

## TRAINING UPDATE

**Lab Location:** SGMC & WAH  
**Department:** Core

**Date Distributed:** 1/28/2016  
**Due Date:** 3/31/2016  
**Implementation:** 4/1/2016

### DESCRIPTION OF PROCEDURE REVISION

<b>Name of procedure:</b>
<b>Measurement of Blood Culture Volume SGAH.M40, WAH.M37 v2 Blood Culture Volume Monitor AG.F28.3</b>
<b>Description of change(s):</b>
<p>SOP - Section 5: change monitor frequency to <b>one day each week</b> &amp; reporting to quarterly, discontinue SGAH ED monitoring, add field ops follow up</p> <p>FORM - A new form will be completed for each quarter of the year (<i>Jan-Mar is quarter 1; Apr-June is quarter 2, etc.</i>)</p> <ul style="list-style-type: none"><li>• Instruction revised to weekly frequency</li><li>• Calculate acceptability at end of quarter</li><li>• Weekly &amp; monthly review space added to cover 3 months</li></ul> <p><b>This revised SOP &amp; FORM will be implemented on April 1, 2016 (start of next quarter)</b></p>

**Document your compliance with this training update by taking the quiz in the MTS system.**

Approved draft for training (version 2)

Non-Technical SOP

<b>Title</b>	<b>Measurement of Blood Culture Volume</b>	
<b>Prepared by</b>	Ron Master	Date: 4/26/2013
<b>Owner</b>	Ron Master	Date: 4/26/2013

<b>Laboratory Approval</b>		
<b>Print Name and Title</b>	<b>Signature</b>	<b>Date</b>
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

<b>Review:</b>		
<b>Print Name</b>	<b>Signature</b>	<b>Date</b>

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### 1. PURPOSE

Larger volumes of blood increase the yield of true positive cultures. The laboratory monitors collected blood volumes.

### 2. SCOPE

This procedure covers the monitoring of blood culture volumes. It does not include performance of blood cultures.

### 3. RESPONSIBILITY

It is the responsibility of technical laboratory personnel who work in microbiology to learn and understand the process described in this procedure.

### 4. DEFINITIONS

ED - Emergency Department

### 5. PROCEDURE

1. The standard used for measurement is an empty aerobic BACTEC bottle filled with 8 mL of stain such as safrannin or carbol fuchsin.
2. Select 2 aerobic bottles from 2 different patients **one day each week. each day.** Do **not** use pediatric bottles.  
~~SGAH only: select 2 bottles collected by ED staff and 2 bottles collected by a laboratory phlebotomist.~~
3. Compare the volume in each of the bottles to be measured to the standard.

4. Record the following information on the Blood Culture Volume Monitor form:
  - a. Number checked, number acceptable, and number unacceptable
  - b. For each unacceptable bottle, record the accession number and collector.
  - c. Record the initials of the person performing the evaluation.
5. At the end of the **quarter month**, calculate the total number checked, number acceptable, and number unacceptable. Calculate the % acceptable.
- ~~6. If the percent acceptable for a month is less than 85%, make a copy of the monitor form for the Field Operations Manager or Supervisor.~~
7. The monitor form is reviewed weekly by the Field Operations Manager, Supervisor or Phlebotomy Group Lead. **Field Ops will follow up on bottles with insufficient volume when weekly review is performed.** Monthly review is performed by the Microbiology Manager or Core Laboratory Supervisor.
8. Communication of findings and Corrective Action
  - ~~a. Results are graphed monthly~~
  - b. Data is distributed to Field Operations Manager and Supervisor for posting
  - c. Data is presented at Lab / ED meetings and documented in minutes
  - d. Follow up with individual staff is performed by the appropriate supervisor

**6. RELATED DOCUMENTS**

Blood Culture, with Automated Detection, Microbiology procedure  
 Blood Culture Volume Monitor form (AG.F28)

**7. REFERENCES**

None

**8. REVISION HISTORY**

Version	Date	Reason for Revision	Revised By	Approved By
000	12/17/13	Section 5.2: Changed # of bottles for SGAH Section 6: move form from section 9 Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13	R. Master	R. Master
1	1/14/16	Section 5: change monitor frequency to one day each week & reporting to quarterly, discontinue SGAH ED monitoring, add field ops follow up	R. Master	R. Master

**9. ADDENDA AND APPENDICES**

None

