COVID-19 Specimen Collection Information

Specimen collection

- To collect a proper nasopharyngeal swab this is the process:
  - If excessive mucus is present, have patient gently wipe their nose first and dispose of tissue properly
  - Collect one nasal specimen using a synthetic viral swab (not a Q-tip) by tilting head back, twisting completely 360 degrees several times in one nostril (can do both if possible) – it must go the entire distance to the posterior nasopharynx, i.e., distance from nostrils to external opening of ear
  - Place in purple-top viral medium (green and red tops can be used, but we know for sure purple will work)
  - Label and place in biohazard bag
  - Place in freezer for pick up

Things I would add/update if you are having a UAP collect it:

- Equipment needed:
  - COVID-19 rate PPE, sterile approved swab, transport medium, label, biohazard bag
- Inspect all equipment and supplies; if a product is expired, its integrity is compromised, or it's defective, remove it from patient use, label it as expired or defective, and report the expiration or defect, as directed by your facility.
- Correct collection and handling of nasopharyngeal swab specimens helps laboratory staff identify pathogens accurately and with minimal contamination from normal bacterial flora. Collection normally involves the use of an approved swab to sample inflamed tissue and exudate from the nasopharynx. After collecting the nasopharyngeal specimen, immediately place the swab into a universal viral transport medium and secure lid.
- Collection of swab:
  - Verify the practitioner's order, gather equipment, and perform hand hygiene.
  - Don PPE per isolation standards (for COVID-19 this includes N95 mask, face shield/goggles, isolation gown, 2 pairs of gloves, head/hair cover, shoe covers (high top preferred)).
  - Confirm the patient's identity using at least two patient identifiers.
  - Explain the procedure to the patient and family.
  - Clear any excess mucous from patient’s nares and dispose of tissue in biohazard.
  - While it's still in the package, bend the sterile swab to measure the distance from the patient’s nostril to the ear to determine the distance to insert the swab (half the distance measured). Open the package without contaminating the swab.
  - Instruct the patient to tilt the head back at a 70-degree angle.
  - Pass the swab gently through the patient’s more patent nostril into the nasopharynx, keeping the swab near the septum and the floor of the nose, to the calculated distance from the nostril. Rotate the swab gently 2 to 3 times and hold for 5 seconds to absorb secretions, and then remove it.

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- Remove the cap from the sterile tube, insert the swab into the transport medium, and break off the contaminated end of the swab.
- Close the culture tube tightly.
- Label the culture tube in the presence of the patient to avoid mislabeling and complete a laboratory request form (if necessary).
- Immediately send the tube to the laboratory or place in refrigerator/freezer for storage. Any delay in cooling or transporting the specimen may damage it and affect the accuracy of the results.
- Remove PPE and perform hand hygiene per standards.

-This is all modified from Lippincott to serve the purposes of coronavirus...