



Microbiology Out of Hours Specimens

Bacteriology

WITH THE EXCEPTION OF CSFs, SAMPLES ARE ONLY ACCEPTED FOR PROCESSING UP TO 22:00 HOURS

Blood cultures

These are taken in the same way as during normal working hours. The on-call BMS does not need to be informed. The bottles are transferred to the laboratory the next morning when they will be processed to detect any bacterial growth.

Continuous Ambulatory Peritoneal Dialysis Bags

These are processed in the laboratory until 22:00. The BMS needs to be informed when they are on their way. After 22:00 bags can be stored at 2-8°C overnight for attention the next morning.

CSF

These are examined for appearance, cell count, Gram film and cultured as appropriate. Requests for specialised stains must be discussed with the consultant.

Operative Specimens / Specimens from sterile sites

These include joint fluids, corneal scrapes and bronchoscopy specimens as well as pus and joint tissue. Gram stained films are made and cultures set up. All such specimens must be sent in sterile containers without formalin or other additions. Swabs are generally less useful than pus or fluid.

Superficial swabs

These specimens do not usually merit emergency examination and processing. Important exceptions are ear swabs from serious ear infections such as malignant otitis externa.

Urines for UTI

The “gold standard” for the diagnosis of urinary tract infection is culture, which requires 18 - 24 hours before a result is available. Microscopy or dipstick testing often provides preliminary information in appropriate patient groups, E.g. Dipstick testing is not suitable for Catheterised patients or those >65 years old.

Further information can be found at:

<https://www.nice.org.uk/guidance/conditions-and-diseases/urological-conditions/urinary-tract-infection>

It is important that the specimens of urine are still sent for examination and the microscopy result will be available by the next day.

Collection containers are for collection purposes only and should NOT be used as a transport or long-term storage device.

For patients with suspected urinary tract infections except those less than 2 years old:

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