

Nasopharyngeal Collection

1. Use recommended PPE. Perform hand hygiene. Masks and gloves are required to avoid contamination of the specimen
2. Use the BD UVT Kit (provided by the lab) containing a flexible flocked swab and transport tube. **Do not bend the swab prior to specimen collection.** Always check the tube for expiration date. If the tube is expired, **DO NOT USE**, call the lab (8580) for additional tubes.
3. Identify patient to be tested with two patient identifiers. Explain procedure to patient. Make sure that they are aware that there will be some discomfort with the collection. Sometimes it is helpful for them to close their eyes during the procedure. Have patient sit with head against a wall or against parent's chest as patients have a tendency to pull away during this procedure. If a wall is not convenient, a hand placed on the top of the head will also provide stability. For infants, it is a good idea to have a second person available to hold the cheeks firmly to avoid movement.
4. Ask patients if they have any known blockages or a deviated septum. If they do, proceed with caution.
5. Tilt patient's head back slightly. Insert the swab into one nostril straight back (not upwards) and continue along the floor of the nasal passage for several centimeters until reaching the nasopharynx (or until resistance is met). The distance from the opening of the nose to the ear gives an estimate of the distance the swab should be inserted. The swab will be inserted approximately $\frac{1}{2}$ the distance. Do not force swab, if obstruction is encountered before reaching the nasopharynx, remove the swab and try the other side. If resistance is also encountered on the opposite side, please note this on the tube label prior to sending it to the lab.
6. Rotate the swab gently (for 10 seconds) to loosen and obtain infected epithelial cells.
7. For an optimal sample, repeat procedure using the other nostril.
8. After removal from the nasopharynx, immediately remove the cap from the sterile culture tube, insert the swab into the transport medium. Break off the swab shaft by bending it against the vial wall evenly at the pre-scored line. Replace the cap securely to prevent leakage during transport.
9. Label the tube with patient's complete name, DOB, the collector's initials, the specimen source, and the collection date and time. Place the tube into specimen bag being careful not to contaminate the outside of the bag. Send or deliver the specimen in the bag to the lab to be tested.

**Cotton or calcium alginate swabs are not acceptable.*

