

CORTISOL, SALIVA COLLECTION INSTRUCTIONS

Special Instructions for collection:

- Do not brush teeth before collecting sample.
- Do not eat or drink for 15 minutes prior to sample collection.
- Collect sample between 11 p.m. and midnight*.
- Preferred collection container is a Sarstedt Salivette tube available through HML.

To use the salivette:

1. Remove the top cap of the tube to expose the swab.
2. Place swab directly into the mouth by tipping the tube so the swab falls into the mouth. Do NOT touch the swab with your fingers.
3. Keep the swab in your mouth for approximately 2 minutes. Roll the swab in your mouth. Do NOT chew the swab.
4. Spit the swab back into the tube. Do NOT touch the swab with your fingers.
5. Replace the cap. Make sure the cap is screwed on tightly.
6. Record the patient's full legal name, date of birth and collection date and time on the tube.

*Note: - Your doctor may require a different collection time.
You may also collect the specimens from 7:00 a.m. – 9:00 a.m. or
3:00 p.m. – 5:00 p.m., depending on your doctor's instructions.

PINWORM COLLECTION INSTRUCTIONS

Pinworm ova are deposited on the skin near the anal opening during the night, or when the patient is at rest.

1. Sample ***must be*** collected after the patient has been asleep for several hours or in the morning before the patient rises or uses the bathroom, preferably while the child is still in bed and the room is dark. You may use a flashlight if needed.
2. ***DO NOT*** wipe or wash the area before swabbing.
3. Take the paddle out of the collection container and press the sticky surface of the square end firmly against the skin on all sides around and across the anal opening. A single paddle may be used for all sides.

NOTE: DO NOT insert paddle into the rectum.

4. Replace the paddle in the tube. Replace the lid and tighten ***firmly***.
5. Wash and dry hands thoroughly after collection.
6. ***Label the container*** with the patient's first and last name, date of birth, and the date and time of the collection.
7. Place the container in a plastic bag.

Please bring specimen to the Laboratory as soon as possible after the completion of the collection.

SEMEN ANALYSIS COLLECTION INSTRUCTIONS

It is recommended that the semen sample be collected following a 2 to 7-day period of abstinence.

The specimen should be collected in a clean specimen container such as a sterile, screw-top urine specimen container provided by the doctor's office. The specimen should not be collected in a condom because of spermicidal activity.

Write the patient's full name and date of birth, the collection date and time on the container.

The specimen should be submitted to the laboratory as soon as possible following collection. It is essential that the semen specimen be kept as close to body temperature as possible and not subjected to temperature extremes following collection and during delivery to the laboratory.

The specimen should be delivered to the Laboratory between the hours of 7:00 am to 12:00 pm (noon) Monday through Thursday.

Please put the time of collection on the test request.

For additional information, contact your physician.

STOOL COLLECTION INSTRUCTIONS FOR
***Clostridium difficile*, and *Fecal WBCs*: (REFRIGERATE specimen)**
***H. Pylori*, and *Fecal Reducing Substances*: (FREEZE specimen)**

1. Collection of the specimen may be facilitated by placing the hat over the opening of the toilet seat to catch the specimen.
2. Put a walnut-size portion in a clean container.
3. Write the patient's full name and date of birth, collection date and time on the container.
4. Place the container in a plastic bag.
5. Place in refrigerator or freezer accordingly.
 - a. **Freeze** specimens for **H. Pylori** testing and **Fecal Reducing Substances** testing.
 - b. **Refrigerate** specimens for **Clostridium difficile** testing and **Fecal WBC** testing.
6. Bring to Lab within 24 hours of collection.

STOOL CULTURE COLLECTION INSTRUCTIONS

Culture:

1. Collection of the specimen may be facilitated by placing the hat over the opening of the toilet seat to catch the specimen.
2. Remove cover from C&S vial (red cap vial) and use the included spoon to fill vial. **IMPORTANT: Stop filling vial when the volume within the vial has reached the arrow on the label.**
3. Screw the cap onto the vial and shake vigorously.
4. Write the patient's full name and date of birth, collection date and time on the container.
5. Place the container in a plastic bag.
6. Keep at room temperature.
7. Bring to Lab within 48 hours.

