Created: 9/11/2024
Updated: 9/11/2024

Bacterial Identification – Aerobic

Pure culture isolate on suitable agar (solid) medium; slant or plate

Suitable agar (solid) medium for isolate submitted. It can be slant or sealed plate.

Pure culture with viable growth must be submitted

Stability varies with the organism and transport system; usually up to 48 hours at ambient temperatures but fastidious organisms should be sent promptly.

N/A

Created: 9/13/2024
Updated: 9/13/2024

Bacterial Ident5a 1 >>BDC -0.001 Tc 6 -0.001 T

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

2 – 4 days

Specimen Retention Time

7 days

Method Description

Identification methods may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification panels. Genus and species are reported on aerobic bacterial isolates whenever possible.

Created: 9/11/2024
Updated: 9/11/2024

Bacterial Identification and Susceptibility – Aerobic Information Sheet

Overview

MDL Test Name

Bacterial Identification and Susceptibility – Aerobic

Pure culture isolate on suitable agar (solid) medium; slant or plate

Specimen Requirements

Container/Tube

Suitable agar (solid) medium for isolate submitted. It can be slant or sealed plate.

Specimen Volume (minimum)

Pure culture with viable growth must be submitted

Sample Stability Time

Stability varies with the organism and transport system; usually up to 48 hours at ambient temperatures but fastidious organisms should be sent promptly.

Transport/Storage Conditions

Ambient (20 – 25°C)

Patient Preparation / Collection Instructions

N/A

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

2 – 4 days

Specimen Retention Time

7 days

Method Description

- Identification methods may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification panels. Genus and species are reported on aerobic bacterial isolates whenever possible.
- Susceptibility testing may include minimal inhibitory concentration (MIC) E U R W K P L F U R G L O X W L R Q R U J U D G L H Q W V W U L S G L I I X
- NOTE: Susceptibility testing is performed depending on source and identification. If the source and identification do not warrant susceptibility testing per CLSI guidelines, MDL will notify the client prior to continuing with testing.

Reference Values

- Identification of organism.
- Susceptibility results are reported as minimal inhibitory concentration (MIC) in µg/mL,.4 ibitory.4 s2 Tw ( )Tj -0.04z Tw (m)c -0.0us x .4 ibitory a or mre xganism.

.4ibitoryxSus or

Cautions

- Invitro susceptibility does not guarantee a clinical response. Therefore, the decision to treat with a particular agent should not be based solely on the antimicrobial susceptibility testing result.

:68 0ROHFXODU 'LDJQRVWLFV /DERUDWRU\
PGOVXSSRUW#ZLFKLWD HGX

Created: 9/13/2024
Updated: 9/13/2024

Bacterial Identification and Susceptibility – Anaerobic Information Sheet

Overview

MDL Test Name

Bacterial Identification and Susceptibility – Anaerobic

MDL Test Code

BAC_IDSUSN

Ask at Order Questions

Source

Specimen Source

Pure culture isolate on suitable agar (solid) medium; slant or plate in an anaerobic environment.

Specimen Requirements

Container/Tube

Suitable agar (solid) medium for isolate submitted. Submit a sealed plate in an anaerobic transport bag to maintain viability.

Specimen Volume (minimum)

Pure culture with viable growth must be submitted.

Sample Stability Time

Stability varies with organism and transport system; usually up to 48 hours at ambient temperatures but fastidious organisms should be sent promptly.

Transport/Storage Conditions

Ambient (20 – 25°C)

Patient Preparation / Collection Instructions

N/A

Performance

Days Performed

Daily; Monday – Sunday

Created: 7/26/2024
Updated: 8/14/2024

Blood Culture Information Sheet

Overview

MDL Test Name

Blood Culture

MDL Test Code

BLD_CULT

Ask at Order Questions

N/A

Specimen Source

Blood (specify collection site)

Specimen Requirements

Specimen Volume (minimum)

- FA Plus and FN Plus Bottles: minimum 4mL; maximum 10 mL
- 3) 3 O X V % R W W O H V P L Q L P X P P / P D [L P X P P /

Sample Stability Time

- 24 hours
- Please notify MDL if a STAT courier is needed to meet this time .

