ESwab Collection Instructions:

Step	Action
1	Perform hand hygiene and put on gloves.
2	Positively identify the patient using at least two patient identifiers. (i.e. Name, DOB, and/or MRN)
3	Open the ESwab peel pouch and remove the swab
4	Collect the patient sample using the swab. Note: Touching the swab applicator below the pink breakpoint should be avoided as it could lead to contamination and incorrect results. 
5	Remove the screw cap from the ESwab tube and insert the swab all the way to the bottom of the tube. 
6	While holding the tube away from your face, hold the end of the swab shaft and bend it at a 180-degree angle to break it at the marked breakpoint 
7	Screw the cap on tightly to prevent leakage. 
8	Dispose of the swab shaft in a regular trash can
9	Apply the Specimen information label to the tube. (Do not cover the tube's lot number or expiration date.) Write the date and time of collection on the label. 
10	Place the tube in a biohazard transport bag
11	Remove gloves and perform hand hygiene
12	Promptly transport specimen to the Laboratory. Specimens must be received in laboratory within 24 hours of collection.

Cautionary Notes per the manufacturer:

- Do not send a dry ESwab as this will lead to unsatisfactory results; Swabs sent with No liquid or very little liquid will be rejected for recollection by the laboratory.
- If the tube spills its contents prior to inserting the swab, the liquid is non-toxic. Put the swab in another tube before sending it to the laboratory and discard the spilled tube.
- If the tube spills after contamination from inserting the swab, follow your facilities instructions for blood and body fluid clean up. Refer to your facility's infection control manual for further instruction.
- If contaminated fluid splashes onto the personnel collecting the sample, treat it as a blood and body fluid exposure. Refer to your facility's infection control manual for further instruction.

- Swabs are the least appropriate specimen for microbiology analysis, as the organisms isolated may only be colonizing the area and are not involved in the infective process.
- Cultures taken from open skin or abscesses may be compromised due to the fact that these lesions are often colonized with a large number of indigenous microbiota.