

Newfoundland & Labrador

PROVINCIAL PUBLIC HEALTH LABORATORY NETWORK

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To: All Staff in each Regional Health Authority

From: Provincial Public Health Laboratory - Office of the Director, Dr. George Zahariadis

Re: *UPDATED* Nasopharyngeal swabs for COVID-19 virus and other respiratory pathogen testing

April 16, 2020

Dear Colleagues:

Due to prior nasopharyngeal swab (NPS) shortages, other swab types (ie: eSwabs, COBAS Dual Swabs) were used as substitutes with a modified collection technique of a deep throat and anterior nares.

NPS stocks are now becoming replenished so the use of alternate swab types and collection from throat/nares can cease effective immediately once FLOQ swab kits are received.

Standard nasopharyngeal collection can resume, as per attached instructions and illustration using the new transport container, eNAT (see attached picture) on adults and children. The clear solution in the

tube inactivates the pathogens while stabilizing the DNA/RNA at room temperature. This is distinct from the previously and commonly used UTM FLOQ swab kits (red top tubes) that if/when used, the UTM must be refrigerated during transportation following collection. To avoid the risk of compromising



specimens, kindly refrigerate all collected FLOQ NPS specimens to maintain consistency.

Specimen Identification based on patient location and symptoms:

To optimize specimen stream workflow, ordering staff should identify on the specimen tube <u>AND</u> in Meditech *or* on the lab requisition as follows:

IP: Inpatients, ER: ER patients, HCW: Health Care Workers, OP: Outpatients, RC: Residential Care*

<u>AND</u> if either:

ASY: Asymptomatic

SYM: Symptomatic

NOTE: If the patient is presenting with lower respiratory tract infection i.e. pneumonia, a lower respiratory tract specimen may be more appropriate to collect. For guidance, please consult clinical infectious diseases through hospital locating at 709 777-6300.

*Residential Care: Long term care, Personal Care home, Group Homes, Prisons, Outpatients who are frequently visiting a health care facility i.e. dialysis, cancer care, day procedure



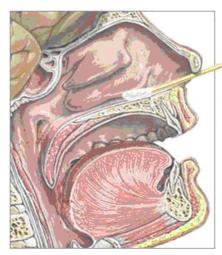






Instructions for Collection of Nasopharyngeal Swab

- 1. Use a NON-EXPIRED FLOQ swab supplied with the collection transport media.
- 2. With LEGIBLE PRINTING, label tube as outlined on the first page.
- 3. Explain the procedure to patient.
- 4. Collector is to wear PPE as per site Infection Control policy.
- 5. If the patient has a lot of mucus in the nose, this can interfere with the collection of cells. Either ask the patient to use a tissue to gently clean out visible nasal mucus or clean the nostril yourself with a cotton swab (e.g. Q-Tip).
- 6. How to estimate the distance to the nasopharynx: Prior to insertion, measure the distance from the corner of the nose to the front of the ear and insert the shaft approximately 2/3 of this length.
- 7. Seat the patient comfortably. Tilt the patient's head back slightly to straighten the passage from the front of the nose to the nasopharynx to make insertion of the swab easier.
- 8. Insert the swab along the medial part of the septum, along the floor of the nose, until it reaches the posterior nares; gentle rotation of the swab may be helpful. (If resistance is encountered, try the other nostril; the patient may have a deviated septum.)
- 9. Allow the swab to sit in place for 5-10 seconds.
- 10. Rotate the swab several times to dislodge the columnar epithelial cells. *Note: Insertion of the swab may induce a cough.*
- 11. Withdraw the swab and place it in the collection tube. Break swab shaft along score line. Replace cap securely.
- 12. Place tube in biohazard bag.
- 13. Remove gloves and wash hands.
- 14. Attach completed requisition.
- 16. Arrange refrigerated transport to the PHML which is open 24/7 to accept specimens.



A sterile swab is passed gently through the nostril and into the nasopharynx

For a video on collection of an NP swab please see: http://www.youtube.com/watch?v=TFwSefezIHU