FREQUENTLY ASKED QUESTIONS

COMMUNITY-BASED TESTING SITES

NASAL SELF-SWABS

Federally supported Community Based Testing Sites transitioned from healthcare professional administered nasopharyngeal swabs to nasal self-swabs as the testing method at each site.

Why did sites switch to a nasal self-swab specimen collection method instead of the existing nasopharyngeal specimen collection method?
The Food and Drug Administration (FDA) recently authorized, as an alternative to nasopharyngeal specimen collection, anterior nares specimen by onsite self-collection or by a healthcare professional (using a round foam swab) for the novel coronavirus. This testing method is less invasive and is safer for both individuals and healthcare professionals.

Is the nasal self-swab method as safe as the existing nasopharyngeal specimen collection method?
The nasal self-swab method is an acceptable alternative to the nasopharyngeal specimen collection method. First, the test is less invasive for individuals. Second, the testing method allows individuals and healthcare professionals to maintain a 6-foot distance, significantly reducing exposures and decreasing the amount of personal protective equipment required.

What do we do if the person is elderly, has shaking hands, is too young to perform the test, or cannot conduct the swab on their own?
The nasal self-swab method requires individuals to conduct their own swab. As such, if individuals cannot perform the swabbing themselves, they are not eligible to use this method and cannot receive testing at these sites. Individuals who cannot self-swab should be redirected to contact their healthcare provider.

Is there specific guidance for the performance self-swabs with multiple individuals in the car?
A healthcare professional must observe an individual self-swabbing. If the lane is established with a table and a healthcare observer on both sides of the car, then you could test personnel on both sides of the car. If only one lane is set up, then, there can only be two individuals who can be swabbed per vehicle – the individual in the driver’s seat and the individual behind the driver.
Can the demonstration of how to perform a nasal self-swab be done prior to station 1 as people are waiting to save time?
Each site may determine where to do the demonstration based on the needs of the individual site.

Are individuals required to show identification? What do we do if we can’t see it?
Individuals should verbally provide their personal identification to ensure the laboratory requisition form has the correct information and is associated with the right individual. Only healthcare facility workers and first responders are required to show photo identification. However, for private sector sites that are pre-registering individuals, there will be a need for individuals to show photo identification in order for the site personnel to validate that the individual is the person that has pre-registered.

What do healthcare providers do if the patient’s car has tinted windows and they cannot observe the patient’s identification nor observe them administering test through the glass?
The preferred method for checking identification (if required) is through the rolled-up window. If that is not possible and the window must be rolled down, a 6 foot or greater distance must be maintained while looking at the identification. The healthcare provider will need to observe the self-swab with the window down, while ensuring to maintain a 6-foot distance from the car or greater.

Will site personnel be in direct contact with the individuals being tested?
At these drive-through sites, individuals drive up to the testing site and provide their identification through the window (if indicated). With the window rolled up, the personnel conducting intake will approach the car in order to read the information on the photo identification (if indicated). There will be no direct contact between the individual and site personnel. The healthcare professional will be observing the individual self-swabbing from a distance of 6 feet or greater.

Why is less personal protective equipment (PPE) required and is it safe to have less PPE?
Personnel at the testing sites are no longer in physical contact with individuals conducting the tests. A 6-foot distance is maintained between the individual and site personnel when the individual’s window is rolled down. Unlike the nasopharyngeal swaps, personnel are not near the individual, thus reducing potential exposures to site personnel.

Can the healthcare professional onsite loosen the lid of the medium tube prior to setting it on the table for the individual to then secure?
Similar to the ability to conduct self-swab, if the individual cannot remove the lids on the medium tube on their own, they will not be able to use this testing method and will need to contact their healthcare provider to discuss testing.
Are the nasal self-swabs as accurate as the nasopharyngeal specimen collection method?
Yes, the nasal self-swabs are as accurate as the nasopharyngeal specimen collection method.

Can we use the nasal self-swabs specimen collection method for individuals who don’t have symptoms?
Those who don’t have symptoms but are healthcare workers and first responders are priority 3. Those without symptoms that are not healthcare workers or first responders are non-priority.

Can we use the nasal self-swabs specimen collection at home?
No, due to concerns with specimen stability, transport, and appropriate collection technique, self-collection at home or at sites other than designated collection sites staffed by healthcare professionals is currently not recommended by the FDA.

We currently have our runner moving cones and directing the vehicles through the site. Can we still have someone fulfill this role and if so, would they need to stay > 6 feet from any open window and wear surgical mask only?
As long as the car windows are rolled up, the runner can move in between vehicles. However, if there is an open window, the runner must stay 6 feet away. We strongly recommend all site personnel wear of surgical masks and gloves.

Why must the swab remain in the nose for 15 seconds?
The swab must stay in place within the nostril for several seconds to absorb secretions coming from the nostril and to obtain an adequate sample for virus detection when running the diagnostic test.

Can I freeze the collected sample?
Per the FDA, there is limited data available on test performance with specimens which have been frozen in any transport media; therefore, specimen stability should be investigated if freezing is necessary.