



# Specimen Collection Manual

# INFORMATION SHEET

## PATHOLOGIST:

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## Important Information:

### Office Hours:

Monday-Friday	7:30am-5:00pm
Saturday	7:00am-11:00am

<b>Main Phone:</b>	337-289-7679
<b>Fax:</b>	337-289-7680

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## Important Phone Numbers:

Client Service Representative: Jason Carriere.....	337-247-5318
Histology Questions: Carrie Calovich.....	337-289-7689
Cytology Questions: Gwen Hitt.....	337-289-7669
Frozen Section Scheduling:.....	337-289-7679
Pathology Reports:.....	337-289-7679
Supplies: PAPSPathology.com.....	337-289-7689
Courier Pick-up Request:.....	337-289-7679
Billing Questions: Patient Billing.....	337-706-1528

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# TISSUE SPECIMEN HANDLING

## I. PRINCIPLE

To correctly handle and submit specimens for tissue processing and considerations for tissue allocations for diagnostic specialties.

## II. PREPARATION OF PATIENT

If collection of specimens by Pathology staff is warranted, proper identification of patient by checking armband or verbal affirmation is required.

## III. SPECIMEN

Any specimen submitted for tissue processing.

## IV. REAGENTS

- 10% Formalin/ 10%NBF (Fixative of choice)
- 0.8% Sterile Saline
- 2% Glutaraldehyde
- Michel's Fixative
- RPMI Media

## V. PROCEDURE

1. Immediately upon removal from the body, tissues should be immersed in container with proper fixative that is **3 times the volume of the tissue**. Container needs to be **correctly labeled with patient name, date of birth, and specimen type**. Labels should be on the specimen container, NOT the lid. **Label information should match information on the requisition**.
2. Each specimen must be accompanied by a correctly completed specimen requisition, which includes:
  - Patient Name (required)
  - Patient Date of Birth (required)
  - Requesting Physician (required)
  - Date of Collection and Time (required)

# TISSUE SPECIMEN HANDLING

- Source of Specimen (required)
- Billing information (required)
- Pre-op Diagnosis (required)
- Clinical History (if applicable)

## VI. PROCESS FOR TISSUE SUBMISSION

1. Routine tissue for pathology
  - Submitted in 10% Formalin
2. Frozen Sections:
  - Pathologist called
  - Submitted Fresh to frozen section room
3. Bone Marrow Biopsy
  - Call 337-289-7679 to schedule bone marrow procedure
  - Call 337-289-7679 to notify when patient is ready for procedure
  - Collected by pathologist and grossing assistant.

**Note: Ochsner facilities should schedule with surgery scheduling**

4. Muscle or Nerve Biopsy for special studies
  - **Call Histology lab at least one day before procedure, 337-289-7689**
  - Submitted to pathology fresh in sterile container
- **NOTE: Must be scheduled with histology lab before collection. Can only be collected Monday-Thursday in the morning to ensure FEDEX pickup times.**
5. Renal Biopsy for special studies
  - Obtain sendoff kit from histology lab 337-289-7689
    - i. Place 1 biopsy in Glutaraldehyde
    - ii. Place 1 biopsy in Michel's solution
    - iii. Place 1 biopsy in 10% Formalin
  - Completely fill out form in kit
  - Return to histology before 2:00pm to ensure FEDEX pickup times
6. Sinus for Ciliary Dysfunction Syndrome

# TISSUE SPECIMEN HANDLING

- Obtain sendoff kit from histology lab 337-289-7689
  - OR submit Fresh to histology lab
  - Mark clearly on requisition that it's for Ciliary Dysfunction Syndrome
  - Return to histology lab before 2:00pm to ensure FEDEX pickup times
7. Disaccharide studies
- Submit fresh to lab for send out
8. Flow Cytometry
- Obtain RPMI Media from histology lab 337-289-7689
  - Submit back to histology lab
9. Lymph Nodes or Tonsils (For lymphoma or inflammatory process)
- Submit fresh to histology lab
  - Call 337-289-7679 when ready for pickup
10. Skin biopsy for Immunofluorescence
- Call histology lab, 337-289-7689, for Michel's solution
  - OR submit fresh to histology lab
  - Return to histology lab by 2:00pm to ensure FEDEX pickup times
11. Chromosome Analysis-Products of Conception
- Obtain ANORA kit from histology lab 337-289-7689
    - i. Place fetus/small piece of placenta-chorionic villi in sterile saline
    - ii. Draw purple top tube of blood from mother
    - iii. Completely fill out form in kit
  - Return to histology lab by 2:00pm to ensure FEDEX pickup times
12. Miscarriage/POC (The fetus is delivered at less than 20 weeks gestation with no signs of life AND weighs less than 350 grams. The fetus is considered a specimen and may be referred to as a "products of conception.")

