

Skin, Hair, and Nail Collection for Culture

South Shore Regional Hospital

**Your collection sample will
not be tested if:**

- › it is not labelled correctly.
- › your requisition is not filled out.

Instructions

- Your primary health care provider (family doctor or nurse practitioner) has given you a form for this test. This form is called your **requisition**.
- You will be given a kit to collect a sample(s).
- Use **only** the collection kit given to you by your primary health care provider, local lab, or blood collection clinic.
- Keep the sample(s) at room temperature. **Do not** put them in the fridge.
- Bring the collection kit and requisition to an approved drop-off site **as soon as you finish the collection**.

Instructions

1. Wash your hands.
2. Clean the affected area with alcohol wipes (70% alcohol) and let it air dry.
3. Collect your skin, hair, or nail sample on the heavy paper from the kit. See the next sections for sample types.

4. Refold the paper so that the sample cannot fall out. **Do not** use tape.
5. Put the heavy paper in the envelope provided.
6. Seal the envelope and label it with your **name, health card number, and dates(s) and time(s) of collection.**

If possible, samples should be collected by your health care provider.

Skin

1. Scrape the edge of the rash using a scalpel blade.
2. Collect the skin flakes on the heavy paper. Collect as many pieces as possible.

Hair

1. Use tweezers to tweeze hair from the affected area. Put in on the heavy paper.
2. Scrape the skin around the hair using the scalpel blade. Add the skin flakes to the heavy paper.

Nails

1. Use a scalpel blade to scrape away the top layer of the nail. Throw these pieces away.
2. Collect the next layer of the nail on the heavy paper. **Do not** collect a whole nail.

If you have been asked to collect a sample at home and you are having trouble, call your primary health care provider.

Each **requisition** must have:

- › Your **full name and date of birth**
- › Your **health card number**
- › Your **primary health care provider's full name and address**
- › The names of **all antibiotics you are taking**
- › The names of **all countries outside of North America that you have visited (or emigrated from) in the past 12 months**
- › **Date and time of collection**

Drop-off sites:

Drop-off sites are closed on holidays.

South Shore Regional Hospital

Main floor

90 Glen Allan Drive

Bridgewater NS B4V 2S6

- **Drop-off hours:**

- › 7 a.m. to 2 p.m. (Mon-Fri)
- › When you arrive, take a Q-matic ticket.

- **Closed:**

- › 8:30 a.m. to 9 a.m.
- › 11:30 a.m. to 12 p.m. (noon)

Fisherman's Memorial Hospital

1st floor registration

14 High Street

Lunenburg NS BOJ 2C0

- **Drop-off hours:**

- › 7:30 a.m. to 2 p.m. (Mon-Thurs)
- › 7:30 a.m. to 11 a.m. (Fri)
- › When you arrive, take a Q-matic ticket.

- **Closed:**

- › 9 a.m. to 9:30 a.m.
- › 11 a.m. to 12 p.m. (noon)

Queen's General Hospital

1st floor

175 School Street

Liverpool NS B0T 1P0

- **Drop-off hours:**

- › 9 a.m. to 11:30 a.m.
- › 12 p.m. (noon) to 2 p.m. (Mon-Fri)
- › When you arrive, take a Q-matic ticket.

- **Closed:** 11:30 a.m. to 12 p.m. (noon)

North Queen's Health Centre

9698 Highway 8

Caledonia NS B0T 1B0

- **Drop-off hours:**

- › 7:30 a.m. to 10:45 a.m.
(every second Wed)

Our Health Centre

3769 Highway 3

Chester NS B0J 1J0

- **Drop-off hours:**

- › 7:30 a.m. to 10:45 a.m. (Thurs)

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

*Prepared by: Pathology and Laboratory Medicine,
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