

A Comparison of Patient Self Swab vs. Provider Swab for GBS status: An analysis of patient preference and sensitivity comparison

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Background/Synopsis: Historically in our private practice setting patients have had their GBS status collected by provider swab between 35 – 37 weeks of gestation unless already present in their urine at the initial OB visit. An initiative this year was put in place to allow patients the option of a self-swab with appropriate instruction per CDC guidelines vs. having a provider collect the swab. It is hypothesized that the majority of the patients will prefer and choose the less invasive self-swab option and that there would not be a sensitivity difference in collection results when self-swab vs. provider swab results are compared.

Objective: The aim of this study is to assess patient preference with the option of collecting a self GBS swab vs. a provider collected swab. Additionally, an analysis will be performed on the sensitivity of GBS presence in the self vs. provider swab groups in pregnant women in a private practice setting.

Study Design/Methods: Prior to the year 2023, all GBS swabs at Women’s Health of Central Virginia were provider collected. After 2023, patients were given instructions in a private setting on self-collection of GBS per CDC guidelines and given the option to self-swab vs. have a provider perform the GBS swab. A retrospective analysis will be performed to identify the percentage and demographics of patients who preferred self-swab vs. provider swab as well as reviewing the sensitivity of the two collection options. The study will include all women who had a GBS swab performed either by self-swab or provider swab between 35 – 37 weeks pregnant. Exclusion criteria will include women who have already been assessed to be GBS positive per previous urine culture results.

Results: Pending completion

Conclusion: Pending completion