## eastern**health**

## **Microbiology Specimen Collection**

Investigation	Collection Container/kit	
Genital specimens	Genital swab kit & Urine Jar	See list for common diseases (See list bottom of age 2) Females  High/Low vaginal swab protocol  Prepare smear on slide; &/or  Send orange-top wire swab and (for Ct/Ng PCR) white-top swabs  Cervical/ Endocervical swab protocol  Prepare smear on slide;  Orange- top wire swab for culture and (the OPTIMAL tests for Ct/Ng in females is PCR via) white-top swab -  First-stream urine as alternative/additional test for Ct/Ng PCR  No voiding for at least 2 hours, Aim to send 20 ml to lab  Males  Urethral swab:  Prepare smear on slide; &  Orange-top and white-top swab &  First-stream urine (after not voiding for at least 2 hours. Aim to send 20ml to lab.  * Ct/Ng PCR =C trachomatis/N agnorrhoeg PCR
HSV		(Stand-alone) White-top dry swab
Group B Screen	Blue Top swab	Blue-top swab for low vaginal →Anal swab. See <u>http://ehpolicies.eh.local:90/index.aspx?itemDetails=2546</u>
General wound MCS	Wound Swab kit	Open wounds <ul> <li>Clean with a swab moistened with normal sterile saline until red granulation tissue is visible.</li> <li>Closed wounds             <ul> <li>Clean away excess debris and purulent material from the opening.</li> </ul> </li> <li>Use wound swab kit                     <ul> <li>Plain swab – use for smear</li> <li>Blue top swab – use for culture</li> </ul> </li> </ul>

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## **General Instructions:**

- Label all specimens with
  - Patient's surname and given name
  - o UR no , if available,
  - $\circ \quad \text{ Date of birth} \\$
  - Site of collection and
  - $\circ$  Date/time of collection
- Store the specimen's smears/ swabs for M&C at room temperature prior to transport to the laboratory.
- Chlamydia/ Gonorrhoea PCR (white-top) swabs **MUST** be received in an EHP laboratory within 2 hours of collection.
- First pass urines for Chlamydia/Gonorrhoea PCR **MUST** be received in the laboratory **within 2 hours of collection**.
- Specimen components not used to be discarded. Return unused components to laboratory for recycling.

Disease for testing	Common Aetiologies	Tests to be undertaken
Bacterial Vaginosis (BV)	Overgrowth vaginal flora with anaerobic bacteria	Smear on Slide +/- High/ Low vaginal swab (see vaginal discharge)
Balanitis	Candida, S. aureus, B-haemolytic Streptococcus	Wound swab kit
Cervicitis	Ct/Ng	Cervical Swab &/or First stream urine
C.trachomatis/ N. gonorrhoea (Ct/Ng)	Ct/Ng	Female: Cervical Swab &/or First stream urine
		Male: Urethral Swab &/or First stream urine
Epididymitis, Epididymo-Orchitis	Non-STI (Enterobacteriaceae e.g. E.coli; P. aeruginosa, Gram positive cocci)	Urethral Swab &/or First stream urine
	VS	
	STI (N.gonorrhoeae, C.trachomatis)	
Group B Streptococcus (GBS) screen	GBS	Blue-top swab
Pelvic Inflammatory Disease (PID)	Non-STI (Termination of pregnancy, retained products of conception, etc. Usually polymicrobial	Cervical swab +/- First stream Urine
- Cervicitis	in aetiology)	
- Endometritis	vs	
- Oophoritis	STI (N.gonorrhoeae, C.trachomatis. Less common M.genitalium)	
<ul> <li>Pelvic abscess</li> </ul>		
<ul> <li>Pelvic peritonitis</li> </ul>		
- Salpingitis		
- Tubo-ovarian Abscess		
Post-partum wound infection	Polymicrobial	Wound swab kit
STI or STD	See Ct/Ng	See Ct/Ng
Termination of Pregnancy	See PID	See PID
Trichomoniasis	Trichomonas vaginalis. See vulvo-vaginitis	See vulvo-vaginitis
Ulcers/Genital Ulcers	Herpes Simplex Virus	Dry swab (Not within genital pack)
Urethritis (male)	Ct/Ng	Urethral Swab &/or First stream urine
Vaginal Discharge	BV vs vulvo-vaginitis – see appropriate	See BV vs vulvovaginitis
Vulvo-vaginitis	N.gonorrhoeae, C.trachomatis, Candida albicans, Trichomoniasis	High/low vaginal swab
	Also non-STI causes	

\* Please note the aetiologies listed for disease processes refer to the most common causes.

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