can worsen diarrhea. Avoid beverages with caffeine and alcohol.Ease back into eating. Try to eat small amounts of food frequently if you experience nausea. Otherwise, gradually begin to eat bland, easy-to-digest foods, such as soda crackers, toast, gelatin, bananas, applesauce, rice and chicken. Stop eating if your nausea returns. Avoid milk and dairy products, caffeine, alcohol, nicotine, and fatty or highly seasoned foods for a few days.Remember that norovirus infection is highly contagious. Avoid contact with others as much as possible during illness and for several days after recovery. Wash your hands and disinfect surfaces and objects. Do not prepare food for others until your symptoms are gone. Share — copy and redistribute the material in any medium or format for any purpose, even commercially. Adapt — remix, transform, and build upon the material for any purpose, even commercially. The licensor cannot revoke these freedoms as long as you follow the license terms. Attribution — You must give appropriate credit, provide a link to the license, and indicate if changes were made. You may do so in any reasonable manner, but not in any way that suggests the licensor endorses you or your use. ShareAlike — If you remix, transform, or build upon the material, you must distribute your contributions under the same license as the original. No additional restrictions — You may not apply legal terms or technological measures that legally restrict others from doing anything the license permits. You do not have to comply with the license for elements of the material in the public domain or where your use is permitted by an applicable exception or limitation. No warranties are given. The license may not give you all of the permissions necessary for your intended use. For example, other rights such as publicity, privacy, or moral rights may limit how you use the material. Do not drive to A&E. Ask someone to drive you or call 999 and ask for an ambulance.Bring any medicines you take with you. ReferencesHill VR, Mull B, Jothikumar N. et al. Detection of GI and GII Noroviruses in Ground Water Using Ultrafiltration and TaqMan Real-time RT-PCR. Food Environ Virol 2, 218-224 (2010). Mull B, Hill VR. Recovery of diverse microbes in high turbidity surface water samples using dead-end ultrafiltration. J Microbiol Methods. 2012;91(3):429-433. Bacteriological Analytical Manual (BAM), Chapter 26: Detection and Quantitation of Hepatitis A Virus in Shellfish by the Polymerase Chain Reaction Bacteriological Analytical Manual (BAM), Chapter 26B: Detection of Hepatitis A Virus in Foods Sampling and Testing Method Guidance for the Detection of Norovirus and Hepatitis A Virus in Soft Fruit Park, GW, Chhabra, P, Vinjé, J. Swab Sampling Method for the Detection of Human Norovirus on Surfaces. Vis. Exp.2017;(120):55205. doi:10.3791/55205; Video Norovirus causes diarrhoea and vomiting and is one of the most common stomach bugs in the UK. It's also called the 'winter vomiting bug' because it's more common in winter, but you can catch it at any time of the year. Norovirus can be very unpleasant but usually clears up by itself in a few days. You can normally look after yourself or your child at home. Avoid going to your GP, as norovirus can spread to others very easily. Phone your GP practice or NHS 24 on 111 if you're concerned or need advice. you're worried about a baby under 12 months your child stops breast or bottle feeding while they're ill a child under 5 years has signs of dehydration - such as fewer wet nappies you or your child (over 5 years) still have signs of dehydration after using oral rehydration sachets you or your child keep being sick and cannot keep fluid down you or your child have bloody diarrhoea or bleeding from the bottom you or your child have diarrhoea for more than 7 days You're likely to have norovirus if you experience: suddenly feeling sick projectile vomiting watery diarrhoea Some people also have a slight fever, headaches, painful stomach cramps and aching limbs. The symptoms appear 1 to 2 days after you become infected and typically last for up to 2 or 3 days. Norovirus spreads very easily in public places such as hospitals, nursing homes and schools. You can catch it if small particles of vomit or stools (poo) from an infected person get into your mouth through: close contact with someone with norovirus who may breathe out small particles of the virus that you then inhale touching contaminated surfaces or objects, as the virus can survive outside the body for several days eating contaminated food, which can happen if an infected person doesn't wash their hands before preparing or handling food You can get norovirus more than once because the virus is always changing and your body is unable to build up long-term resistance to it. It's not always possible to avoid getting norovirus, but following the advice can help stop the virus spreading. You should: stay off work or school until at least 48 hours after the norovirus symptoms have stopped avoid visiting anyone in hospital during this time wash your hands frequently and thoroughly with soap and water particularly after using the toilet and before preparing or handling food be aware alcohol-based hand gels don't kill the virus Maintain basic hygiene and cleaning to help stop the spread of norovirus by: disinfecting any surfaces or objects that could be contaminated, using a bleach-based household cleaner. washing any items of clothing or bedding that could have become contaminated separately on a hot wash (60°C) to ensure the virus is killed. not sharing towels and flannels flushing any poo or vomit in the toilet and cleaning the surrounding area with a bleach-based household cleaner avoiding eating raw, unwashed food only eating oysters from a reliable source as they can carry norovirus If you experience sudden diarrhoea and/or vomiting, the best thing to do is to stay at home until you're feeling better. There's no treatment for norovirus, so you have to let it run its course. You don't usually need to get medical advice unless there's a risk of a more serious problem. To help ease your own or your child's symptoms drink plenty of fluids to avoid dehydration. You need to drink more than usual to replace the fluids lost from vomiting and diarrhoea - as well as water, adults could also try fruit juice and soup. Avoid giving fizzy drinks or fruit juice to children as it can make their diarrhoea worse. Babies should continue to feed as usual, either with breast milk or other milk feeds. You can also: take paracetamol for any fever or aches and pains get plenty of rest use special rehydration drinks, available from