Specimen Collection & Handling Instructions

COLLECTION OF GASTROINTESTINAL (GI) 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
- o 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 OF GASTROINTESTINAL (GI) SPECIMENS

GASTROINTESTINAL (GI) SPECIMENS

(Esophageal, Gastroesophageal Junction, Gastric, Duodenal, Bile Duct)

Collection Instructions: Washings & Brushings

- 1. Instruct the patient to fast for a minimum of 6 hours to overnight.
- 2. Clean the patient's mouth and throat of secretions.
- 3. Insert a Levine gastric tube (without lubricant) to the 55cm mark. Evacuate and discard the contents of the stomach.
- 4. Add 500mL of balance salt solution in 50 mL quantities.
- 5. Withdraw and forcibly re-inject the salt solution 6-7 times to wash the gastric mucosa.
- 6. Repeat step 5 with the patient in each of the different positions: back, abdomen, right and left side with abdominal massage.
- 7. Aspirate the solution and add to equal parts of cytology preservative.
- 8. Re-cap the specimen container tightly and shake vigorously for 30 seconds.
- 9. Label the specimen container with the patients' full name and DOB or Health card number, date of collection, sample type and source.
- 10. Submit specimen with completed cytology requisition including ALL pertinent clinical information.
- 11. 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: 10.0 mL

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

References:

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

