These instructions provide guidance on how to collect a nasopharyngeal swab

Nasopharyngeal swabs can be used to collect an appropriate specimen for influenza testing by RT PCR. Specimens must be immediately placed in 1-3 ml of viral transport medium (VTM). If an NP swab kit with VTM is not used, VTM* can be made in house. Specimens should be collected within the first 24-72 hours of onset of symptoms, and no later than 5 days after onset of symptoms.

**HOW:**
Use infection control precautions:
- Personal protective equipment: wear a surgical mask and disposable gloves.
- When completed, dispose of all PPE and other contaminated materials in the trash.
- Wash hands thoroughly with soap and water or alcohol-based hand gel before and after the procedure.

How to do a nasopharyngeal swab
- Remove the patient’s surgical mask to perform the procedure and replace when done.
- Use a flexible fine-shafted aluminum swab with a polyester (dacron or rayon, not cotton or calcium alginate) tip.
- The distance from the patient’s nose to the ear gives an estimate of the distance the swab should be inserted.
- Insert swab into one nostril straight back (not upwards) and back to the nasopharynx and leave in place for a few seconds.
- Slowly withdraw swab with a rotating motion.
- Place tip of the swab into a vial containing 2–3 ml of VTM* and cut the shaft.

**Storage**
- Specimen(s) can be kept refrigerated at 4°C for up to 72 hours
- Specimens that cannot be processed within 48-72 hours should be frozen at or below −70°C.

Please note: The DOHMH PHL is no longer accepting individual specimens for influenza testing (except for surveillance projects and investigations of clusters or nosocomial illness as pre-approved by DOHMH). Diagnostic specimens should be sent to a commercial laboratory for testing.

* Virus transportation medium for use in collecting nasopharyngeal specimens
Add 10 g veal infusion broth and 2 g bovine albumin fraction V to sterile distilled water (to 400 ml). Add 0.8 ml gentamicin sulfate solution (50 mg/ml) and 3.2 ml amphotericin B (250 μg/ml). Sterilize by filtration.