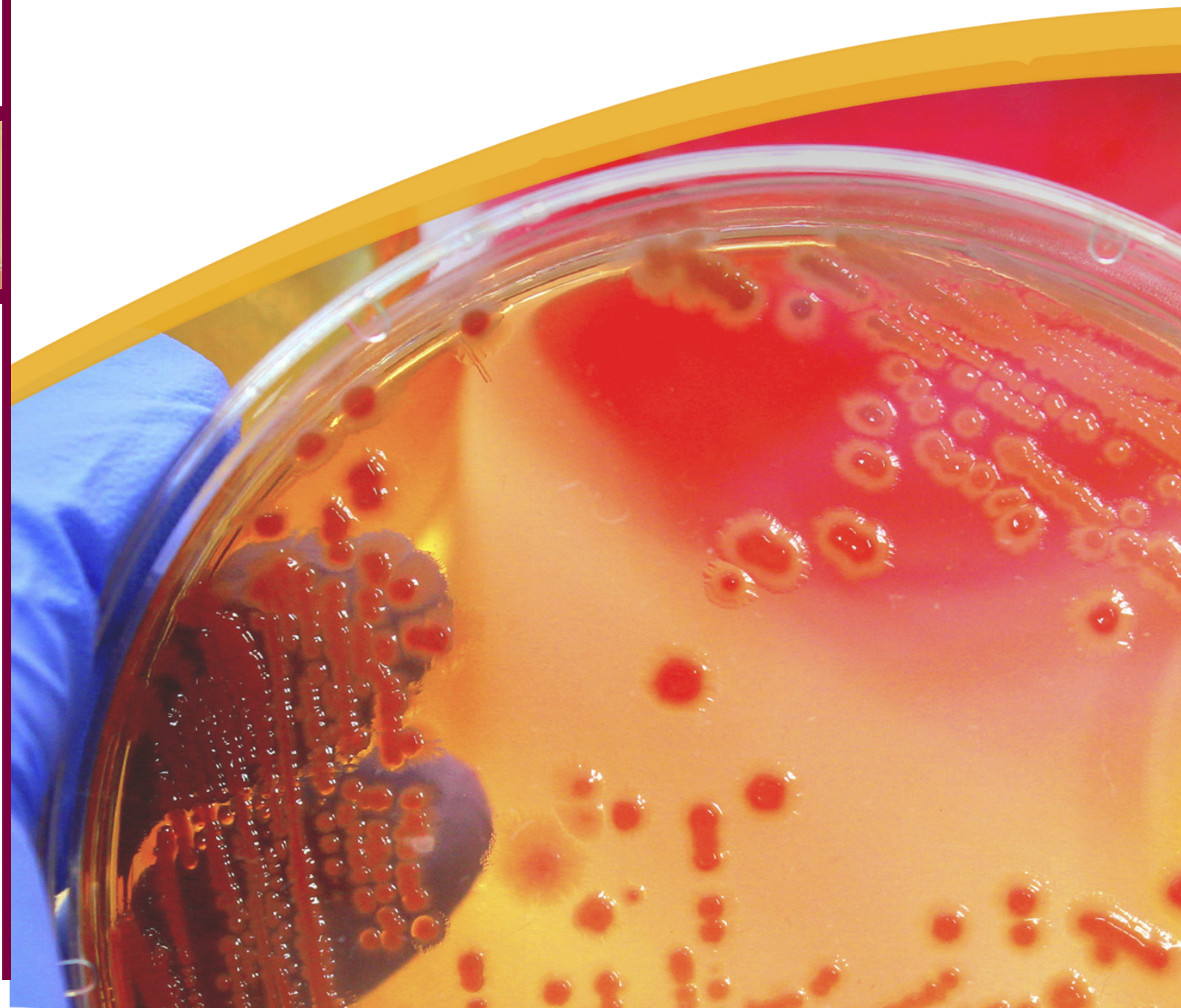




Health Network
LABORATORIES®

SPECIMEN COLLECTION & TRANSPORT GUIDE



Health Network
LABORATORIES®

794 Roble Road • Allentown, PA 18109-9110

Toll Free: (877) 402-4221

www.healthnetworklabs.com

Health Network Laboratories is an Equal Opportunity Employer

4/2016

X:\Marketing_Collateral Files\Microbiology\Micro Collection Guide 2016\Collection Guide 2016



BacT/Alert Bottles (Purple & Blue)

Use for: Routine Bacterial Blood culture (BC)
Adult 10 ml in each bottle (20 ml total)
Children Blue Capped Bottle. 1-10 ml in aerobic bottle ONLY



Isolator Tube

Use for: Blood Cultures
• Mycobacteria AFB, TB complex (BIT), MAI (BIT)
• Fungus (BIF)



Red Top Vacutainer

Use for: Fluids Collection
• Aerobic Fluid culture (FLU)
• Anaerobic Fluid Culture (AN)
• Crystals Fluid (FCRY)



FILL TO LINE ONLY

O & P Para-Pak Pink and Grey Capped Vials

Use for:
• Ova & Parasites (OP)
Use for: Tapeworm, Nematodes, Trematodes
• Stool for WBC's (SWB)
• Stool for Giardia/Cryptosporidium (GIAG)



