






DECOMMISSIONING THE VIPER TESTING FOR <i>T vaginalis</i>	WHICH SWAB / SPECIMEN
---	------------------------------




Decommissioning of the BD Viper for *Chlamydia/N. gonorrhoeae* NAATs





Chlamydia/N. gonorrhoeae nucleic acid amplification testing (NAAT) on the BD Viper will no longer be available from 1st December. Please ensure you obtain Aptima collection kits from your local laboratory as soon as possible. Unused BD Viper collection kits should be returned to the laboratory. For further information, please contact Dr James Ussher (Clinical Microbiologist, Ph (03)4702924, email: james.ussher@sclabs.co.nz), Dr Antje van der Linden (Clinical Microbiologist, Ph (03)4702020, email: antje.vanderLinden@sclabs.co.nz), or Gayleen Parslow (Head of Department, Ph (03)4702954).

Testing for *Trichomonas vaginalis* infection

From the 1st of December the laboratory will no longer be culturing for *Trichomonas vaginalis* on vaginal swabs. Instead, testing will be performed by NAAT and will be available on request. Please provide clinical details. Specimens MUST be collected with the Aptima NAAT vaginal swab *Chlamydia/N. gonorrhoeae* collection kit (pink swab and orange tube). Both vulvovaginal (self- or physician-collected) and high vaginal swabs, can be tested. Testing for *T. vaginalis* can be performed on samples submitted for *N. gonorrhoeae/Chlamydia* testing. For further information, please contact Dr James Ussher (Clinical Microbiologist, Ph (03)4702924, email: james.ussher@sclabs.co.nz), Dr Antje van der Linden (Clinical Microbiologist, Ph (03)4702020, email: antje.vanderLinden@sclabs.co.nz), or Gayleen Parslow (Head of Department, Ph (03)4702954).

Test	Which swab/specimen	Notes
Routine bacterial culture (eg throat swabs, wounds, eyes, vaginal swab for BV or candidiasis)	Bacterial swab (purple top) 	<ul style="list-style-type: none"> • If >2 hours before transport to the laboratory, refrigerate at 4°C • If an abscess is drained, a sample of the pus is preferred to a swab
Culture for <i>B. pertussis</i>	Bacterial charcoal swab (blue top) of nasopharynx 	<ul style="list-style-type: none"> • Culturing for <i>B. pertussis</i> is only useful in the first 2 weeks of symptoms • A <u>nasopharyngeal</u> swab is collected by inserting the swab through the nose, horizontal with the hard palate, to the back of the nasopharynx • If >2 hours before transport to the laboratory, refrigerate at 4°C
PCR for <i>B. pertussis</i>	Orange floq swab (dry) of nasopharynx 	<ul style="list-style-type: none"> • Requires prior approval from a Clinical Microbiologist or the Medical Officer of Health
Culture for <i>N. gonorrhoeae</i>	<ul style="list-style-type: none"> • Urethral: Bacterial charcoal swab (blue top)  • Other sites (endocervical, eye, throat, rectal): Bacterial swab (purple top)  	<ul style="list-style-type: none"> • Symptomatic females: endocervical swab • Symptomatic males: urethral swab • Testing in asymptomatic patients or at extragenital sites: nucleic acid amplification test (NAAT) • Indicate on the request form if symptomatic or if NAAT positive

Test	Which swab/specimen	Notes
<p>NAAT testing for <i>Chlamydia</i> and <i>N. gonorrhoeae</i></p>	<ul style="list-style-type: none"> Vulvovaginal , cervical, throat, rectal, or eye: NAAT vaginal swab <i>Chlamydia/N. gonorrhoeae</i> collection kit (Aptima) (pink swab, orange tube)  <ul style="list-style-type: none"> First void urine: NAAT <i>Chlamydia/N. gonorrhoeae</i> urine collection kit (Aptima)  <p>*****Please note: other specimen types (eg BD Viper collection kits, Surepath specimens, urine not in the Aptima collection kit, orange floq swabs) cannot be tested and will be rejected.*****</p>	<ul style="list-style-type: none"> Female: a vulvovaginal swab (self- or clinician-collected) is the preferred specimen <ul style="list-style-type: none"> Break the swab at the score mark into the collection tube Urine specimens on women have reduced sensitivity and should not routinely be submitted Male: a first void urine (first 20ml of stream, preferably at least 1 hour after last voiding urine) is the preferred specimen <ul style="list-style-type: none"> Urine must be transferred to the collection tube within 24 hours of collection NAAT testing of urethral swabs is not routinely recommended. If required, use the NAAT Unisex swab <i>Chlamydia/N. gonorrhoeae</i> collection kit (blue swab, white swab (which is discarded), white tube) Anorectal and pharyngeal swabs should be collected for NAAT testing in all men who have sex with men or in others based on sexual history Do not pierce the foil cap, cut swabs, or place more than one swab in the collection tube All collection kits contain liquid transport medium. DO NOT apply this liquid (in the tube) to skin or mucous membranes or take internally If the liquid is spilled or tipped out, use a fresh collection kit
	<p>NAAT vaginal swab <i>Chlamydia/N. gonorrhoeae</i> collection kit (Aptima) (pink swab and orange tube)</p> 	<ul style="list-style-type: none"> Both vulvovaginal (self- or physician-collected) and high vaginal swabs can be tested It can be performed on samples submitted for <i>N. gonorrhoeae/Chlamydia</i> testing Must be specifically requested with clinical details

Test	Which swab/specimen	Notes
Viral PCR (eg HSV, VZV, adenovirus)	Orange floq swab (dry) 	<ul style="list-style-type: none"> Please specify sites and include clinical details.
Respiratory viral PCR (eg influenza, RSV)	Nasopharyngeal swab collected using the Respiratory PCR collection kit or submit nasopharyngeal aspirate 	<ul style="list-style-type: none"> Requires prior approval from a Clinical Microbiologist or the Medical Officer of Health Break orange floq swab into universal transport media (red top tube)
Measles PCR	Nasopharyngeal swab collected using the Respiratory PCR collection kit or submit a nasopharyngeal aspirate 	<ul style="list-style-type: none"> Requires prior approval from a Clinical Microbiologist or the Medical Officer of Health Break orange floq swab into universal transport media (red top tube) Please note: measles virus PCR requires prior approval from the Medical Officer of Health and must be submitted with a notifiable diseases form (<i>link needed</i>)
Mumps PCR	Oral swab, collected using the Respiratory PCR collection kit 	<ul style="list-style-type: none"> Requires prior approval from a Clinical Microbiologist or the Medical Officer of Health Collect the oral swab from around Stenson's duct, where the parotid gland drains into the mouth For optimal sensitivity, this should be collected as early as possible in the illness Break orange floq swab into universal transport media (red top tube)