



**URMC
LABS**

To: Outpatient Clients of URMCLabs

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Subject: Chlamydia amplification collection swab modification

On May 3, 2010, the Clinical Microbiology Laboratory will be utilizing instrumentation requiring new collection devices for Chlamydia amplification. Although amplification of GC can also be performed, we recommend culture for GC due to its greater specificity, i.e., culture is less prone to false-positive results; a separate specimen collected on a culturette-type swab should be submitted for GC culture.

New collection devices can be obtained from Client Services via order form or by calling 585-350-2600 option 3 after April 30th, 2010.

Female endocervical collection swab and transport: 441357

Male urethral collection swab and transport: 441358

****Discard old collection devices once you have the new items-old collection devices will not be accepted after July 1, 2010****

Collection review

Female Endocervical Swab:

1. Remove excess mucus with **white shafted cleaning swab** and discard this swab
2. Insert the **pink shafted Endocervical Swab** into the cervical canal and rotate for 15-30 seconds
3. Place swab in transport tube, break shaft at score line, screw cap firmly onto tube
4. Label transport tube with patient name, secondary identifier and date/time collected
5. Place into a zip-locked biohazard transport bag (refrigerate or room temperature)

Male Urethral Swab:

1. Insert the Male Urethral Swab 2-4 cm into the urethra. Rotate for 3-5 seconds.
2. Place swab in tube, break shaft at score line, screw cap firmly onto tube
3. Label transport tube with patient name, secondary identifier and date/time collected
4. Place into a zip-locked biohazard transport bag (refrigerate or room temperature)

Urine (Adolescent Screen):

Cervical or urethral swab specimens are the recommended specimens for amplification tests; urine is recommended only when a patient is not being physically examined.

1. Patient should not urinate for at least one hour prior to collection.
2. Patient should collect the **first** 15-60 mL of voided urine (**first-NOT clean catch**) into a sterile preservative-free collection cup. Secure lid on collection cup
3. Label tube with patient name, secondary identifier and date/time collected.
4. Place into a zip-locked biohazard transport bag; refrigerate specimen until transported to the laboratory.

Questions? Concerns?: Contact Dr. Hardy by email or phone (see above).