Transport/Storage Conditions

x -2.7 ( )]TJ -0.002 Tc 7.007 Tw1.392 0 T76 (u)10 day(-)-6 (ons)]TJ 0 Tc 02.92 0.17 0 Td ( )Tj EMC /P <</MSID 36 >>

- Ambient (20 – ƒ & maintain at room temperature
- DO NOT REFRIGERATE

- A negative culture result does not necessarily rule out bacteremia; false-negative results occur when antibiotics were present in the blood culture set
- False-positive results can occur when contaminants from the collection process grow. Consideration of the full clinical picture and results of multiple blood culture sets should be used when determining if a patient has bacteremia
- This order request is for blood cultures incubated within MDL's continuous monitoring system. If you are a clinical site that incubates their own bottles and is sending only a previously incubated, positive bottle then please reference order: Blood Culture (POSITIVE) - Identification and Susceptibility (POSBLD_CULT)

References**

Clinical Microbiology Procedures Handbook, 3rd Edition. Edited by Lynne S. Garcia. Washington, DC: ASM Press, 2010.

Blood Culture (Positive – Referred) Identification Information Sheet

Overview

MDL Test Name

Blood Culture (Positive – Referred) – Identification

MDL Test Code

POSBLD_CULT_ID

Ask at Order Questions

Gram stain result

Specimen Source

Positive blood culture bottle

Specimen Requirements

Container/Tube

- Blood culture bottle(s) that have been flagged positive by the client's instrumentation

AND/OR

- Culture on suitable agar (solid) medium plate
- NOTE: For clients that are able, plates should be subbed and submitted with the bottle(s) to expedite results

Specimen Volume (minimum)

N/A

Sample Stability Time

Stability varies with the organism; STAT delivery is recommended

Patient Preparation / Collection Instructions

Must be a blood culture bottle(s) that have been flagged positive by the client's instrumentation, please include the initial gram stain result from the client site.

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

1 – 4 days

Specimen Retention Time

7 days

Method Description

Identification methods may include any of the following: conventional biochemical

Created: 9/13/2024
Updated: 9/13/2024

Blood Culture (Positive – Referred) Identification and Susceptibility Information Sheet

Overview

MDL Test Name

Blood Culture (Positive – Referred) – Identification and Susceptibility

MDL Test Code

POSBLD_CULT

Ask at Order Questions

Gram stain result

Specimen Source

Positive blood culture bottle

Specimen Requirements

Container/Tube

- x Blood culture bottle(s) that have been flagged positive by the client's instrumentation.

AND/OR

- x Culture on a suitable agar (solid) medium plate
- x NOTE: For clients that are able, plates should be subbed and submitted with the bottle(s) to expedite results.

Specimen Volume (minimum)

N/A

Sample Stability Time

Stability varies with the organism; STAT delivery is recommended

Transport/Storage Conditions

Ambient (20 – 25°C)

Patient Preparation / Collection Instructions

Must be a blood culture bottle(s) that have been flagged positive by the client's instrumentation, please include the initial gram stain result from the client site.

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

1 – 4 days

Specimen Retention Time

7 days

Method Description

- Identification methods may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification panels. Genus and species are reported on anaerobic bacterial isolates whenever possible.
- Susceptibility testing may include minimal inhibitory concentration (MIC) (broth microdilution or gradient strip diffusion) or disc diffusion ×

Reference Values

No growth

Cautions

- The stability time of isolate in a positive bottle is organism-dependent. The best practice is to subculture positive bottles as soon as possible and/or transport bottle(s) to MDL as soon as possible.
- Certain isolates when only isolated from one culture set can be indicative of contaminants.

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PGOVXSSRUW#ZLFKLWD HGX

Patient Preparation / Collection Instructions

- Varies depending on the fluid type. Collected by a healthcare provider using sterile technique. Contamination with normal flora from skin (or other body surfaces) should be avoided.
- Do NOT submit syringe with needle attached! If submitting a syringe, remove the needle, expel air and cap syringe.
- This order is reserved for 'normally sterile body fluids', those fluids aspirated from an abscess and/or collected from a drainage system should be ordered as ‘Wound Culture – Aerobic, Anaerobic, Gram Stain’ (WNDAA_CULT).

