

Document Name: Gonorrhoeae Culture – Cervix, Urethra, Throat, Eye and Rectum

Approved By:

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Status: APPROVED

PURPOSE:

To determine the presence or absence of *Neisseria gonorrhoeae* in cervix, urethra, throat, eye and rectal specimens.

SAMPLE INFORMATION:

Type	Swab <ul style="list-style-type: none"> • Amie’s with or without charcoal • Charcoal swabs are recommended
Source	<ul style="list-style-type: none"> • Urethra (male specimens only) • Cervix • Throat • Eye • Rectum <p>NOTE: Vaginal specimens are not considered optimal for the diagnosis of gonorrhoeae in women and should be reserved only for the evaluation of preteen-aged girls with suspected sexually transmitted diseases due to presumed sexual abuse or assault. Refer to MIC30350 Genital Culture-Lower/Upper Genital Tract.</p> <p>NOTE: If gonorrhoeae culture is ordered on throat or eye specimens, full culture along with gonorrhoeae culture will be performed.</p>
Stability	<p>If the sample is received in the laboratory and processed greater than 24 hours from collection:</p> <ul style="list-style-type: none"> • Add specimen quality comment: “Delayed transport may adversely affect pathogen recovery”
Storage Requirements	Room temperature or refrigerated
Criteria for rejection and follow up action	<ol style="list-style-type: none"> 1. Unlabeled/mislabeled swabs 2. Dry swabs

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REAGENTS and/or MEDIA:

- Chocolate agar (CHOC) and Thayer Martin agar (TM)
- Identification reagents: catalase, oxidase and API NH

SUPPLIES:

- Wooden sticks
- Disposable inoculation needles
- Microscope slides
- Biosafety cabinet
- 37° CO₂ incubator

SPECIAL SAFETY PRECAUTIONS:

Containment Level 2 facilities, equipment, and operational practices for work involving infectious or potential infectious materials or cultures.

- Lab gown must be worn when performing activities with potential pathogens.
- Gloves must be worn when direct skin contact with infected materials is unavoidable.
- Eye protection must be used when there is a known or potential risk of exposure of splashes.
- All procedures that may produce aerosols, or involve high concentrations or large volumes should be conducted in a biological safety cabinet (BSC).
- The use of needles, syringes and other sharp objects should be strictly limited.

All patient specimens are assumed to be potentially infectious. Universal precautions must be followed. Since viable micro-organisms are used, all cultures must be handled with appropriate precautions. All equipment in contact with cultures should be decontaminated by appropriate methods.

QUALITY CONTROL:

- Refer to Quality Control manual for reagent quality control procedures.

PROCEDURE INSTRUCTIONS:

Step	Action
Processing Swabs for Neisseria gonorrhoeae Culture	
1	In the biosafety cabinet, inoculate Chocolate Agar and Thayer Martin Agar from the swab. Make gram stain on male urethral specimens only.
2	<p>Streak for isolated growth using a disposable inoculation needle.</p> <div data-bbox="711 579 1000 869" style="text-align: center;"> </div> <p>Streak out to cover the whole plate.</p>
3	Place CHOC and TM plates in the CO ₂ incubator.
4	If applicable, allow smear to dry and perform gram stain. Gram stain must be read before culture plates.
5	Examine plates after 24 hours incubation. Record your observations in the LIS. Return cultures to incubator quickly to minimize loss of viability in the absence of CO ₂ .
6	Re-incubate plates for an additional 48 hours.

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INTERPRETATION OF RESULTS:

Step	Action
1	<p>Confirm gram stain on male urethra specimens have been read prior to reading culture plates. Ensure growth on culture media correlates with gram stain results. If discordant results are found:</p> <ul style="list-style-type: none">• Re-examine smear and culture plates.• Check for anaerobic growth.• Re-incubate culture to resolve.• May need to inoculate special selective media.• Consider re-smearing or re-planting specimen to exclude the possibility of error.
2	<p>Examine plates daily for growth of typical colonies: small, translucent, raised, gray and mucoid with entire margins. When picked from the agar surface, they tend to come off as whole colonies.</p>
3	<p>Perform initial identification testing on colonies morphologically resembling <i>Neisseria gonorrhoeae</i> including: oxidase (positive), catalase (positive) and gram stain (Gram negative diplococci).</p>
4	<p>Perform API NH on oxidase positive, catalase positive, and gram-negative diplococci colonies. If there is insufficient growth, subculture organism to chocolate plate. As well, ensure there are sufficient colonies for send out the following day.</p>
5	<p>Beta lactamase testing should be performed on all isolates of <i>Neisseria gonorrhoeae</i>.</p>
6	<p>Re-incubate and re-examine CHOC and TM plates for a total of 3 days and assess as in steps 1 to 3 daily. Prior to discarding plates on day 3, flood with oxidase reagent. If a purple color colony is observed, immediately subculture to CHOC, since oxidase reagent is toxic to bacteria.</p>

REPORTING RESULTS:

Step	Prompt	Action
1	No <i>Neisseria gonorrhoeae</i> isolated after 3 days	<ul style="list-style-type: none"> Report: “No Neisseria gonorrhoeae isolated”. If only swab received add culture comment {GENP to state: “GenProbe or Aptima nucleic acid amplification test is the optimum test for detection of N.gonorrhoeae, as well as Chlamydia trachomatis”.
2	No <i>Neisseria gonorrhoeae</i> isolated after 3 days and plates overgrown with yeast	<ul style="list-style-type: none"> Report: “No Neisseria gonorrhoeae isolated”. Add culture comment {GCY to state: “Specimen contaminated with yeast cells, which may be inhibitory to <i>Neisseria gonorrhoeae</i>. Please recollect if clinically indicated”.
3	<i>Neisseria gonorrhoeae</i> isolated	<ul style="list-style-type: none"> Add organism: “Neisseria gonorrhoeae”. List quantification as “Presumptive”. Add Beta-lactamase result if positive. Add isolate comment &REF5 to state: “This organism has been referred for confirmation and susceptibility testing.” Go to Order Entry; copy report to Chief Medical Officer of Health (HPU1). Add test ?REFE. Send to DynaLIFE for confirmation and susceptibility testing as per MIC10510 Referral of Category B Specimens to DynaLIFE. Freeze isolate and log into stored isolates binder. NOTE: If <i>Neisseria gonorrhoeae</i> is isolated on a child <12 years of age, these results need to be phoned to the ordering location.

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LIMITATIONS:

- The presence of yeast may inhibit the growth of *Neisseria gonorrhoeae*. Although Thayer Martin agar contains Nystatin to inhibit the growth of yeast, inhibition of *Neisseria gonorrhoeae* should be considered on CHOC if culture is positive for yeast species.
- A single negative result produced by any of the confirmatory tests does not rule out an identification of *N.gonorrhoeae*. Further confirmatory testing using at least one different method should be performed.
- False-negative results can be caused by delay in transport.

REFERENCES:

- Clinical Microbiology Procedures Handbook, 4th edition, ASM Press, 2016
- Jorgensen J.H., Pfaller M.A., Carroll K.C., Funke G., Landry M.L., Richter S.S., Warnock D.W. 2015. Manual of Clinical Microbiology, 11th edition, ASM Press, Washington, D.C.

REVISION HISTORY:

REVISION	DATE	Description of Change	REQUESTED BY
1.0	22-Nov-2017	Initial Release	L. Steven