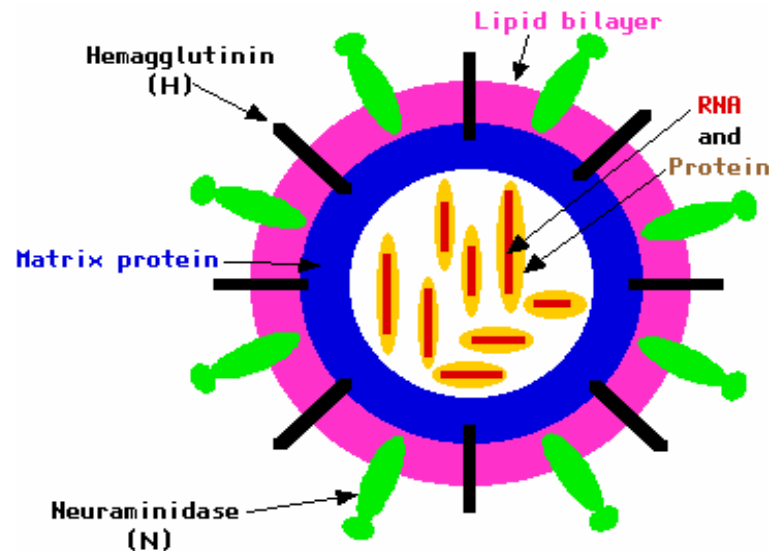


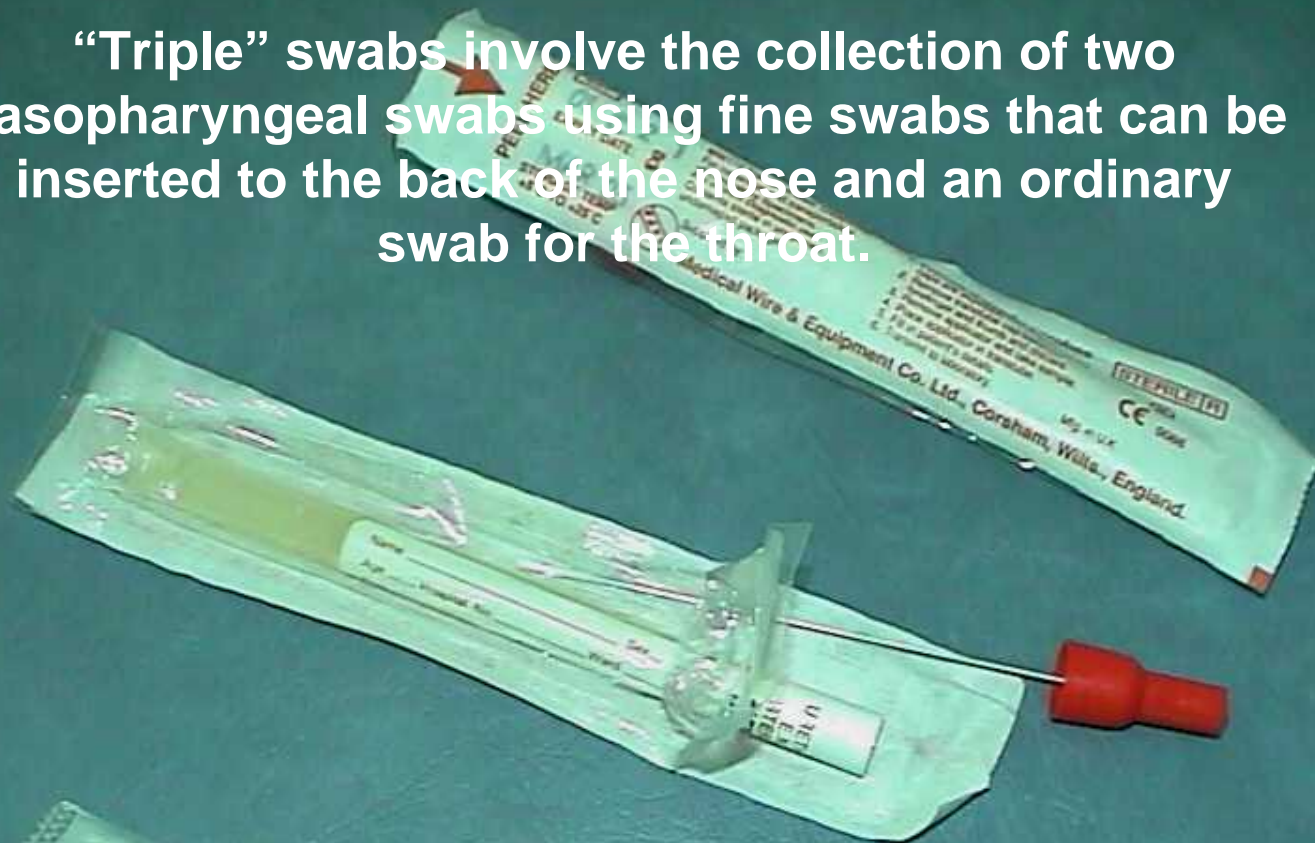
Specimen collection for respiratory viruses

