

Non-Technical SOP

Title	Throat Culture Collection	
Prepared by	Patient Services BPT	Date: 4/17/05
Owner/BPT leader	Elaine Phillips	Date: 4/17/05

Corporate Approval		
BPT Medical Advisor	James E. Fitzwater, MD.	
Signature	Original On file with Technical Standards and Practices	Date: 5/26/05
Medical Director/designee	Sam B Reichberg, MD, PhD.	
Signature	Original On file with Technical Standards and Practices	Date: 5/26/05
Corporate Issue Date	5/26/05	

Local Approval		
Print Name and Title	Signature	Date
Vincent DeRisio, D.O. Medical Director		07/17/07
Donna Bryant, Manager Patient Services		07/17/07
Local Issue Date:	Local Effective Date:	

12 month (or new) management review and approval: Signature acknowledges SOP version remains in effect with NO revisions.		
Print Name	Signature	Date
Vincent DeRisio, D.O. Medical Director		07/17/07
Donna Bryant, Medical Director		07/17/07

1. PURPOSE

The purpose of this document is to provide standardized instructions on the collection of throat specimens at the Patient Service Center.

2. SCOPE

This document applies to all Quest Diagnostic phlebotomists and authorized employees.

3. RESPONSIBILITY

TASK	RESPONSIBILITY
Review, Approval and Update	Director of Patient Services
Ensure all procedures are followed	Patient Services Manager
Comply with Procedure	Patient Services Staff

4. DEFINITIONS

Throat cultures offer direct and indirect information about the patient’s upper respiratory status. A positive result (or a specimen that has identifiable bacterial pathogens) will enable the physician to treat the patient. A negative result (no signs of bacterial pathogens) will alert the physician to look for other causes.

5. PROCEDURE Throat Culture Collection

Step	ACTION
1	Collection of throat cultures on children less than (3) years of age is prohibited. See policy on Invasive Specimen Procurement.
2	The following materials are needed: <ul style="list-style-type: none"> ● Sterile tongue depressor ● Sterile swab ● Face shield ● Gloves ● Bright light source
3	Ask the patient to sit up very straight, open mouth widely and say "ah". This helps to lift the uvula and aides in reducing the gag reflex. You may also want to ask the patient which part of the throat bothers them.

4.	Gently depress the tongue with the tongue depressor. Guide the swab over the depressor. Be certain to touch only the depressor at this point. Culture can be contaminated if the tongue, teeth, cheeks, or lips are touched. Move the swab into the posterior pharynx. The mucosa behind the uvula and between the tonsillar pillars is swabbed with a gently back and forth sweeping motion. Be sure to sample any red areas or white spots in this area. Be sure and ask the patient if the sore areas were swabbed.
5.	Return the swab to the transport medium. If transport ampule is present, crack ampule to release media.
6.	Label swab with the patient's name, date and collector's initials (or electronic label)
7.	Discard the tongue depressor in the trash.
8.	Remove and discard the gloves in the appropriate biohazard container.
9.	Store and transport Culture Swab at room temperature.

6. RELATED DOCUMENTS

**See Policy on Invasive Specimen Procurement
Directory of Services**

7. REVISION HISTORY

Version	Date	Revision Purpose	Name of Reviser