

lab2

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Learning outcome

- Study how to collect right samples from the target organs
- Learn which material we should use in medical virology lab
- Learn how to transport and storage viral specimens

1-Collection of Virus specimens

A-Selection of specimens B-Material for sample collection C-How to collect samples

2- Transport and Storage of Specimens

A-Selection of specimens

• To ensure accurate diagnosis of viral disease, it is important to select the appropriate specimens.

• The specimen should be collected from the target organ most closely associated with clinical symptoms to identify the etiologic agent responsible for the patient's disease.

• It should be collected during the acute phase of infection when viral concentration is at its maximum. Autopsy samples need to be collected as soon as possible after death before tissues start decomposing.

• Transport the specimens as directed so as to maintain viability and minimize overgrowth with contaminating organisms.

• Place each specimen into a separate container labeled with the patient's name and identification number, the collection site, the date of collection, and the time of the collection.

B)Materials for Samples collection

1- Reagents

- Viral transport medium (VTM):

1-Commercial

contains Salt solution with antimicrobial agents to prevents specimen drying, maintains viral viability and retards the growth of microbial contaminants

- the VTM 'M4'. Tubes containing 2-3 mL VTM are used for swab specimens
- while those with 5-7 mL VTM are suitable for tissue samples.



2017

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2-Prepared

A. Transport medium 199

- 1. Tissue culture medium 199 containing 0.5% bovine serum albumin (BSA)
- 2. To 1 litre of above add:
 - benzylpenicillin (2 x 106 IU/litre)
 - streptomycin (200 mg/litre)
 - polymyxin B (2 x 106 IU/litre)
 - gentamicin (250 mg/litre)
 - nystatin (0.5 x 106 IU/litre)
 - ofloxacin hydrochloride (60 mg/litre), and sulfamethoxazole (0.2 g/litre)
- 3. Sterilize by filtration and distribute in 1.0–2.0 ml volumes in screw-capped tubes.

B. PBS-Glycerol transport medium

1. Phosphate-buffered saline (PBS):

- NaCl 8g
- KCl 0.2g
- Na2HPO4 1.44g
- KH2PO4 0.24g
- Distilled water to make 1 litre

2. Autoclave PBS and mix 1:1 with sterile glycerol to make 1 litre

- 3. To 1 litre PBS/glycerol add:
 - benzylpenicillin (2 x 106 IU/litre)
 - streptomycin (200 mg/litre) polymyxin B (2 x 106 IU/litre)
 - gentamicin (250 mg/litre)
 - nystatin (0.5 x 106 IU/litre)
 - ofloxacin hydrochloride (60 mg/litre), and
 - sulfamethoxazole (0.2 g/litre)

Dispense 1.0–2.0 ml of transport medium into sterile plastic screw-cap vials (Cryovials). It is best to store these vials at –20 °C until used. However, they can be stored at +4 °C for 48–96 hours (optimally less than 48 hours) or at room temperature for short periods of 1–2 days.

Note: Normal saline (NS) solution should not be used as a VTM. Adding BSA and antibiotics to NS changes the pH and this will destroy viruses.

2-Supplies

Container

 Sterile, leak-proof, screw-cap containers including urine cups, disposable centrifuge tubes (15 and 50 mL), suitable for holding 1-2 mL of VTM.





Swabs

Sterile cotton, or rayon-tipped swabs with plastic or aluminum shafts small-tip flexible swabs are used for certain samples such as urethral swabs.

Swap tips:

1- head:
Cotton
rayon
Nilon
Metal
2- stick:
Woden
Plastic
metal



Syringe

• Tuberculin syringe with 26- or 27-gauge needle for aspirating vesicular fluid.



Blood tube

 Blood collection tubes containing anticoagulant (ACD)



3-Equipment

Pap smear

A Pap smear (Papanicolau smear; also known as the Pap test) is a screening test for cervical cancer. The test itself involves collection of a sample of cells from a woman's cervix (the end of the uterus that extends into the vagina) during a routine pelvic exam. The cells are placed on a glass slide and stained with a substance known as Papanicolau stain. The stained cells are then examined under a microscope to look for pre-malignant (before-cancer) or malignant (cancer) changes.



