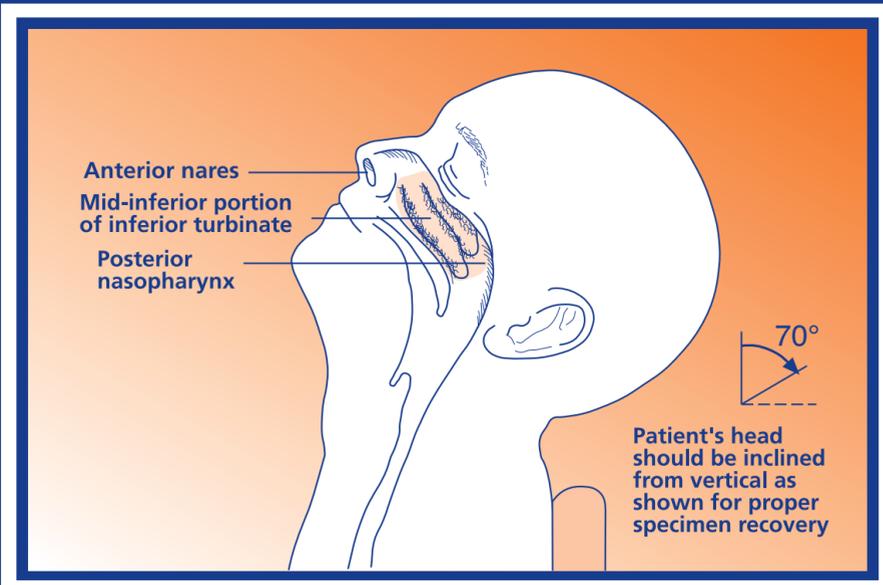


NASOPHARYNGEAL SPECIMEN COLLECTION



BD Veritor™ System

Cat. No.	Description	Qty/Pkg
256055	BD Veritor™ System Reader	1
256045	BD Veritor™ System Flu A+B CLIA-Waived Kit (Dry Swab)	Pkg. of 30
256041	BD Veritor™ System Flu A+B Moderately Complex Kit	Pkg. of 30
256042	BD Veritor™ System RSV Moderately Complex Kit	Pkg. of 30
256038	BD Veritor™ System RSV CLIA-Waived Kit (Dry Swab)	Pkg. of 30

BD™ Universal Viral Transport System

Cat. No.	Description	Qty/Pkg
220220	BD™ Universal Viral Transport, 3 mL vial	Pkg. of 50
220221	BD™ Universal Viral Transport Standard Kit: 3 mL vial with 2 regular polyester-tipped swabs	Pkg. of 50
220222	BD™ Universal Viral Transport Combo Kit: 3 mL vial with 1 regular and 1 minitip wire/plastic swab	Pkg. of 50
220239	BD™ Universal Viral Transport 2 regular polyester-tipped swabs	Pkg. of 100
220240	BD™ Universal Viral Transport combo polyester swabs: 1 regular and 1 minitip wire/plastic swab	Pkg. of 100
220244	BD™ Universal Viral Transport, 1 mL vial	Pkg. of 50
220526	*BD™ Universal Viral Transport Kit: 1 mL vial with a flexible minitip flocced swab	Pkg. of 50
220527	BD™ Universal Viral Transport Kit: 3 mL vial with a regular and flexible minitip flocced swab	Pkg. of 50
220528	BD™ Universal Viral Transport Kit: 3 mL vial with a regular flocced swab	Pkg. of 50
220529	BD™ Universal Viral Transport Kit: 3 mL vial with a minitip flocced swab	Pkg. of 50
220531	BD™ Universal Viral Transport Kit: 3 mL vial with a flexible minitip flocced swab	Pkg. of 50

*A minimal volume of transport media (1 mL) is recommended. Minimal dilution of specimen is preferred and 1 mL or less of transport media is suggested for optimal test performance.

Vacuum-assisted Nasopharyngeal Aspirate Method

Materials:

- Suction outlet (portable/wall)
- Sterile suction catheter
- Mucus trap (i.e., Luken's tube)
- BD™ Universal Viral Transport (UVT)



1. Attach mucus trap to suction outlet and catheter, leaving wrapper on suction catheter; turn on suction and adjust to suggested pressure.
2. Without applying suction, insert catheter into the nose, directed posteriorly and toward the opening of the external ear. **NOTE:** Depth of insertion necessary to reach posterior pharynx is equivalent to distance between anterior nares and external opening of the ear.
3. Apply suction. Using a rotating movement, slowly withdraw catheter. **NOTE:** Catheter should remain in nasopharynx for a minimal period of time, not to exceed 10 sec.
4. Hold trap upright to prevent secretions from going into pump.
5. Rinse catheter (if necessary) with approximately 2.0 mL UVT; disconnect suction; connect tubing to arm of mucus trap to seal.
6. Repeating procedure for the second nostril will deliver optimal combined sample.
7. After collection, immediately transport specimen to the laboratory for viral testing and viral antigen detection. If transport to the laboratory is delayed, place specimen on ice or in refrigeration.