# TISSUE SPECIMEN HANDLING

- Family may opt for funeral pick up for burial. Please clearly mark on requisition for burial and attach with signed release form.

**Note: Include funeral home contact information. Funeral home may require death certificate to be in LEERS.**

- **Next of kin may not request the remains be released to them personally or into their personal custody under Louisiana law.**

Note: LA Rev Stat § 40:1191.2 (2019) Final disposition of fetal remains; right of parents; noticed required; exception.

LA Stat tit 8 § 652 Unlawful disposal of remains.

All Specimen removed during surgical procedures shall ordinarily be sent to the pathology lab for examination. Certain specimens may be exempted from being sent to the pathology lab when the quality of care has not been compromised, when another suitable means of verification of the removal has been made, and when the decision not to send a specimen to the pathology lab has been documented in the medical record by physician. The limited categories of specimen that may be exempted include, but are not limited to the following:

- Cataracts
- Orthopedic appliances
- Foreign bodies that for legal reasons are given directly to the chain of custody of law enforcement officials
- Foreskin from circumcision of a newborn infant
- Teeth, provided the number (including fragments) is recorded in the medical record

Certain specimens removed during surgical procedures that are sent for examination by a pathologist may not require microscopic examination. The limited categories of specimen that may be included in, but are not limited to, the following:

# TISSUE SPECIMEN HANDLING

- Stones
- Cataracts
- Bunions
- Hammertoe
- Septum
- Knees
- Femoral head (not for fracture)
- Humeral head (not for fracture)
- Medical devices i.e. Mediports, catheters
- Orthopedic hardware
- Other metal objects i.e. bullets, nails, etc.
- Foreign body



# CLIENT FROZEN SECTIONS

## VII. Frozen Sections

Frozen sections received from clients or doctor's offices will be performed by PAPS Pathologist scheduled for that area.

- **NOTE: All frozen sections should be scheduled with PAPS at 337-289-7679**
1. Client/Surgery Location
    - a. When surgeon is ready for the frozen section to be performed, the pathologist is notified by calling 337-289-7679
    - b. The specimen, accompanied by the appropriate pathology requisition is delivered to the frozen section room
    - c. After the frozen is performed the results are written on the specimen requisition and called to the ordering physician. (These results are also included in the pathology report.)
  2. Doctor's Office
    - a. The correctly labeled specimen, accompanied by the appropriate pathology requisition is delivered to the PAPS Histology department location at 1214 Coolidge BLVD 3<sup>rd</sup> floor west towers immediately.
    - b. The pathologist is notified and the frozen section is performed in the frozen section room.
    - c. The results are written on the request and are called to the ordering physician. (These results are also included in the pathology report)

# CYTOLOGY SPECIMEN HANDLING

## I. PRINCIPLE

- All Non-Gyn and Gyn specimens should be collected according to the following guidelines. In addition, specimens should be properly fixed and accompanied by the proper requisition.

## II. REAGENTS

- Cytology spray fixative or reagent alcohol
- Cytolyt or PreservCyt Solution

## III. EQUIPEMENT AND INSTRUMENTATION

- Collection bottles
  - Thin Prep Vial -PAP (GYN)
  - Thin Prep Vial –PreserveCYT (Non-Gyn)
- Glass slides
- Slide holders
- Cytobrush and Plastic Spatula
- Wallach Papette (broom)
- BD Max Swab
- GBS Swab
- HSV Swab

## IV. COLLECTION OF GYN SPECIMENS

- Broom
  - The Broom should be inserted with central bristles into the endocervical canal deep enough to allow the shorter bristles to fully contact the ectocervix (see broom protocol). Push gently while rotating the broom in a clockwise direction at least five times. Rinse the broom in the Thin Prep Vial by pushing the broom to the bottom of the vial at least 10 times, forcing the bristles apart. As a final step, swirl the broom vigorously to further release material. Discard the broom and package specimen.

