

## COLLECTION OF CEREBROSPINAL FLUID (CSF) SPECIMENS



### Specimen Labeling:

All specimens will be clearly labeled **BEFORE** being sent to the laboratory for testing to ensure correct identification of the patient and sample.

All specimens/containers must be labeled with:

- The patient's full name (printed in the same format as patient's health card)
- A second identifier such as date of birth or health card number
- It is recommended that the specimen container also be labeled with specimen source (for non-gynecologic samples)

Specimen/container labeling options are:

- Computer printed label affixed to the side of the specimen container.
- Or clearly printed handwritten information on the label of the specimen container using indelible ink
- Specimen collected on a glass slide must have the patient/sample information printed on the frosted end of the slide using pencil or indelible ink.

### Specimen Handling and Transportation:

- Specimens collected from multiple sites should be collected in separate vials/slides with the specimen source identified.
- Each fluid specimen must be placed into a polybag.
- Specimens collected on a glass slide must be securely packaged in a cardboard/plastic slide holder
- A completed Cytology & HPV Testing Requisition must accompany each specimen.
- Specimens requiring expedited service must be clearly marked as such. The typical designation is: ASAP.
- For optimal results transport the specimens to the laboratory as soon as possible after collection.

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#### Cytology Requisition Information:

All specimens must be submitted for testing with a completed Cytology & HPV Testing Requisition.

Provide the following information in a **legible format**:

#### Patient Information:

- Full name of patient (printed in the same format as patient's health card)
- Health card number
- Date of birth
- Date of specimen collection
- Specimen source
- Specimen site
- Number and type of specimen (e.g. slides, vials)
- Collection method (e.g. voided urine, fine needle aspiration)
- Pertinent clinical information

#### Health Care Provider Information:

- Full name, address and billing number of the ordering health care provider
- Full name, address (and billing number if known) of any copy-to physicians

#### Collection Kit Information:

##### Fine Needle/ Sputum/ Fluid Kits:

Kit components are ordered separately:

- 90 mL sterile urine container with 40 mL of cytology preservative (Cytolyt®- clear, colourless solution).
- Collection instructions are included in the sputum and urine kits
- Polybag
- Cytology requisition (ordered separately)



**CAUTION:** The preservative contains methyl alcohol. Do not drink. If ingested, do not induce vomiting; call your doctor or local poison control center immediately. Vapor may be harmful if inhaled; use with adequate ventilation. Flammable; keep away from heat, sparks & open flame. Avoid contact with eyes.

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### Collection Instructions

1. Collect 1-3 mL of CSF and deposit the specimen into the cytology preservative.
2. ADD specimen to equal parts of cytology preservative.
3. Tightly re-cap the specimen container.
4. Label the specimen container with the patients' full name and DOB or Health card number, date of collection and sample type.
5. Submit the specimen with a completed cytology requisition including ALL pertinent clinical information.
6. Keep the preserved specimen at room temperature or refrigerated (2-8°C). It is recommended to return the specimen to the laboratory as soon as possible after collection. Testing of the sample should occur within 8 days from the date of collection.

**Minimum Specimen Volume:** 1.0 mL

**Collection Kit:** Cytology Fine Needle Aspiration Kit  
90mL sterile urine container with 40mL of cytology preservative (Cytolyt®)  
The specimen container contains a preservative.  
This preservative **MUST NOT** be emptied out.  
**NOTE:** *The preservative is HARMFUL if ingested*