community pharmacies if you have signs of dehydration, such as a dry mouth or dark urine If you feel like eating, try plain foods, such as soup, rice, pasta and bread. Babies and young children, especially under a year old, have a greater risk of becoming dehydrated. You don't normally need to see your GP if you think you or your child has norovirus, as there's no specific treatment for it. Antibiotics won't help because norovirus is caused by a virus. Norovirus causes diarrhoea and vomiting and is one of the most common stomach bugs in the UK. It's also called the 'winter vomiting bug' because it's more common in winter, but you can catch it at any time of the year. Norovirus can be very unpleasant but usually clears up by itself in a few days. You can normally look after yourself or your child at home. Avoid going to your GP, as norovirus can spread to others very easily. Phone your GP practice or NHS 24 on 111 if you're concerned or need advice. you're worried about a baby under 12 months your child stops breast or bottle feeding while they're ill a child under 5 years has signs of dehydration - such as fewer wet nappies you or your child (over 5 years) still have signs of dehydration after using oral rehydration sachets you or your child keep being sick and cannot keep fluid down you or your child have bloody diarrhoea or bleeding from the bottom you or your child have diarrhoea for more than 7 days or vomiting for more than 2 days You're likely to have norovirus if you experience: suddenly feeling sick projectile vomiting watery diarrhoea Some people also have a slight fever, headaches, painful stomach cramps and aching limbs. The symptoms appear 1 to 2 days after you become infected and typically last for up to 2 or 3 days. Norovirus spreads very easily in public places such as hospitals, nursing homes and schools. You can catch it if small particles of vomit or stools (poo) from an infected person get into your mouth through: close contact with someone with norovirus who may breathe out small particles of the virus that you then inhale touching contaminated surfaces or objects, as the virus can survive outside the body for several days eating contaminated food, which can happen if an infected person doesn't wash their hands before preparing or handling food You can get norovirus more than once because the virus is always changing and your body is unable to build up long-term resistance to it. It's not always possible to avoid getting norovirus, but following the advice can help stop the virus spreading. You should: stay off work or school until at least 48 hours after the norovirus symptoms have stopped avoid visiting anyone in hospital during this time wash your hands frequently and thoroughly with soap and water particularly after using the toilet and before preparing or handling food be aware alcohol-based hand gels don't kill the virus Maintain basic hygiene and cleaning to help stop the spread of norovirus by: disinfecting any surfaces or objects that could be contaminated, using a bleach-based household cleaner. washing any items of clothing or bedding that could have become contaminated separately on a hot wash (60°C) to ensure the virus is killed. not sharing towels and flannels flushing any poo or vomit in the toilet and cleaning the surrounding area with a bleach-based household cleaner avoiding eating raw, unwashed food only eating oysters from a reliable source as they can carry norovirus If you experience sudden diarrhoea and/or vomiting, the best thing to do is to stay at home until you're feeling better. There's no treatment for norovirus, so you have to let it run its course. You don't usually need to get medical advice unless there's a risk of a more serious problem. To help ease your own or your child's symptoms drink plenty of fluids to avoid dehydration. You need to drink more than usual to replace the fluids lost from vomiting and diarrhoea - as well as water, adults could also try fruit juice and soup. Avoid giving fizzy drinks or fruit juice to children as it can make their diarrhoea worse. Babies should continue to feed as usual, either with breast milk or other milk feeds. You can also: take paracetamol for any fever or aches and pains get plenty of rest use special rehydration drinks, available from community pharmacies if you have signs of dehydration, such as a dry mouth or dark urine If you feel like eating, try plain foods, such as soup, rice, pasta and bread. Babies and young children, especially under a year old, have a greater risk of becoming dehydrated. You don't normally need to see your GP if you think you or your child has norovirus, as there's no specific treatment for it. Antibiotics won't help because norovirus is caused by a virus. Pathology category Code Referral code Request form ICE request form. Please include all relevant clinical details, including the date of symptom onset. Test information This is a nucleic acid amplification test for the detection of norovirus genotypes 1 and 2, which are most commonly implicated in outbreaks. Testing is not usually helpful in sporadic cases as infection is usually self-limiting. Norovirus testing is only performed at the discretion of the infection control team. Please do NOT send vomit specimens as they will not be tested. Tests performed in a UKAS Accredited Medical Laboratory - 8873. Guidelines Pre-analytical Please isolate cases of suspected norovirus into single rooms where possible. Do not wait for the outcome of testing: contact the infection control team as soon as possible should an outbreak be suspected.If a delay occurs in delivering the sample to the laboratory, please refrigerate. Reference range Tube type Tube type info Special requirements Staff are reminded to take a pot home from their nearest clinical area and a blue microbiology form (so that they have it at home should they ever experience symptoms). Formed stool can be tested for Norovirus, when only vomiting symptoms presentIf they become symptomatic then they should complete a blue microbiology form and submit their sample to the lab directly or they can drop the sample directly at their GP (helpful if they are acutely unwell and cannot travel)The staff member should notify OH that they have submitted a sample and we will contact them directly with the results and offer advice on return to work etc.Confirmed Norovirus cases are considered "medically exempt", which means that the mandatory 48 hour absence from work following resolution of symptoms is not counted as sick leave. Minimum volume Assay frequency Monday - Friday, 9am - 5pm TAT Inpatient (urgent) TAT Inpatient TAT GP/Outpatient Referral lab