

Viral Saliva Specimen Collection Instructions

Included in this kit a pre-labeled sterile tube for saliva collection, a biohazard bag with absorbent material

NOTE: DO NOT eat, drink, smoke, brush teeth, or chew gum at least 30 minutes prior to collection. Saliva collection is intended to be self-administered in a contact-free collection method observed by a trained witness. PPE can be minimized to mask and gloves while maintaining at least 6 feet of separation. Additional PPE as defined by CDC may be worn. DO NOT use the kit if the specimen collection tube is damaged or broken.

Patient cleans hands prior to collection with alcohol-based sanitizer or soap and water.

The observer confirms patient identity using two identifiers (name, DOB, etc.) before providing the tube.

Patient should begin to pool saliva in their mouth-use a gentle sucking motion to help move saliva to the middle of the mouth (this should be normal saliva (spit) that collects in the mouth. DO NOT cough or sniffle to collect deep saliva/sputum).

The patient removes the lid of the sterile collection container and gently expels the collected

saliva into the tube until the liquid reaches the 1 mL mark on the tube (DO NOT include bubbles in the measurement). It is okay if the saliva is above the 1mL mark.

The patient screws the lid securely on the collection tube. Failure to properly secure the lid may result in specimen rejection or delayed testing.

The patient places the sample in a biohazard bag and securely seals it.

The patient cleans hands with alcohol-based sanitizer or soap and water. If the observer had contact with the patient, then the observer cleans hands and changes gloves.

Samples are stable at room temperature for up to 72 hours. After 72 hours, samples degrade at room temperature which increases the likelihood of indeterminate results. To maintain the sample's quality after 72 hours, refrigerate the sample at 35.6 °F/35.60 Tc 0 Tw 10.11 0 Td()Tj-.832(35.)12 (6)T0 Tc (F)Tj0