# CYTOLOGY SPECIMEN HANDLING

- Spatula
  - Use only plastic spatulas, not wood. Cervical scrapings are obtained by rotating the noticed end of the spatula around the outer surface of the cervix (see brush/spatula protocol). Rinse the spatula in the Thin Prep Vial by swirling the spatula vigorously in the fluid at least 10 times. Discard spatula and package specimen.
- Brush
  - Insert the brush into the cervix until only the bottom most fibers are exposed. Slowly rotate  $\frac{1}{4}$  or  $\frac{1}{2}$  turn in one direction. DO NOT OVER ROTATE. Rinse the brush in the Thin Prep Vial by rotating the device in the solution at least 10 times while pushing against the PreserveCyt Vial wall. Swirl the brush vigorously to further release material. Discard the brush and package specimen.

**NOTE: Tighten the cap until the torque line on the cap passes the torque line on the vial. Label and package specimen**

Record the patient's name on the vial with date of birth, and ordering physician. Place Thin Prep Vial in a specimen bag and requisition in the outside pocket of bag for transport to the lab.

**NOTE: Only HPV testing can be added after the specimen has been processed, all other tests must be ordered upon submission of the specimen.**

# GYNECOLOGICAL AND MOLECULAR TESTING INSTRUCTIONS

## V. PAPS Gynecological and Molecular Testing Instructions

- If your patient needs a pap smear, use a ThinPrep collection kit.
- If your patient needs HPV high risk or 16/18/45 genotype testing, use a ThinPrep collection kit.
- If your patient needs a BV Panel, use one BD Max specimen collection kit exclusively for the BV Panel
- If your patient needs a GBS, use the GBS swab (labeled BBL CultureSwab) collection kit. GBS's must be received at the lab within 24 hours. Please call by noon if you collect any GBS's on Friday morning.

**NOTE: Please make sure swab is labeled with patient name, date of birth, and collection date and time.**

- CT/NG/TV can be done on either the Thin Prep or BD Max Swab. If using the BD Max swab, collect one swab exclusively for the CT/NG/TV.
- There is no extra charge for using multiple collection kits for 1 patient. Place the ThinPrep vial, BD Max swab(s) and/or BD Max GBS swab in the same biobag. Use 1 order form and demographic sheet. If the patient is self-pay/prepay, include the PAPS payment form that has their credit card information and payment authorization. Private pay rates are per test regardless of collection method.

## VI. Thin Prep

- Annual Wellness Pap Smear
- HPV High Risk, Genotype 16/18/45
- STI's: CT, NG, TV

# GYNECOLOGICAL AND MOLECULAR TESTING INSTRUCTIONS

**\*\*BV Panel NOT recommended off ThinPreps anymore. If symptomatic for vaginosis, use BD Max Swab.**

## **VII. Symptomatic Patients with Pap Smear**

- Pap smear and HPV must be done on ThinPrep
- BV Panel must be done on BD Max swab

## **VIII. BD Max Specimen Collection Swab**

- Symptomatic/OB Patients
- Testing: CT, NG, TV, BV Panel
- BV Panel requires all of the material from 1 swab. If you are also ordering CT/NG/TV, collect 2 separate BD Max swabs.
- Can be clinician collected or patient self-collected. If patient collected, please note in comments section of order.
- Write 2 patient identifiers or place ID sticker on the bottle. Do not cover up barcode