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

4 – 6 days

Specimen Retention Time

7 days

Method Description

- Conventional aerobic and anaerobic bacterial culture techniques with selective and non-selective media.
- Identification methods (wTd [( )C 5.04 en app(obi)2.6 r9oP1o3(t)-6.6 (i)13.5 (v)-2 (e dent)-6.

Cautions

- False-negative cultures can be caused by low numbers of organisms, prior antimicrobial treatment, or the fastidious nature of the infective organism.
- False-positive cultures can result from contamination of the specimen with skin microbiota.
- This order is generally reserved for those body fluids normally considered ‘sterile’, outside of cerebral spinal fluid and urine, which have their own orders.

Created: 7/26/2024
Updated: 2/24/2025

Cerebral Spinal Fluid Culture and Gram Stain Information Sheet

Overview

MDL Test Name

Cerebral Spinal Fluid Culture and Gram Stain

MDL Test Code

CSF_CULT

Ask a-1 (F)-6PF x CSF Color?

x CSF Clarity?

Specimen Source

Cerebral Spinal Fluid (specify source/collection method: i.e.: Lumbar puncture, shunt, ventricular shunt, etc.)

Specimen Requirements

Container/Tube

Sterile Container

Specimen Volume (minimum)

0.5mL

Sample Stability Time

48 hours

Transport/Storage Conditions

Ambient (20 – 25°C); maintain at room temperature

Patient Preparation / Collection Instructions

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

4 – 6 days

Specimen Retention Time

7 days

Method Description

- Conventional aerobic bacterial culture technique with selective and non-selective media ×××
- Identification methods (when appropriate) may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification systems ××
- Susceptibility testing (when appropriate) may include minimal inhibitory concentration (MIC) (broth microdilution or gradient strip diffusion) or disk diffusion ××

Reference Values

No growth

Cautions

- This order does NOT include an anaerobic culture. If an anaerobic culture is desired, please use order: CSF_CULT_ANAGS (Cerebral Spinal Fluid Culture Aerobic, Anaerobic, and Gram Stain).
- False-negative cultures can be caused by low numbers of organisms, prior antimicrobial treatment, or the fastidious nature of the infective organism.
- False-positive cultures can result from contamination of the specimen with skin microbiota.

Created: 7/26/2024
Updated: 2/24/2025

Cerebral Spinal Fluid Culture (Aerobic, Anaerobic, and Gram Stain) Information Sheet

Overview

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

4 – 6 days

Specimen Retention Time

7 days

Method Description

- Conventional aerobic and anaerobic bacterial culture technique with non-selective media.
- Identification methods (when appropriate) may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification S D Q H O V × ×
- Susceptibility testing (when appropriate) may include minimal inhibitory concentration (MIC) (broth microdilution or gradient strip diffusion) or disk G L I I X V L R Q × ×

Genital Culture Information Sheet

Overview

MDL Test Name

Genital Culture and Gram Stain

MDL Test Code

GTL_CULT

Ask at Order Questions

N/A

Specimen Source

- x Genital
- x Vaginal
- x Abscess
- x Endocervical
- x Rectovaginal
- x Urethral/Penial
- x Other

Specimen Requirements

Container/Tube

- x ESwab
- x ESwab Minitip Flocked Collection Kit (Urogenital)

Specimen Volume (minimum)

- x N/A (swab specimen)
- x Must have swab present in container

Sample Stability Time

- x 24 hours

Transport/Storage Conditions

- x Ambient (20 – 25°C)
- x DO NOT REFRIGERATE

Patient Preparation / Collection Instructions

- x Female: Do NOT use lubricant. Cervical mucus should be removed first and discarded before inserting the swab into the endocervical canal, move the swab from side to side allowing several seconds for absorption of organisms by the swab. Return the swab to the transport tube and label.
  For vaginal, wipe away excessive secretions or discharge. Obtain secretions from the mucosal membrane of the vaginal vault with the swab. Return the swab to the transport tube and label.
- x Male: Using a swab, insert 2 – 4 cm into the urethral lumen, rotate the swab & leave it in place for 2 seconds. Alternatively, use a swab to collect a specimen of urethral discharge. Return the swab to the transport tube and label.
- x Refer to the WSU MDL ESwab Collection Guide

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

3 – 4 days

Specimen Retention Time

7 days

Method Description

- x Conventional aerobic bacterial culture technique with selective and non-selective media.
- x Identification methods (when appropriate) may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification panels.
- x Susceptibility testing (when appropriate) may include minimal inhibitory concentration (MIC) (broth microdilution or gradient strip diffusion) or disk diffusion.

