

CT/NG Swab Specimen Collections - Approved Personnel & Locations

Test Name (Procedure Code)	Source	Specimen Type	Collector (C) and/or Instructor (I)								Location/Collection Site				
			Patient	MA	LVN	RN	NP	PA	MD/DO	CPT	Lab Draw Station	Clinic Appt Room	*Clinic Back Office	Home Health	Home Self-Collect
CT/NG Female Genital (LABP000535)	Endocervical	Clinician Collected Swab	X	X	X	X	C	C	C	X	X	✓	X	X	X
	Vaginal	Clinician Collected Swab	X	X	X	X	C	C	C	X	X	✓	X	X	X
		Self Collected Swab	C	X	I	I	I	I	I	X	✓	✓	✓	✓	**N/A
CT/NG Throat (1230000590)	Throat	Clinician Collected Swab	X	C	C	C	C	C	C	X	X	✓	✓	✓	X
		Self Collected Swab	C	I	I	I	I	I	I	X	✓	✓	✓	✓	**N/A
CTNG Anorectal (1230000591)	Anorectal	Clinician Collected Swab	X	X	X	X	C	C	C	X	X	✓	X	X	X
		Self Collected Swab	C	X	I	I	I	I	I	X	✓	✓	✓	✓	**N/A

*Back Office = Outpatient order class intended for office collection (e.g., Express Care, Telemedicine, etc.)

**Not currently offered, pending method validation