

RT-PCR Diagnostic Test Specimen Collection Instructions

Collection Site Preparation

1. Please note that specimens for RT-PCR nucleic acid testing are not being collected by Aegis Specimen Collectors. Specimens may be collected by or under the supervision of properly trained medical professionals in accordance with federal and state-level requirements.
2. The collection site must have all the supplies needed to complete a specimen collection (e.g. collection kits, ink pens, Aegis Laboratory Request Forms, leak-resistant plastic bags, absorbent material, shipping containers, UN3373 Category B shipping labels (if shipping via [FedEx](#)), and appropriate personal protective equipment).
3. It is up to your organization to ensure that appropriate personal protective equipment (PPE) is available and that you have been trained in proper use prior to performing specimen collection. CDC defines recommendations for healthcare personnel involved in collecting specimens from patients here: <https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html>.
4. Ensure that there is a means for washing hands, suitable clean surface for the collector to use as a work area, and a secure temporary storage area for maintaining specimens until they are transferred to the laboratory.
5. Ensure access to collection supplies is restricted only to the collector(s)/donor(s) and other authorized personnel.

Laboratory Request Form Completion

Complete all fields of the Laboratory Request Form

Diagnosis Code(s)

NOTE: All requisitions must have a valid ICD-10 code provided by the physician to support the medical necessity of the order.

Diagnosis codes are 3-7 characters (e.g., U07.1). The first digit is alpha, 2nd and 3rd are numeric and 4-7 can be alpha and/or numeric.

1. Codes beginning with a numeric digit are not valid. All diagnosis codes must begin with a letter.
2. Examples of allowable codes: Z20.828; U07.1; J06.9; J12.9; J22; R05; R06.2; R50.9

Billing/Insurance Information

Obtain insurance information and ALWAYS validate it with the patient.

Mark the appropriate check box on the Laboratory Request Form.

Patient Information

Fill in patient's complete First Name, Middle Initial, Last Name, Sex, Date of Birth, Address, City, State, Zip Code, Phone Number, Email Address (if requested), Social Security Number, Race and Ethnicity.

Collector's Initials

Legibly write your initials in the box.

Date Collected

This is the Date of Service (DOS).

Specimen Type

Select the type of specimen collected.

Requesting Provider

Select the appropriate requesting provider (Choose only one). Write in name legibly if not pre-printed.

Sample Label

With the patient present and after completing the patient information, remove the label and place it on the side of the specimen device.

Provider Signature

Obtain the ordering provider's signature.

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1. Nasopharyngeal (NP), oropharyngeal (OP), or nasal swab specimens in viral transport media are all acceptable specimen types for RT-PCR nucleic acid testing by our laboratory.
2. Obtain and complete the applicable Laboratory Request Form. See previous section "Laboratory Request Form Completion."
3. Check the collection swab and viral transport media packaging to ensure the expiration date has not been exceeded. Do not use expired devices.



NOTE: Do not allow bleach to come into contact with PrimeStore Molecular Transport Medium® (MTM). PrimeStore MTM contains guanidine thiocyanate, which produces a dangerous chemical reaction that releases cyanide gas when exposed to bleach (sodium hypochlorite) or other halogenated chemicals.

PrimeStore MTM Manufacturer Info:

Longhorn Vaccines and Diagnostics LLC

1747 Citadel Plaza Ste 206, San Antonio, TX 78209

Telephone: USA (210) 826-0910 Email: info@lhnvd.com

4. Open the flocked swab container and remove the swab from its packaging and discard packaging. Do not lay the swab down or touch it on any surfaces before performing specimen collection. Collect the nasopharyngeal (NP), oropharyngeal (OP), or nasal swab (mid-turbinate or nares) specimens using standard clinical procedures. Per CDC guidelines for specimen collection, NP and OP specimens must be collected by a healthcare provider; mid-turbinate and anterior nares specimens may be collected by a healthcare provider or via supervised onsite self-collection. (<https://www.cdc.gov/coronavirus/2019-ncov/lab/guidelines-clinical-specimens.html>)
 - a. NP swab: Tilt patient's head back 70 degrees. Gently and slowly insert a swab with a flexible shaft (wire or plastic) through the nostril parallel to the palate (not upwards) 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 swab 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.
 - b. OP swab: 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.
 - c. Nasal swab (nasal mid-turbinate (NMT) swab or deep nasal swab): Tilt patient's head back 70 degrees. While gently rotating the swab, insert swab less than one inch (about 2 cm) into nostril parallel to the palate (not upwards) until resistance is met at turbinates. Rotate the swab several times against nasal wall and repeat in other nostril using the same swab.
 - d. Nasal swab (anterior nares): Insert the entire absorbent tip of the swab (usually ½ to ¾ of an inch (1 to 1.5 cm) inside the nostril and firmly sample the nasal wall by rotating the swab in a circular path against the nasal wall at least 4 times. Take approximately 15 seconds to collect the sample. Be sure to collect any nasal drainage that may be present on the swab. Sample both nostrils with same swab.
5. Following collection, open the cap of the viral transport media tube (PS-MTM) and insert flocked swab containing collected sample directly into the viral transport media tube. Break off excess swab handle at the indicated break-point and discard swab handle.
6. Place cap on viral transport media tube (PS-MTM) and close tightly.
7. Remove the label from the top of the Laboratory Request Form and place the label length-wise on the side of the tube – DO NOT wrap the label around the tube otherwise the barcode cannot be read.
8. Place the closed transport tube into the specimen bag with the absorbent pad.
 - a. Fold and place the completed Laboratory Request Form in the back pouch of the Aegis specimen bag.
9. DO NOT seal the Laboratory Request Form in the sealed part of the pouch with the primary specimen. It is important that the specimen be in one compartment and the paperwork in the other to avoid contamination of the requisition in the event of specimen leakage.
10. Seal the bag using the zip-top closure.
11. Place the sealed specimen bag(s) into a UN3373 labeled kit box provided (up to 5 samples per kit box). Place the kit box(es) with samples inside the UN3373 Category B clinical pack with FedEx return label affixed if you are shipping or into a convenience container for courier transport. Consult FedEx instructions for [Packaging UN 3373 Shipments](#) for additional shipping information.
12. Transport collected specimens to the laboratory within 24 hours of collection using the preprinted FedEx labels affixed to the UN3373 clinical pack provided by Aegis or through local courier pickup.
13. Call Client Services 800.533.7052 to schedule a FedEx or courier pickup.
14. Specimens are transported to the laboratory at room temperature.