STOOL FOR O&P AND/OR GIARDIA ANTIGEN COLLECTION INSTRUCTIONS

Ova and Parasites:

NOTE: Are you taking antacids or had barium recently? If yes, wait two days after discontinuing antacids before collecting specimen. Are you taking barium, metronidazole or tetracycline? Wait 14 days from when you had the barium, metronidazole or tetracycline before collecting specimen.

1. Collection of the specimen may be facilitated by placing the hat over the opening of the toilet seat to catch the specimen.
The specimen must not be contaminated with urine or water.
2. Remove cover from Proto-fix (white cap vial) and use the included spoon to fill vial. **IMPORTANT: Stop filling vial when the volume within the vial has reached the arrow on the label.**
3. Screw the cap onto the container and shake vigorously.
4. Write the patient's full name and date of birth, collection date and time on the container.
5. Place the container in a plastic bag.
6. Keep at room temperature.
7. Bring to Lab within one week.

If more than one specimen is to be collected, they are to be collected on different days.

**STOOL COLLECTION INSTRUCTIONS FOR
*Norovirus Group I and II:***

1. Collection of the specimen may be facilitated by placing the hat over the opening of the toilet seat to catch the specimen.
2. Remove cover from the Cary-Blair transport media container.
3. Put a walnut-size (Tablespoon amount) portion into the container.
4. Write the patient's full name and date of birth, collection date and time on the container.
5. Place the container in a plastic bag.
6. Keep in refrigerator until transporting to the lab.
7. Bring to Lab within 24 hours of collection.

TIMED FECAL COLLECTION INSTRUCTIONS

Your physician has requested that you collect stool for testing as part of your care. Important health decisions depend on the results of your stool test. The test must include all of the stool you pass during the collection period specified by your physician. Otherwise, the test will be inaccurate.

Please read these entire two pages before you begin collecting stool.

Contents of the kit:

- Instruction brochure
- Screw-capped stool collection containers
- One toilet adapter to hold the collection container in the toilet
- Two self-sealing plastic bags for returning the collection containers

NOTE: Use only the labeled collection containers. This ensures proper handling and reporting of results to your physician.

Collection Instructions:

- If your stool will be tested for fat, follow the enclosed special instructions for your diet. Start the diet at least 72 hours before you begin collecting stool.
- Start your stool collection on this date: _____ At your earliest convenience
- Collect all of your bowel movements in the collection containers according to the instructions checked:
 Single specimen 24 hours 48 hours 72 hours _____

Fill Instructions:

To collect a stool specimen, follow these instructions:

1. Lift the toilet seat, and place the toilet adapter across the rim of the toilet bowl. Place the adapter so the shorter support lies across the rear of the toilet bowl and the longer support lies across the middle of the toilet bowl.
2. Unscrew the cap from the collection container. Place the container in the hole of the toilet adapter (figure 1).

Figure 1. This top view of a toilet shows how the collection container slides into the ring of the toilet adapter. The shorter support of the adapter lies across the rear of the toilet bowl rim. The longer support lies across the middle of the toilet bowl rim. The toilet seat is up.

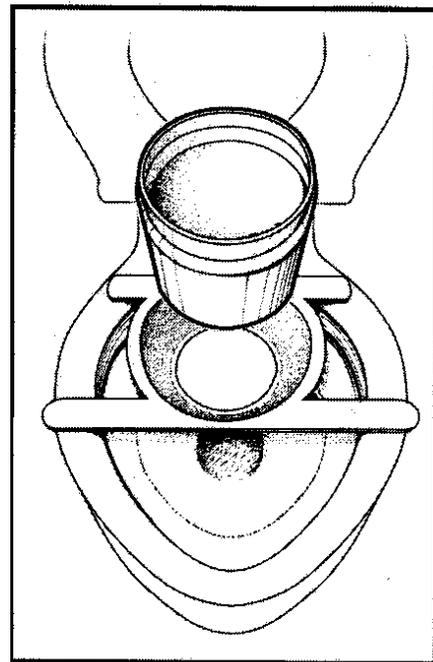


Figure 1

3. Put the toilet seat down (figure 2). The closed end of the container should rest in the water or just above it. Depending on the water level in the toilet and shape of the toilet seat, the collection container may float and rise. As you sit, align the container to be sure your stool goes into the container.

Figure 2. This top view of a toilet shows the toilet adapter holding the collection container in place. The toilet seat is down.

