
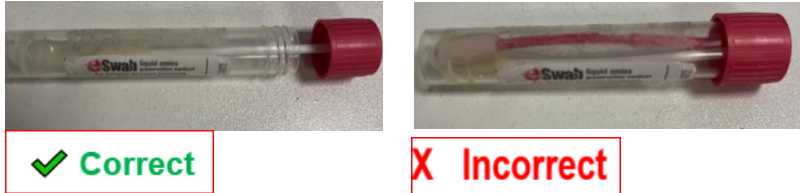













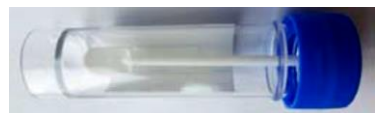
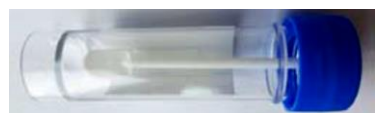

BACTERIOLOGY SAMPLE CONTAINER GUIDE



All precious samples, such as CSF and respiratory samples including sputum, BALs etc **MUST NOT** be sent via the pneumatic tube. **All other specimens, e.g., swabs, tips, blood cultures, faeces and urines can be sent via the pneumatic tube (POD).**

****All urgent samples need to be phoned to the laboratory prior to sending****

Test	Container type	Comments
<p>MRSA Nose & Groin/perineum only</p>	 <p>Double eSwab – pink cap, liquid media Manufacturer: COPAN Lid: Pink top Media: Liquid Amies Media appearance: Clear, colourless Swab: 1 x white, 1 x pink</p> <p>Only specimens received with <u>white swab</u> in the tube are accepted for MRSA screen:</p>  <p>✓ Correct X Incorrect This swab will be processed. This swab will be rejected.</p>	<p>Liquid e-Swabs contain 1ml of liquid. No liquid should be discarded when collecting sample. Samples with insufficient liquid will be rejected.</p> <p>SEE: APPENDIX 1 for MRSA swab collection procedure</p>
<p>VRE screen/Wounds/throat swab/genital swabs (Skin, superficial, not surgical), Abscess or swab, deep-seated pus swab, post op wound swab, wound exudates (all include MRSA)</p> <p>MRSA Screen – *for a rapid MRSA screening only result, please submit a separate swab</p>	 <p>Single eSwab – pink cap, liquid media Manufacturer: COPAN Lid: Pink top Media: Liquid Amies Media appearance: Clear, colourless Swab: 1 x white</p>	<p>Collect the sample, insert the swab into the tube, snap off at the marked break point, discard the remaining shaft and recap the tube. Do not discard any liquid.</p>
<p>Rapid/Routine Carbapenemase-Producing Enterobacteriaceae (CPE) Screen</p>	 <p>Double-head (duo) swab – red cap, sponge with liquid media</p> <p>Manufacturer: COPAN Lid: Red top Media: Foam sponge soaked in liquid media</p>	<p>Double headed red topped swab Charcol swabs and wire samples are not suitable for this test and will be rejected.</p> <p>Faecal material must be visible on the cotton tip of the swab otherwise the specimen will be rejected.</p>

	Media appearance: Off-white sponge at base of container Swab: 1 x 1 x double-head white	
Urethral swab		
Non- swab samples: Tissues, pus, Line Tips, Aspirates, Sterile fluids, Respiratory samples (sputum, BALs, Pleural fluid)		Universal container (30ml) – white top, sterile container Universal container (50ml) – white/silver/yellow top, sterile container Sterile fluids minimum volume: 1mL Tubes MUST be removed and replaced with a securely sealed screw cap
Sterile fluids for culture: CAPD/ peritoneal fluids (Ascites), Joint Fluids (Prosthetic & Natural), Stem Cell		Silver/blue top aerobic bottle Inoculate up to 10 mL to the bottle
Pleural Fluids (Not including pleural drains) are required to be sent in a set of blood culture bottles AND a sterile universal	 	Adults: Silver/blue top aerobic bottle Paediatrics: Pink top Peds aerobic bottle
Bronchial washings and Bronchoalveolar lavage		Tubes MUST be removed and replaced with a securely sealed screw cap
Urine Clean catch urine (CCU), Mid-stream urine (MSU), Supra pubic	Urine – Boric Acid Monovette tubes, Minimal volume: 10 mL	Urine samples must be collected in a primary container and then drawn into the 10ml Monovette