Reference Values

- No growth of pathogen
- Normal skin and/or vaginal flora isolated
- Normal skin and/or vaginal flora includes:
  - Lactobacilli
  - Corynebacterium spp
  - Gardnerella vaginalis
  - coagulase-negative staphylococci
  - Staphylococcus aureus
  - Streptococcus agalactiae (GBS)
  - Enterococcus spp
  - Escherichia coli

433Tj /TT0 /LBodyo<<AMCID 88 >>BDC 9TT4 1 Tf 11.04 -0 0 11.04 180 528.96 Tm 4228. /TT0 1 Tf 0.598 0

Report Available (TAT) – (Once received at MDL)

1 – 3 days

Specimen Retention Time

7 days

Method Description

- Conventional aerobic bacterial culture technique, screening for presence or absence only of Group A (Streptococcus pyogenes).
- Identification methods (when appropriate) may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification panels.

Reference Values

of n e T

Created: 7/29/2024
Updated: 8/15/2024

Lower Respiratory Culture with Gram Stain Information Sheet

Overview

MDL Test Name

Lower Respiratory Culture with Gram Stain

MDL Test Code

LR_CULT

Ask at Order Questions

N/A

Specimen Source

Lower Respiratory Sources:

- x Sputum
- x Tracheal

Transport/Storage Conditions

Refrigerated (2 – 8°C)

Patient Preparation / Collection Instructions

- Bronchial (BAL, washings, brushings): Collect via bronchoscopy and place in sterile container. Cover brushes with 1.0mL of sterile saline.
- Sputum: Early morning specimens preferred. Instruct patient to produce lung material, not saliva. Collect in sterile container. Specimens can be collected by respiratory therapy (induced).
- Tracheal Aj-0.002 Tc -0.00.o aL: Colledyototovoducr5 (r)-5.9 (ni)2.6TD[s)-2 (t)-6(er)-5.9 (i)2. T

- Normal respiratory flora includes:
  - Viridans Streptococci
  - Non-pathogenic Neisseria
  - Diphtheroids
  - Coagulase-negative Staphylococcus
  - Rothia
  - Group F Streptococcus oc42oP0 Td[pat)-6(hogeni)0C (0.717 ( )TEe)]T0 Tc 0

Specimen Retention Time

7 days

Method Description

A nasal swab is inoculated onto Spectra MRSA agar, a selective and differential chromogenic medium used in qualitative detection of nasal colonization of methicillin-resistant Staphylococcus aureus (MRSA).

Reference Values

No growth of Methicillin-Resistant Staphylococcus aureus (MRSA).

Cautions

This test is intended only for screening for MRSA colonization and is not intended to diagnose MRSA infection.

Neisseria gon orrhoeae Culture Information Sheet

Overview

MDL Test Name

Neisseria gonorrhoeae Culture

MDL Test Code

NG_CULT

Ask at Order Questions

N/A

Specimen Source

- x Vaginal
- x Endocervical
- x Urethral/Penial
- x Urethral Discharge
- x Vaginal Discharge
- x Genital
- x Lesion
- x Throat

Specimen Requirements

Container/Tube

- x ESwab
- x ESwab Minitip Flocked Collection Kit (Urogenital)

Specimen Volume (minimum)

- x N/A (swab specimen)
- x Must have swab present in container

Created: 7/29/2024
Updated: 9/10/2024

Created: 6/7/2024

Overview

MDL Test Name

RIC (RSV A/B, Influenza A/B, SARS-CoV-2 panel by RT-PCR)

MDL Test Code

pRIC

Ask at Order Questions

None

Specimen Source

- x Nasopharyngeal

OR

- x Oropharyngeal

Specimen Requirements

Container/Tube

- x Viral Transport Media (M4 or M5) with flocked Nasopharyngeal swab

OR

- x Oropharyngeal swab

Specimen Volume (minimum)

N/A (swab specimen)

Sample Stability Time

- x 72 hours at 20 – 22°C
- x 7 days at 2 – 8°C

Transport/Storage Conditions

- x Refer to the Nasopharyngeal Swab Collection
- x Refer to the Oropharyngeal Swab Collection

Cautions

- This test has not been FDA-cleared or approved. It is a lab-developed test, validated by MDL.
- Undetected (negative) results do not preclude infection and should not be used as the sole basis for treatment. Results should be correlated with the patient's history and clinical presentation.
- This test is specific for RSV A/B, Influenza A/B, and SARS-CoV-2. Positive results do not exclude the possibility of concurrent infection with other respiratory viruses.
- This test detects Influenza A/B viral RNA but does not distinguish among the different viral subtypes.

