

## **VAGINAL SWAB (HIGH) - COLLECTION**

*This LOP is developed to guide clinical practice at the Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP.*

### **1. AIM**

- To ensure adequate pathological material is obtained via high vaginal swab (HVS) without trauma to the genital tract

### **2. PATIENT**

- Woman with symptoms of vaginal infection (abnormal discharge/odour/itch) or suspicion of a sexually transmitted infection (STI)
- Pregnant woman presenting with threatened preterm labour (TPL) or premature rupture of membranes (PROM)

### **3. STAFF**

- Medical, midwifery and nursing staff

### **4. EQUIPMENT**

- Sterile gloves
- Speculum
- Plastic-backed sheet (blue incontinent sheet)
- Water-based lubricant
- Good light source (torch or lamp)
- Sterile bacterial swab stick (blue top)

### **5. CLINICAL PRACTICE**

- Explain procedure to woman and gain consent
- Advise woman to pass urine if needed
- Place woman in position comfortable for her, and suitable for collection of HVS
- Ensure privacy is maintained
- Wash hands and put on sterile gloves
- Lubricate speculum with water-based lubricant
- Pass speculum and locate cervix using light source
- Collect specimen from posterior fornix of vagina using sterile swab stick
- Open tube containing transport medium, place swab inside immediately, and seal
- Label HVS with woman's name and medical record number and add the time, date and ward
- Complete microbiology request form, including woman's verifying signature. Document any antibiotic allergies the woman has in the clinical information section on the request form, so the laboratory can perform appropriate sensitivity testing with a positive result
- Place HVS in biohazard plastic bag and send to microbiology
- Rinse reusable speculum and send to Central Sterilising Department (CSD) for re-sterilising, or discard single-use speculum in general waste, or contaminated waste bin if heavily contaminated
- Dispose of other equipment appropriately
- Remove gloves and wash hands
- Document in medical record and on antenatal card

### **6. DOCUMENTATION**

- Medical record
- Antenatal Card

## **VAGINAL SWAB (HIGH) – COLLECTION cont'd**

### **7. EDUCATIONAL NOTES**

- There is a lack of evidence supporting guidelines on the use of HVS in pregnancy and there is a high incidence of unnecessary swab testing<sup>1</sup>

### **8. RELATED POLICIES / PROCEDURES / CLINICAL PRACTICE LOP**

- Rupture of Membranes - Preterm Prelabour - Assessment and Management
- Rupture of Membranes - Prelabour at Term – Assessment and Management
- Preterm Labour - Diagnosis and Management
- Sexual Transmitted Infections (STI)/Blood Born Viruses (BBV)/Antenatal Screening and Treatment
- Infection Prevention and Control Practice Handbook CEC 2016
- Infection Prevention and Control Policy PD2017\_013
- NHMRC Infection Prevention and Control Guidelines 2019
- SESLHD Bare Below the Elbows – Hand Hygiene SESLHDPR/343

### **9. NATIONAL STANDARD**

- Standard 5 – Comprehensive Care

### **10. REFERENCES**

1. Seema Sadiq, Aisha Hameed. Dilemma of High Vaginal Swabs (HVS) in Pregnancy. Poster presented at: RCOG World Congress 2017, March 20-22, 2017, Cape Town, South Africa.

### **REVISION & APPROVAL HISTORY**

Reviewed and endorsed Maternity Services LOPs group July 2019  
Approved Quality & Patient Safety Committee 15/3/12  
Reviewed Obstetrics LOP Committee December 2011 – no change  
Approved Quality Council 15/12/03

**FOR REVIEW : AUGUST 2024**