Appendix L: Swabbing Technique

The Levine technique is one method of obtaining a semi-quantitative wound culture swab to guide the use of appropriate anti-infective agents (or tissue culture, in appropriate settings) (NPUAP, EPUAP, & PPPIA, 2014; WOCN, 2010). It may also be appropriate to take a tissue culture. This is not intended to be a comprehensive list but rather suggestions of information identified within the systematic review, AGREE II appraised guidelines, by the expert panel or external stakeholder feedback.

The Levine technique for performing quantitative swab cultures:

1. Cleanse the wound with normal saline.
2. Remove/debride non-viable tissue.
3. Wait two to five minutes.
4. If the ulcer is dry, moisten the swab with sterile normal saline.
5. Culture the healthiest looking tissue in the wound bed.
6. Do not culture exudates, pus, eschar, or heavily fibrous tissue.
7. Rotate the end of a sterile alginate-tipped applicator over a 1 cm² area for 5 seconds.
8. Apply sufficient pressure to the swab to cause tissue fluid to be expressed.
9. Use sterile technique to break the tip of the swab into a collection device designed for quantitative cultures (NPUAP, EPUAP & PPPIA, 2014, p. 164).