 Microbiology Swab Specimen Collection

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| **Investigation** | **Collection Container/kit** | **Tests – Refer also to the Pathology Handbook Test & Collection Guide** |
| **STIPCR - Chlamydia/Gonorrhoea/Trichomonas vaginalis (CT/NG/TV)** |  | **Females:**   * Cervical/Endocervical swab for STIPCR * First-stream urine (15-20mLs) as alternative/additional test (after not voiding for at least 2 hours).   Males:   * First-stream urine (15-20mLs) is the preferred specimen (after not voiding for at least 2 hours)   Throat swab  Rectal Swab |
| **Herpes PCR**  **(HSV-1, HSV-2, VZV, CMV, Adenovirus, Enterovirus)**  **& All other non-respiratory PCR requests (except CT/NG/TV)** |  | * White-top dry swab |
| **General wound MCS**  **Group B Screen (GBS)**  **CRE/CPO Screen**    **MRSA Screen**  **VRE Screen**  **C.auris Screen**  **Genital MCS** |  | **Open wounds:** Clean with a swab moistened with normal sterile saline until red granulation tissue is visible.  **Closed wounds:** Clean away excess debris and purulent material from the opening.  **GBS**: Blue-top swab for combined low vaginal and rectal swab. See <http://ehpolicies.eh.local:90/index.aspx?itemDetails=2546>  **CRE:** Rectal swab AND separate inguinal swab (Faecal specimen is preferable, rectal swab MUST have visible faeces).  **MRSA:** Nose & groin swabs, +/- axilla +/- throat  **VRE:** Rectal swab with visible faeces  **C.auris**: bilateral axilla and groin swabs  **Genital MCS:**   * Females - High vaginal swab/Cervical swab. (For Chlamydia/Gonorrhoea/Trichomonas vaginalis PCR see STIPCR section). * Males – Urethral swab (use orange top charcoal swab – see below) |
|  | Gonorrhoea culture or Urethral swab MCS |
| **COVID-19/Influenza A/Influenza B/ RSV PCR**  **Extended Respiratory PCR including Bordetella pertussis PCR.** |  | * **Collect a nose & throat swab for COVID19/Influenza A/Influenza B/RSV PCR.** * **For Bordetella pertussis PCR - Nasopharyngeal swab is preferred specimen.** |

**General Instructions:**

* Label all specimens with
  + Patient’s surname and given name
  + UR no (if available)
  + Date of birth
  + Site of collection and
  + Date/time of collection
* Store swabs for M&C at room temperature prior to transport to the laboratory.
* Chlamydia/ Gonorrhoea/Trichomonas PCR (white-top) swabs and first pass urine specimens **MUST** be received in an EHP laboratory **within 2 hours of collection**.