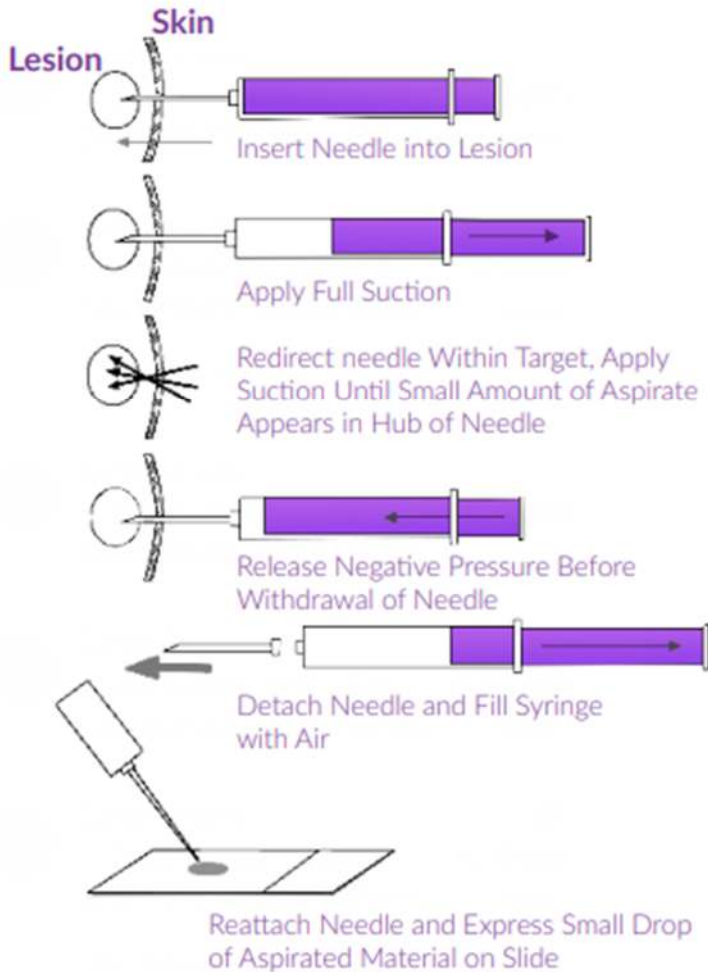
**\*\*No pap smear or HPV/Genotype HPV testing on swabs**

## **IX. GBS (BBL Culture Swab)**

- The date and time must be written on the requisition.  
GBS's must be received in the lab within 24 hours of collection.  
If you collect GBS on Friday morning, please call the office at 337-289-7669 for special pickup.



# FINE NEEDLE ASPIRATION OF PALPABLE LESIONS



## IIX. Collection of NON GYN Specimen

All specimen submitted to PAPS should be labeled with patient name and a second unique identifier (preferably date of birth).

### Fine needle aspiration procedure:

#### Reagents and Equipment:

- Tube of cytology fixative (provided by PAPS)
- Spray Fixative (provided by PAPS)
- Slides (provided by PAPS)
- Pencil for labeling slides (pens and markers will dissolve)
- Needles 22-25 gauge
- 10 or 20 ml syringe
- Alcohol or betadine
- Xylocaine

Palpate/visualize the mass/area. Clean with alcohol swab or betadine. Attach 10 or 20 ml syringe to needle (size 22-25 gauge are common). Administer Xylocaine. Immobilize the area with thumb and index finger of one hand. Place the needle at applicable site and insert with a single quick motion without negative pressure. Retract plunger to create negative pressure. Move needle back and forth several times in different areas of the mass, while maintain constant negative pressure. This allows for sampling of a wide area of the lesion. Gently release the plunger and prepare specimen for cytology.

Detach needle from the syringe. Fill syringe with air, then reattach needle. Advance plunger to place a drop of the specimen on the slide. Invert a second clean slide over the drop, gently pulling slides apart to create a monolayer of cells. Allow one slide to air dry and immediately spray fix the other slide with cytology fixative. Label all slides in pencil with patient name and date of birth.

## FINE NEEDLE ASPIRATION OF PALPABLE LESIONS

Rinse the syringe and needle with cytology fixative in tube. This is done by drawing fixative in and out of the syringe through the needle several times. Label container with patient name and date of birth.

If the lesion is cystic, after specimen collection is complete, the needle is removed from syringe and capped with a syringe cap. Label syringe with patient name and date of birth.

Fill out requisition and submit to laboratory.

**Note: Please do not send needles to the cytology department; discard all needles in proper disposal containers.**

If the lesion cannot be palpated or visualized, then specimen is obtained by either ultrasound or CT. This must be done by a radiologist.

### **TZank Smears**

Clean an intact pustule/blister with alcohol. Disrupt pustule/blister with a sterile needle/blade. Collect contents of pustule/blister with blade/needle and smear on glass slide. Immediately spray with cytology fixative. Label all slides in pencil with patient name and date of birth. Fill out requisition and submit to laboratory.

### **Breast Secretions**

Label all slides in pencil with patient name and date of birth. Place nipple on slide and allow discharge material to run onto the slide. Spray with cytology fixative immediately. Fill out requisition and submit to laboratory.

### **Fluids**

All fluids (example; ascites, pleural, urines, vitreous, CSF, sputum or washings of any kind) should be placed in a sterile container (in case cultures are wanted) and sent to the lab as soon as possible. Label container with patient name and date of birth.