Surgical tools



C-How to collect samples

Refer to the following information when selecting appropriate specimens for testing.

1-Swabs:

Rectal swab: Insert swab 4-6 cm and roll against mucosa. Place swab in 1-2 ml of sterile saline or viral transport media, break off the swab into medium.

Vesicle or lesion swab: Open lesion carefully using a sterile instrument. Moisten a sterile swab with sterile saline or other transport media and collect cells from open lesion. Place swab in 1-2 ml of sterile saline or viral transport media.

Ocular swab: Collect from lower conjunctiva using a swab moistened with sterile saline. Place swab in 1-2 ml of sterile saline or viral transport media.



Throat swab (THRT): Swab posterior throat and tonsil area and place swab in 1-2 ml of sterile saline or viral transport media.

• **Nasal swab:** Swab nostrils separately and place swabs in 1-2 ml of sterile saline or viral transport media.

• Nasopharyngeal swab (NP): Insert sterile swab through nostril into nasopharynx and rotate several times. Remove and place swab in 1-2 ml of sterile saline or viral transport media.



2-Blood (BLD):

1- Whole blood: Collect in EDTA (purple top) tube.

2- Serum: Collect in red top tube. Centrifuge and remove from clot if possible.

*Note: When requesting antibody titers, send paired samples for the most accurate results.





3- Aspirate:

1- Nasal Aspirate: Insert suction device through nostrils into nasopharynx. Aspirate fluid while removing suction device. Flush device with sterile saline and collect in a sealed container.



2-Throat Aspirate

3- Fecal Aspirate

4- Tissue or Biopsy (BX):

Place in sterile container or VTM with a small amount of sterile saline to keep moist.



2017

5- Self-collected:

1-Semen: Collect in semen straw and transfer immediately into liquid nitrogen.

2- Urine (URN): Collect at least 1 hour after last urination. Transport specimen in polypropylene containers, which are provided on request.

3- Feces: Place 2-4 grams inside a sterile sealed container.

6- CSF: Collect the cerebrospinal fluid in sterile container.







Regular needle

CSF needle

D- Appropriate Specimens for Virus Culture

Organ system involved	Agent suspected	Appropriate specimens
Respiratory	rhinovirus, RSV	NP, BAL, OTHER RESP FLD, NW
(upper respiratory, tracheobronchitis, pneumonitis)	influenza, parainfluenza	NP, BAL, LUNG BX, NW
	cytomegalovirus	BAL, LUNG BX, BLD, THRT
	adenovirus, enterovirus	THRT, BAL, STOOL
Central Nervous System	enterovirus	THRT, STOOL, CSF
(encephalitis, encephalomyelitis, meningitis,	cytomegalovirus	CSF, BLD
neuritis, polyradiculo-encephalopathy)		
Skin, Mucous Membrane, Eye	varicella-zoster	VESICL
	verpes simplex	VESICL, THRT, EYE SWB
	enterovirus	VESICL, THRT, STOOL
	adenovirus	EYE SWB
Urogenital	herpes simplex	GENSWB, URN
	adenovirus	THRT, URN
	enterovirus	THRT, URN, STOOL
	cytomegalovirus	URN, BLD, THRT
	chlamydia	GENSWB, URN
Gastrointestinal	adenovirus	STOOL, THRT, BX
	enterovirus	
	cytomegalovirus	STOOL, BX, BLD
	herpes simplex	STOOL, BX, BLD
Cardiovascular	influenza	NP, NW
(Pericarditis, myocarditis)	enterovirus	STOOL, THRT, PERICD
Mononucleosis	cytomegalovirus	BLD, THRT, URN

2017

2-Transport and Storage of Specimens

-Use provided transport bag usually combined with a request form.

-Samples should reach the laboratory within 24 hrs. If this is not possible refrigerate

-Store samples in a short term transport storage 4°C degrees Celsius after that in a long term transport(>72hours) storage-70°C with liquid nitrogen

-Swab samples can be kept a 2 - 27 degrees Celsius for up to 4 - 6 days and NEVER send dry swabs.





The request form

Educational Videos

http://www.copanusa.com/education/videos/