

*STEP-BY-STEP GUIDELINES FOR COLLECTION OF THE FIRST
SAMPLE OF SPONTANEOUS SPUTUM AT THE LOCAL CLINICS FOR
CONFIRMATION OF THE DIAGNOSIS OF PULMONARY TUBERCULOSIS*

VIAL PREPARATION

The health care worker should:

1. WASH THE HANDS PRIOR TO VIAL PREPARATION;

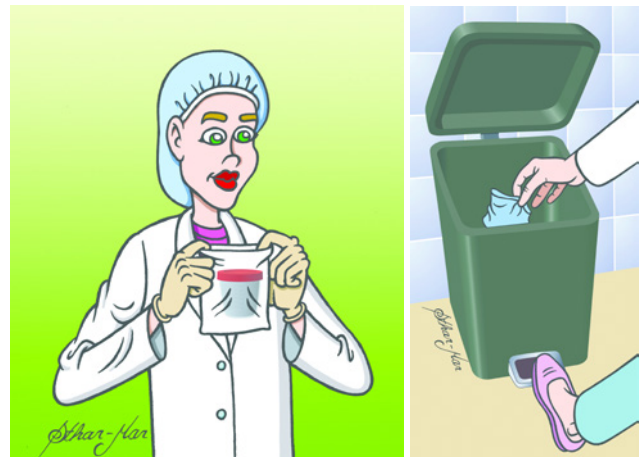


2. CHOOSE A STERILE AND SCALED VIAL WITH TRANSPARENT WALLS, MINIMAL AND MAXIMAL VOLUME CAPACITIES OF 35 ml and 50 ml, respectively, MAXIMAL HEIGHT of 40 mm and TWISTING TAP with a DIAMETER of 50 mm, according to the illustration below:



Boca larga= large mouth; tampa rosqueável=twisting tap; plástico transparente= transparent plastic, capacidade de 35 ml a 50 ml= minimal and maximal volumes of 35 ml and 50 ml, respectively; pote descartável= disposable vial; altura mínima= minimal height; etiqueta do frasco – Nome completo= full name, data=date: xx/yy/zz

3. OPEN THE PLASTIC BAG OF THE COLLECTION VIAL, TAKE THE VIAL OFF WITHOUT UNTWISTING THE TAP and DISCARD THAT IN THE COMMON TRASH;



4. RECORD THE PATIENT NAME AND THE COLLECTION DATE IN A LABEL;



5. FIX THE LABEL ON THE EXTERNAL WALL OF THE COLLECTION VIAL. DO NOT FIX THE LABEL OVER THE VOLUME SCALE OR OVER THE TAP



6. 10 ml LINE MUST BE POINTED OUT WITH BLACK RETO-PROJECTOR PEN TO MAKE EASIER THE OBSERVATION OF THE LEVEL TO BE REACHED WITH THE SPUTUM.

ATTENTION: FOAM WILL NOT BE REGARDED.

HYDRATION OF THE PATIENT, HYGIENE OF THE TEETH AND ORAL CAVITY

THE HEALTH CARE WORKER, PROPERLY WORN WITH N95 MASK, SHOULD:

1. WELCOME THE PATIENT;
2. DELIVER A WHITE SURGICAL MASK TO THE PATIENT AND ADVISE THE PATIENT HOW TO FIX THE MASK OVER THE FACE;
3. EXPLAIN TO THE PATIENT THAT THIS MASK SHOULD BE FIXED OVER HIS FACE UNTIL THE PLACE OF THE COLLECTION PROCEDURE or IN CASE THE PATIENT MOVES TO OTHER PLACES (e.g.: GO TO THE BATHROOM or TO THE RADIOLOGY SERVICE);



4. RECOMMEND TO THE PATIENT TO SWALLOW WATER AS MUCH AS POSSIBLE DURING THE COLLECTION and



5. ASK THE PATIENT TO GO TO THE BATHROOM FOR THE FOLLOWING PROCEDURES:

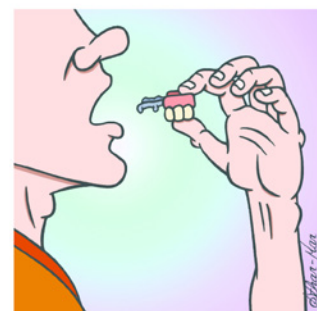
a) TAKE THE WHITE SURGICAL MASK OFF THE FACE



c) REMOVE ANY TOOTH PROTHESIS;



b) WASH THE HANDS WITH WATER AND SOAP AND LATER ON, DRY THEM WITH PAPER TOWEL;



d) BRUSH THE TEETH WITH TOOTH BRUSH DAMPENED WITH FILTERED WATER TO REMOVE ANY FOOD RESIDUE OF THE TEETH, GINGIVAS and TONGUE;



ENVIRONMENTAL PREPARATION FOR SPUTUM COLLECTION

THE HEALTH CARE WORKER, PROPERLY WORN WITH N95 MASK, SHOULD:

1. CHOOSE AN OPENING PLACE AT THE LOCAL CLINICS FOR SPUTUM COLLECTION;



e) RINSE THE MOUTH AND GARGLE WITH FILTERED WATER;



f) FIX AGAIN THE WHITE SURGICAL MASK OVER THE FACE.

