

Nasopharyngeal (nose) & Oropharyngeal (throat) Swab Collection

1. Purpose

Screening for COVID-19.

2. Required Pathology

Naso pharyngeal **and/or** oropharyngeal specimen should be taken for diagnosis.
The swabs may be dry or flocced with or without Viral Transport Medium/Liquid Amies Medium.

A single swab is to be collected (combined nasopharyngeal swabs and oropharyngeal) for both COVID-19 and respiratory virus multiplex tests (if required).

If the patient has a productive cough it is recommended a sputum specimen is collected. Discuss with the treating clinician.

3. Equipment

Swab

If viral medium not available, send as a dry specimen (see above)

Do not use calcium alginate swabs or swabs with wooden shafts.



Biohazard Bag

Pathology request form: COVID-19 PCR

Hand sanitiser

Tongue depressor

PPE (Essential)

- goggles / protective eyewear
- apron/gown
- mask
 - surgical mask in community settings,
 - P2 for patients with severe symptoms suggestive of pneumonia*
- gloves (non-sterile)

*likely to be managed in hospital setting



Cleaning products: Detergent wipes followed by disinfectant wipes.

A one-step detergent/chlorine-based product may also be used.

4. Taking the specimen

Explain to patient/carer that the insertion of the swab to the back of the nose may produce mild but short lived discomfort.

Explain the sequence of sampling—nostrils first then the throat swab will be taken.

Discuss with the patient how & when they will be informed of the results.

Patient should not blow their nose prior to procedure.

Perform hand hygiene before donning personal protective equipment.

Nose (nasopharyngeal) Swab

Stand slightly to the side to avoid exposure to droplets should the patient sneeze or cough.

Tilt the patients head back gently and steady by holding the chin.



Gently insert the swab into the nostril until resistance felt.

Gently rotate for 10-15 seconds.

Withdraw and repeat the process in the other nostril.

Throat (oropharyngeal) swab

Ask the patient to open their mouth and stick out their tongue

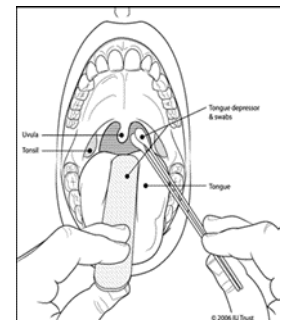
Use a tongue depressor to create easy access to the back of the throat

Swab the tonsillar beds and the back of the throat, avoiding the tongue.

Place swab into transport tube.

At completion of procedure remove PPE and perform hand hygiene

Clean and disinfect contaminated surfaces.



5. Documentation

Label the pathology request form and the sample with patient identifiers:

- Surname, First Name
- Date of Birth and/or UR Number
- Date & Time of Collection
- Signature of the Collector
- Ward/Hospital/Clinic (where applicable)

Complete the pathology request form—COVID-19 PCR & send to VIDRL.

Transported as routine diagnostic sample (Biological sample Category B) to Victorian Infectious Diseases Reference Laboratory, 792 Elizabeth St. Melbourne, 3000)

Record in the patient's medical record/notes

6. Reference

<https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19> (Retrieved 18th March 2020)