<p>aspirate (SPA), Bladder & Catheter urine</p>	  <p>NB. Exceptions will be made for paediatric urine samples on babies up to 3 months, where the volume is less than 10ml. A universal container will be accepted for these patients.</p> <p>Other urine samples received in <u>non-boric acid</u> container will be rejected.</p>	<p>using the straw inside the packaging.</p> <p>SEE: APPENDIX 2 for Urine Monovette User Guide</p>
<p>Blood cultures</p> <p>Venous blood, arterial blood, peripheral blood, sterile fluids, stem cells</p> <p>Plastic bottles</p>	 <div style="border: 1px solid black; padding: 5px; display: inline-block; text-align: center;"> <p>BC Volume: Adults: Inoculate between 8- 10 mL to each bottle Children: Inoculate between 1- 3mL Neonates: Inoculate 1-2 mL</p> </div> <p>Underfilling blood culture bottles may give false negative results. BCs can be sent via POD.</p>	<p>Blood culture set is defined as one aerobic (silver/blue top) and one anaerobic bottle (purple top)</p> <p>For neonates and infants a single Peds aerobic bottle (pink top) is required.</p>
<p>Faeces</p> <p>NB: One sample can be sent for all the following tests if required: Routine culture, C. diff, H. pylori, Ova Cysts and Parasites (OCP).</p>		<p>Minimal volume of specimen for culture and C.diff: 2-3 mL or 1/8 of the container.</p> <p>Minimal volume of specimen for all tests: 5 mL or 1/4 of the container</p>
<p>Faeces Parasitology Ova Cysts and Parasites (OCP).</p>		<p>Minimal volume of specimen is 2-3 mL or 1/8 of the container.</p> <p>Send 3 faecal samples over a period of 10 days, dated and labelled 1,2&3. Please record duration of diarrhoea, relevant foreign travel, presence of abdominal symptoms and evidence of malabsorption & blood eosinophil count. If amoebic dysentery is suspected and clinical advice needed tel 0161 276 6333.</p>
<p>Faeces Parasitology Enterobius vermicularis (Pinworm)</p>	<p>SALINE SWAB</p>	<p>Collection kit to be provided by the laboratory by calling 0161 276 6734</p>
<p>Urine for Schistosomiasis</p>		<p>Any sterile container</p>

		Collect the total urine produced between 10am and 2pm
Perinasal swab Bordetella pertussis (whooping cough)		Darcon with flexible wire shaft
AFB including TB Glass bottle		Blood culture bottle, white cap Minimal volume: 5mL of BAL, 6mL of CSF, 1-5 mL of bone marrow or blood

TO AVOID SAMPLE REJECTION - PLEASE FOLLOW THE INSTRUCTIONS BELOW:

- * SEND THE SAMPLE IN A CORRECT CONTAINER AND WITH THE CORRECT SWAB IN (MRSA SCREEN) – see instruction on the next page
- * Sample **MUST** be labelled with 4 identifiers (District number or NHS number, Surname, Forename, DOB)
- * Request form identifiers **MUST** match the identifiers on the sample
- * Each sample must be placed in a separate, sealed plastic bag, samples that require testing in multiple departments **MUST** be separated and transported in separate bags
- * One test should be requested per request form and one sample sent
- * Screw cap **MUST** be securely sealed to prevent sample's leakage.

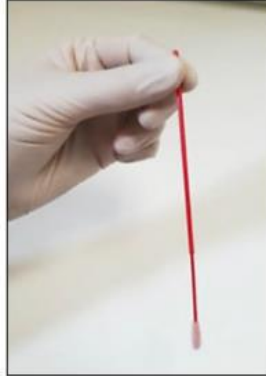
APPENDIX 1:

Double eSwab: MRSA screening for nose and groin/perineum only



1. Open the peel pouch and hold with swabs and tube accessible.

Alternatively, the tube can be placed on a flat surface.



2. Take out the pink swab holding **only** the top half of the shaft.

3. Collect the first sample (groin/perineum).



4. Unscrew tube cap, insert swab into the liquid and 'swirl' for 5 seconds.

5. **Discard** the pink swab as tiger waste. Re-cap tube if required.



6. Take out the white swab holding **only** the top half of the shaft.

7. Collect the second sample (nose).



8. Unscrew tube cap, insert the swab into the tube and snap off at marked break point.

9. Discard the remaining plastic shaft.



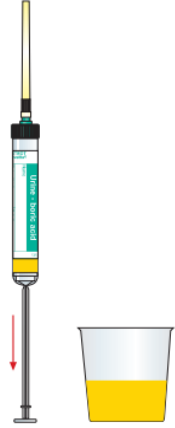
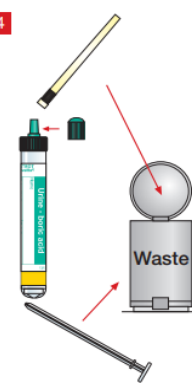
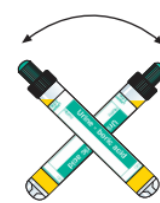


10. Re-cap the tube with the white swab end and liquid inside.

Note: Swab can be dampened with one drop of sterile saline before use if required. Do not use the liquid from the e-swab as the whole amount is needed for the test.

APPENDIX 2:

Urine Monovette® User Guide

<p>1</p>  <p>Remove stopper and keep for later use! <u>Attach plastic straw.</u></p>	<p>2</p>  <p>Insert the plastic straw into the container and fill the Urine Monovette® up to the bottom of the label.</p>	<p>3</p>  <p>To empty the plastic straw, hold the Urine Monovette® in an upright position and pull the plunger backwards to the bottom of the tube.</p>	<p>4</p>  <p>Remove the plastic straw, break off plunger and throw away. <u>Replace the stopper.</u></p>	<p>5</p>  <p>Mix well after sample collection (tilt approx. 5 times).</p>
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