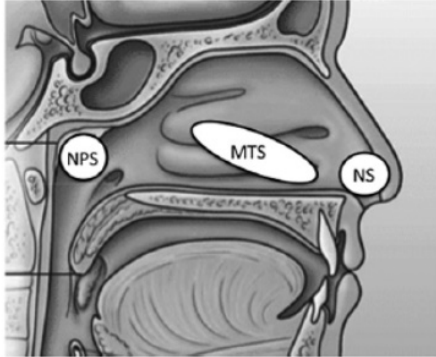


IDPH Specimen Collection, Labeling, Storage and Transportation Procedure

1. Explain the procedure to the patient (Nasopharyngeal or Nasal swab).
2. Assemble swabs, PPE, and hand sanitizer.
3. Complete all paperwork and double check. Please note that if you are sampling numerous patients from the same facility that you can enter many of the common data elements electronically and print multiple copies of the submission form. This will save time by requiring you to only complete patient specific information on the lab submission form if you make copies that have much of the information completed in advance.
4. Perform Hand hygiene.
5. Use gown, procedure mask or fit tested N95, face shield or goggles, gloves per facility guidance and risk assessment.
6. Twist to remove the cap from the viral transport media tube.
7. Remove the swab and handle carefully to prevent touching the sterile end of the swab.
8. Swab the patient as appropriate given the type of swab provided (Nasopharyngeal or Nasal).
9. Place the swab in the transport media tube.
10. Ensure that the swab tip is in the viral transport media.
11. Bend/cut/snap the applicator stick as appropriate such that the cap can be secured.
- 12. Secure the cap on the transport tube tightly to prevent leakage.**
13. Label the vial with the following information: patient name (double check spelling with patient), date of birth, date and time of collection and place in transport/storage bag with requisition.
14. Ensure the specimen and requisition form are kept together a transport bag. They should be in separate “pockets.”
15. Store the specimen at 2-8C prior to and during shipment to the laboratory. Please note that all specimens must be tested within 72 hours of collection. Use ice packs to maintain temperatures during transit. Do not use wet ice.
16. Remove gloves, perform hand hygiene, put on fresh gloves, sanitize pen and surfaces.
17. Courier or ship specimens to the laboratory quickly.



Sampling Locations: NPS, Nasopharyngeal swab; MTS, midturbinate swab; NS, nasal swab. (From Frazee et al., 2018)

Resources:

Centers for Disease Control and Prevention (2010). *SPECIMEN COLLECTION PROCEDURES MANUAL* Retrieved from https://www.cdc.gov/nchs/data/nhanes/nhanes_01_02/specimen_collection_year_3.pdf

Heikkinen T, Marttila J, Salmi AA, et al. Nasal swab versus nasopharyngeal aspirate for isolation of respiratory viruses. *J Clin Microbiol.* 2002;40:4337-4339.

Louisiana Department of Public Health. Information for Healthcare Providers, Healthcare Systems, and Laboratories Following Updated FDA Recommendations for SARS-CoV-2 Diagnostic Testing retrieved from <http://ldh.la.gov/assets/oph/Coronavirus/resources/providers/Swabfactsheet.pdf>

Sung RY, Chan PK, Choi KC, et al. Comparative study of nasopharyngeal aspirate and nasal swab specimens for diagnosis of acute viral respiratory infection. *J Clin Microbiol.* 2008;46:3073-3076