6. ADVISE THE PATIENT NOT TO MAKE ORAL HYGIENE WITH TOOTH CREAM and

7. INFORM THAT TOOTH BRUSHING, MOUTH RINSING and GARGLE WITH WATER ARE ENOUGH AND INDISPENSABLE.

2. IN CASE OF NO OPENING PLACE, CHOOSE A VENTILATED ENVIRONMENT IN WHICH THE PATIENT CAN REMAIN ALONE;

3. ASK THE PATIENT TO SIT TO BEGIN THE COLLECTION. THE PATIENT MUST REMAIN SITTEN THOROUGHOUT THE COLLECTION PROCEDURE;

4. KEEP A TABLE NEAR THE PATIENT TO SUPPORT THE COLLECTION VIAL;



5. PUT THE COLLECTION VIAL IN AN EASY AND ACCESSIBLE PLACE TO THE PATIENT;

6. PUT A FILTERED WATER BOTTLE AND A CUP OVER THE TABLE IN ORDER THE PATIENT CAN DRINK DURING THE COLLECTION PROCEDURES and



7. ASK THE PATIENT TO TAKE THE WHITE SURGICAL MASK OFF THE FACE;



SIMULATION OF THE PROCEDURES FOR SPUTUM COLLECTION

THE HEALTH CARE WORKER, PROPERLY WORN WITH N95 MASK, SHOULD EXPLAIN THE PROCEDURES TO COLLECT THE SAMPLE OF SPONTANEOUS SPUTUM TO THE PATIENT IN FEW WORDS USING A SIMPLE AND OBJECTIVE LANGUAGE. SIMULATE THE PROCEDURES TO MAKE EASIER THE UNDERSTANDING BY THE PATIENT:

1. EXPLAIN THAT THE SPUTUM IS A FLUID WHICH COMES FROM THE LUNGS, AFTER COUGHING. THEREFORE, PATIENT'S COLLABORATION TO COUGH IS INDISPENSABLE;

2. ADVISE THE PATIENT TO:

a) BREATH DEEPLY, KEEP THE AIR INSIDE THE LUNGS FOR SOME SECONDS and, LATELY, EXPIRATE;



b) HESE PROCEDURES SHOULD BE REPEATED THREE TIMES and

c) IMMEDIATELY AFTER, STIMULATE THE PATIENT TO COUGH;

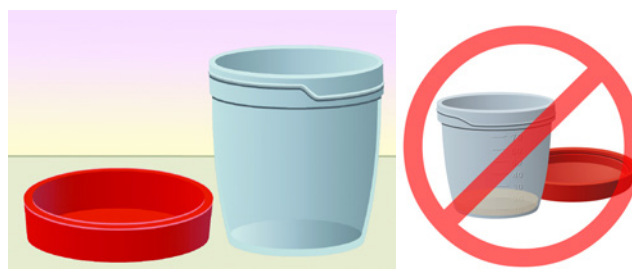
d) WHILE COUGHING, THE PATIENT SHOULD UN-TWIST THE COLLECTION VIAL TAP, OPEN THE VIAL, CURVE THE HEAD OVER THE VIAL, WITHOUT TOUCHING THE LIPS, CHIN or CHEEKS IN ANY AREA OF THE VIAL OR OF ITS TAP AND EXPECTORATE INSIDE THE VIAL;



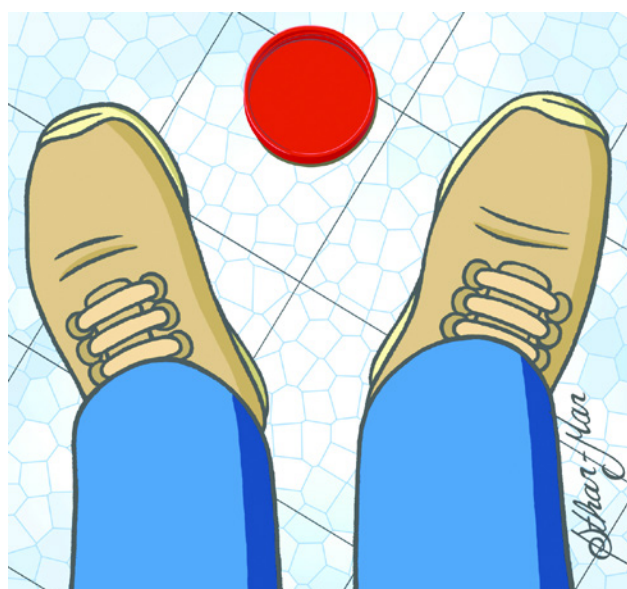
e) DO NOT TOUCH THE FINGERS IN THE INTERNAL PART OF THE VIAL;



f) AT THE END OF EACH EXPECTORATION, ADVISE THE PATIENT TO CLOSE THE VIAL COMPLETELY TWISTING THE TAP;



