BIOMÉRIEUX

BIONEERING DIAGNOSTIK

Wash hands or use an alcohol hand rub.

Remove the plastic

ESwab Specimen Collection Instructions

Per the manufacturer, COPAN Diagnostics, “ESwab is a liquid based multipurpose collection and transport system that maintains the viability of aerobic, anaerobic and fastidious bacteria for up to 48 hours. The ESwab system collects and releases more specimen, significantly improving patient test results and decreasing the need for repeat testing due to insufficient sample.

Urine Culture Specimen Collection Guide

BD Vacutainer ® C&S Preservative Urine Tubes Intended Use

Per the manufacturer, “Bacteria quantification in urine is widely used as an aid in evaluating a patient for urinary tract infections. Colony forming units of 100,000 microorganisms or greater per milliliter of urine are generally considered indicative of infection.

Urine frequently supports the proliferation of bacteria, which may multiply at the same rate as in the nutrient broth. Therefore, a urine sample delayed in transit or left at room temperature for an extended period of time may give an erroneous result.

As a means of preventing growth of the microorganisms from sources exogenous to the bladder, refrigeration or culturing within 2 hours of micturition is recommended. It is not always within the control of the laboratory to maintain the parameters necessary for accurate results.

All BD Vacutainer® C&S Preservative Urine Tubes are intended for the collection and transport of urine samples for culture and sensitivity testing of bacteria.

The tubes are filled with a lyophilized urine maintenance formula and evacuated to draw approximately 4.0 mL of urine. The lyophilized urine maintenance formula can maintain the bacterial population in the urine specimen for a period of up to 48 hours at room temperature at levels comparable to those urine specimens without additive, held under refrigeration for the same period of time.”

Vacutainer Collection and Transfer Instructions

Items Needed: Gloves, Sterile Urine Cup, Cleansing Towelette, MDL Urine Culture Kit (BD Vacutainer C&S Preservative Urine Tube, Vacutainer Transfer Straw, Biohazard Bag)

1. The healthcare professional should follow

Molecular Diagnostics Laboratory
Wichita State University

Created: 12/20/2020
Updated: 9/16/2024

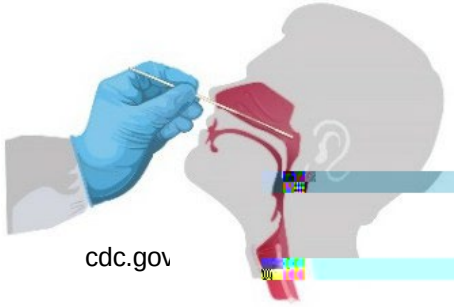
Viral Nasopharyngeal Swab Specimen Collection Instructions

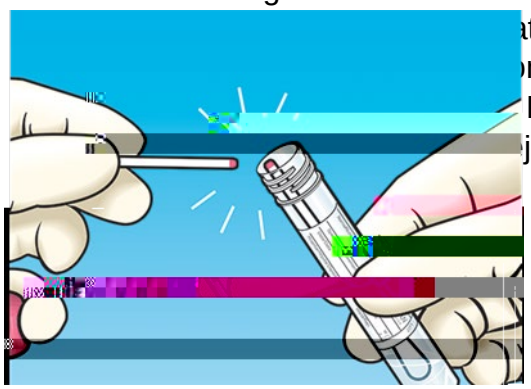
Included in this kit a pre-labeled viral transport media tube, a nasopharyngeal flock swab, a biohazard bag with absorbent material.

NOTE: 1.

Clean hands prior to collection with alcohol-based sanitizer or soap and water.

2. Confirm patient identity using two identifiers (i.e. DOB, name, etc) before collection.
3. Patient should be seated in an upright position.
4. Remove the swab and insert into the nostril parallel to the palate until resistance is encountered (or the distance is equivalent to that from the ear to the nostril indicating contact with the nasopharynx). Gently rub and roll the swab. Leave swab in place for several seconds to absorb secretions. Slowly remove the swab while rotating it. the swab off against the side of th


cdc.gov


tely 2 inches above the tip.
n the collection tube. Place
Failure to properly secure lid
jection or delayed testing.

6. Clean hands with alcohol-based sanitizer or soap and water.

Samples are stable at room temperature for up to 72 hours. After 72 hours, samples degrade at room temperature which increases the likelihood of indeterminate results. To maintain the sample's quality after 72 hours, refrigerate the sample at 35.6 °F - 46.4 °F. Discard and recollect any samples older than 7 days.

WSU Molecular Diagnostics Laboratory
mdlsupport@wichita.edu
(316) 978-8600

with absorbent material

Molecular Diagnostics Laboratory
Wichita State University

Created: 12/20/2020
Updated: 9/16/2024

Viral Saliva Specimen Collection Instructions

Included in this kit a pre-labeled sterile tube for saliva collection, a biohazard bag with absorbent material

NOTE: DO NOT eat, drink, smoke, brush teeth, or chew gum at least 30 minutes prior to collection. Saliva collection is intended to be self -administered in a contact -free collection method observed by a trained witness. PPE can be minimized to mask and gloves while maintaining at least 6 feet of separation. Additional PPE as defined by CDC may be worn. DO NOT use the kit if the specimen collection tube is damaged or broken.

1. Patient cleans hands prior to collection with alcohol-based sanitizer or soap and water.
2. The observer confirms patient identity using two identifiers (name, DOB, etc.) before providing the tube.
3. Patient should begin to pool saliva in their mouth-use a gentle sucking motion to help move saliva to the middle of the mouth (this should be normal saliva (spit) that collects in the mouth. DO NOT cough or sniffle to collect deep saliva/sputum).
4. The patient removes the lid of the sterile collection container and gently expels the collected saliva into the tube until the liquid reaches the 1 mL mark on the tube (DO NOT include bubbles in the measurement). It is okay if the saliva is above the 1mL mark.
5. The patient screws the lid securely on the collection tube. Failure to properly secure the lid may result in specimen rejection or delayed testing.
6. The patient places the sample in a biohazard bag and securely seals it.
7. The patient cleans hands with alcohol-based sanitizer or soap and water. If the observer had contact with the patient, then the observer cleans hands and changes gloves.

Samples are stable at room temperature for up to 72 hours. After 72 hours, samples degrade at room temperature which increases the likelihood of indeterminate results. To maintain the sample's quality after 72 hours, refrigerate the sample at 35.6 °F35.6J 0 Tc 0 Tw 10.11 0 Td ( )Tj -.832[(35.)12 (6)]TJ 0 Tc (F)Tj 0

WSU Molecular Diagnostics Laboratory
mdlsupport@wichita.edu
(316) 978-8600