Urine Collection for Chlamydia and Gonorrhoeae NAAT Testing

Specimen Collection and Handling:

1. The patient should not have urinated for at least 1 hour prior to specimen collection.
2. Direct patient to provide a first-catch urine (approximately 20 to 30 mL of the initial urine stream) into a urine collection cup free of any preservatives. Collection of larger volumes of urine may result in specimen dilution that may reduce test sensitivity. Female patients should not cleanse the labial area prior to providing the specimen.
3. Remove the cap and transfer 2 mL of urine into the urine specimen transport tube using the disposable pipette provided. The correct volume of urine has been added when the fluid level is between the black fill lines on the urine specimen transport tube label.
4. Re-cap the urine specimen transport tube tightly. This is now known as the processed urine specimen. Transport specimen as soon as possible.

LIMITATIONS

1. Use this collection kit only with the GEN-PROBE® APTIMA® Assays. Performance has not been established with other products. Do not apply the transport medium directly to skin or mucous membranes or take internally.
2. Do not use gray top vacutainers for urine specimens with this test request.

ANAEROBIC CULTURES

• The best specimen for anaerobic culture is obtained by using a needle and syringe. Do not transport material for culture with a needle attached to a syringe. Transport in a syringe may be used only if hand-transported and only without a needle attached. Transfer aspirated material into a Port-a-cul fluid vial. Large amounts of purulent material may be transported in a sterile screw-capped tube if transported immediately.
• Tissues and biopsies are also acceptable for anaerobic culture. Tissue biopsies, tissue samples, and curettings may be placed into Port-a-cul tissue jars or sterile screw-capped containers. Screw capped containers must be transported to the laboratory within 20 minutes of collection for proper processing.
• When a swab is used to collect a specimen, the swab must be placed into a Port-a-cul vial. The swab is left in the vial.
• Special care must be taken to sample the active site of infection when a swab is used. SWABS DO NOT GIVE OPTIMAL RESULTS. Swabs should not be routinely used. Send aspirated fluid or tissue in an anaerobic transport container whenever possible.
• Avoid storing the specimen in extremes of heat or cold. If delays are unavoidable, hold the specimen at room temperature until able to transport.

MYCOBACTERIAL CULTURES

• Use a sterile, leak-proof container. Do not use waxed containers.
• Collect initial specimens aseptically and before the initiation of antimicrobial therapy.
• SWABS CANNOT BE USED TO CULTURE FOR MYCOBACTERIA.
• If specimens are delayed in transit, they should be refrigerated or kept on wet ice. Freezing of specimens may decrease the yield.
- 24-hour collections are not acceptable.
- For sputum specimens, at least 5-10 ml is necessary for adequate assessment.
- For urine specimens, collect the first morning specimen.
- For blood and bone marrow, collect in a BacT/Alert MB bottle.

**YEAST AND FUNGUS CULTURES**
- Collect specimens aseptically; place into sterile containers and transport to the laboratory within 2 hours of collection. Delay in transit will decrease viability of possible pathogens.
- The use of swabs is discouraged; however, certain body sites cannot be sampled with other collection devices. Keep in mind that swabs of open wounds and drainages may be contaminated with environmental microbiota.
- If processing is to be delayed more than several hours, store specimens as listed below:
  - Blood at room temperature
  - CSF at room temperature (25°C)
  - Dermatological specimens at 15-30°C
  - Refrigerate all other specimen types.
- Generally, fungal slants are inoculated at the bedside for bone marrow aspirates. Hold at 25°C (room temperature) until transported. Transport as soon as possible.
- For blood culture of yeasts, use routine blood culture bottles. For filamentous fungi, collect blood in an Isolator tube.

**VIRAL PCR TESTING**
- For best correlation with a particular disease, the specimen should reflect the target organ whenever possible. Collect specimens as soon as possible after the onset of symptoms. The chance of viral recovery is best during the first 3 days after onset and is greatly reduced with many viruses beyond 5 days.
- Place swabs, scrapings and small pieces of tissue into transport media and transport to laboratory on wet ice. The Virology Laboratory (262-3488, Room C135) provides transport media. Note - do not dilute CSF in viral transport.
- See site specific specimen collection procedures below.

Transport samples to the laboratory as soon as possible after collection, ideally, transport on wet ice. With delays in transport, refrigeration is a viable alternative. Do not freeze specimens before analysis since it compromises the viability of the infecting agent.