### **Brushings**

Label all slides in pencil with patient name and date of birth. Place brush below the frosted end of labeled slides and slide brush down, rotating at the same time. Spray with cytology fixative immediately. Fill out requisition and submit to laboratory.

# REJECTION OF SPECIMENS

## I. Rejection of Specimens

### A. Statement of Policy

- The lab may reject tissue or cytology specimens if not properly identified, not properly labeled, or not properly sealed in the appropriate container.

**NOTE: All specimens should have 2 patient identifiers (name and DOB) and be accompanied by a completed requisition.**



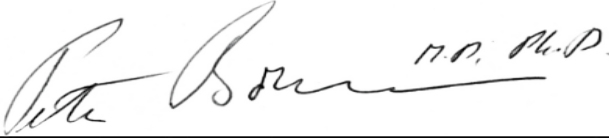
### B. Procedure

- Any specimen not accompanied by a properly filled out requisition.
- Any specimen missing demographic sheet of patient
- Any specimen container that has not been properly labeled
- Specimen and requisition do not match



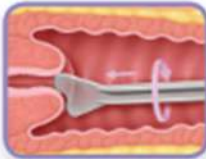
# PREFERRED ANATOMIC PATHOLOGY SERVICES 2023 SPECIMEN COLLECTION MANUAL

**The policies and procedures included in this manual  
have been reviewed and approved by:**

 BSHTL (ASCP)	06/21/2023
Carrie Calovich, Histology Manager	Date
 BSCT (ASCP)	06/21/2023
Gwen Hitt, Cytology Manager	Date
 M.D., M.P.	06/21/2023
Peter Bozner, M.D., Medical Director	Date

## Protocol: endocervical brush/spatula

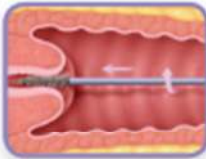
### Quick reference guide



**Obtain** an adequate sample from the ectocervix using a plastic spatula. If desired, use lukewarm water to warm and lubricate the speculum. Apply water-soluble, carbomer-free gel lubricant sparingly to the posterior blade of the speculum if necessary.<sup>1,2</sup> Select the contoured end of the plastic spatula and rotate it 360 degrees around the entire ectocervix, while maintaining tight contact with ectocervical surface.



**Rinse** the spatula as quickly as possible into the PreservCyt® Solution vial by swirling the spatula **vigorously** in the vial 10 times. Discard the spatula.



**Obtain** an adequate sampling from the endocervix using an endocervical brush device. Insert the brush into the cervix until only the bottom-most fibers are exposed. Slowly rotate 1/4 or 1/2 turn in one direction. **DO NOT OVER-ROTATE THE BRUSH.**



**Rinse** the brush as soon as possible in the PreservCyt Solution by rotating the device in the solution 10 times while pushing it against the PreservCyt vial wall. Swirl the brush **vigorously** to further release material. Discard the brush.



**Tighten** the cap so that the torque line on the cap passes the torque line on the vial.



**Record** the patient's name and ID number on the vial.

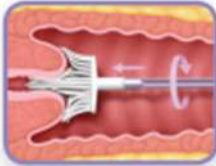
**Record** the patient information and medical history on the cytology requisition form.



**Place** the vial and requisition in a specimen bag for transport to the laboratory.

## Protocol: broom-like device

### Quick reference guide



**Obtain** an adequate sampling from the cervix using a broom-like device. If desired, use lukewarm water to warm and lubricate the speculum. Apply water-soluble, carbomer-free gel lubricant sparingly to the posterior blade of the speculum if necessary.<sup>1,2</sup> Insert the central bristles of the broom into the endocervical canal deep enough to allow the shorter bristles to fully contact the ectocervix. Push gently and rotate the broom in a clockwise direction for five complete, 360 degree turns.



**Rinse** the broom as quickly as possible into the PreservCyt® Solution vial by pushing the broom into the bottom of the vial 10 times, forcing the bristles apart. Swirl the broom **vigorously** to further release material. Do not leave the head of the broom in the vial. Discard the collection device.



**Tighten** the cap so that the torque line on the cap passes the torque line on the vial.



**Record** the patient's name and ID number on the vial.  
**Record** the patient information and medical history on the cytology requisition form.



