

MCGILL UNIVERSITY HEALTH CENTRE

MEMORANDUM

DATE: May 16, 2016

TO: General Distribution MUHC and External Clients

FROM: Dr. Marcel Behr,

Microbiologist-in-Chief

RE: REVISED - Chlamydia trachomatis and Neisseria gonorrheae PCR (CT/NG)

Effective <u>immediately</u>, although not included in the package insert, the Microbiology Laboratory will accept rectal and oropharyngeal swabs using the "female genital" collection kit for the *Chlamydia trachomatis* and *Neisseria gonorrhoeae* testing platform.

Specimen collection procedures (remain the same).

- 1. <u>Males</u>: The acceptable specimen is a urine sample and the patient should not have voided for at least 1 hour prior to collection. There is <u>no</u> urethral swab kit. Urine specimens must be sent using the appropriate collection kit. This kit contains a pipette for transferring the correct amount of urine from a sterile container into the collection tube that contains the transport media. This must be done <u>prior</u> to transporting the specimen to the lab.
- 2. <u>Females</u>: Although both endocervical and vaginal swabs are acceptable, endocervical swabs are preferred because of increased sensitivity over vaginal swabs for pathogen detection. Use the "Female specimen" kit when taking endocervical or vaginal specimens. Instructions for vaginal swab collection can be found on the collection kit. The swab must be <u>LEFT INSIDE</u> the specimen collection tube with the swab tip broken off at the scored line on the shaft.
- 3. <u>MUHC Wards and Clinics:</u> Please note that a special collection and transport kit is required and can be obtained from Stores (Urine kit-MMS 55-05-091904; Female kit-MMS 55-02-091905).
- 4. **External Clients**: The urine or female collection kits can be purchased from Roche Molecular Diagnostics at 450-686-7050, extension 2157.

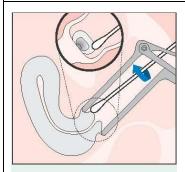
Specimens in the proper collection tube are stable for approximately 7 days at room temperature. Consult with the Microbiology lab if you need information on proper specimen procurement.



Guide for Endocervical and Urine Sample Collection

For Chlamydia trachomatis and Neisseria gonorrhoeae

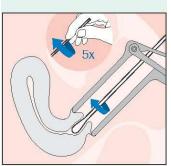
ENDOCERVICAL SAMPLE



1. CLEAN:

Using one of the swabs provided, remove excess mucus from the cervical os and surrounding mucosa.

Discard the swab after use. If required, use more than one swab.

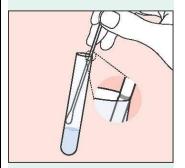


2. COLLECT:

Insert a new clean swab into the endocervical canal.

Gently rotate the swab 5 times in one direction.

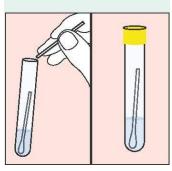
Carefully withdraw the swab.



3. ALIGN:

Open the cobas® PCR Media tube.

Lower the swab specimen into the tube until the visible dark line on the swab shaft is aligned with the tube rim. The tip of the swab should be just above the media surface.



4. BREAK & CAP:

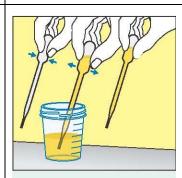
Carefully leverage the swab against the tube rim to **break** the swab shaft at the dark line. Discard the top portion of the swab.

Tightly re-cap the tube.



The specimen is now ready for transport.

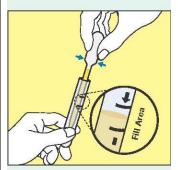




1. COLLECT:

Prior to sampling, the patient should not have urinated for at least one hour.

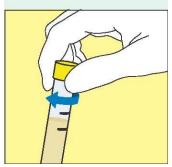
Ask the patient to provide the **first catch urine** (10-50ml) into a urine collection cup.



2. PIPET:

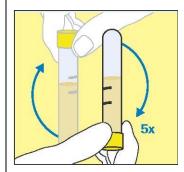
Use the provided disposable pipet to transfer (within 24 hours) the urine into the cobas® PCR Media tube.

The correct volume of urine has been added when the fluid level is between the two black lines on the tube label.



3. CAP:

Tightly re-cap the cobas® PCR Media Tube.



Urine:

4. MIX:

Invert the tube 5 times.

5. LABEL THE SPECIMEN AND PLACE IN BIOHAZARD BAG.

The specimen is now ready for transport.

Transport Temperature: between 2°C and 30°C **Stability of sample:** 7 days

THE SPECIMEN WILL BE REJECTED IF THERE IS:

Endocervical:
-Presence of two swabs within the same tube

-No swab within the tube -Excess of blood (>5%)

-Inadequate volume (insufficient or excess) -Excess of blood (>0.35%) Adapted from:

