# **INVESTIGATIONS**

<u>Within 45 mins of presentation(after admission)</u>: Total leucocyte count, blood urea, serum creatinine, blood sugars, SGOT/SGPT, s.bilirubin, Platelet count

S.ELECTROLYTES,

PT-INR, APTT

CUE, ECG

Blood culture & sensitivity

(before giving antimicrobials)

ABG analysis

Chest x ray

Nasopharyngeal/oropharyngeal swab

Tracheal/ ET aspirate

## **Collection of OP and NP swabs**

•Optimal timing:

-Within 3 days of symptom onset and no later than 7 days.

-Preferably prior to initiation of antimicrobial therapy.

### **Collection of Oropharyngeal swab Materials:**

•Sterile Dacron/Nylon flocked swab

•Viral Transport Medium (3 ml sterile VTM) Procedure:

•Hold the tongue out of the way with a tongue depressor.

•Use a sweeping motion to swab posterior pharyngeal wall and tonsillar pillars

•Have the subject say "aahh" to elevate the uvula.

•Avoid swabbing soft palate and do not touch the tongue with swab tip.

•Put the swab in VTM





### **Collection of Nasopharyngeal swabs**

•Materials --Sterile Dacron/Nylon flocked swab

•Viral Transport Medium (3 ml sterile VTM)

• Procedure: Tilt patient's head back 70 degrees

•Insert swab into nostril (Swab should reach depth to distance from nostrils to outer opening of the ear

•Leave swab in place in place for several seconds to absorb secretions

•Slowly remove swab while rotating it

•Place tip of swab into VTM and snap/cut off the applicator stick



#### **Packaging System**

•The original samples should be packed, labeled and marked, and documented as Category B•Standard triple packing for Category B to be followed.•Samples to be sent on dry ice (if possible). However using cold packs is acceptable.•Sender should provide prior intimation about shipment of samples to the nearest certified laboratory.



3. Outer container (w/list of itemized contents)