SEND SPECIMENS ON ICE

Sterile Specimen Cup

Use for:
• Clostridium difficile (CDPCR) non-formed stool ONLY.
• Dialysis Fluids (100 ml) (CAPD)
• Hair, Nails, or Skin Scrapings or dermatophyte culture (MYD)
• Sputum, bacterial, TB or fungus (SPUTM, TB, MYR)
• Stool for WBC's (SWB)
• Tissue - Aerobic or Anaerobic, TB or fungus (TI, AN, TB, MYR)
• Urine for AFB, TB (50 ml, 1st AM specimen) (TB)
• Urine for Fungus (50 ml) (MYR)
• Urine for CMV (RCMV)



Urine Collection Tube Kit

Use for: Bacterial Urine Culture from foley (UR)
MUST be filled at least to minimum fill line
KIT DOES NOT CONTAIN URINALYSIS TUBE OR COLLECTION CUP



FILL TO LINE ONLY

Para-Pak C&S Vial Orange Capped (CaryBlair media)

Use for:
• Bacterial Stool Pathogen Panel (BSPCR) - Includes: Salmonella, Shigella/enteroinvasive E coli, Campylobacter, Plesiomonas, Yersinia, Vibrio, Shiga toxin, C.diff
• Virus Stool PCR (VSPCR) - Includes: Adenovirus, Astrovirus, Norovirus, Rotovirus, Sapovirus
• Parasite Stool PCR (PSPCR) - Includes: Cryptosporidium, Cyclospora, Entamoeba histolytica, Giardia
• Comprehensive Stool PCR (CSPCR) - Includes: all of the above organisms
• Bacterial Stool 4 pathogen PCR panel (MFEST) - Salmonella, Shigella, Shiga Toxin, and Campylobacter
• Stool for WBC's (SWB)
• Stool culture, Salmonella/Shigella only (FESS)



APTIMA™ Unisex Swab Collection Kit (purple lettering)
Use for: collection and transport of swab specimens from
• **Male** urethral specimens & **Female** cervical specimens
Amplified N. gonorrhoeae (GCTMA)
Amplified Chlamydia trachomatis (CTTMA)
Amplified Trichomonas (TRTMA)
Oral/Throat or Ocular (corneal/conjunctiva) OR
Rectal/Anal (MCRNA)

APTIMA™ urine collection kit (yellow tube)
Use for: urine transport
Amplified N. gonorrhoeae (GCTMA)
Amplified Chlamydia trachomatis (CTTMA)
Amplified Trichomonos (TRTMA)



SEND ON ICE

UNIVERSAL TRANSPORT MEDIA

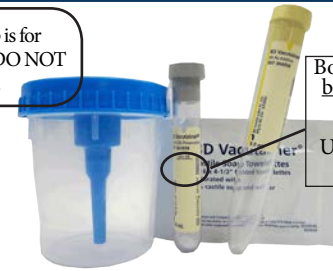
Use for: Viral Specimen to include:
• Herpes Simplex Without typing (HSVCR)
With typing (HSVCT)
• Influenza A + B + RSV (FLABR)(in season only)
• Respiratory Profile (RPPPR) (Influenza, RSV, Parainfluenza, Metapneumovirus, Rhinovirus Adenovirus, Coronavirus, Bocavirus, Chlamydomphila pneumonia, Mycoplasma pneumoniae)
• Rapid CMV culture (RCMV)
• Skin Viral Cultures includes:
Herpes Simplex w/ typing & Varicella (SKVC)
• Varicella - Zoster Culture (VZVC)
• Bordatella, PCR (BPPCR)
See handbook for additional Viral Cultures

VARICELLA DFA
Obtain collection kit containing slides from lab
• Varicella-Zoster DFA (VZDFA)



Affirm™ Collection Kit
Use for: Vaginal swabs (VGDNA)
*Dispense transport reagent into tube before inserting swab
Only for detection of:
• Candida species
• Gardnerella
• Trichomonas

Blue capped cup is for collection ONLY. DO NOT send to lab.



Boric Acid tube **MUST** be filled to minimum fill line.

Under-filled tubes are unacceptable

Boric Acid Tube

MUST be filled at least to minimum fill line

Use for:
• Routine Bacterial Urine Culture (UR)
• Indicate if from Foley, straight catheter, or clean catch.
• DO NOT USE for Urine for AFB or Fungus

Conical Bottom Tube

Use for:
• Urinalysis (Send separate specimen for Urine Culture)
• DO NOT SEND Urine in blue capped collection cup.

SWAB COLLECTION

1. Specify source on requisition slip
2. Use 1 Swab for each test ordered



Blue Cap Culture Swab or Red Cap Swab ACCEPTABLE
Use for: Collection of specimens from a site where **NO** fluid or tissue can be collected.
• Aerobic Wound Culture (WO)
• Beta Strep Group B PCR (BSBP)
• Fungal Genital Culture (FGE)
• Genital Culture (GE)

Blue Cap Culture Swab ONLY
• Anaerobic Wound Culture (AN)

Red Cap Culture Swab ONLY
Use for:
• Catheter Tip Culture (CAT) (discard swabs and place catheter tip on top of sponge)
• MRSA screen, PCR (MRSAP)
• Throat, Group A Strep by culture (TH) or PCR (SADNA)