3. ALERT THE PATIENT TO AVOID THE VIAL TAP FALLING ON THE FLOOR. IN CASE IT HAPPENS, THE PATIENT SHOULD ASK THE SUBSTITUTION OF THE VIAL TAP TO THE HEALTH CARE WORKER;



4. THE IMPORTANCE OF COLLECTING 10 ml MUST BE EXPLAINED TO THE PATIENT; POINT OUT THAT THE FOAM WILL NOT BE REGARDED TO REACH THIS VOLUME;

5. THERE IS NO TIME LIMITS FOR SPUTUM COLLECTION;

6. THE COLLECTION PROCEDURE WILL BE ENDED WHEN THE VOLUME of 10 ml IS REACHED;

7. ADVISE THE PATIENT TO REPEAT THESE PROCEDURES AS MANY TIMES AS NECESSARY UNTIL REACHING THE 10 ml LINE IN THE VIAL WALL and

8. IN CASE THE PATIENT IS NOT ABLE TO EXPECTORATE 10 ml, THE HEALTH CARE WORKER SHOULD STIMULATE THE PATIENT TO EXPECTORATE AS MUCH AS POSSIBLE; AT LEAST 5 ml.

SPUTUM COLLECTION

THE HEALTH CARE WORKER, PROPERLY WORN WITH N95 MASK, SHOULD:

1. DELIVER A PROPERLY IDENTIFIED COLLECTION VIAL WITH THE 10 ml LINE POINTED OUT TO MAKE THE OBSERVATION OF THE VOLUME RECOMMENDED EASIER BY THE PATIENT;

2. DELIVER A DISPOSABLE PAPER TOWEL TO REMOVE EXPECTORATION IN CASE IT REMAINS OVER THE LIPS. IT IS FORBIDDEN TO REMOVE THE EXPECTORATION WITH THE VIAL DUE TO THE RISK OF SAMPLE CONTAMINATION;



3. OBSERVE THE FIRST EXPECTORATIONS AND THE PROCEDURES THE PATIENT ADOPTS TO EXPECTORATE INSIDE THE VIAL. CORRECT THE PATIENT WHENEVER NECESSARY;

4. SUPERVISE THE COLLECTION AS MUCH AS POSSIBLE TO EVALUATE IF THE INSTRUCTIONS ARE BEING RESPECTED. DURING THE SUPERVISIONS, STIMULATE THE PATIENT TO CONTINUE THE COLLECTION UNTIL REACHING THE VOLUME OF 10 ml;

5. IN CASE OF DIFFICULTIES, ASSIST THE PATIENT DURING THE COLLECTION PROCEDURES UNTIL HE IS ABLE TO PERFORM ALL THE PROCEDURES BY HIMSELF;

6. IN CASE THE EXPECTORATION FALLS OVER THE EXTERNAL WALL OF THE VIAL, THE HEALTH CARE WORKER SHOULD IMMEDIATELY REMOVE THAT USING PAPER TOWEL AND DESCONTAMINATE WITH PHENOL SOLUTION 5%;

7. THE COLLECTION WILL BE FINISHED WHEN THE VOLUME OF 10 ml IS REACHED;

8. WAIT THE TIME THAT YOU CONSIDER NECESSARY TO THE PATIENT COLLECT 10 ml OF SPUTUM OR THE MAXIMAL VOLUME NEAR THIS VALUE and

9. IN CASE THE PATIENT IS NOT ABLE TO EXPECTORATE 10 ml OF SPUTUM, THE HEALTH CARE WORKER SHOULD STIMULATE THE PATIENT TO EXPECTORATE THE MAXIMAL VOLUME; AT LEAST 5 ml.



STORE OF THE SPUTUM VIAL IN THE REFRIGERATOR UNTIL ITS TRANSPORT TO THE LABORATORY

AT THE END OF THE COLLECTION, THE HEALTH CARE WORKER, PROPERLY WORN WITH N95 MASK, SHOULD:

1. PUT THE SPUTUM VIAL INSIDE A TRANSPARENT PLASTIC BAG AND CLOSE THE BAG WITH A KNOT and

2. STORE THE VIAL INSIDE THE REFRIGERATOR RESERVED FOR CONTAMINATED MATERIAL UNDER 2-8oC TEMPERATURE UNTIL ITS TRANSPORT TO THE LABORATORY;

ATTENTION: IF THE HEALTH CARE WORKER CONSIDERS THAT THE PATIENT IS ABLE TO RESPECT ALL THE RECOMMENDATIONS ABOUT THE COLLECTION IN THE ABSENCE OF ANY SUPERVISION, THE NEXT COLLECTION SHOULD BE PERFORMED AT THE PATIENT'S HOUSE. IF NO, THE COLLECTION SHOULD BE PERFORMED AT THE LOCAL CLINICS OR AT ANYOTHER REFERENCE HEALTH SERVICE.