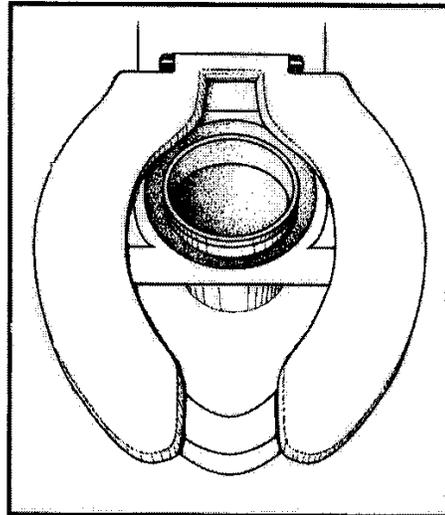


Figure 2

4. Continue to add stool to the container until it reaches the fill line or the collection time is completed. You may need to use multiple containers.
5. After your bowel movement, remove the container from the toilet. Screw the cap onto the container and wipe the outside of the container dry.
6. When your collection is complete, make sure you have screwed the cap evenly and tightly onto the collection container. Discard the toilet adapter. Place the capped container inside the plastic bag. Seal the bag. Return to your physician's office.

Instructions for the 100-Gram Fat Test Diet

A 100-gram fat test diet has been ordered for you. This diet is used to test how well you can absorb the fat contained in the foods you eat.

The diet is designed to help you take in about the same amount of fat each day. If possible, you should follow the diet for two days before stool collection and during the period of stool collection.

One hundred grams is in the average range of fat intake for most adults. You may tend to eat more or less fat than this, depending upon your appetite and the foods you choose.

If your intake of fat seems to fall short of or exceeds 100 grams per day, please let your physician know.

If you need further help planning your meals, ask to talk with a registered dietician.

The foods below are grouped according to their approximate fat content. While on the test diet, eat foods that give you a total of 100 grams of fat each day. The fat can be distributed throughout the day as you desire. If you are unable to eat a meal due to other medical tests, choose a snack to make up for the amount of fat missed in that meal.

15 Grams of Fat

1 weiner*
1 oz. (1 tbsp.) almonds or
peanuts

10 Grams of Fat

1 oz. cheddar, colby,
Swiss, or
American cheese*
1 cup whole milk
1½ tbsp. peanut butter
1 oz. potato or corn
chips (about 15
chips)
15 French fries
1 croissant
(medium)
8 oz. milkshake (whole
milk)
8 oz. malted milk
(whole milk)

5 Grams of Fat

1 oz. cooked meat (trim
away fat), poultry
or fish (cooked
weight)
1 oz. mozzarella cheese
1 egg (not fried)
1 oz. luncheon meat*
(1 oz. = 1 slice)
½ cup creamed cottage
cheese*
1 cup 2% milk
1 tsp. butter
(1 tsp. = 1 pat)
1 tsp. margarine
(1 tsp. = 1 pat)
1 tsp. mayonnaise*
2 tsp. mayonnaise-type
salad dressing

1 tbsp. French or Italian
dressing*
2 strips bacon
1 tsp. cooking fat or oil
2 tbsp. liquid non-dairy
cream substitute
3 tbsp. Half-and-Half
2 tbsp. sour cream*
1 tbsp. cream cheese*
10 medium green olives
5 large ripe olives
1 muffin
1 oz. biscuit or plain
cake donut
1/3 cup ice cream
1½ cup popcorn (popped
in oil)
3-4 inch pancakes
1-7 inch waffle

Foods with No Fat

You may eat these foods in any amount desired unless instructed otherwise. This includes products labeled fat-free or products with less than 1 gram of fat per serving.

egg whites
dried curd cottage cheese
skim milk
breads, cereals
pasta, potatoes, rice
saltines, melba toast, breadsticks
popcorn (popped in air)
pretzels
vegetables
fruit and fruit juices
fruit ice or sherbet
gelatin
angel food cake

pudding made with skim milk
hard candies, jelly-type candies
carbonated beverages
coffee or tea
ketchup, mustard, barbecue sauce
seasonings

In order that you consume an accurate intake of fat, do not use fats or oils when you cook. Bake, broil, boil, microwave or use a nonstick pan.

You can use the specific fat content of foods, which is often listed on product food labels, when it is available. The following is an example:

| Potato Chips | |
|-----------------------------------|-------------|
| Nutrition Information per Serving | |
| Serving size: | 1 oz |
| Servings per container | 16 |
| Calories | 185 |
| Protein | 2 g |
| Carbohydrate | 22 g |
| Fat | 10 g |

* Use regular product; not light/lite, lowfat or no fat.

