

# Non-Gynecologic Cytology Specimen Collection Guidelines



## General Instructions for all Non-Gynecologic Specimens

1. Label all specimen containers at the patient's bedside with patient's first and last name, a second unique patient identifier (date of birth or medical record number), and specimen source. Please label the specimen cup and not the specimen lid. If fixative is added, please also include the type of fixative on the label.
2. Label all microscopic glass slides at the patient's bedside with patient's first and last name and second unique patient identifier (date of birth or medical record number). Slide must be labeled on the frosted end with an ordinary lead pencil. Ink will wash off in processing. The slides should be placed in a slide holder for transport.
3. The specimen requisition must be completed with the patient's name, date of birth, physician's name, submitting health facility, billing information, date of collection, source of specimen, procedure, and clinical history. The patient identifiers must match the specimen container and/or slides.
4. Place the properly labeled specimen container and/or slide holder in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Body Cavity Fluid (Thoracentesis, Paracentesis, Cyst Aspirate, Washings, Catheterized Urine)

All body fluid specimens for cytology should be submitted in equal parts Cytolyt in a leak-proof container with a secure leak-proof lid. Any clotted material should also be submitted. If Cytolyt fixative is not immediately available, place specimen in the refrigerator until Cytolyt fixative can be added. Do not submit the specimen in formalin. Note the collection method and added fixative on the specimen or requisition. Place the properly labeled specimen container in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Bronchial Brushing (Slides)

Roll the contents of the brush onto a clean, labeled glass slide to produce a thin evenly layered smear and fix immediately with spray. Place the spray fixed slides in a cardboard slide holder. Submit the slides in the holder in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Voided Urine

For females, clean the whole genital/urinary area with a cloth and warm water, washing from front to back avoiding the anal area. On rising, first thing in the morning, empty the bladder. DO NOT collect this specimen. On the SECOND voiding of the day, collect the specimen from the first part of the second voiding. If possible, place specimen in an equal volume of Cytolyt. If fixative is not available, send the specimen immediately to the lab. Do not submit the specimen in formalin. Refrigerate the specimen if a delay in transport is unavoidable. Note on the container and requisition that the specimen is voided urine. Submit the properly labeled specimen container in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Cerebrospinal Fluid

Collect the specimen in clean, sterile, labeled container. Send specimen directly to the lab. Do not submit the specimen in formalin. Refrigerate the specimen if a delay in transport is unavoidable. Submit the properly labeled specimen container in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Contact Us

If you have any questions or need more information, contact Cytology at Pathology Services Laboratory by phone at 479-968-6781 or 1-800-874-4904 or by email at [PSLab@pathologyserviceslab.com](mailto:PSLab@pathologyserviceslab.com).

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## Gastrointestinal Brushings

Gastrointestinal brushings can be submitted two different ways:

1. Slides- Roll the contents of the brush onto a clean, labeled glass slide and fix immediately with spray fixative or place slides in a glass coplin jar containing 95% alcohol. Place the spray fixed slides in a cardboard slide holder. Submit the slides in the holder or the sealed coplin jar in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.
2. Container-Rinse the brush in a properly labeled container filled with Cytolyt solution by rotating the brush ten (10) times while pushing against the container wall. Swirl the brush vigorously in the solution to further release cells. Cut off the brush and place in the solution. Tightly close the container lid. Submit the properly labeled specimen container in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Nipple Discharge

Express secretions by gently compressing the full circumference of the areola between the thumb and index finger. If a mass is present the area between the mass and nipple may be compressed. Smear the secretion on a clean, labeled glass slide. If the secretion is scanty, the slide may be touched to the nipple. If the secretion is thick, smear it between two slides, and pull the slides apart quickly. Spray slides immediately with fixative. Place the spray fixed slides in a cardboard slide holder. Submit the slides in the holder in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Sputum

A sputum sample may be collected by:

1. Spontaneous Deep Cough Technique. Three morning sputum samples are collected over 3 days. Patient should rinse mouth with water, take about four deep breaths followed by a few short coughs, and then inhale deeply and cough forcefully into the container.
2. Sputum Induction Technique. Follow instructions for specific aerosol instrument.

Sputum should be collected in a collection cup with 30 mls of CytoLyt Solution or Cytolyt should be immediately added to the specimen. The properly labeled specimen cup is submitted in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

## Fine Needle Aspiration

If on-site adequacy evaluation will be needed, please schedule it prior to the date of specimen collection by calling Cytology at (479)968-6781.

A small amount of aspirate material is placed onto a properly labeled slide. A second properly labeled slide is then used to drag the fluid down the first slide to make a thin evenly spread smear. One smear is fixed immediately with spray fixative. The other smear is air-dried. If lymphoma is suspected, submit part of the specimen in RPMI media for flow cytometry. If additional material remains in the syringe, allow it to clot and place it in formalin. Place the spray fixed or air-dried slides in a cardboard slide holder. Submit the slides in the container and the formalin container and/or RPMI vial in a biohazard specimen bag with the specimen requisition in the outside pocket of the bag.

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