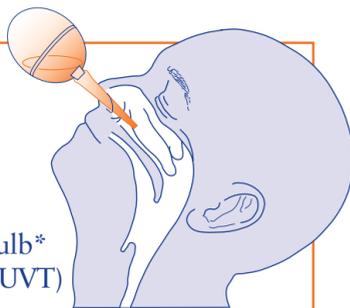
Patient Age	Catheter Size (French)*	Suction Pressure
Premature infant	6	80-100 mmHg
Infant	6	80-100 mmHg
Toddler / Preschooler	8	100-120 mmHg
School age	8	100-120 mmHg
Adolescent / Adult	8	120-150 mmHg

To determine length of catheter tubing, measure distance from tip of nose to external opening of ear.

Nasopharyngeal Wash: Bulb Method

Materials:

- Saline
- 1-2 oz. tapered sterile rubber bulb*
- BD™ Universal Viral Transport (UVT)
- Specimen container



1. Suction 3-5 mL saline into a new sterile bulb.
2. Insert bulb into one nostril until nostril is occluded.
3. Instill saline into nostril with one squeeze of the bulb and immediately release bulb to collect recoverable nasal specimen.
4. Empty bulb into sterile specimen container with suitable UVT, according to virology laboratory requirements.
5. Repeating procedure for the second nostril will deliver optimal combined sample.
6. After collection, immediately transport specimen to the laboratory for viral testing and viral antigen detection. If transport to the laboratory is delayed, place specimen on ice or in refrigeration.

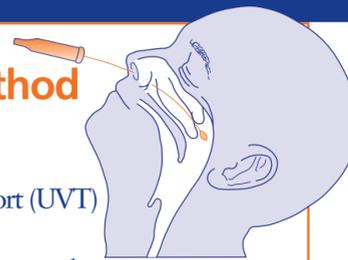
Length and diameter of bulb as appropriate for infant, child or adult.

Nasopharyngeal Swab Method

Materials:

- Flexible Minitip Flocced Swab
- 1-3 mL BD™ Universal Viral Transport (UVT)

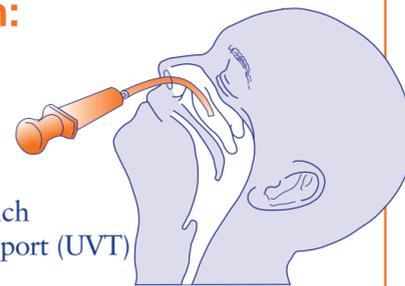
1. Insert swab into one nostril.
2. Rotate swab over surface of posterior nasopharynx.
3. Withdraw swab from collection site; insert into transport tube or container with UVT.
4. Repeating procedure for the second nostril will deliver optimal combined sample.
5. After collection, immediately transport specimen to the laboratory for viral testing and viral antigen detection. If transport to the laboratory is delayed, place specimen on ice or in refrigeration.



Nasopharyngeal Wash: Syringe Method

Materials:

- Saline
- 3-5 mL syringe*
- 2" Sterile NG tube 8-french
- BD™ Universal Viral Transport (UVT)
- Specimen container



1. Fill syringe with saline; attach tubing to syringe tip.
2. Quickly instill saline into nostril.
- 3a. Aspirate the recoverable nasopharyngeal specimen. Recovery must occur immediately, as the instilled fluid will rapidly drain.
- 3b. (Alternate) In appropriate cases, patients may tilt head forward to allow specimen to drain into suitable sterile container.
4. (If aspirated) Inject aspirated specimen from syringe into sterile specimen container with suitable UVT, according to virology laboratory requirements.
5. Repeating procedure for the second nostril will deliver optimal combined sample.
6. After collection, immediately transport specimen to the laboratory for viral testing and viral antigen detection. If transport to the laboratory is delayed, place specimen on ice or in refrigeration.

Length and diameter of syringe and tubing as appropriate for infant, child or adult.

