

NASOPHARYNGEAL SWAB SPECIMEN COLLECTION INSTRUCTIONS

INFLUENZA TESTING

These laboratory instructions provide guidance on how to collect nasopharyngeal specimens and how to successfully ensure safe transport to the laboratory. It is absolutely critical that specimens be collected properly, labeled properly, stored appropriately, and submitted with a complete laboratory test request/submission form.

WHAT IS COLLECTED: The preferred specimen is a nasopharyngeal swab (NP). However, OLS will also accept the following for Influenza testing: throat swabs, nasal aspirates, nasal washes, dual nasopharyngeal/throat swabs, bronchoalveolar lavages, bronchial aspirates, bronchial washes, endotracheal aspirates, endotracheal washes, tracheal aspirates, and lung tissues.

TIMING OF COLLECTION: Specimens for testing should only be collected for individuals who have been symptomatic for less than 72 hours.

HOW IS IT COLLECTED: Once collected, the swab should be placed in viral transport media (VTM) as soon as possible. Make sure the lid is securely closed. It is recommended to use Parafilm or tape to seal the lid. VTM (sometimes called UTM) is a red/pink liquid containing small clear beads. The use of Stuart's, Amies, saline, or other inappropriate transport media will result in rejection of the sample.

PERSONAL PROTECTIVE EQUIPMENT (PPE): Use proper PPE when collecting NP swabs from an infected patient. Proper PPE includes surgical mask, disposable gloves, and/or droplet protection such as face mask or safety glasses. When collection is complete, dispose of all PPE and other contaminated materials in a trash receptacle. Wash hands thoroughly with soap and water or an alcohol-based hand gel before and after the collection procedure.

STEPS TO NP SWAB COLLECTION:

- (1) Use a flexible aluminum or plastic fine-shafted swab with a polyester, Dacron, or rayon tip. **Do not use cotton or calcium alginate.**
- (2) Insert the swab into the nostril and back into the nasopharynx and leave in place for one minute.
- (3) Slowly withdraw the swab with a rotating motion.
- (4) Place the tip of the swab into the vial containing 2-3mL of VTM or UTM. If using an aluminum shaft swab, cut the shaft. If using a plastic shaft swab, break the shaft at the break point.
- (5) Label the transport tube with the patient's first and last name and the date of collection.



NASOPHARYNGEAL SWAB SPECIMEN COLLECTION INSTRUCTIONS INFLUENZA TESTING

COMPLETION OF TEST REQUEST FORM: The test request form must contain the patient name, patient date of birth, date of specimen collection, source of specimen, and submitting facility name and address at a minimum. **If specimens are being submitted as part of an outbreak, the Outbreak Number must be written in the designated area on the form. To obtain an Outbreak Number, contact the Division of Infectious Disease Epidemiology at 304-558-5358.**

FAILURE TO COMPLETE THE REQUIRED INFORMATION ON THE TEST REQUEST FORM MAY RESULT IN THE REJECTION OF THE SAMPLE.

STORAGE: After collection, place the vial containing the swab and media into a zippered or sealable biohazard labeled bag. Keep the specimen(s) refrigerated at 4°C (39.2°F) until shipping. If the specimen(s) cannot be shipped within 72 hours after collection, they should be kept frozen at -70°C (-158°F) or below in a manual defrost freezer.

PACKAGING: Specimens should be packaged in an insulated box and shipped overnight with ice packs. Dry ice is not necessary, but recommended in cases where the samples have been frozen. The package must be shipped according to the current DOT, IATA, and ICAO regulations. See our website - www.wvdhhr.org/labservices - for complete packaging and shipping guidelines. An example of proper marking and labeling is shown below.

