

Collecting **specimens** when **nodules or ulcerated** **nodules are present**

- ▶ Cleanse area with alcohol in widening concentric circles to remove oils/dirt.
- ▶ Use iodine (wait 30 seconds) or aqueous iodophor (wait one minute). Apply in widening concentric circles.
- ▶ Remove iodine prep with alcohol in same manner.
- ▶ Tissue biopsy of nodule or surgical removal of the nodule.
- ▶ Send tissue for histopathology and cultures.
 - Ask for *AFB*, fungal and routine bacterial cultures.
 - History will help select type of cultures if limited specimen is available.

Collecting **specimens** from **sinus tracts or deep** **draining wounds**

- ▶ Clean skin surface around surrounding sinus tract as you would for abscess to a radius of approximately 2 cm beyond sinus tract/deep wound.
- ▶ Iodine should be instilled into the opening of the sinus tract at the same time to disinfect the proximal area which will be colonized with microorganisms. Remove iodine via aspiration.
- ▶ Discard surface curettings and obtain deep curettings for culture.
- ▶ *NOTE: If pus is draining from the wound, use a flexible plastic catheter to obtain the pus from deep in the wound after appropriate cleansing.*

Collecting **specimens** from **decubitus/diabetic** **foot ulcers**

- ▶ Use iodine (wait 30 seconds) or aqueous iodophor (wait one minute). Apply in widening concentric circles.
- ▶ Remove iodine prep with sterile saline in same manner.
- ▶ Use sterile gauze to manually debride ulcer surface and discard.
- ▶ Collect tissue from the clean deep base of the ulcer.
- ▶ *NOTE: Microorganisms collected via surface swab specimens from ulcers represent those found in deeper tissue less than 50 percent of the time.*