

PROCEDURE

Corewell Health East - Reporting Sperm in Urinalysis Specimens - Royal Oak

This Procedure is Applicable to the following Corewell Health sites:
Corewell Health William Beaumont University Hospital (Royal Oak)

Applicability Limited to:	N/A
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Functional Area:	Clinical Operations, Laboratory
Lab Department Area:	Lab - Urinalysis

1. Principle

Spermatozoa may on occasion be identified in the urinary sediment. They may be flagged by the automated Urinalysis (UA) cell counter or observed during a manual microscopic examination of sediment. It is our practice to report such findings. This policy defines the conditions under which such a urinalysis sediment must be reviewed by a second Technologist and states procedure for reporting presence of spermatozoa.

2. Responsibility

Personnel who have completed the competency requirements will perform this testing.

3. Specimen

Fresh, well-mixed, uncentrifuged urine. It is recommended that testing be done within one hour after voiding. Otherwise immediately refrigerate the specimen and return to room temperature before testing.

4. Procedure

- A. If sperm are detected in urine received for urinalysis from either a male or female, the presence of sperm should be included in the report. A quantitative result is not required and other than the exceptions listed below, confirmation is not necessary.
- B. However, in the following patient types, the urinalysis result should NOT BE COMPLETED until consultation with a second technologist has occurred:
 1. Male child less than 10 years of age
 2. Female patient less than 16 years of age
 3. Female patient in a nursing home
- C. If sperm are detected in any of the patient types indicated above, the technologist MUST:
 1. Leave the UA result as partial until informed by a supervisor or lead technologist that the result may be released.
 2. Immediately request another technologist, lead-technologist or supervisor confirm the presence of sperm and document the name of the individual confirming results in the Laboratory Information System (LIS).

Entities will reference associated Documentation contained within this document as applicable
Printouts of this document may be out of date and should be considered uncontrolled.

3. Check the patient ID on the sample container and verify, as much as is possible, there has been no specimen mix-up.
4. Refrigerate the sample and indicate on the container that it must not be discarded until indicated by the supervisor involved with the case.
5. If not done already, inform the supervisor or lead technologist who is overseeing urinalysis testing.
6. If another appropriate urine sample is available in the lab, consider examining this sample.
- D. The supervisor or lead technologist will be responsible for reviewing the case and contacting the patient's care-giver (physician, charge nurse or nurse manager) to explain the urinalysis findings.
- E. In the case of an Emergency Center patient, this communication should occur as soon as possible. However, in the case of an outpatient or nursing home patient, the communication should take place on the day shift.
- F. Based on this communication, it will be decided how and whether to report the urinalysis results. The urinalysis result should not be completed until communication with the primary care-giver has taken place.
- G. The pathologist with responsibilities for Urinalysis should also be informed of the occurrence, however unless problems occur, this can take place on the following business day and does not require any immediate notification.
- H. Once the case has been completed, the urine sample can be discarded.

5. Revisions

Corewell Health reserves the right to alter, amend, modify or eliminate this document at any time without prior written notice.

6. Procedure Development and Approval

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7. Keywords

Not Set