

## Microbiology User Information: Ear, Eye, Nose, Mouth and Throat Swabs

### Specimen Types:

#### Swabs

- Ear
- Eye
- Nasal
- Mouth
- Throat

For Corneal Scrapes please see [Corneal Scrape Instructions](#)

### Indications for Swab Samples:

West Kent Formulary Therapeutic guidance ENT: [Eye](#) [Ear, Nose and Oropharynx](#)

Hospital antimicrobial guidelines for ENT infections: [Ear Nose and Throat \(ENT\)](#)

Primary Care antimicrobial guidelines: : [Primary Care Antimicrobial Prescribing Guidelines](#)

### Request form requirements:

Providing adequate clinical details to microbiology request forms is vital for the safety of laboratory staff and ensuring patient tests are correctly interpreted.

Please include details of relevant clinical information, current, just finished or intended antibiotic therapy.

Please include details of any patient known allergies to antibiotics

Please state if yeast infection is suspected.

### Time to laboratory:

Specimens should be transported and processed as soon as possible

Transport swabs are stable at room temperature for 24 hours but refrigerate samples where possible

**If processing is delayed, store refrigerated, rather than at room temperature**

For information on transport, including days and times, please see [Pathology Transport Services](#)

### Laboratory Testing:

All Microbiology laboratory investigations are based on UK Standards for Microbiology Investigations which can be found [HERE](#). If further advice is required, please contact the laboratory

### Laboratory Turn Around Time (from Date/Time of Receipt in Laboratory):

Culture- 3 working days

Chlamydia PCR (eye)- 7 working days

Viral PCR (Eye)- 3 working days

### Time limit for requesting additional investigations:

7 days





Requests for extra tests must be received within the sample storage period and must be accompanied by a request form. Please telephone the laboratory before requesting extra tests to ensure the sample is available and still viable

**Adverse factors affecting the interpretation of microscopy and culture results:**

- Delays in processing may result in degradation of microorganism which generates results that do not reflect the true clinical situation
- Excessive temperature

Note: rapid transport to the laboratory is the best way to minimise uncertainty of results

**Specimen Collection:**

<b>Collection Containers</b>	<p>Eye, Nasal, Mouth, Throat: Charcoal Transport medium:</p>  <p>Ear: Charcoal Transport medium (wire shaft, orange top swab):</p>  <p>Chlamydia: Eye- COBAS Female swab kit:</p>  <p>Viral: eye- Virocult viral transport medium:</p> 
------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>Specimen Type</b>	Swabs
<b>Collection Methods</b>	<p><b>Eye- MC&amp;S and Viral:</b> Hold the swab parallel to the cornea and gently rub the conjunctiva in the lower eyelid. Place the swab inside the transport medium.</p> <p><b>Eye- Chlamydia:</b> Specimens must be taken before the use of fluorescein dye Superficial pus should be removed with a normal swab. This may be placed in a transport swab sent to Microbiology for bacteriological examination. Using the sampling swab, firmly stroke the whole area of the upper and lower lid palpebral conjunctivas to remove epithelial cells. Place in Cobas tube (yellow ) media – break swab shaft at visible mark.</p> <p><b>Ear:</b> Antibiotics or other chemotherapeutic agents should not be used in the aural canal for three hours prior to the swab being taken. Place the swab in the outer ear and rotate the swab gently. Place the swab inside the transport medium</p> <p><b>Nose:</b> Moisten the swab beforehand with sterile saline. Move the swab from the anterior nares and direct it upwards into the tip of the nose and gently rotate gently.</p> <p><b>Mouth:</b> To assure that the preconditions of the sampling for oral infections are comparable it is advised that patients should not:  1. Eat or drink within 2 hours  2. Brush their teeth within 2 hours  3. Use any mouth rinse or disinfectant within 2 hours prior to sampling •  If possible, samples should be taken in the morning under fasting conditions. • any lesions or inflamed areas using cotton tipped swabs. Samples of denture fitting surfaces should also be swabbed as these are more sensitive sites than the palatal mucosa to recover Candida species.  The use of a tongue depressor or spatula may be helpful  Rub the swab over the appropriate area. Place the swab inside of the transport medium.</p> <p><b>Throat:</b> Throat swabs should be taken from the tonsillar area and/or posterior pharynx, avoiding the tongue and uvula. Place the swab inside the transport medium. Throat culture should not be taken if the epiglottis is inflamed as sampling may cause serious respiratory obstruction.</p>