

Specimen Collection Guide for Cutaneous Leishmaniasis

PART I.

Patient Information		MRN:
Name:	Gender: M F	DOB:
Likely country of acquisition*:		Age:

*Residence in area of *Leishmania* transmission, travel history, etc.

PART II.

Clinical Information	
Number of lesions:	Duration of oldest lesion:
Location(s) of lesions:	Mucosal involvement [§] : Y N
Signs and symptoms: (circle any that apply)	
Pruritus Pain Bleeding Exudation/drainage Other_____	

[§]Evidence of mucosal involvement includes any of the following: erythema/infiltration of nasal mucosa, lips, palate; hypo- or dysphonia; dysphagia; recurrent epistaxis; stridor; dyspnea.

PART III.

Specimen Information	Date:	Site:
Method(s) of Collection:		
Aspirate Scraping Biopsy [‡]		

[‡]Biopsy has lowest culture yield for leishmaniasis; aspirate plus scraping are preferable.

PART IV.

Clinician Contact Information	Name:	
Street Address:	City, Province:	Postal Code:
Email Address:	Phone:	Fax:

Instructions for Specimen Collection

Collection Method	Necessary Materials	Instructions
I. Lesion Aspirate	<ol style="list-style-type: none"> 1. Topical antiseptic 2. Sterile gloves 3. 25-27 gauge needle 4. 1-3 cc syringe 5. Sterile normal saline 6. Sterile gauze pads 7. Band-aid 8. Transport medium and container 	<ol style="list-style-type: none"> 1. Clean skin lesion with topical antiseptic, and allow to air dry 2. Draw 0.1 – 0.2 mL sterile NS into syringe, and insert needle tangentially into ulcer base or border 3. Rotate needle back and forth, gently, and slowly aspirate tissue fluids (should be pink tinged) 4. Transfer aspirated fluid from syringe to transport medium 5. Label transport container with patient name, MRN, date, and specimen site 6. Complete Parts I – IV of specimen collection guide
II. Lesion Scraping	<ol style="list-style-type: none"> 1. Topical antiseptic 2. Sterile gloves 3. 25-27 gauge needle 4. 1-3 cc syringe 5. 1-2% lidocaine ± epinephrine (or suitable local anesthetic) 6. 10-blade scalpel 7. Sterile gauze pads 8. Band-aid/tape 9. Transport medium and container 	<ol style="list-style-type: none"> 1. Clean skin lesion with topical antiseptic, and allow to air dry 2. Infiltrate lesion superficially with local anesthetic, and wait ~5 minutes to achieve anesthesia of the lesion 3. Scrape the ulcer/lesion base with scalpel <u>superficially</u>, but do not incise the lesion 4. Dress lesion appropriately (bleeding should be minimal; oozing may occur) 5. Transfer scraped material from scalpel blade to the transport medium 6. Label transport container with patient name, MRN, date, and specimen site 7. Complete Parts I – IV of specimen collection guide
III. Biopsy [‡]	<ol style="list-style-type: none"> 1. Topical antiseptic 2. Sterile gloves 3. 25-27 gauge needle 4. 1-3 cc syringe 5. 1-2% lidocaine ± epinephrine (or suitable local anesthetic) 6. Small (~4 mm) punch biopsy 7. Suture materials (needle driver, sutures) 8. Sterile gauze pads 9. Band-aid/tape 10. Transport medium and container 	<ol style="list-style-type: none"> 1. Clean skin lesion with topical antiseptic, and allow to air dry 2. Infiltrate lesion completely with local anesthetic, and wait ~5 minutes to achieve anesthesia of the lesion 3. Using a small (~4 mm or less) punch biopsy, sample outer/rolled border of ulcer down to the level of the dermis, at least 4. Transfer biopsy specimen to transport medium 5. Close and dress wound as appropriate 6. Label transport container with patient name, MRN, date, and specimen site 7. Complete Parts I – IV of specimen collection guide

[‡]Biopsy has lowest culture yield for leishmaniasis; aspirate plus scraping are preferable.