

<b>PROGRAM Standard Operating Procedure – Laboratory Services</b>	
Title: MIC10410 – Accessioning Microbiology CAP Surveys	Policy Number: 15-155-V1
Program Name: Laboratory Services	
Applicable Domain: Lab, DI and Pharmacy Services	
Additional Domain(s): NA	
Effective Date: 12/04/2024	Next Review Date: 12/04/2026
Issuing Authority: Director, Laboratory and Diagnostic Imaging Services	Date Approved: 12/04/2024
Accreditation Canada Applicable Standard: NA	

**GUIDING PRINCIPLE:**

CAP surveys provide external assessment challenges (EQA) for clinical microbiology laboratories.

The Stanton Territorial Hospital Microbiology Laboratory participates in the following CAP external assessment challenges:

1. Methicillin Resistant *S. aureus*-MRS
2. Vancomycin Resistant Enterococcus-VRE
3. *N. gonorrhoeae* Culture-D3
4. Candida Culture-F3
5. Vaginitis Screen, Virtual Gram Stain-VS2
6. Infectious Disease, Respiratory Panel-IDR
7. Molecular MTB Detection and Resistance-MTBR

**PURPOSE/RATIONALE:**

This standard operating procedure describes how to accession microbiology CAP surveys in a standardized way so that results do not affect epidemiology statistics and so that patient specific system rules are applied correctly.

**SCOPE/APPLICABILITY:**

This standard operating procedure applies to Medical Laboratory Technologists (MLTs) processing competency survey specimens.

**SAMPLE INFORMATION:**

- Testing material consists of liquid samples and virtual gram stains
- Refer to the directions accompanying each survey for specimen handling

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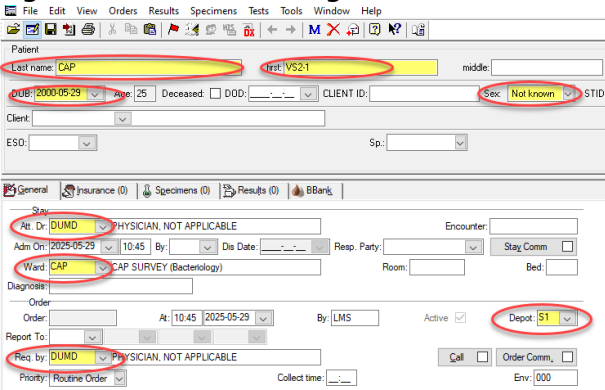
**SPECIAL SAFETY PRECAUTIONS:**

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

- Ensure that appropriate hand hygiene practices be used
- 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. Routine Practices 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.

**PROCEDURE INSTRUCTIONS:**

Step	Action
<b>Ordering CAP samples in SoftMic</b>	
<b>1</b>	In Order Entry, select <b>"New"</b> to create a new patient
<b>2</b>	Fill out the following information in the general tab: 
	<b>LAST NAME:</b> CAP
	<b>FIRST NAME:</b> CAP Specimen No.
	<b>AGE:</b> Will not be indicated on the kit instructions. Use any age
	<b>SEX:</b> Will not be indicated on the kit instructions. Use not known
	<b>REQ. BY:</b> DUMD
	<b>ATT. DR.:</b> DUMD
	<b>WARD:</b> CAP
	<b>DEPOT:</b> S1

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Fill out the following information in the micro tab:

SCOV2 FLUAT FLURT RSVT HRET

Source: NS Nasopharyngeal Swab - TORCH

Site:

Add (F6) Collected by LMS at 06:33 2022-05-02

Add (F6) Received by LMS at 06:33 2022-05-02

Add (F6) Plated by LMS at 06:33 2022-05-02

Current antibiotic therapy

unk

Micro OE Comment

CLINICAL HISTORY: no clinical history provided

Study

CAP

Media/Due D&T Culture Comm Specimen Quality Order Comm

**ORDER:** Order the test specified on the CAP Kit Instructions

**SOURCE:** Choose the appropriate source as per the survey instructions

**COLLECTED/RECEIVED/PLATED:** Add yourself

**ANTIBIOTIC THERAPY:** Choose unk

**MICRO OE COMMENTS:** Record the clinical history as no clinical history provided

**STUDY:** Select the study CAP

**NOTE:** Without this step, the specimen will not qualify to the review worklist

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Place the requisition barcodes for all specimens accessioned on a separate piece of paper and attach to the paperwork that accompanied the survey. Place all papers on the Dark Room bench.

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**APPROVAL:**

April 12, 2024

Date



Director, Laboratory and Diagnostic Imaging Services

**REVISION HISTORY:**

REVISION	DATE	Description of Change	REQUESTED BY
1.0	19 Jul 22	Initial Release	L. Steven
2.0	19 Feb 24	Procedure reviewed	L. Steven

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