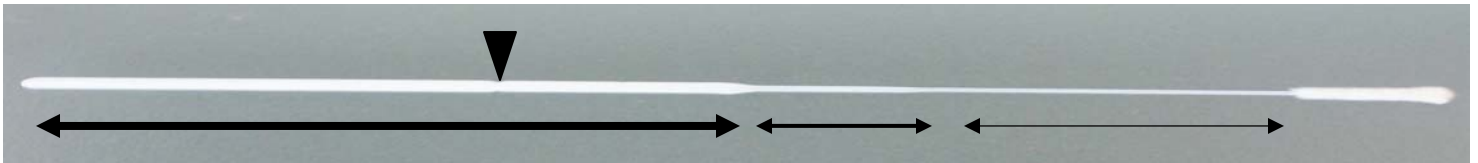


COLLECTION OF A NASOPHARYNGEAL AND THROAT SWAB FOR DETECTION OF RESPIRATORY INFECTIONS

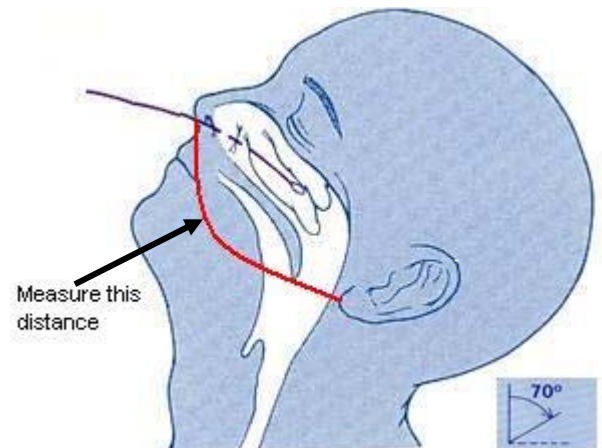
Nasopharyngeal swabs are the preferred specimens for respiratory virus rapid antigen (DFA) testing and pertussis testing

Swab Description: The nasopharyngeal swab has a white plastic shaft, with 3 different thicknesses, ending in a “furry” or flock tip. There is a deep score mark (∇) on the thick part of the shaft where it can be snapped to fit into the transport medium container, obviating the need to cut it with a sterile scissors (see graphic). Each swab is individually packaged and labeled “Copan sterile swab applicator”



Collection of a nasopharyngeal swab (NP)

1. Assemble all supplies such as gloves, mask, pen, appropriate collection kit containing ProvLab requisition, nasopharyngeal flock swab and transport medium
2. Check expiry date of transport medium
3. Perform hand hygiene by washing hands with soap and water or using alcohol hand rub
4. Put on gloves and mask (and eye protection if required, or if splashing is anticipated)
5. Have the patient sit in a chair or lie on a bed – elevate the head of the bed so that their head can be tilted back (see diagram)
6. Remove any mucous from the patient’s nose, with a tissue or cotton tipped swab prior to collecting the NP swab
7. How deep is the NP swab inserted into the nasopharynx ?
*Measure the distance from the corner of the nose to the front of the ear and insert the shaft **ONLY half this length.** In adults, this distance is usually about 4 cm, (finest thickness of this swab shaft). In children this distance is less.*
8. Tilt the patient’s head back slightly (about 70°) to straighten the passage from the front of the nose to the nasopharynx to make insertion of the swab easier
9. **Gently** insert the swab along the medial part of the septum, along the base of the nose, until it reaches the posterior nares – gentle rotation of the swab may be helpful. (If resistance is encountered on one side, try the other nostril, as the patient may have a deviated septum)
10. Rotate the swab several times to dislodge the columnar epithelial cells, and then remove the swab.
Note – *insertion of the swab usually induces a cough*
11. Put the NP swab into the transport medium and break it at the score mark on the shaft so that it does not protrude above the rim of the container. Failure to do so will result in the transport medium leaking and the **sample being discarded.**
12. **Ensure that the lid of the container is screwed on tight.**
13. Remove and discard gloves. Perform hand hygiene by washing hands with soap and water or using alcohol hand rub



COLLECTION OF A NASOPHARYNGEAL AND THROAT SWAB FOR DETECTION OF RESPIRATORY INFECTIONS

14. Remove and discard face mask, and repeat hand hygiene if hands become contaminated
15. Follow the labeling and transport instructions given in the collection kit insert.

Collection of a Throat Swab (TS)

1. Assemble all supplies such as gloves, mask, pen, appropriate collection kit containing ProvLab requisition, throat swab and transport medium.
2. Check expiry date of transport medium
3. Perform hand hygiene by washing hands with soap and water or using alcohol hand rub
4. Put on gloves and mask (and eye protection if required or splashing is anticipated)
5. Using the plastic shafted swab in the kit, vigorously swab the back of the throat around the tonsillar area
6. Place the swab into the transport medium, and break off the shaft so that it does not protrude above the rim of the container. Failure to do so will result in the transport medium leaking and the **sample being discarded**
7. **Ensure that the lid of the container is screwed on tight**
8. Remove and discard gloves. Perform hand hygiene by washing hands with soap and water or using alcohol hand rub
9. Remove and discard face mask, and repeat hand hygiene if hands become contaminated
10. Follow the labeling and transport instructions given in the collection kit insert.