

Michigan
COMMUNITY INTEGRATED PARAMEDICINE
Procedure Protocol
SPECIMEN COLLECTION

Initial Date: October 23, 2020

Revised Date:

Section 11-33

This protocol is for trained CIP Paramedics only. If during assessment, procedure, or treatment the patient is found to have a medical emergency in need of hospital treatment, the CIP visit will be suspended, and local MCA protocols utilized.

Purpose: Provide guidelines for CIP paramedics to obtain and transport specimen at the request of a health care provider as approved by the MCA

Aliases: labs, strep test, swab test

- I. Indications
 - a. Order from a clinician requesting specimen collection to be obtained and transported to the appropriate testing facility when a patient has a barrier to submitting specimens in a timely manner.
 - b. Specimen collection for the purpose of point of care testing.

- II. Procedure
 - a. For all procedures accompanied by a physician's order.
 - i. Review order for special instructions prior to collecting the specimen
 - ii. Label with the patient's name, date of birth, and additional information required for the specific specimen (source, date, time) or required by the MCA or specimen testing facility.
 - iii. Complete appropriate lab paperwork.
 - iv. Transport sample in a biohazard bag or follow clinician's order for shipping.

 - b. Lab Draw (optional)
 - i. Considerations: Patients who are on blood thinners may require prolonged direct pressure after blood draw. Equipment
 1. Appropriate needle
 2. Rainbow tubes
 - ii. Procedure
 1. Select an appropriate site and using universal precautions cannulate the vein.
 2. Blood tubes should be collected in the order of red, green, purple, pink and blue.

 - c. Urine Specimen (optional)
 - i. Equipment
 1. Urine specimen cup
 2. wipes
 - ii. Procedure
 1. Obtain sample through method ordered (clean catch, foley bag, etc.)

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- d. Nasal Swab
- i. Equipment – appropriate swabs for specific test
 - ii. Procedure
 1. Place patient in seated position
 2. Tilt patient's head back slightly to visualize nasal passages
 3. Gently insert swab along nasal septum, just above the floor of the nasal passage, to the nasopharynx
 - a. Stop when resistance is met & do not force the swab further
 - b. If resistance is detected, pull back slightly and try reinserting at a different angle, closer to the floor of the nasal canal
 - c. The swab should reach a depth equal to the distance from the nostrils to the outer opening of the ear
 4. Rotate swab several times, remaining in the passage for 10 seconds
 5. Gently removed swab while rotating
 6. Place swab into collection tube according to directions and prior to breaking the stick
 7. Secure lid on the tube
- e. Throat Swab
- i. Equipment – appropriate swabs for specific test
 - ii. Procedure
 1. Place patient in seated position
 2. Tilt patient's head back, instruct them to open their mouth and stick out their tongue
 3. Use a wooden tongue depressor to hold the tongue in place
 4. Visualize the posterior nasopharynx and tonsillar arches
 5. Without touching the side of the mouth, insert the swab reaching the posterior nasopharynx and tonsillar arches wiping the swab on the area
 6. Place swab into collection tube according to directions and prior to breaking the stick
 7. Secure the lid on the tube
- III. Documentation **see CIP Documentation protocol**
- a. Additionally: testing procedure used and results if applicable