

Respiratory Pathogen & SARS-CoV-2 (Covid-19) Specimen Collection Instructions

MATERIALS PROVIDED:

- Thin, Flexible Swab (Nasopharyngeal collections only)
- Thicker, Stiff Swab (Oropharyngeal and Nasal Collections only)
- Biohazard Specimen Bag with Absorbent Pad • FedEx/UPS Shipping Bag

ACCEPTABLE SPECIMEN COLLECTION CONTAINERS:

- UTM Collection Tube (for all collections)

SPECIMEN COLLECTION:

To ensure safety and validity of the sample, it is important to follow the instructions provided below. Deviations from these procedures may result in rejection of sample or delay in testing.

Upper Respiratory

Nasopharyngeal Specimen (NP)

1. Tilt patient's head back 70 degrees.
2. Gently and slowly insert a minitip swab with a flexible shaft (wire or plastic) through the nostril parallel to the palate (not upwards) until resistance is encountered or the distance is equivalent to that from the ear to the nostril of the patient, indicating contact with the nasopharynx.
3. Gently rub and roll the swab.
4. Leave swab in place for several seconds to absorb secretions.

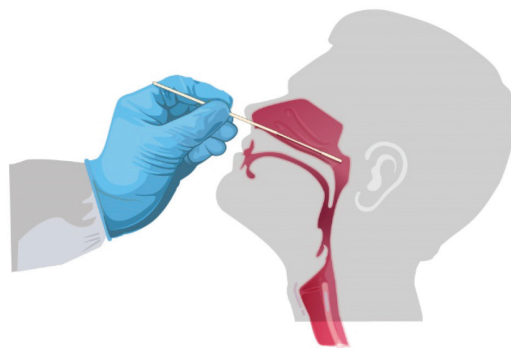


Figure 1. NP Collection

5. Slowly remove swab while rotating it. Specimens can be collected from both sides using the same swab, but it is not necessary to collect specimens from both sides if the minitip is saturated with fluid from the first collection.
6. If a deviated septum or blockage create difficulty in obtaining the specimen from one nostril, use the same swab to obtain the specimen from the other nostril.
7. Place swab, tip first, into the transport tube provided.
8. Place barcode label lengthwise on tube. Write with indelible ink the patient's name, DOB, date/time of specimen collection, and collector's initials.

If you anticipate any shipping delays, please contact Client Services and review our Quick Reference Guide.

Oropharyngeal Specimen (OP)

1. Use a thicker, stiff swab.
2. Tilt patient's head back 70 degrees.
3. Rub swab over both tonsillar pillars and posterior oropharynx and avoid touching the tongue, teeth, and gums.



Figure 2. OP Collection

4. Place swab, tip first, into the transport tube provided.
5. Place barcode label lengthwise on tube. Write with indelible ink the patient's name, DOB, date/time of specimen collection, and collector's initials.

Anterior Nasal Specimen (ANS)

Insert the entire collection tip of the swab provided (usually $\frac{1}{2}$ to $\frac{3}{4}$ of an inch, or 1 to 1.5 cm) inside the nostril.

1. Tilt patient's head back 70 degrees.
2. While gently rotating the swab, insert swab less than one inch (about 2 cm) into nostril parallel to the palate (not upwards) until resistance is met at turbinates.

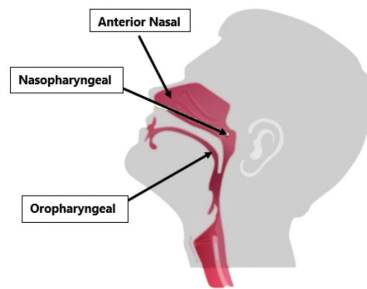


Figure 2. OP Collection

3. Rotate the swab several times against nasal wall and repeat in other nostril using the same swab.
4. Place swab, tip first, into the transport tube provided.
5. Place barcode label lengthwise on tube. Write with indelible ink the patient's name, DOB, date/time of specimen collection, and collector's initials.

REJECTION CRITERIA:

Samples with any of the following will be rejected:

1. Collection containers other than specified
2. Missing required patient identifiers
3. Improperly filled tubes
4. Leaking or broken tubes
5. Specimens exceeding stability timeline (refer to Quick Reference Guide)

SHIPPING PROCEDURE:

1. Place specimen bag(s) in FedEx/UPS shipping bag.
2. Make sure to check the box for Exempt Human Specimen.
3. Place shipping label on shipping bag.
4. Ship to the lab promptly.

**During summer months, specimens must be shipped refrigerated*

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