**Place** the vial and requisition in a specimen bag for transport to the laboratory.

**Refer to the instructions provided with the collection device for warnings, contraindications, and limitations associated with specimen collection.**

[www.thinprep.com](http://www.thinprep.com)

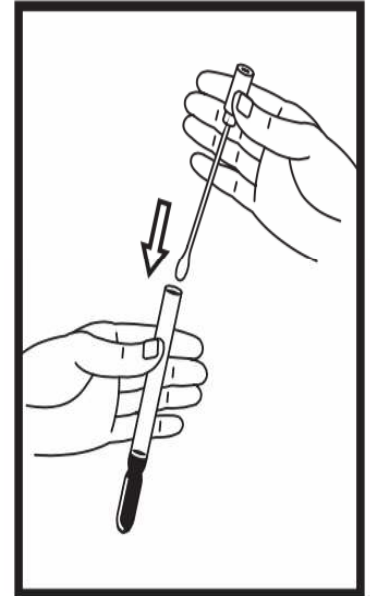
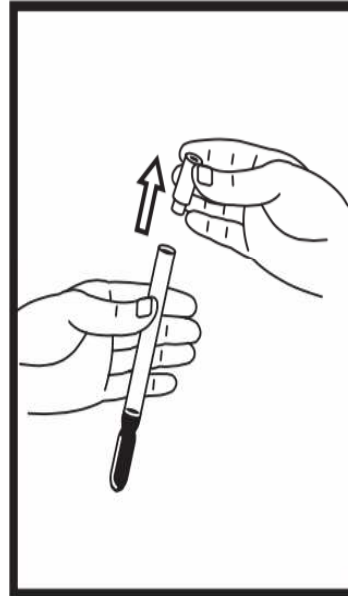
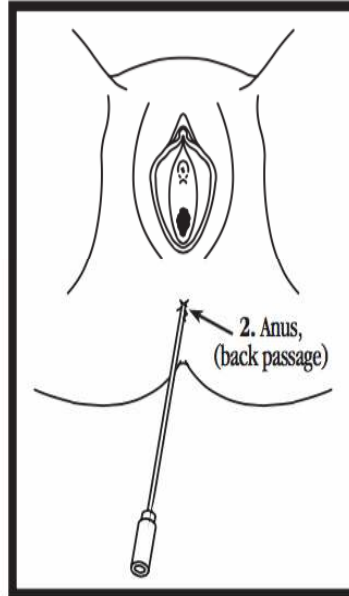
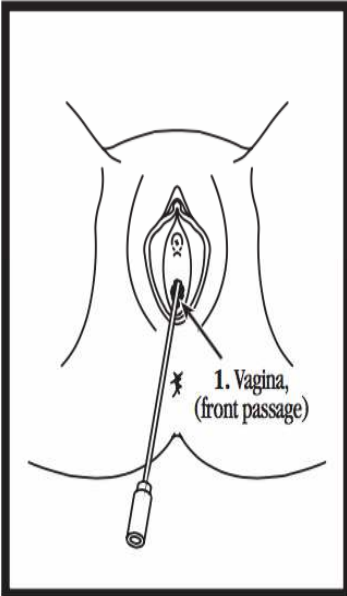
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1. Cervicovaginal Cytology Based on the Papanicolaou Technique; Approved Guideline – Third Edition (Clinical and Laboratory Standards Institute GP15-A3). 2. Hologic internal study, data on file.

**hologic.com | diagnostic.solutions@hologic.com | +1.781.999.7300**

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# Instructions for the collection of a genital swab for the detection of a group B streptococcus (GBS)



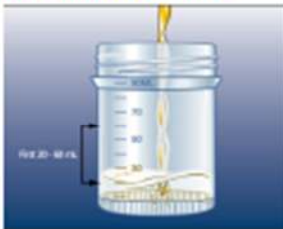
- 1.** Remove swab from packaging. Insert swab 2cm into vagina, (front passage). Do not touch cotton end with fingers.
- 2.** Insert the **same** swab 1cm into anus, (back passage).
- 3.** Remove cap from sterile tube.
- 4.** Place swab into tube. Ensure cap fits firmly.

# ADDENDUM

## BD MAX™ UVE SPECIMEN COLLECTION KIT

### BD MAX™ UVE SPECIMEN COLLECTION KIT URINE SPECIMEN COLLECTION

#### COLLECTION SITE



1. Have patient collect specimen in a sterile, plastic, preservative-free specimen collection cup.  
**NOTE:** Patient should not urinate for at least 1 hour prior to collection of specimen. Patient should collect the first 20 to 60 mL of voided urine.



