pathlab



June 2016

Laboratory Processing of Vaginal Swabs

From 1st August 2016, please note that all (non - molecular) vaginal swabs will require the provision of appropriate clinical details.

The laboratory investigation for the causes of vaginitis is **not** indicated in an asymptomatic patient. Such practice will inevitably lead to inappropriate and unnecessary treatment, along with selection for resistant micro-organisms.

Auditing has shown that significant numbers of vaginal swabs arrive at the laboratory having been taken as part of a routine cervical smear examination. In addition large numbers of vaginal swabs have no accompanying clinical details to suggest that the patient might have symptoms suggestive of vaginitis.

From 1st August, all vaginal swabs will require the provision of appropriate clinical details for testing to proceed. For example, this can include vaginal discharge or itch, dyspareunia, STI screen, sexual abuse, post-partum, persistent or recurrent vaginal thrush. Note that vaginal swabs from children will be processed regardless of the presence of clinical details.

Please note that current guidelines (e.g. NICE & CDC) do not recommend screening of asymptomatic pregnant women for the presence of bacterial vaginosis and *Trichomonas vaginalis*. Therefore "Pregnancy" by itself is insufficient clinical detail to warrant laboratory testing of the specimen.

If clinical details are not supplied on a vaginal swab, the sample will be stored and a comment asking for these will go back to the requestor. The provision of appropriate clinical details will be accepted up to 48 hours after the sample has been taken.

Please contact us if you have any concerns regarding this proposed policy change.

Please ensure that all members of your institution receive a copy of this Update

Michael Addidle
Clinical Microbiologist
Ph: 07 578 7073

Vani Sathyendran
Clinical Microbiologist

Murray Robinson
Lead Microbiology Scientist

CLINICAL UPDATE