“Triple” swabs



Courtesy of Infection Monitoring & Prevention Service, RBWH

“Triple” swabs involve the collection of two nasopharyngeal swabs using fine swabs that can be inserted to the back of the nose and an ordinary swab for the throat.

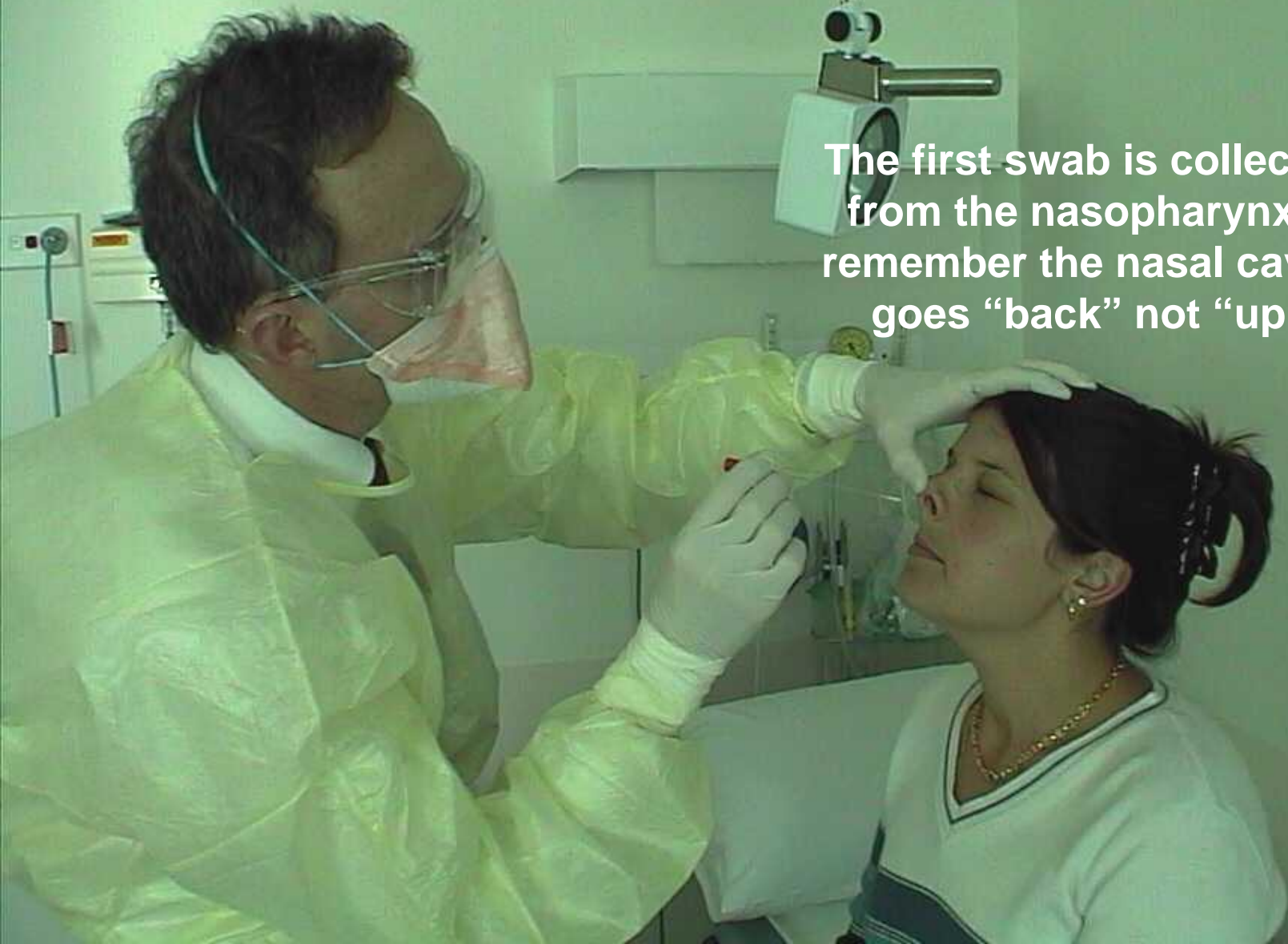


Nasopharyngeal swab

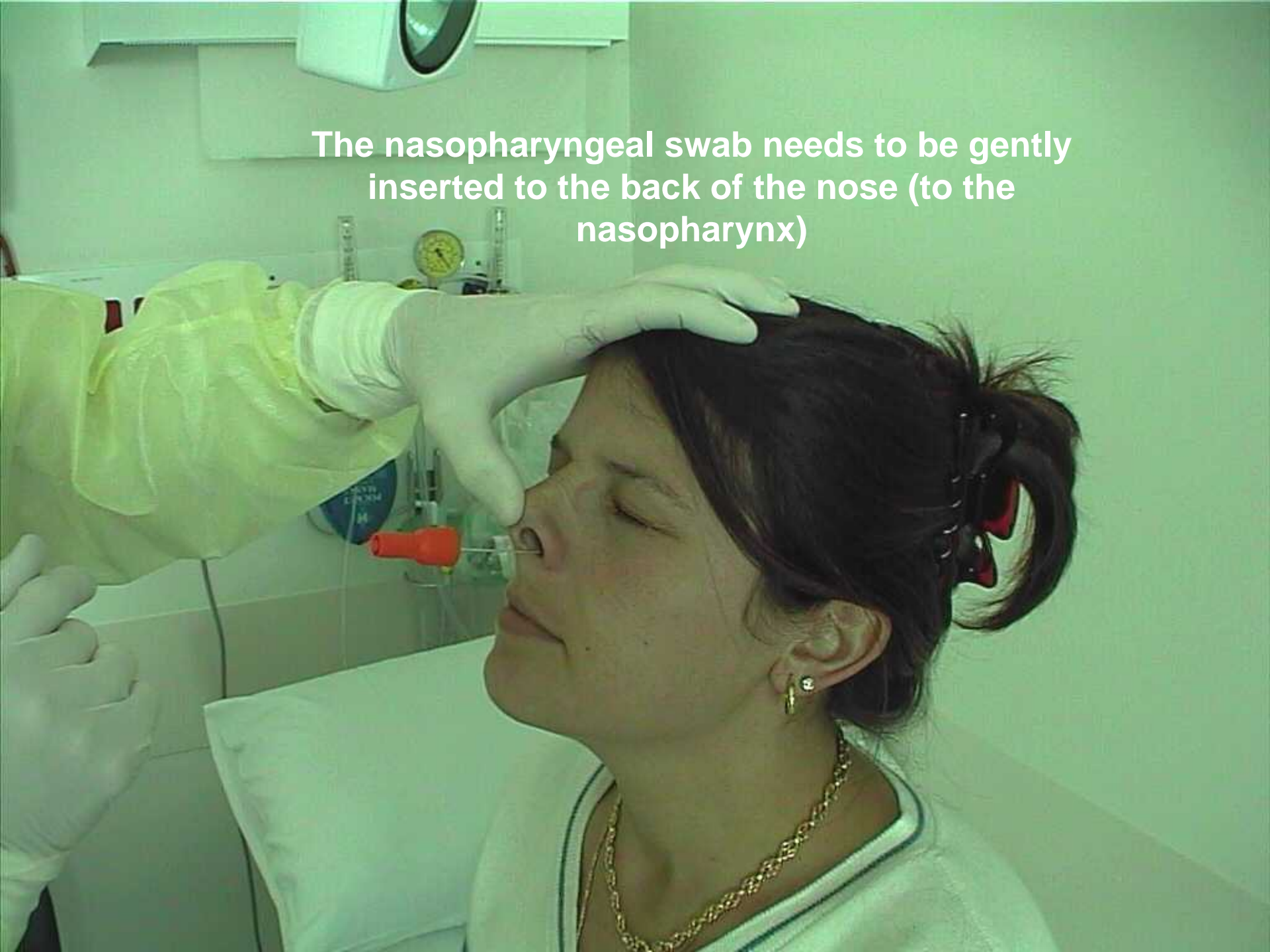
Ordinary swab for the throat.

