

Optimal Nail Specimen Collection for Onychodystrophy Testing

PRACTICE ESSENTIALS™

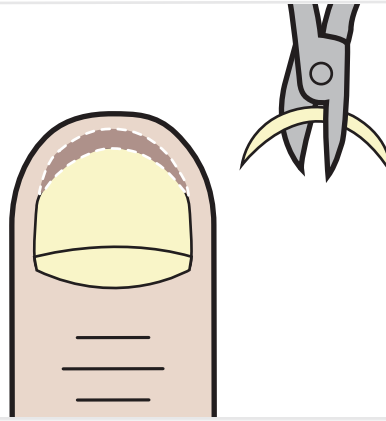


- Nail specimen testing for onychodystrophy / onychomycosis confirms diagnosis of nail disease and enables targeted treatment through identification of genus and species of infection, which cannot be done by visual examination alone.
- Proper specimen collection and submission procedures play a vital role in practice operations and patient treatment.

Steps

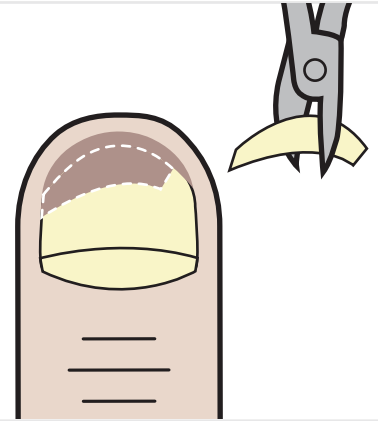
Prep: Wipe nail collection site with 70% isopropyl alcohol. Local anesthesia may or may not be required.

1



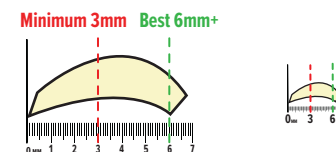
Debride and *discard* distal nail clippings.

2



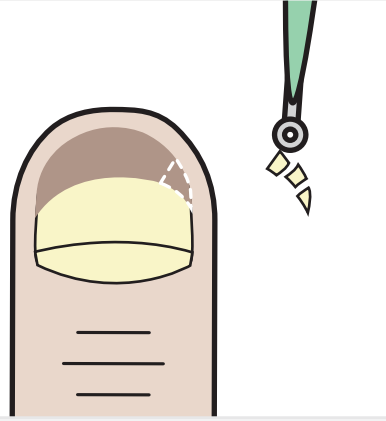
Obtain specimen from the most proximal area of nail and hyponychium.

IMPORTANT




Minimum specimen size of nail and subungual debris for ordering a single test is 3mm. However, when ordering multiple tests such as PAS, GMS, FM, and DNA (PCR) at the same time, 6mm or more of specimen is optimal.

3




Use curette to *obtain additional subungual debris*, as this will increase the potential yield.

4



Place *dry* nail sample and subungual debris into dry keratin bag.

5



Complete information on bag. Complete Requisition Form and prepare for shipping.

Tips for Best Submissions

- Do not submit specimen if your patient is undergoing antifungal therapy. Wait 7 days after topical treatment. Wait 60 days after systemic treatment.
- Do not use nail or skin softener.
- Do not place a patient in a betadine whirlpool.
- Do not submit initial distal nail clippings.
- Do not submit specimen in formalin.

Nail Specimen Collection: Patient Example

Pre-Nail Debridement



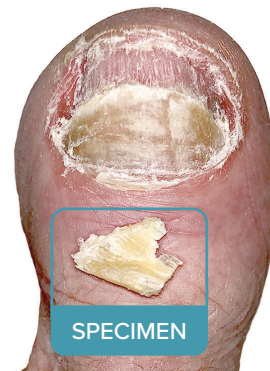
Patient nail as they present in the office.

Mid-Nail Debridement



Distal nail clippings have been removed. Proximal nail and subungual debris removal in progress.

Post-Nail Debridement



Total area of nail and tissue removal during collection process, showing optimal specimen size of 6mm+.

Onychodystrophy Laboratory Tests

- Histopathology testing (PAS, GMS, FM) is designed to detect fungi and melanin. These tests allow for a diagnosis of microtrauma in cases of non-infectious nail dystrophy.
- DNA (PCR) testing is designed to identify the genus and species of causative organisms in cases of infectious nail dystrophy.
- Combination testing (PAS, GMS, FM, PCR) provides the *most comprehensive evaluation* of nail unit dystrophy, incorporates both the highest sensitivity and highest specificity, and *enables precise, targeted therapy* for the underlying etiology.

PERIODIC ACID–SCHIFF (PAS)

Sensitive test for staining cell walls of fungi magenta to identify living fungi

GOMORI METHENAMINE SILVER (GMS)

Sensitive test for staining degenerated fungal organisms

FONTANA-MASSON (FM)

Sensitive test for melanin pigment (melanoma) and pigmented saprophytes

ONYCHODYSTROPHY DNA TEST (PCR)

Specific test that identifies genus and species with molecular genetic testing and rapid detection of both dermatophytes and non-dermatophytes by detecting DNA genetic material of dermatophytes, saprophytes, yeasts, and pseudomonas



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