





## **Mouth Swab**

**Synonyms Clinical Indication** Please give detailed clinical information, including date of onset/contact with the suspected infection and any current, or intended antibiotic therapy. Part of Profile / See Also Microscopy for yeasts Culture for bacteria and fungi; antibiotic sensitivities on potential pathogens. **Request Form** Microbiology or combined Pathology manual request form or ICE request Availability / Frequency of On request during normal working hours **Analysis Turnaround Time** 72 hours **Patient Preparation Sample Requirements** Bacterial culture swab in transport medium **Specimen Type** Volume Container Swab in suitable transport medium Samples should be transported to laboratory on day of collection. **Reference Range & Units** N/A Interferences N/A **Interpretation & Clinical** Interpret any culture results from this non-sterile site with caution **Decision Value (if applicable)** References UK SMI Bacteriology | B 4 | Issue no: 7.2 | Issue date: 23.08.22 – Investigation of superficial mouth swabs **Test code MOUT** 

**Lab Handling** 

Samples should be processed as soon as possible.