



## BRONCHOALVEOLAR LAVAGE

### INDICATIONS:

For the detection and characterization of microbiologic pathogens (primarily *Pneumocystis jiroveci*, viral, fungal and bacteria) in immunocompromised patients; for detection and characterization of malignancy.

### SPECIMEN:

Bronchoscopically-obtained lavage (preferably at least 20 ml) of the distal airways and alveoli in the distribution of the suspected lesion.

### SUPPLIES:

1. Standard bronchoscopy equipment
2. Sterile plastic specimen container
3. Specimen Requisition
4. Specimen bag with a biohazard label

### COLLECTION:

Using standard bronchoscopy technique, lavage the lung distribution in question with sterile saline. Collect the lavage specimen in a sterile specimen container. Label the container with the correct patient information and submit the specimen, along with the completed request form to your lab. Be sure to indicate the exact source of the specimen (i.e. right or left side and lobe). If transport will be delayed, refrigerate the specimen. Do not add fixative to the specimen. If microbiology studies are desired, indicate all the studies to be performed on the requisition slip. At your lab, a portion of the specimen will be divided and sent for microbiology studies (currently sent to Quest Diagnostics). The remaining specimen will be processed for cytologic evaluation.

Complete test requisition including last and first name of patient, patient's date of birth and social security number, body site and source of specimen collected. Label specimen container (using the labels provided on the requisition) with patient's first name and last name, and body site/source. The container must have at least two (2) unique identifiers. Examples of unique identifiers: patient name, DOB, unique bar code, etc. Include pertinent clinical information, i.e., previous malignancy, radiation therapy, drugs, etc. Place container in a specimen bag with a biohazard label. Place the requisition in the side pocket of the specimen bag.