
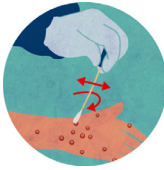



Tips for Adequate Collection of a Lesion Specimen from a Suspect Monkeypox Virus Case




Vigorous swabbing of lesion specimens maximizes the probability of achieving accurate diagnostic results. **Specimens that do not contain enough human DNA may lead to inconclusive PCR test results, with no positive or negative result.** Inconclusive results necessitate patients being sampled again which can delay diagnosis. Follow the instructions below to make sure your specimens are adequate for testing. While vigorous swabbing on the surface of a lesion should collect enough viral DNA, more viral DNA can be found in crusts when present. Recommended [infection prevention and control practices](#), including the use of personal protective equipment (PPE), for caring for a patient with suspected or confirmed monkeypox infection should be used during specimen collection: [What Healthcare Professionals Should Know](#). Unroofing or aspiration of lesions (or otherwise using sharp instruments for monkeypox testing) is **not necessary, nor recommended due to the risk for sharps injury.**

Swabbing of Lesion Surface:

1. Use sterile, synthetic swabs. Do not use cotton swabs.
2. More information on specimen collection can be found here: [Preparation and Collection of Specimens](#).
3. Do not clean the lesion with ethanol or any other disinfectant prior to swabbing.
4. Hold the swab with a firm grasp. Avoid touching the swab shaft at least an inch before the tip if collecting a dry swab and the length of the swab shaft that will be submerged in liquid if using a swab to be stored in viral transport media. 
5. Apply firm pressure (generally firm enough so that the swab shaft, if plastic, may bend slightly). This may result in discomfort or slight pain, but it is necessary to obtain adequate DNA.
 - a. If lesion ruptures while swabbing, ensure that swab collects lesion fluid.
 - b. If possible, avoid using swabs that bend too easily which may make applying firm pressure difficult.
6. Swipe the swab back and forth on the lesion surface at least 2-3 times then rotate and repeat on the other side of the swab at least 2-3 times. 
 - a. If material is visible on the swab surface (such as skin material or from lesion fluid that is leaking from the lesion), this is indicative of an adequate collection. Although please note that material may not always be visible on swabs.
7. Place swab within appropriate container. 
 - a. Ensure container, storage and shipping conditions are approved by laboratory that specimen is being sent to for testing.

Collection of crusts from healing lesions:

Crusts are not accepted by all laboratories as an approved specimen type. Ensure the laboratory that will be receiving the specimen for testing is able to test crusts before collecting or sending.

1. Use a forceps or other blunt-tipped sterile instrument to remove all or a piece of the crust at least 4mm x 4mm – about the size of this dot: ● 
2. Separate each crust into a dry, sterile container. 
 - a. Ensure container, storage, and shipping conditions are approved for laboratory that specimen is being sent to for testing. 
3. Cover lesion with band aid.