















VAGINITIS TESTING
Collection instructions: Carefully insert swab ~5cm (2 inches) inside the opening of the vagina, then gently rotate against the vaginal wall for 30 seconds, ensuring moisture absorbed onto swab. Cervical swabs are **NOT** appropriate for vaginitis testing since testing methods assesses relative amounts of organisms in vaginal flora, and cervical flora may differ.
 * Self-collection, where appropriate, can only occur in a health care setting, such as a clinic or emergency department. Collection instructions are available at <https://www.interiorhealth.ca/sites/default/files/PDFS/patient-collection-instructions.pdf>

Patient Age/ Clinical factors	Collection Container	Patient Self-collect Option*	Tests Included	Outpatient Laboratory Requisition Request	Inpatient/ED Meditech Orders
14 to 59 years, uncomplicated		Yes	Bacterial vaginosis Yeast screen Trichomonas The same swab can be used for Chlamydia/gonorrhea 	Select any option below: VAGINITIS <input checked="" type="checkbox"/> Initial (smear for BV & yeast only) AND/OR <input checked="" type="checkbox"/> Chronic/recurrent (smear, culture, trichomonas)	Vaginitis Molecular-Age 14-59
14 to 59 years, with diagnosis of: <ul style="list-style-type: none">PregnancySuspected PIDInfection post-gynecologic surgeryIntra or post-partum infectionToxic shock syndrome		No	Bacterial vaginosis Yeast identification Bacterial culture If Chlamydia/gonorrhea and/or Trichomonas testing required, collect and order additional Aptima swab. See instructions below. 	Write in 'Other Tests' section: "Vaginal culture relevant diagnosis" <hr/> OTHER TESTS – Standing Orders include expiry & frequency <input type="checkbox"/> ECG <input type="checkbox"/> FIT (Age 50-74 asymptomatic q2y) Copy to Colon Screening Program <input type="checkbox"/> FIT No copy to Colon Screening Program Vaginal culture relevant diagnosis 	Vagina C&S - Relevant Diagnosis
Less than 14 years OR 60 years and greater		No	Yeast identification Bacterial culture Note: NOT eligible for BV testing due to different vaginal pH and flora	Select any option below: VAGINITIS <input checked="" type="checkbox"/> Initial (smear for BV & yeast only) OR <input checked="" type="checkbox"/> Chronic/recurrent (smear, culture, trichomonas)	Vagina - Age <14 or >59yr
Confirmed yeast infection with history of azole failure		No	Yeast culture	Write in 'Other Tests' section: "Vaginal yeast culture-azole failure" <hr/> OTHER TESTS – Standing Orders include expiry & frequency <input type="checkbox"/> ECG <input type="checkbox"/> FIT (Age 50-74 asymptomatic q2y) Copy to Colon Screening Program <input type="checkbox"/> FIT No copy to Colon Screening Program Vaginal yeast culture - azole failure 	Vagina C&S - Azole Failure

SEXUALLY TRANSMITTED INFECTION TESTING
 * Self-collection, where appropriate, can only occur in a health care setting, such as a clinic or emergency department. Collection instructions are available at <https://www.interiorhealth.ca/sites/default/files/PDFS/patient-collection-instructions.pdf>

Test Request	Patient Sex	Specimen source	Patient Self-collect Option*	Collection Container	Outpatient Laboratory Requisition Request	Inpatient/ED Meditech Orders
Chlamydia/Gonorrhea	Female	Vagina preferred; equivalent performance to cervical collection	Yes		CHLAMYDIA (CT) & GONORRHEA (GC) by NAAT Source/site: <input type="checkbox"/> Urethra <input type="checkbox"/> Cervix <input type="checkbox"/> Urine <input checked="" type="checkbox"/> Vagina <input type="checkbox"/> Throat <input type="checkbox"/> Rectum	Vagina-Chlamydia/GC NAAT
Chlamydia/Gonorrhea	Female	Cervix Use larger swab to remove cervical mucous prior to collection to avoid cancellation due to specimen viscosity	No		CHLAMYDIA (CT) & GONORRHEA (GC) by NAAT Source/site: <input type="checkbox"/> Urethra <input checked="" type="checkbox"/> Cervix <input type="checkbox"/> Urine <input type="checkbox"/> Vagina <input type="checkbox"/> Throat <input type="checkbox"/> Rectum	Cervix-Chlamydia/GC NAAT
Chlamydia/Gonorrhea	Female OR Male	First catch urine (limit to first 20-30 mL of urine only) NOT optimal for female patients; vaginal or cervical specimens perform better	Yes		CHLAMYDIA (CT) & GONORRHEA (GC) by NAAT Source/site: <input type="checkbox"/> Urethra <input type="checkbox"/> Cervix <input checked="" type="checkbox"/> Urine <input type="checkbox"/> Vagina <input type="checkbox"/> Throat <input type="checkbox"/> Rectum	Urine-Chlamydia/GC NAAT
Chlamydia/Gonorrhea	Female OR Male	Throat OR Rectum	Yes		CHLAMYDIA (CT) & GONORRHEA (GC) by NAAT Source/site: <input type="checkbox"/> Urethra <input type="checkbox"/> Cervix <input type="checkbox"/> Urine <input type="checkbox"/> Vagina <input checked="" type="checkbox"/> Throat <input type="checkbox"/> Rectum OR CHLAMYDIA (CT) & GONORRHEA (GC) by NAAT Source/site: <input type="checkbox"/> Urethra <input type="checkbox"/> Cervix <input type="checkbox"/> Urine <input type="checkbox"/> Vagina <input type="checkbox"/> Throat <input checked="" type="checkbox"/> Rectum	Throat-Chlamydia/GC NAAT OR Rectal-Chlamydia/GC NAAT
Chlamydia/Gonorrhea	Male	Urethra	No		CHLAMYDIA (CT) & GONORRHEA (GC) by NAAT Source/site: <input checked="" type="checkbox"/> Urethra <input type="checkbox"/> Cervix <input type="checkbox"/> Urine <input type="checkbox"/> Vagina <input type="checkbox"/> Throat <input type="checkbox"/> Rectum	Urethra-Chlamydia/GC NAAT
Trichomonas	Female	Vagina	Yes		VAGINITIS <input type="checkbox"/> Initial (smear for BV & yeast only) <input type="checkbox"/> Chronic/recurrent (smear, culture, trichomonas) <input checked="" type="checkbox"/> Trichomonas testing	Trichomonas – Female/Aptima kit