1. **Wash hands with soap and water** before beginning stool specimen collection (bowel movement).

2. Write the **patient’s full name, specimen collection date and time** on the outside of the specimen cup. **Print legibly.**

3. Completely fill out the information on the test requisition. **Print legibly.**

4. **To collect a stool specimen**, before using the toilet, lift up the toilet seat and place a piece of plastic wrap (wax paper may be substituted) over the toilet bowl. Secure with adhesive tape to prevent the sample from falling into the toilet.

5. Make a depression in the plastic wrap or wax paper to aid specimen collection.

6. Lower the toilet seat and proceed with expelling bowel movement (stool specimen). Expel the specimen onto the plastic wrap. **Do not urinate on the specimen.** Do not attempt to pass (expel) the specimen directly into the specimen cup.

7. Use a plastic spoon to transfer a portion of the stool specimen (approximately one tablespoon in size) to the specimen cup.

8. Recap the specimen cup making sure the lid is tight. Ensure the **patient’s full name and specimen collection date** has been written on the outside of the specimen cup.

9. Place the specimen cup in the plastic zipper bag and seal it.

10. Place the sealed plastic bag in another plastic bag (i.e. double bag the specimen cup).

11. Dispose of the remainder of stool in the toilet. Discard the soiled plastic wrap by placing in a disposable bag (paper or plastic). Place this bag into a sealable plastic bag. Close that bag securely and place it in the garbage.

12. Clean any contaminated surfaces with appropriate household disinfectant.

13. **Wash hands thoroughly with soap and water.**

14. Place specimen cup (in sealed plastic bag) in the refrigerator until it is returned to the Health Department.

15. Place the specimen on ice for transport to the health department.

16. Deliver the specimen on ice within 24 hours of collection to the following facility:

   Name of Facility
   ____________________________________________
   Address ____________________________________
   ____________________________________________
   Phone _______________________________________
   Hours _______________________________________

   For any questions, please call:
   ____________________________

Thank you for your time and cooperation.