

Document Name: Nose Culture

Approved By:

Status: **DRAFT**

**PURPOSE:** To determine the presence or absence of *Staphylococcus aureus* in nasal specimens.

**SAMPLE INFORMATION:**

<b>Type</b>	Swab <ul style="list-style-type: none"> <li>• Amie's with or without charcoal</li> </ul>
<b>Source</b>	Nose
<b>Stability</b>	If the sample is received in the laboratory and processed greater than 48 hours from collection: <ul style="list-style-type: none"> <li>• Add specimen quality comment: "Delayed transport may adversely affect pathogen recovery"</li> </ul>
<b>Storage Requirements</b>	Room temperature
<b>Criteria for rejection</b>	<ol style="list-style-type: none"> <li>1. Unlabeled/mislabeled swabs.</li> <li>2. Specimen container label does not match patient identification on requisition.</li> <li>3. Dry swabs.</li> </ol>

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	<b>Effective: DRAFT</b>	

### **REAGENTS and/or MEDIA:**

- Blood agar (BA) and Mueller Hinton agar (MHP)
- Identification reagents: catalase, Staph latex test and Cefoxitin antibiotic disks

### **SUPPLIES:**

- Disposable inoculation needles
- Biosafety cabinet
- 37° CO<sub>2</sub> incubators
- Wooden sticks
- Plastic test tubes
- 0.9% sterile saline

### **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 Test Manual for reagent quality control procedures.

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**PROCEDURE INSTRUCTIONS:**

Step	Action
<b>Processing swabs for nose culture</b>	
1	In the biosafety cabinet, inoculate Blood agar.
2	<p>Streak for isolated growth using a disposable inoculation needle:</p> <div data-bbox="732 489 972 728" style="text-align: center;"> </div> <p>Streak out to cover the whole plate.</p>
3	Place BA plate in the CO <sub>2</sub> incubator.
4	Examine plates after 24 hour incubation. Record observations in the LIS.
5	Re-incubate CO <sub>2</sub> plate(s) for an additional 24 hours.
6	At 48 hours, examine plates and record observations.

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**INTERPRETATION OF RESULTS:**

Step	Action	
1	Remove culture plate after 24 hours incubation.	
2	Observe plate for <i>Staphylococcus aureus</i> colonies.	
3	<b>If <i>Staphylococcus aureus</i> colonies are not seen:</b>	
	No <i>S.aureus</i> colonies seen at 24 hours	<ul style="list-style-type: none"> <li>Record observations in the LIS.</li> <li>Re-incubate plate in CO<sub>2</sub> incubator on the “Old wound culture” shelf.</li> </ul>
	No <i>S.aureus</i> colonies seen at 48 hours	<ul style="list-style-type: none"> <li>Record observations in the LIS.</li> <li>Workup complete. <i>S.aureus</i> not isolated.</li> </ul>
4	<b>If <i>Staphylococcus aureus</i> colonies are seen:</b>	
	<b>IF</b>	<b>THEN</b>
	<i>S.aureus</i> colonies are not isolated	<ul style="list-style-type: none"> <li>Subculture colonies to Blood agar.</li> <li>Perform Staph latex test from subculture plate.</li> </ul>
	<i>S.aureus</i> colonies are isolated	<ul style="list-style-type: none"> <li>Perform Staph latex test.</li> </ul>
	<b>IF</b>	<b>THEN</b>
	Staph latex test: NEGATIVE	<ul style="list-style-type: none"> <li>Record observations in the LIS.</li> <li>Workup complete. <i>S.aureus</i> not isolated.</li> </ul>
	Staph latex test: POSITIVE	<ul style="list-style-type: none"> <li>Record observations in the LIS.</li> <li><i>S.aureus</i> isolated.</li> <li>Perform cefoxitin disk diffusion test. Refer to MIC51300 – Cefoxitin Screen.</li> </ul>
	<b>IF</b>	<b>THEN</b>
	Cefoxitin screen: SENSITIVE	<ul style="list-style-type: none"> <li>Record results in the LIS as per MIC51100 – Disk Diffusion Test.</li> <li>Methicillin sensitive <i>S.aureus</i> isolated.</li> </ul>
	Cefoxitin screen: RESISTANT	<ul style="list-style-type: none"> <li>Record results in the LIS as per MIC51100 – Disk Diffusion Test.</li> <li>Methicillin resistant <i>S.aureus</i> isolated.</li> </ul>

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**REPORTING RESULTS:**

IF	REPORT
No <i>Staphylococcus aureus</i> isolated after 2 days	<ul style="list-style-type: none"> <li>Report: <b>“No Staphylococcus aureus isolated”</b></li> </ul>
Methicillin sensitive <i>Staphylococcus aureus</i> isolated	<ul style="list-style-type: none"> <li>Add organism: <b>“Staphylococcus aureus”</b></li> <li>List quantification as <b>“Isolated”</b></li> <li>Isolate comment &amp;MSSA will be reflexed from the susceptible cefoxitin KB result to state: <b>“***Methicillin susceptible (MSSA)***”</b></li> </ul>
Methicillin resistant <i>Staphylococcus aureus</i> isolated	<ul style="list-style-type: none"> <li>Add organism: <b>“Staphylococcus aureus”</b></li> <li>List quantification as <b>“Isolated”</b></li> <li>Isolate comment &amp;MRSA will be reflexed from the resistant cefoxitin KB result to state: <b>“***Methicillin Resistant***</b> <b>This organism is cloxacillin resistant (MRSA) and is resistant to all beta-lactam agents.”</b></li> </ul>

**REFERENCES:**

- Clinical Microbiology Procedures Handbook, 4<sup>th</sup> 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, 11<sup>th</sup> edition, ASM Press, Washington, D.C.

**REVISION HISTORY:**

REVISION	DATE	Description of Change	REQUESTED BY
1.0		Initial Release	L. Steven

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