

HELICOBACTER PYLORI ANTIGEN COLLECTION & SHIPPING INSTRUCTIONS

KIT CONTENTS

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| 1 - Requisition Form | 1 - Cardboard Shipping Box |
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| 1 - Clean, White Vial (no preservative) | 1 - UPS Next Day Air Pack (US & Canada only) |
| 1 - Nun's Hat | 1 - UPS Next Day Shipping Label (US & Canada only) |
| 1 - Biohazard Bag | |

CAREFULLY READ COLLECTION AND SHIPPING INSTRUCTIONS THOROUGHLY BEFORE STARTING

PLEASE NOTE When shipping the specimens back to Meridian Valley Lab, send Monday through Thursday Only. DO NOT MAIL ON FRIDAYS AS DELIVERIES **ARE NOT** ACCEPTED ON SATURDAY OR SUNDAY.

OBSERVED HOLIDAYS ARE AS FOLLOWS: NEW YEARS DAY, MEMORIAL DAY, FOURTH OF JULY, LABOR DAY, THANKSGIVING DAY AND THE DAY AFTER, AND CHRISTMAS DAY.

DO NOT SEND SAMPLE(S) THE DAY PRIOR TO OR THE DAY OF A HOLIDAY.

INTERFERING SUBSTANCES

3 DAYS PRIOR TO BEGINNING THE DIET PLAN DISCONTINUE USE OF THE FOLLOWING *UNLESS OTHERWISE DIRECTED BY YOUR PRACTITIONER*

- Antifungal
- Anti-yeast medications
- Antibiotics

2 DAYS PRIOR TO BEGINNING THE DIET PLAN DISCONTINUE THE USE OF

- Aspirin
- Antacids
- Digestive Enzymes

COLLECTION INSTRUCTIONS

1. Place Nun's Hat under toilet seat. Collect stool in collection container.
IMPORTANT: DO NOT LET URINE OR WATER COME INTO CONTACT WITH THE STOOL SPECIMEN. Alternatively, any clean, plastic container can be used to collect the stool specimen.
2. Remove the vial from the cardboard box.
3. Unscrew the cap on the white vial, with the spoon take portions from multiple areas of the stool. Fill the white vial with enough stool approximately half to three quarters full. DO NOT OVERFILL. Screw the cap on tightly.
4. Write Patient Name and Date of Collection on the vial. You do not have an ID#, the lab will assign one upon arrival.
5. Place the white vial into the biohazard bag. Place the white vial and the ice pack into the foam insulated mailer and freeze overnight.
6. Complete the enclosed requisition.

7. If patients are paying MVL directly the ABN form (opposite side of requisition form) **MUST** be signed, dated, and payment to be included.
8. Place the requisition/ABN form in the outside pocket of the biohazard bag.

SHIPPING INSTRUCTIONS

1. Retrieve the foam insulated mailer containing the frozen white vial and ice pack from the freezer. Place the foam mailer in the cardboard shipping box.
2. Place the cardboard shipping box into the UPS next day air pack and seal securely.
3. Place return shipping label with barcode on outside UPS next day air bag.
4. Save return receipt with the tracking number for your records.
5. Call UPS toll free at **1-800-742-5877** for a pickup or for nearest drop location. UPS will pick up only on weekdays.
6. When calling for UPS pickup, request “**ON CALL AIR**” only. **DO NOT request a one-time pickup.** Meridian Valley pays for “**ON CALL AIR**” only. UPS expects the patient to pay for a one-time pickup.