Check list of issues that may be covered during plenary discussions

1) Session II – Discussion – implementation challenges (Marietjie Venter)
   a. Implementation challenges at level of sentinel sites
      i. Adapting the case definition
      ii. Algorithm for selection of patients for testing for RSV
      iii. Attaining sample size for 0-6m, 6m-5y and 65+y age group
      iv. Year-round sampling
      v. Transporting specimens to laboratory
      vi. Collection of clinical data
      vii. Acceptance of RSV surveillance by sentinel physicians
      viii. Impact of RSV testing on SARI, ILI surveillance
      ix. Any other challenge
   b. Implementation challenges at level of laboratory
      i. EQAP
      ii. Supply of primers, probes, reagents, enzymes etc.
      iii. Algorithm for selection of specimens for RSV testing
      iv. Any other challenge
   c. Implementation challenges at level of data management
      i. Timeliness, completeness and transfer of clinical data from sentinel site to laboratory
      ii. Integration of clinical and laboratory data
      iii. Uploading onto FluMart
      iv. Acceptance by laboratory staff and impact of RSV testing on influenza

2) Session VIII – Plenary discussion – final products of pilot (Harish Nair)
   a. List of final products
      i. RSV surveillance strategy – case definition, high risk groups, optimal size, all-year round testing, etc.
      ii. Standardized laboratory protocol for RT-PCR for RSV
      iii. Need for RSV typing, RSV sequencing
      iv. Incremental costs for RSV surveillance based on GISRS, etc.
   b. Data and analysis needed for these products
   c. Analysis end-points, stratification, variables required
   d. Data gaps and ways to bridge gap

3) Session VIII – Plenary discussion – sustainability (Peter Smith)
   a. What would be the “minimum size” and “optimal size” of the surveillance – no. of sentinel sites, priority for hospital or community based surveillance, target groups, minimum sample size, year-round or seasonal sampling, etc.
   b. Is there a need for case-based clinical data beyond the pilot?
   c. What internal or national resources are available to offset the incremental costs?
   d. What needs to be done to institutionalize and integrate RSV surveillance with GISRS?
   e. How can WHO support beyond 2018