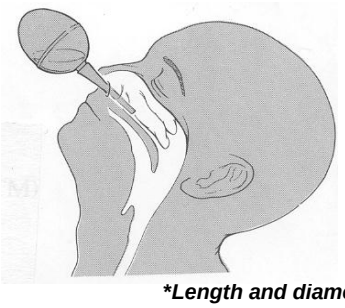
LEGACY HEALTH | LEGACY LABORATORY SERVICES

Instructions for Viral and Pertussis Collections

Multiple tests (depending on quantity) can be performed on these two types of collections, (i.e. RSV <u>and</u> pertussis PCR, viral culture <u>and</u> pertussis PCR, or Respiratory PCR etc.) from only one specimen.

Nasal Wash: (Recommended)



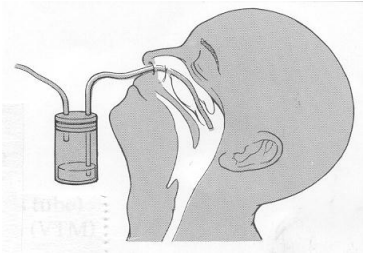
Materials: Saline
1-2 oz. Tapered rubber bulb*
Specimen Container

Method:
1) Suction 3-5 mL saline into a new sterile bulb
2) Insert bulb into one nostril until nostril is occluded
3) Instill saline into nostril with one squeeze of the bulb and immediately release bulb to collect recoverable specimen
4) Empty bulb into suitable dry, sterile specimen container or test tube with cap.

There is also a SYRINGE METHOD using a 3-5 mL syringe and 2 inches of 18-20 gauge tubing. Method is the same; inject saline and quickly aspirate back into syringe.

Length and diameter of syringe, tube, or bulb as appropriate for infant, child, or adult

Nasal Aspirate:



Materials: Portable suction pump
Sterile suction catheter
Mucus trap (i.e. Luken's tube)

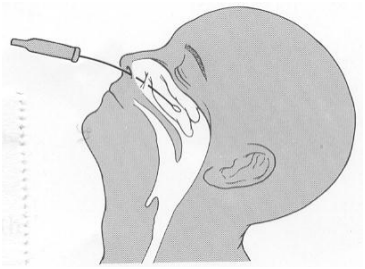
Method:
1) Attach mucus trap to suction pump and catheter, leaving wapper on suction catheter; turn on suction and adjust to suggested pressure (see table).
2) Without applying suction, insert catheter into the nose, directed posteriorly, toward the opening of the external ear.**
3) Apply suction: using a rotating movement, slowly withdraw catheter. Catheter should be in nasopharnynx no longer than 10 seconds.
4) Hold trap upright to prevent secretions from going into pump.
5) Rinse catheter with saline (if necessary), disconnect suction, connect tubing to arm of mucus trap to seal.

Patient Age	Catheter Size	Suction Pressure
Premature Infant	6	80-100 mmHg
Infant	8	80-100 mmHg
Toddler/Preschooler	10	100-120 mmHg
School Age	12	100-120 mmHg
Adolescent/Adult	14	120-150 mmHg

To determine length of catheter tubing measure distance from tip of nose to external opening of ear.

Primarily only one type of test (RSV <u>or</u> pertussis) can be performed per swab on these specimens.

Nasopharyngeal Swab:



Materials: Nasopharyngeal swab (see below for type):
*__Viral or pertussis PCR__ – Green top, Dacron or Rayon tip, (NOT calcium alginate) with liquid Stuarts transport. Specimen, swab containers or M4 or M4RT media.
*__Pertussis culture__ – Orange top, charcoal, Amies transport (These are ONLY good for culture, NOT PCR)

Method:
1) Insert swab into one nostril
2) Press swab tip on the mucosal surface of the mid-interior portion of the inferior turbinate, and rub the swab tip several times across the mucosal surface to loosen and collect cellular material.
3) Withdraw swab; insert swab into sterile container or swab container.
4) For viral cultures, PCR, or viral antigens, immediately insert swab into a vial of M4 or M4RT media. Do Not insert swabs for Pertussis culture into a viral transport tube.
5) Cut or break swabs into M4 (M4RT) media. DO NOT stuff swab handle cap into tube.

Legacy provides both of these swab types and M4 or M4RT through Legacy Laboratory Supply department.

These specimens will <u>not</u> be collected at Legacy Patient Service Centers or Laboratories.

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Last Approved Date: 5/8/2014

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