2. Place cap securely on urine collection cup.  
**NOTE:** Wear clean gloves when handling urine specimen. If gloves come into contact with the specimen, immediately change gloves.



3. Label collection cup with patient identification, date, and time collected.



4. Uncap the BD MAX™ UVE Sample Buffer Tube. Use the transfer pipette to gently mix and aspirate 1 mL of urine from the urine cup.  
**NOTE:** Neat urine specimens must be processed within 4 hours if kept at 2–30°C, or 24 hours if kept at 2–8°C.



5. Dispense approximately 1 mL into the BD MAX™ UVE Sample Buffer Tube. Discard the pipette.  
**NOTE:** The transfer pipette is intended for use with a single specimen only.



6. Tighten the cap securely on the BD MAX™ UVE Sample Buffer Tube. Invert the tube 3 to 4 times.



7. Label the BD MAX™ UVE Sample Buffer Tube with patient identification, date, and time collected. Be careful not to obscure any bar codes on the tube.  
**NOTE:** Wear clean gloves when handling sample tubes and urine specimens.

#### STORAGE AND TRANSPORT SAMPLE BUFFER TUBE STORAGE CONDITIONS

Specimen Type	Prior to Transfer into BD MAX™ UVE Sample Buffer Tube		In BD MAX™ UVE Sample Buffer Tube Prior to Pre-Warm or Testing		
	2–30°C	2–8°C	2–30°C	2–8°C	-20°C
Urine	4 hours	24 hours	5 days		30 days

443376—BD MAX™ UVE Specimen Collection Kit for use with the BD MAX™ CT/IGC/TV assay kit.



bd.com/us

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8. Use the viewing window on the BD MAX™ Sample Buffer Tube to ensure urine specimen was added to the tube.

# ADDENDUM

## BD MAX™ Vaginal Panel specimen collection and transfer procedure

### BD MAX™ UVE Specimen Collection Kit

#### Clinician collection procedure

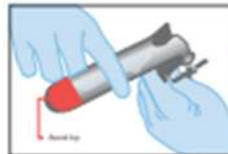
- Collect swab prior to pelvic, speculum, or bimanual exam
  - No lubricant is used for the sample technique.
1. Gently slide the swab **2 inches (5 cm)** into the vagina. If the swab does not slide easily, gently rotate the swab as you push. If it is still difficult, do not attempt to continue.
  2. Rotate the swab for 10 to 15 seconds.
  3. Withdraw the swab without touching the skin outside the vagina.

#### Precaution: if a speculum will be inserted prior to collecting the Vaginal Panel swab

1. Do **not** collect specimen at the posterior fornix.
2. Lukewarm water may be used to warm and lubricate the speculum.
3. If lubricant must be used, lubricant should be used sparingly (1.8 mm) and applied only to the exterior sides of the speculum blades, avoiding contact with the tip of the speculum.



Apply a 1.8 mm amount of lubricant on the speculum



Apply only to exterior sides of the speculum, avoiding the tip.\*  
\*Avoid use of lubricants that contain carbomer (or carbopol polymers).

4. Avoid contact between the swab and the speculum or lubricant.
5. Insert the MAX Vaginal Panel collection swab to contact the vaginal sidewall, 2 inches (5 cm) within the vagina, rotate gently for 10-15 seconds; withdraw the swab without touching the speculum.

#### Swab to tube transfer procedure (clinician collected and patient self-collected)

To transfer the sample



1. Fully insert the swab into the tube so that the tip is at the bottom.



2. Carefully break the shaft at the score mark. Be careful to avoid splashing.



3. Tightly re-cap the tube.



4. Label tube with patient information, date, and time collected. Be careful not to obscure the bar codes on the tube.

#### Swab Storage and Transport

Swab sample must be transferred within 2 hours after collection to the BD MAX™ UVE Sample Buffer Tube when kept at 2°C to 30°C.

#### Specimen Type:

Vaginal swab collection for BD MAX Vaginal Panel (not requiring pre-warm)

In BD MAX UVE Sample Buffer Tube prior to testing

2–30°C	2–8°C
8 days	14 days

BD, Sparks, MD 21152-0999 USA  
800.638.8663

[bd.com](http://bd.com)

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