

Specimen Type	Specimen Collection		Transport		Replica Limit (if applicable)	Comments
	Guidelines	Device/ Min Volume	Local	Courier/ Delayed		
ABSCESS	Remove surface exudate by wiping with sterile saline or 70% ETOH					Tissue or fluid is always superior to a swab specimen. Source/site must be clearly documented on specimen, computer, or requisition. A sample from the base of the lesion and a sample from the abscess wall are most productive.
Open	Aspirate if possible or pass a swab deep into lesion's advancing edge	Routine Culture Swab	≤2h RT	≤ 24 h. RT	1/day/source	Sampling of the surface area can introduce colonizing bacteria not involved in the infectious process.
Closed	Aspirate abscess wall material with needle and syringe. Remove needle, submit with cap on syringe.	Capped syringe, or Routine and Anaerobic culture swabs ≥ 1 ml	≤1h. RT	≤ 24 h. RT	1/day/source	Submit aspirate for aerobic and anaerobic culture. If swabs are used, collect both routine and anaerobic culture swabs.
BITE WOUND	See ABSCESS					Do not culture animal bite wounds ≤12 h old (agents are usually not recovered) unless they are on the face or hand or unless signs of infection are present.
FISTULA	See ABSCESS					
GANGRENEOUS TISSUE	See abscess.					
WOUND	See ABSCESS					