Created: 6/6/2024
Updated: 9/16/2024

SalivaDirect Information Sheet

Overview

MDL Test Name

Saliva Direct (SARS-Cov-2 by RT-PCR (Saliva Only))

MDL Test Code

pCOVSAL

Ask at Order Questions

Several

Specimen Source

Saliva

Specimen Requirements

Container/Tube

5mL Screw Cap Eppendorf Tube

Specimen Volume (minimum)

0.5 mL

Sample Stability Time

- x 72 hours at 20 – 22°C
- x 7 days at 2 – 8°C

Transport/Storage Conditions

Refrigerated (4 – 8°C) or Ambient (20 – 22°C)

Patient Preparation / Collection Instructions

- x The patient must not eat, drink, or use tobacco products within 30 minutes of collection.
- x Refer to the Viral Saliva Specimen Collection Instructions.

Performance

Days Performed

Daily; Monday – Friday at 11:30 AM

Report Available (TAT) – (once received at MDL)

< 48 hours

Specimen Retention Time

7 days

Method Description

Real-time reverse transcription polymerase chain reaction (RT-PCR) test intended for qualitative detection of nucleic acid from SARS-CoV-2.

Reference Values

Not Detected

Interpretation

- A positive (detected) result indicates SARS-CoV-2 RNA is present, suggesting infection of COVID-19
- A negative (undetected) result indicates that SARS-CoV-2 is not present in the patient's sample, this can be influenced by the stage of infection, and/or quality of specimen collected for testing. Results should be correlated with the patient's history and clinical presentation.
- An inconclusive result indicates the presence or absence of SARS-CoV-2 RNA in the specimen could not be determined with certainty, possibly due to real-time, reverse transcription polymerase chain inhibition. Submission of a new specimen for testing is recommended if clinically indicated.

Cautions

- Undetected results do not rule out COVID-19 in patients and should not be used as the sole basis for treatment. Results should be correlated with the patient's history and clinical presentation.
- This test is specific for SARS-CoV-2. Positive results do not exclude the possibility of concurrent infection with other respiratory viruses.
- The sensitivity of the assay is dependent on the timing of specimen collection in relation to symptom onset, and the quality of specimen submitted for testing.
- FDA cleared for use under Emergency Use Authorization (EUA) only.

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Molecular Diagnostics Laboratory
Wichita State University

Created: 8/27/2024
Updated: 2/24/202

Patient Preparation / Collection Instructions

- Cleanse skin or mucosal surfaces. For closed wounds and aspirates, disinfect as for a blood culture collection with 2% chlorhexidine or 70% alcohol followed by an iodine solution. Remove iodine with alcohol prior to specimen collection. For open wounds, debride (if appropriate), and thoroughly rinse with sterile saline prior to collection. Sample viable infected tissue, rather than superficial debris.
- Tissue biopsies should be collected from areas within and adjacent to the area of infection. (large enough tissue samples should be collected to perform all of the tests requested)

Performance

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

4 – 6 days

Specimen Retention Time

7 days

Method Description

- Conventional aerobic and anaerobic bacterial culture technique with selective and non-selective media.
- Identification methods (when appropriate) may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification panels.
- Susceptibility testing (when appropriate) may include minimal inhibitory concentration (MIC) (broth microdilution or gradient strip diffusion) or disk diffusion.

Reference Values

No growth.

Cautions

- Antibiotics administered prior to sample collection may negatively affect the recovery of organisms associated with infection. Preferably collect specimen prior to initiation of therapy and only from wounds that are clinically infected or deteriorating or that fail to heal over a long period.
- Many wound infections are polymicrobic and the isolation of an organism in culture may or may not correlate with infection of the wound.

