

DynamicHealth™

<https://www.dynahealth.com/skills/t1585081292688-testing-for-covid-19-coronavirus>

Nursing Skills

Testing For COVID-19 (Coronavirus)

Procedure

PROCEDURE STEPS

1. Use meticulous hand washing and aseptic non-touch technique throughout procedure to prevent disease transmission.
2. Put on a gown, gloves, face mask or [appropriate respirator](#) (if available), and eye protection.[1 2 3 5](#)
3. Have patient sit upright for specimen collection, if possible.
4. **To obtain nasopharyngeal specimen** (priority specimen type for diagnosis):[1 5 7 8](#)
 1. Have patient tilt their head back 70°. Use nondominant hand to support back of head, as needed.
 2. Inspect nasal passages for obstruction. Avoid collecting specimen collection from an obstructed nostril.
 3. If there is a lot of mucus in nose, have patient wipe or blow nose because mucus can interfere with obtaining a good specimen.
 4. Open test kit and remove swab. Verify swab is intended for nasopharyngeal specimen collection. Do not allow swab to come into contact with any surface.
 5. Holding swab at score line, insert swab into nostril parallel to palate until tip is roughly at level of anterior ear.
 6. If resistance is met, withdraw swab slightly, elevate tip, and reinsert. Do not use force when inserting swab.
 7. Rotate swab several times to obtain specimen. Leave in place a few seconds to allow absorption.
 8. Remove swab and place in collection tube with sterile transport medium.
 9. Break swab at score line. Place lid on collection tube and close tightly.
5. **To obtain oropharyngeal specimen:**[1 7](#)
 1. Open test kit and remove swab. Do not allow it to come into contact with any surface.
 2. Have patient open mouth wide and tilt head back as tolerated.

3. Use nondominant hand to depress tongue with tongue depressor so oropharynx is visible.
 4. Holding swab at score line, insert swab into mouth, taking care to avoid contact with tongue, cheeks, palate, or uvula.
 5. Rotate swab several times over posterior oropharynx and tonsils to obtain specimen.
 6. Remove swab, again taking care to avoid contact with tongue, cheeks, palate, or uvula.
 7. Place in appropriate collection tube, per national guidelines, with sterile transport medium. For example, in the United States, oropharyngeal swabs should be placed in same collection tube as nasopharyngeal swab.¹
 8. Break the swab at the score line. Place lid on collection tube and close tightly.
6. **If patient has a productive cough**, obtain a sputum specimen. Sputum induction is not recommended.^{1 6 13}
1. Have patient rinse their mouth with water.¹
 2. Have patient cough deeply and expectorate into a sterile, leak proof specimen container.¹
 3. Close lid tightly on specimen container.
7. Label specimen in presence of patient with date, time, and your initials.¹²
 8. Place specimen in biohazard bag.

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