CHI Health CUMC – Bergan Mercy Anatomic Pathology Laboratory 7500 Mercy Road, Room 1913 Omaha, NE 68124 Phone: 402-717-5227 Fax: 402-717-5252



FINE NEEDLE ASPIRATION (FNA) CYTOLOGY COLLECTION GUIDE

Fine Needle Aspiration (FNA) with Slides	 Numerous superficial palpable and deep seated, non-palpable lesions can be aspirated utilizing multiple imaging modalities. Only fine needles (i.e. 22g or thinner) should generally be used for cytology specimens. Choose needle size (22g - 27g) appropriate for location and nature of the lesion. Note: For certain cases (e.g. EBUS, EUS), a slightly larger needle may be used. Otherwise, tissue collected with larger needles are considered core biopsies, which should be placed in formalin and ordered/processed as surgical pathology specimens. Using a pencil, label 2 glass slides with patient's full name and DOB, along with the letter "F" (for fixed) on one slide and the letters "AD" (for air dried) on the other; repeat for each FNA pass. Write specimen source on each slide (e.g. right neck) under DOB. Leave space on label for lab to write case number. Do NOT write any of the following on slide labels: MRN, doctor's name, or date/time. Do NOT use any kind of ink (ballpoint pen, fine point Sharpie, etc.) to label slides. Aspirate lesion. Carefully expel a drop of specimen from syringe near middle of slide labeled "F"; using a blank slide, gently smear specimen down the slide away from the label. Immediately spray with cytology fixative and allow to dry completely. Carefully expel a drop of specimen from syringe near middle of slide labeled "AD"; using a blank slide, gently smear specimen not the upper 1/3 of the slide near the label. IMOT expel or smear specimen onto the upper 1/3 of the slide near the label. Mot expel or smear specimen onto the upper 1/3 of the slide near the label. Mot Slide to air dry completely. Note: Alternatively, specimen may be expelled onto either the "F" or "AD" slide then smeared by sandwiching the slides t



Fine Needle Aspiration (FNA) without Slides	 Numerous superficial palpable and deep seated, non-palpable lesions can be aspirated utilizing multiple imaging modalities. Only fine needles (i.e. 22g or thinner) should generally be used for cytology specimens. Choose needle size (22g - 27g) appropriate for location and nature of the lesion. Note: For certain cases (e.g. EBUS, EUS), a slightly larger needle may be used. Otherwise, tissue collected with larger needles are considered core biopsies, which should be placed in formalin and ordered/processed as surgical pathology specimens. Aspirate lesion. Rinse the needle and syringe several times in a properly labeled container of sterile saline or prefilled CytoLyt container by pulling and depressing the syringe plunger. After depressing plunger the final time to push all liquid out of the syringe, dispose of syringe. Repeat for each pass (if multiple passes are made of same lesion). If multiple anatomical sites/lesions are being sampled, use a separate properly labeled container of sterile saline or CytoLyt container. Place saline or CytoLyt container(s) into bio bag with cytology requisition. If needle rinses were placed in saline, refrigerate (specimens in CytoLyt are stable at room temperature). Deliver to the lab as soon as possible.
--	--