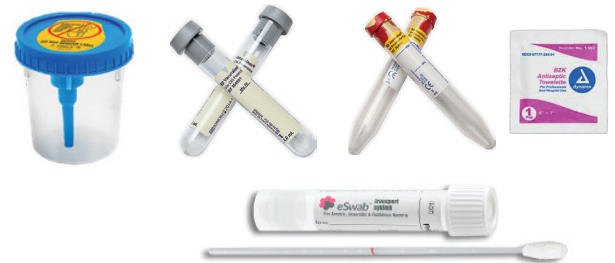


# Sexually Transmitted Infection (STI), Women's Health, Bacterial Vaginosis/Aerobic Vaginitis (BV/AV) Specimen Collection Instructions

## MATERIALS PROVIDED:

- BD Vacutainer® Urine Collection Cup • Specimen Collection Tube
- Cleansing Towelettes • Biohazard Specimen Bag with Absorbent Pad
- FedEx/UPS Shipping Bag



## ACCEPTABLE SPECIMEN COLLECTION CONTAINERS:

- Gray or Yellow/Red Top Tube (urine collections only)
- ESwab or Other Swab with Liquid Amies Media (swab collections only)

## 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.

### Option 1: Urine Procedures

#### Mid Stream Clean-Catch Procedure

A first morning sample or sample collected longer than 1-2 hours since prior urination maximizes sensitivity of detecting pathogens.

#### Patient Self-Collect Instructions

1. Wash hands thoroughly with warm water and soap.
2. **Females:**  
Stand in a squatting position over the toilet. Separate the folds of skin around the urinary opening. Cleanse the area around the opening with the first castile soap towelette.
- Males:**  
Cleanse the end of the penis with the first castile soap towelette beginning at the urethral opening and working away from it (the foreskin of an uncircumcised male must be retracted).
3. Repeat using a second clean towelette.
4. Urinate the first portion of urine in the toilet.
5. As you continue to urinate, bring the collection cup into the midstream to collect the urine sample (half full is sufficient).
6. Do not touch the inside or lip of the cup.
7. Urinate remainder of urine into the toilet.
8. Replace the blue screw cap onto the BD Vacutainer® Urine Collection Cup.

#### Clinical Technician Instructions

1. Put on sterile gloves.
2. Peel back protective sticker to expose rubber-covered cannula.
3. Push Vacutainer® tube into the integrated transfer port on the collection cup.
4. Hold in position until flow of urine stops.
5. Remove tube.
6. For yellow/red top Vacutainer® tube, invert 8-10 times.
7. For gray top Vacutainer® tube, shake tube vigorously.
8. Place protective sticker back over the integrated transfer port.
9. Place barcode label lengthwise on tube. Write with indelible ink the patient's name, DOB, date/time of specimen collection, and collector's initials.
10. Remove lid from the cup and dispose of in a biohazard sharps container.
11. Dispose of urine according to your facility's policy.



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

## Catheterized Patient Procedure

Specimen collection from patients with indwelling catheters requires aseptic technique.

1. Put on sterile gloves.
2. Clamp catheter tubing above the port to allow collection of freshly voided urine (minimum 7-10 mL urine required).
3. Vigorously clean the catheter port or wall of the tubing with 70% ethanol (not provided) (wherever collection will occur).
4. Aspirate urine via sterile needle (not provided) (direct tubing puncture) or syringe (not provided) (if port has a Luer lock type fitting).
5. Eject urine into urine collection cup and replace lid securely.
6. Thoroughly mix urine in cup by inverting several times.
7. Peel back protective sticker to expose rubber-covered cannula.
8. Push Vacutainer® tube into the integrated transfer port on the collection cup.
9. Hold in position until flow of urine stops.
10. Remove tube.
11. For yellow/red top tube, invert 8-10 times. For gray top tube, shake tube vigorously.
12. Place protective sticker back over the integrated transfer port.
13. Place barcode label lengthwise on tube. Write with indelible ink the patient's name, DOB, date/time of specimen collection, and collector's initials.
14. Place tube in a biohazard specimen bag and place any paperwork in the side pouch.
15. Remove lid from the collection cup and dispose of in a biohazard sharps container.
16. Dispose of urine according to your facility's policy.



## Option 2: Swab Collection Procedure

1. Put on gloves.
2. Open the peel pouch.
3. Remove the tube and place barcode label lengthwise on tube. Write with indelible ink the patient's name, DOB, date/time of specimen collection, and collector's initials.
4. Remove the swab – to prevent contamination, avoid touching the shaft above the molded breakpoint.
5. Collect the patient sample with the swab.  
Note: Use the swab intra-vaginally or around the genital areas. If lesions are present, press the swab against the base of the lesion firmly.
6. Remove the cap from the tube and insert the swab all the way to the bottom.
7. Holding the swab close to the rim of the tube, break the shaft at the breakpoint line while keeping the tube away from your face.
8. Screw on the cap tightly to prevent leaking.
9. Dispose of the remainder of the shaft.
10. Place tube in a biohazard specimen bag and place any paperwork in the side pouch.



## REJECTION CRITERIA:

*Samples with any of the following will be rejected:*

- Collection containers other than specified
- Missing required patient identifiers
- Improperly filled tubes
- Leaking or broken tubes
- 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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