When eating in restaurants, order foods without fat and ask for fat servings separately. Add the correct portion of fat to get the desired amount needed. Examples are listed below.

| Food Item | On the side |
|------------------|--------------------|
| dry toast / | butter / |
| dinner roll | margarine |
| plain salad | salad dressing |
| plain potato | sour cream |
| sandwich | mayonnaise |

The following is one sample menu that you can use as a guide. If these foods are not available, you may substitute foods with a similar fat content. Foods in **bold print** have fat. The portion size is indicated. Foods in regular print have no fat. They can be eaten as desired.

| <u>Breakfast</u> | <u>Grams of Fat</u> |
|---------------------------|---------------------|
| 1 egg – poached or | |
| boiled | 5 |
| toast | 0 |
| 1 tsp margarine | 5 |
| cereal | 0 |
| 1 cup 2% milk | 5 |
| fruit juice / coffee | 0 |
| sugar, salt, | |
| pepper, jelly | 0 |

| <u>Noon Meal</u> | <u>Grams of Fat</u> |
|--------------------------------|---------------------|
| 2 oz. meat (cooked) | 10 |
| 1 oz. swiss cheese | 10 |
| bread/sandwich bun | 0 |
| 2 tsp. mayonnaise | 10 |
| tossed salad | 0 |
| 1 tbsp. french dressing | 5 |
| 1/3 cup ice cream | 5 |
| coffee-black | 0 |
| 1 cup 2% milk | 5 |

| <u>Evening Meal</u> | <u>Grams of Fat</u> |
|---------------------------|---------------------|
| 3 oz. meat | |
| (cooked weight) | 15 |
| baked potato | 0 |
| 2 tbsp. sour cream | 5 |
| dinner roll | 0 |
| 1 tsp. margarine | 5 |
| vegetable | 0 |
| gelatin | 0 |
| 1 cup 2% milk | 5 |
| coffee-black | 0 |

| <u>Evening Snack</u> | |
|-----------------------------|-----|
| 1 oz. cheddar cheese | 10 |
| saltines | 0 |
| carbonated beverage | 0 |
| <hr/> | |
| Total Grams of Fat | 100 |

24-HOUR URINE COLLECTION INSTRUCTIONS

Use the following procedure for the correct specimen collection and preparation.

1. Verify your name and date of birth is correct on the 24 hour urine container(s).
2. Your 24 hour container MAY contain hazardous preservatives. Do not discard any liquid or powder in the bottle. If the powder or liquid comes in contact with your skin, wash the site right away. If blisters develop, call your doctor.
3. Discard the **first-morning** specimen and record the time of voiding on the label on the jug.
4. Collect all subsequent voided urine for the remainder of the day and night.
5. Collect the **first-morning** specimen on day two at the same time as noted on day one. This collection must be included to complete the 24-hour collection.
6. If you are needing a second container to complete the 24 hour collection, please notify your doctor's office in plenty of time.
7. Keep the collection refrigerated or in a container on ice until taking it to the laboratory or doctor's office.

URINE COLLECTION INSTRUCTIONS-MALE

The patient should first void a small amount of urine which is discarded. Some of the urine should then be collected in a clean container before voiding is completed.

A. Midstream Urine

1. Wash hands.
2. If not circumcised, hold the foreskin back before cleansing.
3. Wash urethral meatus with Clinipad® or cleansing towelette.
4. Urinate a small amount into the toilet or bedpan and stop.
5. Urinate the rest of the urine stream into a screw-capped, sterile urine container.
6. Place the cap on the cup and **TIGHTEN SECURELY**.
7. Label container with patient's full name and date of birth.

URINE COLLECTION INSTRUCTIONS-FEMALE

The patient should first void a small amount of urine which is discarded. Some of the urine should then be collected in a clean container before voiding is completed.

1. Wash hands.
2. Use Clinipad® or cleansing towelettes to cleanse genital area.
Do this three separate times.
3. Use free hand to spread labia apart during urination.
4. Keep the labia separated, urinate a small amount into the toilet or bedpan, and stop.
5. Place the cup under the stream and continue to urinate into the screw-capped, sterile urine container.
6. Finish voiding into toilet or bedpan.
7. Place the cap on the cup and **TIGHTEN SECURELY**.
8. Label container with patient's full name and date of birth.