

COVID-19 Specimen Collection Guidance

Acceptable Specimen Types

Specimen Type	Collection options	Collection Process
Nasopharyngeal (NP) swab	Healthcare professional	Insert minitip swab with a flexible shaft (wire or plastic) through the nostril parallel to the palate until resistance is encountered or the distance is equivalent to that from the ear to the nostril of the patient, indicating contact with the nasopharynx. Swab should reach depth equal to distance from nostrils to outer opening of the ear. Gently rub and roll the swab. Leave swab in place for several seconds to absorb secretions. Slowly remove swab while rotating it. Specimens can be collected from both sides using the same swab, but it is not necessary to collect specimens from both sides if the minitip is saturated with fluid from the first collection. If a deviated septum or blockage create difficulty in obtaining the specimen from one nostril, use the same swab to obtain the specimen from the other nostril.
Oropharyngeal (OP) swab	Healthcare professional	Insert swab into the posterior pharynx and tonsillar areas. Rub swab over both tonsillar pillars and posterior oropharynx and avoid touching the tongue, teeth, and gums
Nasal mid-turbinate swab	Healthcare professional or supervised self-collection	Use a flocked tapered swab. Tilt patient's head back 70 degrees. While gently rotating the swab, insert swab less than one inch (about 2 cm) into nostril (until resistance is met at turbinates). Rotate the swab several times against nasal wall and repeat in other nostril using the same swab.
Anterior nares/nasal swab	Healthcare professional or self-collection	Using a flocked/spun polyester swab or a round foam swab, insert the swab at least 1 cm (0.5 inch) inside the nostril (naris) and firmly sample the nasal membrane by rotating the swab and leaving in place for 10 to 15 seconds. Sample both nostrils with same swab.
Nasopharyngeal wash/aspirate or nasal wash/aspirate	Healthcare professional	Attach catheter to suction apparatus. Have the patient sit with head tilted slightly backward. Instill 1 mL-1.5 mL of non-bacteriostatic saline (pH 7.0) into one nostril. Insert the tubing into the nostril parallel to the palate (not upwards). Catheter should reach depth equal to distance from nostrils to outer opening of ear. Begin gentle suction/aspiration and remove catheter while rotating it gently. Place specimen in a sterile viral transport media tube.

Swab Specimen Requirements:

- All swabs must be placed immediately after collection into a sterile transport tube containing 2-3mL of either viral transport medium (VTM), a Universal Transport Medium appropriate for viruses Amies transport medium, or sterile saline.
- Swabs must be sterile. If the applicator handle requires additional trimming, the trimming should be performed with a sterile pair of scissors to prevent contamination of the sample.
- Do not use calcium alginate swabs or swabs with wooden shafts, as they may contain substances that inactivate some viruses and inhibit PCR testing

Nasal wash/aspirate Requirement:

- The NW specimen and the non-bacteriostatic saline used to collect the specimen should be placed immediately into a sterile transport tube.

Specimen Handling

- Refrigerate all specimen types at 2-8°C after collection and up to 72 hours after collection. If a delay in testing or shipping is expected, store specimens at -70°C or below.
- Label each specimen container with the patient's first and last name, patient's date of birth, specimen date of collection, and specimen type.
- Complete the MSDH SARS-CoV-2 test requisition (form 1198). The requisition and the specimen container must have matching information for the patient's name and date of birth to be acceptable.