

<p>Abscess: closed or open, cellulitis, eye exudate, tissue, skin lesion</p>	<ul style="list-style-type: none"> ● Collection <ul style="list-style-type: none"> - Closed <ul style="list-style-type: none"> ○ Remove surface exudate by wiping with sterile saline or 70% alcohol. ○ Collect fluid abscess material with a Luer tip syringe and remove tissue aseptically. - Open <ul style="list-style-type: none"> ○ Aspirate material from under the lesion or abscess margin, if possible. ● Transport <ul style="list-style-type: none"> - Transport fluid abscess material in a sterile, leak-proof container. - Transport tissue in 2-3 mL sterile saline in a sterile, leak-proof container. - Do not transport specimens in swab transport device or gel-based medium. ESwab is acceptable. - Transport specimens at ambient temperature. - Refrigerate specimens if transport is delayed for more than 1 hour. ● Storage: Refrigerate. Do not freeze. ● Comments <ul style="list-style-type: none"> - Tissue (at least 1g, if possible) or fluid is preferred. - A swab is strongly discouraged unless it is the only specimen available.
<p>Body fluids: abdominal, ascites, bile, joint, paracentesis, pericardial, peritoneal, pleural, synovial, thoracentesis</p>	<ul style="list-style-type: none"> ● Collection: Minimum of 2 mL in sterile container. Recommended volume: 15 mL ● Transport: As soon as possible at room temperature in sterile, leak-proof container. ● Storage: Refrigerate. Do not freeze. ● Rejection: Specimen volume <2 mL
<p>CSF</p>	<ul style="list-style-type: none"> ● Collection: Minimum 2 mL. Optimum volume: 10 mL. ● Transport: As soon as possible at room temperature in sterile, leak-proof container. ● Storage: Refrigerate. Do not freeze. ● Rejection: Specimen volume <2 mL
<p>Gastric lavage or wash</p>	<ul style="list-style-type: none"> ● Collection: <ul style="list-style-type: none"> - Collect early morning before patient eats and while they are still in bed. - Perform lavage with 25-50 mL chilled, sterile, distilled water. - Max volume: 15 mL - Limit replicates to 1 per day on 3 consecutive days ● Transport: <ul style="list-style-type: none"> - Transport in sterile, leak-proof container at ambient temperature. ● Storage: Room Temperature ● Rejection: Specimen has not been neutralized within 1 hr of collection.

<p>Respiratory (lower): BAL, brush or wash, endotracheal aspirate, transtracheal aspirate, tracheal aspirate.</p>	<ul style="list-style-type: none"> • Collection: <ul style="list-style-type: none"> – Minimum volume: 3 mL – Place brushes in a sterile, leak-proof container with up to 5 mL sterile saline. • Transport: <ul style="list-style-type: none"> – Transport in sterile, leak-proof container at ambient temperature. • Storage: Refrigerate. • Rejection: Specimen volume <3 mL
<p>Sputum (expectorated or induced)</p>	<ul style="list-style-type: none"> • Collection: <ul style="list-style-type: none"> – 5-10 mL sputum in a sterile container. Minimum: 3 mL – Do not collect nasopharyngeal discharge or saliva. – Limit replicates to 3 specimens collected consecutively in 8 to 24 hour intervals, with at least one being an early morning collect. Early morning sputum is preferred. • Transport: <ul style="list-style-type: none"> – Transport in sterile, leak-proof container at ambient temperature. • Storage: Refrigerate. • Rejection: Specimen volume <3 mL
<p>Stool</p>	<ul style="list-style-type: none"> • Collection: <ul style="list-style-type: none"> – Pass the specimen directly into a sterile, leak-proof container. – Do not use holding or transport medium or preservatives. – Minimum amount: 1 g. • Transport: <ul style="list-style-type: none"> – Transport specimens in a sterile, leak-proof container. – Transport specimens as soon as possible at ambient temperature. • Storage: If transport is delayed for more than 1 hour, refrigerate the specimen. Do not freeze stool specimens. • Rejection: Specimen received in PVA, formalin, or other preservative, rectal swabs.
<p>Tissue or lymph node</p>	<ul style="list-style-type: none"> • Collection: Submit as much tissue as possible • Transport: Transport in a sterile, leak-proof container containing 2-3 mL sterile saline at ambient temperature. • Rejection: Specimen submitted in fixed formalin or other preservative.
<p>Urine</p>	<ul style="list-style-type: none"> • Collection: <ul style="list-style-type: none"> – Collect approx. 40 mL urine (midstream). First morning specimen is preferred. – Do not use preservatives – Do not pool urine specimens. – Use catheterization only if a midstream sample cannot be obtained. – Minimum volume: 10-15 mL – Replicate specimens should be limited to 1 specimen per day on 3 consecutive days.

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| | <ul style="list-style-type: none">• Transport: Transport in sterile, leak-proof container at ambient temperature.• Storage: Refrigerate. |
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