



Arkansas Department of Health

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Governor Asa Hutchinson
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Updated April 26, 2020

Guidance Regarding Specimen Collection and Acceptable Swabs for COVID-19 Testing

The Arkansas Department of Health has expanded criteria for COVID-19 testing and recommends that clinicians consider testing patients for COVID-19 based solely on their symptoms. We also now recommend testing all those with history of potential exposure to COVID-19, even if asymptomatic. Providers should continue to use their best clinical judgment to determine if a patient's presentation is consistent with COVID-19 and needs testing.

Over the past few weeks, capacity for COVID-19 testing at commercial labs has increased significantly. For initial diagnostic testing for COVID-19, ADH recommends collecting and testing an upper respiratory specimen. Nasopharyngeal specimen is the preferred choice for swab-based COVID-19 testing. When collection of a nasopharyngeal swab (NPS) is not possible, the following are acceptable alternatives:

- An oropharyngeal (OP) specimen collected by a healthcare professional, or
- A nasal mid-turbinate (NMT) or deep nasal swab collected by a healthcare professional
 - Tilt patient's head back 70 degrees. While gently rotating the swab, insert swab less than one inch (about 2 cm) into nostril (until resistance is met at turbinates). Rotate the swab several times against nasal wall and repeat in other nostril using the same swab, or
- An anterior nares (nasal swab; NS) specimen collected by a health care professional or by onsite self-collection
 - insert the swab at least 1 cm (0.5 inch) inside the nares and firmly sample the nasal membrane by rotating the swab and leaving in place for 10 to 15 seconds. Sample both nares with same swab.

For a nasal swab (NS), a single polyester swab with a plastic shaft should be used to sample both nares. NS or NMT swabs should be placed in a transport tube containing either viral transport medium, or sterile saline.

Nasal swabs can be collected by the patient himself/herself under supervision of a healthcare worker; and is an acceptable alternative to the NP swab. It allows tested individuals and health care professionals to maintain a 6 foot distance. It also decreases the amount of personal protective equipment required.

Certain commercial labs like LabCorp have been approved by the FDA for in home collection kits (<https://www.pixel.labcorp.com/>) and may be an alternative for certain patients. Some FDA approved tests can use oral fluid specimens from individuals suspected of COVID-19 for testing (Curative-Korva SARS Cov 2 Assay). We suggest discussing other alternative specimens like oral fluid with your laboratory partner. Currently, ADH accepts only NPS, OP and NS for testing.

Acceptable Swabs

The FDA has made alternative recommendations in the context of limited quantities of testing supplies during this public health crisis, based on the best available evidence and in consultation with outside experts. We have included a list of examples of products, including catalog numbers for different distributors. The absence of a specific product from this list does not imply unacceptability of that product if it is of the correct type.

Below is a list of individually wrapped swabs. All swabs are flocked unless noted. Some swabs may be acceptable for specimen collection at multiple locations and are therefore listed under each location.

Nasopharyngeal:

- Puritan: 25-3316-H, 25-3316-U, 25-3317-H, 25-3317-U, 25-3318-H, 25-3318-U, 25-3319-H, 25-3319-U, 25-3320-H, 25-3320-U, 25-3320-H EMB 80, 25-3320-U EMB 80, 25-3320-H EMB 100, 25-3320-U EMB 100, 25-1406 1PF 50f, 25-800 1PD 50, and 25-800 1PD ALUM 50
- Copan: 503CS01, 553C\$, 518CS01, 518C\$, 501CS01, 551C\$, 162C\$, 160C^\$, 168C^\$, and 170KS01^
- BD: 220252 and 220251
- DHI/Quidel: 503CS01.DHI
- Fisher Healthcare: 23600952, 23600956, 2300961, 23500959[†], 2300963[†], 23600950, 1490623\$, 1490622^\$, 1490625^\$, and 1490640^\$
- Hardy/Healthlink: 518CS01, 501CS01, 162Ct**, and 160CC^\$

Oropharyngeal:

- Puritan: 25-1506 1PF SOLIDf, 25-1506 1PF 100f, 25-3206-H, 25-3206-U, 25-3706-H, 25-806 1PD and 25-806 1PD BT
- Copan: 502CS01, 552C\$, 519CS01, 519C\$, 164KS01, 175KS01, 159C\$, 155C^\$, 167KS01^, and 1U054S01, and 1C055S01
- BD: 220250 and 220115^\$
- Fisher Healthcare: 23600957, 23600951, 23600960\$, and 2300964\$, 1490641, 1490650, and 1490619\$
- Hardy/Healthlink: 519CS01, 502CS01, and 164KS01

Mid-Turbinate:

- Copan: 56380CS01, 56750CS01, 56780CS01
- Fisher Healthcare: 23600966

Anterior Nares:

- Puritan: 25-3206-H, 25-3206-U, 25-3706-H, 25-1506 1PF 100 , 25-1506 1PF solid, 25-1506 1PF BT, 25-1506 1PF TT MC, 25-1506 2PF BT, 25-1406 1PF BT
- Copan: 502CS01, 552C[†], 519CS01, 519C[†], 164KS01, 175KS01, 159C\$, 155C^\$, 167KS01^, 1U054S01, and 1C055S01
- BD: 220144, 220145, 220250, and 220115^\$
- DHI/Quidel: 20103

- Fisher Healthcare: 23600957, 23600951, 23600960\$, and 2300964\$, 1490641, 1490650, and 1490619\$
- Hardy/Healthlink: 519CS01, 502CS01, and 164KS01
- US Cotton: Spun Polyester Swab

Rayon swabs may not be compatible with all molecular testing platforms. Laboratories with in-house tests should perform analytical testing to confirm compatibility with individual platforms.

Please be aware that the CDC does not recommend use of calcium alginate swabs or swabs with wooden shafts, as they may contain substances that inactivate some viruses and inhibit PCR testing (see <https://www.cdc.gov/coronavirus/2019-ncov/lab/guidelines-clinical-specimens.html>).

To avoid specimens being wasted, if a lab is presented with a specimen that was collected or identified in a sub-optimal manner, FDA believes that it would still be appropriate for the lab to accept the specimen for analysis and note the circumstances on the report. These specimens may have decreased sensitivity, so caution should be exercised when interpreting negative results.

Clinicians with questions regarding this advice can call the ADH COVID-19 Physician's Call Line at 1-844-930-3023.