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**INDUSTRY STANDARD OF THE
PEOPLE'S REPUBLIC OF CHINA**

SN/T 1470-2004

Examination codes for dengue fever at frontier port

国境口岸登革热检验规程

(English Translation)

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Foreword

Appendix A and Appendix B of this standard are informative annexes.

This standard is proposed and managed by the National Certification and Accreditation Administration.

This standard was drafted. Fujian Entry-Exit Inspection and Quarantine Bureau of the People's Republic of China, Tianjin Entry and Exit Inspection of the People's Republic of China Epidemic situation.

1 Scope

This standard stipulates the object, procedure and results of the dengue fever at the national border.

This standard applies to the inspection of dengue fever at border ports.

2 Normative references

The terms in the following documents become the terms of this standard by reference to this standard. All dated references, followed by all Modifications (not including errata content) or revisions do not apply to this standard, however, parties to agreements based on this standard are encouraged to study if it is possible to use the latest version of these files? For undated references, the latest edition applies to this standard.

WS233-2002 General guidelines for biosafety in microbiology and biomedical laboratories

3 Test object

3.1

Dengue fever patients, suspected dengue fever patients and suspected dengue deaths found at border crossings.

3.2

Other persons applying for inspection.

4 Laboratory biosafety protection

Laboratory structure and facilities, safe operating procedures, safety equipment and personal protection shall comply with the second-level biosafety prevention in WS233-2002 the requirements of the laboratory.

5.1.1 Dengue patients, suspected dengue patients and other personnel

Collect 3 mL of venous blood within 5 days after onset, set it to solidify at room temperature, centrifuge for 15 min at 3000 r/min, and aspirate the upper serum for examination.

Measurement. The virus should be separated using the same day serum. For contaminated serum, penicillin and streptomycin should be added first (the final concentration is 500kU/L), and 4°C is used.

Inoculate after 2h treatment. The remaining serum after inoculation was early serum. Aseptic collection of blood samples 3 weeks after the disease, treated as above, as a recovery Reconstituted serum for serological testing.

5.1.2 Suspected dengue deaths

Blood, cerebrospinal fluid, brain tissue, liver tissue, etc. are available. The blood and cerebrospinal fluid were treated as in 5.1.1. Tissue block grinding to make suspension, 3000r/min After centrifugation for 15 min, the supernatant was taken for detection.

5.2 Request for inspection of specimens

5.2.1

The identification of the sample to be inspected shall be consistent with the records of the inspection form and the test list.

5.2.2

The container for the specimen to be inspected shall be free from damage and leakage.

5.2.3

Blood specimens should be free of hemolysis, hyperlipidemia and jaundice.

5.2.4

Remote inspection specimens should be refrigerated.

5.3 Specimen preservation

If the separated serum cannot be detected immediately, it can be stored under the following conditions.

- Detected within 3d, can be stored at 2 ° C ~ 8 ° C;
- Short-term storage can be stored below -20 °C;
- Long-term storage should be kept below -70 ° C;