



INFECTION CONTROL POLICY & PROCEDURE

Title: COVID-19 Testing/Collection Guidelines

Number: IC-6009

Effective Date: 04-17-20

Revised Date:

Review Date: (no revisions): 02-03-22

PURPOSE

To obtain COVID-19 test specimens using CDC recommended guidelines, to ensure the most accurate results possible and to prevent serial transmission of COVID-19 to staff obtaining specimen.

POLICY

COVID-19 specimens from Nasopharyngeal or Oropharyngeal sites following collection instruction.

PROCEDURE

1. Label tube of UTM legibly with two patient identifiers; patient's name and date of birth, or medical record number.
2. **Nasopharyngeal Specimen (NP):**
 - Use the flexible shaft NP swab provided to collect the specimen.
 - Have the patient blow their nose and then check for obstructions.
 - Tilt patient's head back 70 degrees and insert the swab into nostril parallel to the palate, not upwards, until resistance is encountered or the distance is equivalent to that from nostrils to outer opening of patient's ear indicating contact with nasopharynx. Leave swab in place for several seconds to absorb secretions. Slowly remove the swab while rotating it.
 - Repeat process with other nostril.
 - Insert the swab into the tube of UTM, making certain that the swab tip is covered by the liquid in the tube. The swab is to remain in the tube for transport.
 - **Plastic Shaft NP Swab:** The swab shaft extends past the top of the tube. Snap off at the break line on the shaft, allowing the end with the swab tip to remain in the liquid. The tip of the swab must be immersed in the liquid.
 - **Wired Shaft Swab:** Cut the upper end of the wire with clean scissors so that it is even or below the top of the vial, allowing the end with the swab tip to remain in the liquid.
3. **Throat (Oropharyngeal) Specimen (OP):** If nasopharyngeal specimen cannot be collected due to inability to procure NP swabs, a throat swab can be sent as an alternative specimen.

NOTE: *Throat swab tips must be synthetic (e.g. polyester, rayon or dacron), cotton or calcium alginate tipped or wooden shaft swabs are unacceptable.*

- Use a throat swab to collect specimen by swabbing the patient's posterior pharynx and tonsillar area (avoid the tongue).
- Insert the swab into the vial of UTM. If the swab shaft extends past the top of the tube, clip it so that the top of the swab shaft is just below the top of the tube allowing the end with the swab tip to remain in the liquid.

4. Next Steps:

- Securely tighten the cap on the tube of UTM and recheck to make certain it is labeled with two patient identifiers. Write NP or OP on the tube of UTM. Insert the tube into specimen transport bag and close bag tightly.
- Complete a laboratory test requisition form specific to each location. For test requested, write "COVID-19" under Comments/Other test requests. Ensure that all information is legible, complete and accurate. Place the completed form into the outside pocket of the specimen bag. Do not enclose it inside the bag with the specimen tube.

5. Holding:

- Store specimen refrigerated (2-8 C) until ready to send to the state laboratory. Specimens may be held refrigerated for up to 72 hours. Specimens MUST be received at the Washington State Health Laboratories within three days of being collected.

6. Packaging:

Specimens must be packaged and shipped in accordance with appropriate DOT regulations for Category B Biological Substances.

- Place the securely sealed Ziploc bag containing the specimen tube alone with the frozen ice pack into the appropriate box that is contained within the cardboard shipping box. If using an alternative type of packaging, make certain it is compliant with labeled appropriately for Category B Biological Substances.
- Ensure that the outer packing box that is supplied with the specimen kit is sealed securely with packaging tape.
- Ensure shipper label information for your facility is completed in full and affixed to the outer package.

7. Transport:

- Submitters are responsible for arranging for specimens to be transported to the appropriate lab.

Approved By:

Director Infection Control/Employee Health

Date

Chief Nursing Officer

Date