PCR SWAB—*Candida auris*

SPECIMEN COLLECTION GUIDE

PREPARATION OF THE PATIENT

1. Follow your facility's procedure.

COLLECTION SAFETY AND PROCEDURE PRECAUTIONS

NOTE: Sagis Diagnostics strongly recommends that sample collectors use all proper precautions when collecting specimens, including following proper collection techniques to minimize the risk of transmitting infectious diseases.

1. C. auris can survive for weeks on plastic surfaces, has reduced susceptibility to quaternary ammonia disinfectants, and can colonize the skin of healthy individuals.
2. Therefore, strict BSL2 laboratory safety precautions must be followed, when working with this organism.
3. Specifically, it is recommended that testing is processed within the BSL2 biosafety cabinet, gloves and lab coats are required, and strong hand hygiene is enforced.
4. The use of disinfectants with the sporicidal claim, such as freshly made 10% bleach, is recommended for decontaminations after working with C. auris cultures.
5. Utilize/Wear all required PPE Supplies for collection.

MATERIALS NEEDED

- Use appropriate Sagis requisition form
- PPE Supplies
- Ryon tip swab or nylon-flocked swab
- BD ESwab® or Copan ESwab® collection and transport system

LABELING AND PAPERWORK

1. Fill out appropriate Sagis requisition form including pertinent clinical history and ICD-10 codes.
2. Complete the form and labeling, including:
   a. Ordering Physician's Name- Print provider's name and credentials (when applicable).
   b. Practice Information- Name of practice (when applicable).
   c. Patient Information (Required)
      i. Last Name & First Name- Verify that first and last name match with specimen, driver's license, and patient's attached demographics.
      ii. Patient's date of birth- Verify the DOB matches with specimen, ID, and patient's attached demographics.
      iii. Gender- Select gender.

d. Bill Type- One must be selected. If insurance is designated, insurance card should be attached to file.
e. Specimen Information (Required)
    i. Select the type of Specimen- *Candida Auris Surveillance by PCR*.
    ii. Collection Date, Initials and Time- Verify the collection date and time is within the appropriate stability time.
    iii. Stability- Transport immediately.
f. Insurance information and Diagnosis (ICD-10) Codes
g. Test Order
    i. The requested test(s) must be selected here and ICD-10 code.

3. Patient Acknowledgment
    a. The patient or a legal guardian MUST read, sign, and date the form.
    b. Failure to do so will result in immediate sample rejection.
4. Authorized Healthcare Provider Acknowledgement
    a. Have physician read statement of physician certification, and sign.
    b. Ordering physician must sign and date.
5. Documentation, Patient Protection, and Compliance
    a. Each specimen tube must have at least TWO forms of identification MATCHING the requisition form for the lab to process.
    b. Driver's license/state ID- copy both front and back.
    c. Insurance card(s)- copy both front and back of both primary and secondary insurance that is used by the clinic.
    d. Electronic/handwritten records- all patient records that are used by the clinic for medical history, medication list, insurance information.
    e. Only use black or blue ink (smudge-free) for writing on requisition forms and sample tubes.
    f. NEVER USE WHITE OUT or any corrective fluid on any sample tubes, requisition forms, billing information, or any information to be sent to the lab. This is a MAJOR violation.
    g. If a mistake was made on the requisition form or sample tube, correct it by making a single straight line thru the mistake, then write the correction, followed by your initial and the date.
    h. Never scribble or scratch out. All changes must be seen and documented.

COLLECTION INSTRUCTIONS AND TRANSPORT

Accurate labeling of specimens is crucial to ensuring exact reporting of patient results.

NOTE: The skin (specifically axilla and groin) appears to be the highest yield site to swab to identify patients colonized with C. auris.

Prior to Collection- Perform hand hygiene and wear appropriate personal protective equipment (PPE) as indicated by the patient's clinical care team (e.g., gloves, gown, mask).

1. Open the swab package by grasping the plastic at the opposite end from the soft tip.
2. Carefully remove the tube from its packaging, leaving the swab tip enclosed in the package to prevent contamination.
3. Pull the swab from its package, being careful not to touch the soft tip. Firmly rub the soft end of the collection swab across the indicated site at least 3-5 times. Single swab axilla and groin composite collection method:
    a. Rub both sides of the swab tip over the left axilla skin surface and then the right, targeting the crease in the skin where the arm meets the body (i.e., swab both armpits, swiping back and forth ~5 times per armpit).

b. With the same swab used on the axilla, rub both sides of the swab tip over the left groin skin surface, targeting the inguinal crease in the skin where the leg meets the pelvic region, and repeat with the right side (i.e., swab the skin of both hip creases swiping back and forth ~5 times per hip crease).

4. Remove the cap from the swab collection tube, then place the soft end of the collection swab into the tube. Be careful to keep the cap from touching any materials that may contaminate your sample.
5. Snap off the end of the swab at the marked line by bending the plastic handle against the edge of the transport media container.
6. Screw on the tube cap. You may need to adjust it until the snapped end of the swab slides into place in the center of the cap.
7. Write specimen information on the tube label or apply the patient identification label and fill the requisition form.
8. If immediate delivery or processing is delayed, then specimens should be at 2°C 25°C) and processed within 120 hours. The specimen is stable for 120 hours after collection at 2-25°C.

LIMITATIONS

Incorrect or no media, insufficient media, or wrong collection tube can limit interpretation.
Inadequate specimen can limit interpretation. Prolonged time from collection to receipt in lab can compromise specimen quality.

PACKAGING/HANDLING

1. Ensure everything is properly labeled according to aforementioned instructions.
2. Properly label and package any container used to transport specimen to alternate location in accordance with applicable local, state, and federal requirements.
3. To maintain sample integrity, the specimen must be collected in the most sterile and dust-free environment as possible.
4. After collection, transfer the collected sample to the laboratory within 24 hours due to clinical necessities and store in room temperature.

REJECTION CRITERIA

Specimens and requisition forms not meeting the standards for patient test management are subject to rejection due to the following **missing** information:

1. Patient's full name (first and last)
2. Patient Date of Birth
3. Patient signature
4. Unlabeled specimen
5. Patient name mismatch between requisition and sample
6. Sample received is incorrectly labeled or illegible
7. Specimens collected improperly
8. Failure to follow proper storage requirements
9. Failure to follow proper collection procedures
10. Specimen is of insufficient quantity/quality

11. Specimen is from unacceptable source or is the wrong sample type (swab/stool/urine)
12. Specimen was not received by the laboratory in a timely manner (collection date exceeds allowed days prior to receipt).
13. Leakage or damaged tubes
14. Incorrect transfer media
15. Any missing signatures, patient information, clinic information, and/or copies of the patient's driver's license and insurance card qualify as a sample rejection