

COLLECTION OF RESPIRATORY (PULMONARY) 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 (e.g., sputum)

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 Handling and Transportation:

- Specimens collected from multiple sites must be collected in separate containers with the source of each identified.
- Each specimen must be placed into a polybag.
- 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
- Anatomic site (if applicable)
- Number specimens submitted (e.g., containers)
- Collection method (e.g., sputum, bronchial wash)
- 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/ Bronchial/ Sputum Kits:

Kit components are ordered separately:

- 90 mL sterile container with 40 mL of cytology preservative (Cytolyt® clear, colourless solution)
- Patient collection instructions (for sputum samples only).
- Polybag
- Cytology requisition



CAUTION: The preservative contains methyl alcohol. Do not drink. If ingested, do not induce vomiting; call a 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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Sputum

Patient Collection Instructions

Your health care provider may request the collection of up to 3 sputum samples for cytology testing.

Routine Specimens:

IMPORTANT: Only collect one sample per day. Collect samples on consecutive days.

1. Collect the specimen in the early morning before eating.
2. Rinse mouth with water and discard.
3. Breathe in deeply and **COUGH DEEPLY** from the lungs and deposit the sputum **DIRECTLY** into preservative in the specimen container. **DO NOT** spit in the bottle without a **DEEP COUGH** first.

Note: The specimen container contains a preservative. This preservative **MUST NOT** be emptied out.

4. Screw the cap on the container and tighten securely.
5. Wash hands.
6. Label the specimen container with:
 - Your full name (printed in the same format as your health card)
 - Your date of birth or health card number
 - Date of the sputum collection

Complete the patient's information area of the cytology requisition with:

- Your full name (printed in the same format as on the health card)
 - Your date of birth
 - Your health card number, version and province
 - Your address, postal code & phone number
7. After collection of all the samples, (1 to 3 based on your health care provider's recommendation), package the labeled specimen container(s) with the completed cytology requisition(s) in a polybag.
 8. Keep the specimen(s) refrigerated (not frozen).
 9. Return the specimen(s) to the LifeLabs' specimen collection centre within 24 hours (after collection of the last sample).

Post-Bronchoscopy Sputum:

- Cough and deposit all sputum into the collection container in the 1 to 2 hour period following your bronchoscopy (Steps# 2-8, above).
- Continue the sputum series the next morning as described above (Steps# 1-9, above).

Minimum Specimen Volume: 5.0 mL of sputum obtained from a deep cough.

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Physician Collection Instructions

Bronchial Brushings

1. Using standard bronchoscopy technique, sample the area of interest.
2. Cut off brush and drop into a specimen container (should contain approximately 40 mL of cytology preservative).
3. Re-cap the specimen container tightly and shake vigorously for 30 seconds.
4. Label the specimen container with the patients' full name and DOB or Health card number, date of collection, sample source and anatomic site.
5. Submit specimen with 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. Specimen integrity is compromised after 8 days after collection.

Minimum Specimen Volume: Brush in cytology preservative.

Bronchial Washings

1. Using standard bronchoscopy technique, sample the area of interest.
2. ADD 40ml of specimen (or less) to the cytology preservative.
3. Re-cap the specimen container tightly and shake vigorously for 30 seconds.
4. Label the specimen container with the patients' full name and DOB or Health card number, date of collection, sample source and anatomic site.
5. Submit specimen with 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. Specimen integrity is compromised after 8 days after collection.

Minimum Specimen Volume: 5.0 mL of washings

Reference:

NCCLS GP23-A Nongynecologic Cytologic Specimens: Collection and Cytopreparatory Techniques; Approved Guideline. Volume 17, Number 19, 1999