The collector must be using appropriate personal protective equipment

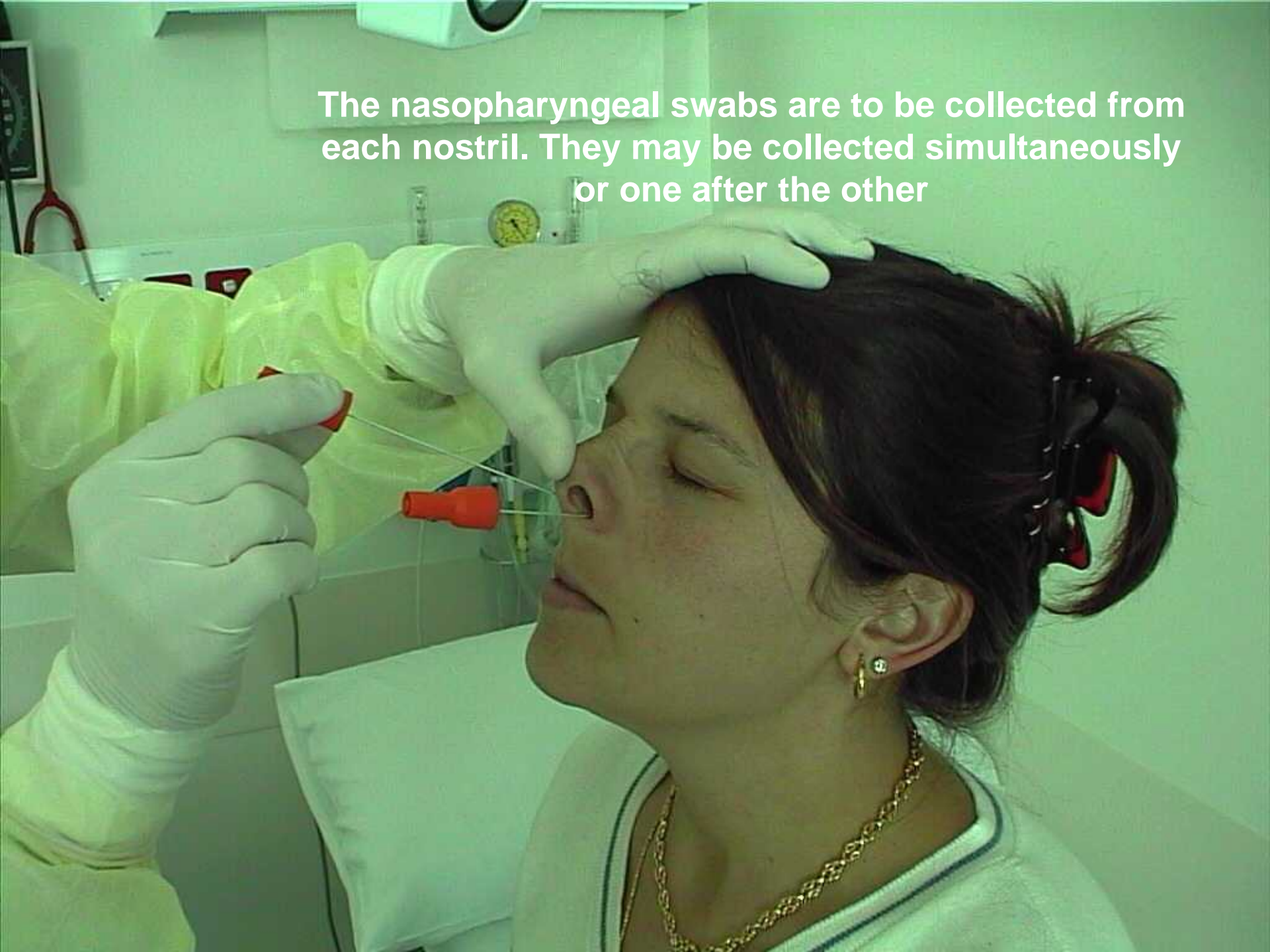
The first swab is collected from the nasopharynx – remember the nasal cavity goes “back” not “up”



The nasopharyngeal swab needs to be gently inserted to the back of the nose (to the nasopharynx)