Created: 8/27/2024
Updated: 8/27/2024

Upper Respiratory Culture Information Sheet

Overview

MDL Test Name

Upper Respiratory Culture

MDL Test Code

UR_CULT

Ask at Order Questions

N/A

Specimen Source

- x Throat swab
- x Oropharyngeal swab
- x Nasal swab
- x Nasopharynx swab

Specimen Requirements

Container/Tube

ESwab

Specimen Volume (minimum)

- x N/A (swab specimen)
- x must have swab present in container

Sample Stability Time

48 hours

Transport/Storage Conditions

- x Refrigerated (2 – 8°C)
- x Ambient (20 – 25°C) ×

- Group F Streptococcus
- Anaerobes
- Haemophilus species (not influenzae)
- Eikenella
- Actinobacillus
- Capnocytophaga
- Morexella
- Enterococci
- Yeasts (not Cryptococcus)
- Insignificant numbers of S. aureus, gram-negative rods, and N. meningitidis

Cautions

- Specimens from the upper respiratory tract can be easily obtained but are always contaminated with resident microbiota. Many microorganisms present in the nares and throat are found in both the disease and the carrier states.
- Culture of nasopharyngeal specimens to detect carriage of potential pathogens such as Neisseria meningitidis, S. pneumoniae, and H. influenzae should be discouraged. Since these pathogens are all part of the normal oropharyngeal flora, the clinical relevance of culturing them from this site cannot be determined.
- Upper respiratory cultures should be done when detection of a specific pathogen is sought and not be performed routinely to detect any organism that is present.

Urine Culture Information Sheet

OVERVIEW

MDL Test Name

Urine Culture

MDL Test Code

URN_CULT

Ask at Order Questions

N/A

Specimen Source

Urine, Specify collection method (i.e.: clean catch, foley catheter, cystoscopy, etc.)

SPECIMEN REQUIREMENTS

Container/Tube

- BD Vacutainer Urine C&S Tube (Preserved) [Preferred]
- Sterile Container (Unpreserved)

Specimen Volume (minimum)

- BD Vacutainer Urine C&S Tube: must be filled to minimum line printed on the tube (4mL)
- Unpreserved: 0.5mL

Sample Stability Time

- BD Vacutainer (Preserved): 48 hours
- Sterile Container (Unpreserved, Refrigerated): 24 hours
- Please notify MDL if a STAT courier is needed to meet this time.

Transport/Storage Conditions

- BD Vacutainer: Ambient (20 – 25°C) or Refrigerated (2 – 8°C)
- Sterile Container: Refrigerated (2 – 8°C)

Patient Preparation / Collection Instructions

Refer to the Urine Culture Specimen Collection Guide

PERFORMANCE

Days Performed

Daily; Monday – Sunday

Report Available (TAT) – (Once received at MDL)

2 – 4 days

Specimen Retention Time

7 days

Method Description

- Conventional aerobic bacterial culture technique with selective and non-selective media.
- Identification methods (when appropriate) may include any of the following: conventional biochemical testing, matrix-assisted laser desorption/ionization time-of-flight (MALDI-TOF) mass spectrometry, and commercial identification panels.
- Susceptibility testing (when appropriate) may include minimal inhibitory concentration (MIC) (broth microdilution or gradient strip diffusion) or disk diffusion.

Reference Values

No growth

Cautions

Unrefrigerated, unpreserved urine specimens greater than two hours old may be subject to overgrowth with organisms normally present in the urethral and periurethral areas, which may yield inaccurate or misleading results.

Created: 7/30/2024

Cautions

- Antibiotics administered prior to sample collection may negatively affect the recovery of organisms associated with infection. Preferably collect specimen prior to initiation of therapy and only from wounds that are clinically infected or deteriorating or that fail to heal over a long period.
- Many wound infections are polymicrobic and the isolation of an organism in culture may or may not correlate with infection of the wound.

- Refrigerated (2 – 8°C)
- Ambient (20 – ƒ & × ×

Cautions

- Antibiotics administered prior to sample collection may negatively affect the recovery of organisms associated with infection. Preferably collect specimen prior to initiation of therapy and only from wounds that are clinically infected or deteriorating or that fail to heal over a long period.
- Many wound infections are polymicrobic and the isolation of an organism in culture may or may not correlate with infection of the wound.