

Central Vermont Medical Center

Department of Pathology and Laboratory Medicine

**ACID FAST BACILLI (AFB)
SPECIMEN COLLECTION**

Collection of specimens

Pulmonary specimens:

- A series of 3 sputa (not saliva), transtracheal aspirates, bronchoscopy material or aerosol induced sputum is optimal for testing. Collect at least 2-10 ml of specimen into a sterile container. Specimens should be collected 8-24 hours apart with at least one sample being an early morning specimen.
 - For sputum specimens, rinse mouth with water before collecting the specimen. Cough deeply in order to obtain the thick, mucous secretion from the lungs.
 - Specimens from one morning may be pooled, but DO NOT POOL SAMPLES FROM DIFFERENT DAYS.
- Refrigerate the specimen until it can be delivered to the lab.

Extra pulmonary specimens:

- **Abscess:** Remove surface exudates by wiping with sterile saline or 70% alcohol. Collect fluid abscess material with Luer tip syringe and or remove tissue aseptically. For open lesions or abscesses aspirate material from under the margin. Submit in the sterile 50mL conical tube provided or sterile urine cup. Transport as soon as possible at room temperature or refrigerate at 2-8°C.
- **Blood:** Collect in vacutainer using SPS, heparin or citrate as an anticoagulant. Do not use EDTA or a yellow top tube containing ACD. Vacutainers may be shipped or the blood may be transferred into the sterile plastic centrifuge tube. Store and ship at room temperature.
- **Bone Marrow:** Ship in collection vessel (such as 10mL yellow top container containing SPS) or transfer into sterile plastic centrifuge tube. Transport at room temperature.
- **CSF:** > 2 ml needed. Collect in sterile container. Transport at room temperature.
- **Feces:** Stool cultures are not optimal for the recovery of mycobacteria. Routine screening of gastrointestinal specimens to predict disseminated *M. avium* complex infection is not recommended by the American Thoracic Society.
- **Pleural fluid, ascetic fluid, synovial fluid, paracentesis and thoracentesis fluid:** A volume of > 5 ml is required in a sterile container. Store refrigerated at 2-8°C until the specimen can be shipped at room temperature.
- **Tissue** (any site, indicate source): Aseptically place into sterile container with a 2-3mL of sterile saline to prevent desiccation. Ship and store at room temperature.
- **Urine:** Collect a minimum of 40 ml from a first morning specimen, clean catch or catheterization in a sterile container. Transfer to sterile plastic centrifuge tube. Store refrigerated until delivery to the lab.

Specimen labeling

- All specimens must be clearly labeled with the patient's FIRST and LAST NAME, and date of birth.

- All specimens must be accompanied by an electronic or paper requisition indicated the test requested, specimen source and date and time of specimen collection.

Specimen transport & delivery

All specimens should be delivered to the laboratory as soon as possible for timely processing of the specimen. Transport at the temperature indicated above (room temperature or refrigerated) based upon the specimen type.

Reference:

Vermont Department of Health specimen collection guidelines, Micro 418, Rev.6 (10/15)

Alias:

MIC.33050