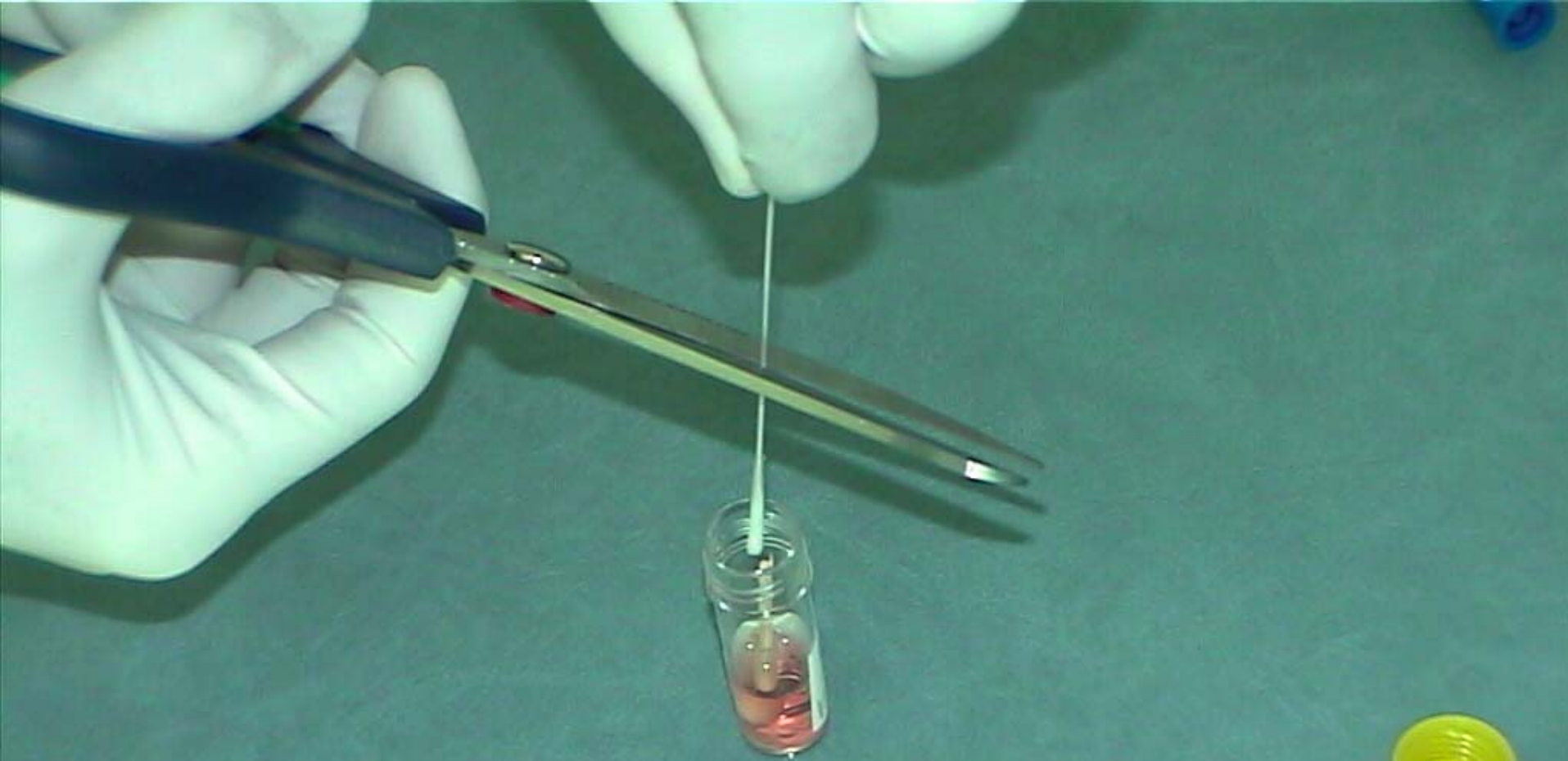


The nasopharyngeal swabs are to be collected from each nostril. They may be collected simultaneously or one after the other



The throat swab needs to be thoroughly applied to the back of the throat and pharynx to collect sufficient specimen





The swabs may be sent dry direct to the laboratory. If there is a delay in transport (>24hours) then all three swabs should then be placed in viral transport medium (kept in the ward fridge) by cutting/breaking off the tips into the container

Note: Scissors need to be cleaned between each patient to reduce cross contamination

The specimen should then be sealed, labelled with patient's details, placed in a biohazard bag and transported to the laboratory without delay.

Notify the laboratory that the specimen has been collected as part of the Border Control measures or if the patient is severely ill.

For all other pathology specimens, label appropriately to indicate ?Swine Flu (not seasonal influenza) and forward to the laboratory.

