



UTM™ Viral Transport Media



I. Principle:

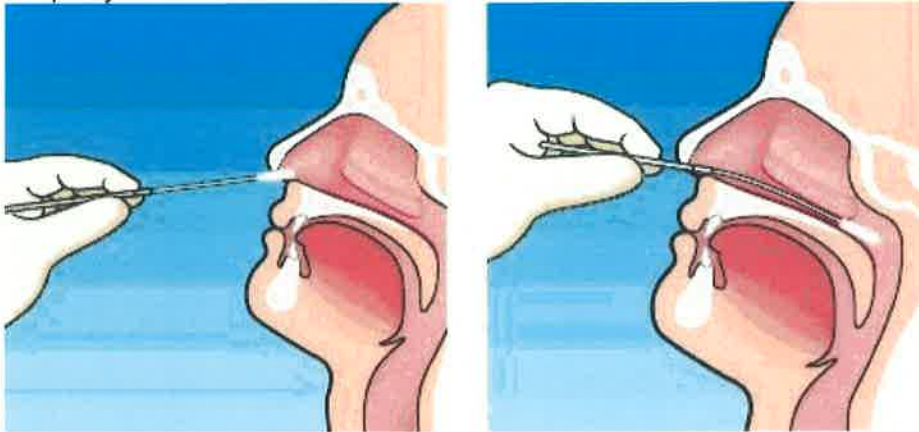
Proper collection and handling of patient specimens are of utmost importance in respiratory virus detection.

II. Procedure:

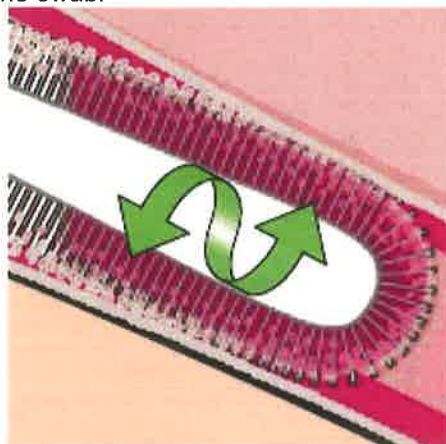
Nasopharyngeal Swab Collection:

1. Open the sterile, flexible minitipped swab package and remove the swab.
2. Tilt the patient's head back (head should be inclined from vertical).

3. Gently insert the sterile swab along the nasal septum just above the floor of the passage to the nasopharynx until resistance is met.



4. Rotate the swab gently against the nasopharyngeal mucosa for 10-15 seconds and then gently remove the swab.



5. Insert the swab into the UTM tube pushing it all the way to the bottom of the of the tube.

6. Holding the swab shaft close to the rim of the tube and point the tube away, break the swab shaft along the prescored breakpoint indentation.



7. Label the specimen appropriately, including two patient identifiers, (e.g. patient name, and date of birth), specimen source and date and time of collection.

8. Transport the specimen to the laboratory after collection. If specimen delivery will be delayed the specimen may be stored at 2-8°C using cold packs, wet ice or other refrigerant coolants for up to 7 days hours before being tested. If longer storage is required, the specimen should be frozen at -70°C .