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**Date:** 6/19/2025

**Re:** Self-Collection of Upper Respiratory Tract and Urine Specimens for Measles NAT Testing

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## Overview

The BCCDC Public Health Laboratory (BCCDC PHL) will now accept self-collected throat/nose swabs and urine samples for measles nucleic acid testing (NAT) in cases where healthcare provider-collected specimens are not attainable. The inclusion of self-collected throat/nose swabs and urine samples is a part of a BCCDC PHL initiative to support public health units' efforts in measles testing. It is recommended that both sample types be collected to increase the sensitivity of measles virus detection, however, either sample type can be submitted for testing on their own at the discretion of the public health unit.

**Note:** Self-collected specimens *are not validated* for measles NAT testing. Provider-collected specimens remain the gold standard for measles diagnosis.

The BCCDC PHL is providing public health units with this letter, an example requisition demonstrating how to fill out the testing section of the BCCDC PHL Virology requisition for measles self-collection, [an infographic for the self-collection of throat and nose samples](#) for measles testing, and [an infographic for urine self-collection](#). Public health units are responsible for putting together self-collection kits, with containers provided by the health unit, distributing them to patients, and coordinating the shipment of the self-collection samples to the BCCDC PHL.

## Eligibility Criteria for Self-Collection

Self-collection of throat/nose and/or urine specimens is appropriate only for individuals:

- Who have been exposed to measles, **and**
- Are exhibiting symptoms of measles, **and**
- When collection by healthcare provider-collected specimens is not possible

For more information on clinical features of measles and testing guidelines, please consult the recent BCCDC PHL laboratory memo: [http://www.bccdc.ca/Health-Professionals-Site/Documents/BCCDC\\_PHL\\_Memo\\_Measles\\_Update\\_29May2025.pdf](http://www.bccdc.ca/Health-Professionals-Site/Documents/BCCDC_PHL_Memo_Measles_Update_29May2025.pdf)

## Specimen Submission Requirements

1. **Appropriate specimen collection container:** to collect a throat/nose swab use a COPAN red-top with Universal Transport Media and for urine use a sterile container.



- a. Public health units can obtain testing containers through their usual supply chain procedures. Please note that the BCCDC PHL will not be providing sample containers for this initiative.
- b. For more information on measles specimen collection containers please consult the BCCDC eLab Handbook at <http://www.elabhandbook.info/PHSA/Default.aspx>.

## 2. Completed BCCDC Virology Requisition

In the Measles testing section

- a. Check off the sample type (nasal/throat and/or urine) **and** the "Other sample type" boxes
- b. Indicate "SELF-COLLECTION" in the "Other sample type, specify:"

Example Testing Information for a  
Self-Collected Throat/Nose Swab:

MEASLES, MUMPS, RUBELLA	
<input type="checkbox"/> Recent MMR vaccination	<input type="checkbox"/> Recent travel (*Provide travel dates)
<b>MEASLES</b>	
<input checked="" type="checkbox"/> Nasal / Nasopharyngeal swab	<input type="checkbox"/> Buccal /
<input checked="" type="checkbox"/> Throat swab	<input type="checkbox"/> Urine
<input type="checkbox"/> Urine	<input type="checkbox"/> Other sample type, specify:
<input checked="" type="checkbox"/> Other sample type, specify: SELF-COLLECTION	

Example Testing Information for a  
Self-Collected Urine sample:

MEASLES, MUMPS, RUBELLA	
<input type="checkbox"/> Recent MMR vaccination	<input type="checkbox"/> Recent travel (*Provide travel dates)
<b>MEASLES</b>	
<input type="checkbox"/> Nasal / Nasopharyngeal swab	<input type="checkbox"/> Buccal /
<input type="checkbox"/> Throat swab	<input type="checkbox"/> Urine
<input checked="" type="checkbox"/> Urine	<input type="checkbox"/> Other sample type, specify:
<input checked="" type="checkbox"/> Other sample type, specify: SELF-COLLECTION	

- c. Ordering provider information and signature filled out (highlighted sections)

ORDERING PRACTITIONER (Name, MSP#, Address of report delivery)	ADDITIONAL COPIES TO PRACTITIONER / CLINIC: (Limit of 3 copies available) (Name, Address / MSP# / PHSA Client#)
<div></div>	1. <div></div>
	2. <div></div>
	3. <div></div>
<input type="checkbox"/> I am a Locum (provide name of Practitioner and Clinic to receive report)	
SIGNATURE OF ORDERING PRACTITIONER	DATE SIGNED

Please note that public health units are responsible for filling out this information prior to submission to the BCCDC PHL for testing as it is not a field pre-filled by BCCDC PHL for this initiative.

3. **Specimen Acceptance Criteria** : samples must have two matching patient identifiers on both the specimen and the completed requisition.
  - a. For more information, please consult the sample collection information for all sample types at <http://www.bccdc.ca/health-professionals/professional-resources/laboratory-services/sample-collection-and-transport>

## Specimen Storage and Transport

**Storage:** Refrigerate (2-8°C) prior to transport.



**Transport:** Within 48 hours of collection on ice to the BCCDC PHL. All samples must be in acceptable sample collection containers and properly packaged as per Transport Canada, Transport of Dangerous Goods Regulations.

**Responsibility:** Public health units must verify that the sample and requisition meet all testing requirements before submission

## Laboratory Processing and Turnaround

Routine measles nucleic acid testing (NAT) is performed at the BCCDC PHL 6-7 days per week, and the turnaround time for results is generally ~24 hours after a specimen is received. Testing can be expedited upon request to the BCCDC Medical Microbiologist on-call (604-661-7033). Please note that self-collected respiratory samples are not validated for measles NAT testing—all results will contain a comment that the result is from an unvalidated sample type. If a self-collected throat/nose sample for measles NAT testing is negative, but a patient is presenting signs and exposure history for measles infection, consider the possibility of a false-negative result and manage the case appropriately.

## Additional Measles Resources

- BC case count and exposure locations: <http://www.bccdc.ca/health-info/diseases-conditions/measles>
- Updated (May 2025) PHAC Guidance: <https://www.canada.ca/en/public-health/services/diseases/measles/health-professionals-measles/guidance-management-measles-cases-contacts-outbreaks-canada.html>
- BCCDC guidance, Communicable Disease Control, Measles Chapter: <http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/EpId/CD%20Manual/Chapter%201%20-%20CDC/Measles.pdf>
- Measles vaccines: Canadian immunization guide: <https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-4-active-vaccines/page-12-measles-vaccine.html>

Thank you,

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