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| | T | |
| POLICY STATEMENT | Urinary tract infection or UTI is one of the most commonly encountered infectious diseases. Urine is a normally sterile body fluid and is easily contaminated by normal flora from the perineum, prostate, urethra or vagina. A colony counts must always accompany urine cultures to determine significance of the organism isolated. | |
| PURPOSE | This procedure provides technical instruction for the performance of the Urine Cultures. | |
| SCOPE | This procedure applies to testing personnel authorized to perform testing. This group includes, but is not limited to Laboratory Technologists as well as leads and supervisory personnel. | |
| RESPONSIBILITY | All the above personnel are responsible for following the Urine Culture procedure without exception. In addition, testing personnel are also responsible for evaluating the results and taking proper remedial action. | |
| RELATED DOCUMENTS | MICR 6140 R Specimen Processing MICR 6305 R Bacterial Cultures | |

SPECIMEN HANDLING

See MICR 6140 R Specimen Processing

CULTURE WORKUP

- 1. Examine all plates for macroscopic growth at 24 hours
- 2. If the culture was processed after 4pm and reincubate plates an additional 24 hours.
- 3. Determine colony count of each isolate by multiplying the number of colonies on the BAP by 100 or 1000 depending on the loop used.
 - White 0.001 ml loop; 1 colony = 1000 CFU/ml
 - o Clean catch and Catheter specimens

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- Blue 0.01 ml loop; 1 colony = 100 CFU/ml
 - Suprapubic aspirate, cystoscopy, nephrostomy and pediatric (≤ 12 yrs old) catheterized specimens
- 4. Do not identify normal flora to genus or species level
 - Urogential flora
 - o Lactobacilli
 - o Diphtheroids
 - o Gardernella
 - Streptococcus viridians
 - o Low numbers of Gram negative rods and Enterococcus
 - Skin flora
 - o Diphtheroids,
 - Staphylococcus sp.
- 5. Perform identification of uropathogens and antimicrobial susceptibility testing (AST) if appropriate according to the following guidelines:
 - Uropathogens
 - o Gram Negative Bacilli
 - o Staphylococcus aureus
 - Staphylococcus coag negative
 - ID and AST if in pure culture \geq 50,000
 - ID and AST only if concentration >10x total count of all other isolates
 - o Enterococcus
 - β-Hemolytic Strep Streptococcus agalactiae should be reported from women in childbearing years (14 to 50 years old) regardless of count.
 - Gardnerella ID only if concentration >10x total count of all other isolates
 - o Aerococcus urinae
 - ID only if concentration >10x total count of all other isolates
 - α-hemolytic strep colony, Gram positive cocci in cluster/tetrads
 - Yeast ID Candida. albicans and Candida glabrata

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| CLEAN CATCH and INDWELLING FOLEY CATHETER SPECIMENS | | |
|---|-----------------------|--|
| Number of isolates | Colony Count (CFU/ml) | Extent of Work Up |
| 1 | <10,000 | Minimal ID |
| 1 | ≥10,000 | ID and AST |
| | Both <10,000 | Minimal ID |
| 2 | Both ≥10,000 | Both - ID and AST |
| Ζ | 1 isolate ≥ 10,000 | ID and AST |
| | 1 isolate <10,000 | Minimal ID |
| ≥3 | 1 isolate ≥100,000 | ID and AST |
| | 2 isolates <10,000 | Minimal ID |
| | | Check the UA WBC and leukocyte esterase results. |
| | | If normal: Report colony count and add comment NGMSPC = "Multiple Species present – Probable contamination. Suggest Repeat Specimen" |
| | Any other amount | If abnormal or no UA: Minimal ID of 3 isolates with colony count and add comment CALMIC= "Contact Microbiology within 72 hours if definitive identification is clinically indicated." |
| | | If >3 isolates, Report colony count and add comment NGMSPC = "Multiple Species present – Probable contamination. Suggest Repeat Specimen" |

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| STRAIGHT CATHETER, SUPRAPUBIC ASPIRATE, CYSTOSCOPY, NEPHROSTOMY and PEDIATRIC (≤ 12) CATHETER SPECIMENS | | |
|--|-----------------------|--|
| Number of isolates | Colony Count (CFU/ml) | Extent of Work Up |
| 1 | <1,000 | Minimal ID |
| 1 | ≥1,000 | ID and AST |
| 2 | Both <1,000 | Minimal ID |
| | Both ≥1,000 | Both - ID and AST |
| | 1 isolate ≥ 1,000 | ID and AST |
| | 1 isolate <1,000 | Minimal ID |
| | 1 isolate ≥10,000 | ID and AST |
| | 2 isolates <1,000 | Minimal ID |
| ≥3 | Any other amount | Minimal ID of <u>3 isolates</u> with colony count and add comment CALMIC= "Contact Microbiology within 72 hours if definitive identification is clinically indicated." <u>If >3 isolates</u> , Report colony count and add comment NGMSPC = |
| | | "Multiple Species present – Probable contamination. Suggest Repeat Specimen" |

6. Physicians may request additional work up by ordering "MICRO ADD ON TO CULTURE WORKUP" and specifying their request.

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REPORTING

- Enter report of "No growth in 24 hours" if no growth on all media.
- Enter preliminary report of "No growth after <24 hours" or "Culture in Progress) if the culture was processed after 4pm and reincubate plates an additional 24 hours.
- If only urogenital or skin flora is present report the following with colony count:
 - \circ NSF = Normal Skin Flora
 - NUF = Normal Urogenital Flora
 - o MSF = Mixed Skin Flora
 - MUF = Mixed Urogenital Flora
 - o MSUF = Mixed Skin & Urogenital Flora
- Report individually significant pathogenic organisms with colony count and AST if appropriate.
- Enter all results in the appropriate spot in the Meditech workcard.

REFERENCES:

Garcia, Lynne, *Clinical Microbiology Procedure Handbook,* 3rd Edition, 2010, Volume 1, Section 3.12 Urine Cultures.

Sharp, Susan; Yvette McCarter, Gerri Hall, Eileen Burd, Marcus Zedrvos, Cumitech 2C – Laboratory Diagnosis of Urinary Tract Infections, 2009