



"Delivering more than a test result."

ASHI No. 10-4-OR-03-1

CAP No. 7222314

CLIA No. 38D1058476

Buccal Swab Collection Instructions

1. Please fill out all sections of the provided requisition form.
2. Please use 3 buccal swabs for the test.
3. Open one swab at a time and collect the sample by rubbing the swab on the inside of your cheek about 20 times or for 10-15 seconds in a circular motion. Swab firmly so that the cheek is pushed outward.
4. Repeat step 4 with the other two swabs on the inside of the *other* cheek.
5. Dry the swabs by shaking the swabs in the air for a 15 - 20 seconds.
6. Place the dried swabs back in their original sleeves.
7. Place the swab sleeves containing the dry swabs **and** test requisition into the white envelope provided. Seal the envelope and label the envelope with your name and date of sample collection. **Be sure to write your name on the envelope.**
8. Ship your test kit back to the lab as soon as possible after collection.

**Kashi Clinical Laboratories
10101 SW Barbur Blvd, Suite 200
Portland, Oregon 97219**

If you have any questions, please call us Toll Free at:
1-877-879-1815

Kashi Clinical Laboratories, Inc. | 10101 SW Barbur Blvd., Suite 200 | Portland, OR 97219

Office: (503) 206-4989 | Fax: (503) 206-6939 | Toll Free: 1-877-879-1815 | www.kashilab.com | info@kashilab.com