WOUND PATHOGEN PANEL



(PCR) Assays are the most commonly used molecular technique to detect and study microbes. As compared to other methods, real time PCR and analysis are definitive, reliable, accurate, and fast. OmniHealth Diagnostics uses the most advanced leading edge technology to perform infectious Diseases testing.

TEST INCLUDES

- · Acinetobacter baumannii
- Bacteroides fragilis
- Citrobacter braakii/freundii
- Citrobacter koseri
- Enterobacter cloacae
- Enterococcus spp.
- Escherichia coli
- Klebsiella aerogenes
- Klebsiella oxytoca/michiganensis
- Klebsiella pneumoniae
- Morganella morganii
- Proteus mirabilis
- Pseudomonas aeruginosa
- Serratia marcescens
- Staphylococcus aureus
- Staphylococcus epidermidis
- Staphylococcus saprophyticus
- Streptococcus pyogenes (Group A)

ABX Resistance Markers

- Class A -β-lactamase (blaKPC)
- Class A -β-lactamase (CTX-M-Grp 1)
- Class B metallo- β-lactamase (blaNDM)
- Vancomycin vanA
- Vancomycin vanB
- Methicillin/Oxacillin (mecA)
- Sulfonamides
- Fluoroquinolones
- Trimethoprim

EXPECTED TURN AROUND TIME

2-3 Days

SPECIMEN

Wound Swab

VOLUME

One Swab in RapidX

CONTAINER Purple Top RapidX SPECIMEN COLLECTION SWAB * THEMILIZED BY SHIPLENG-OLINE CAS * DISTORMED BYTECH, OD NOT RESTREMIZE OR RECENT * BO NOT STORE AT EXTREME THEMPERATURES AND BUILDIFFIED PLACE STERRILE TO STORE AT EXTREME THEMPERATURES AND BUILDIFFIED PLACE * BO NOT STORE AT EXTREME THEMPERATURES AND BUILDIFFIED PLACE ** THE PROPERTY OF THE PROPERTY OF

COLLECTION

- Remove sterile swab from collection kit being careful not to contaminate the tip.
- Follow one of the sample collection methods below based upon the type of wound:
 - Decubitus ulcer
 - roll the sterile swab directly across the affected area until saturated. Proceed to step
 - Abscess with skin intact:
 - Use sterile needle/syringe to aspirate approximately 1 mL of purulent material
 - Eject aspirated material into sterile collection cup
 - Roll sterile swab in collection cup to saturate swab. Proceed to step 3.
 - Abscess with open skin/sinus tract:
 - Wipe skin around opening with 70% ethanol or equivalent
 - Roll sterile swab with purulent material within abscess/sinus and ensure it is saturated. Proceed to step 3.
- Place the swab in the molecular transport tube.
- Swirl the swab in the solution 5 times.
- Break the swab handle at the indentation mark and recap the tube (with the swab remaining in the tube).
- Label the tube with two patient identifiers.
- Place the tube into the provided specimen bag along with requisition w/ ICD-10 code matches encounter note, face Sheet and insurance card copy front/back

STORAGE/TRANSPORT INSTRUCTIONS

 Place all samples collected for the day into a provided UPS/FedEx Lab Pak mailer. Seal the mailer and place a shipping label on the outside.

STABILITY

5 Days

REJECTION REASONS

- There are not two patient identifiers that match the requisition form on the tube.
- Swab is returned outside the tube or biohazard bag.
- Anything other than the swab is inside the tube.
- Samples are received at the lab later than 30 calendar days after the date of specimen collection.