

PF-PTD-275

Sputum



Synonyms

Spit

Clinical Indication

Cough swab (usually from CF patients only)

E.g., Productive cough, pneumonia, haemoptysis, COPD, etc

Please give detailed clinical information, including date of onset/contact with suspected infection, and any current or intended antibiotic therapy.

Part of Profile / See Also

Routine: Culture for bacteria. Fungal culture where indicated. Antibiotic sensitivity testing will be performed on potential pathogens.

Mycobacteria / AFBs: Microscopy for acid fast bacilli (AFB) and culture. Only performed if indicated or specifically requested. For Mycobacteria refer to PF-PTD-215

Viral investigations including SARs CoV (COVID) Only performed if indicated or specifically requested. Sent to reference laboratory for analysis **Mycoplasma pnemoniae PCR**: Only performed if indicated or specifically requested. Sent to the reference laboratory for analysis. Refer to PF-PTD-217

Request Form

ICE / Medway order comms request or where order comms not available complete a handwritten Pathology /Microbiology request form

Availability / Frequency of

During working day.

Analysis

Turnaround Time Routine Culture : 5 days

Microscopy for AFB: Next normal working day
Mycobacteria culture: 12 weeks. Refer to PF-PTD-215

Viral investigations including SARs CoV (COVID) – subject to reference lab

TATS

Mycoplasma pnemoniae PCR: 10 days

Patient Preparation

An early morning deep cough specimen collected before eating, drinking or cleaning teeth is required. Saliva is not satisfactory for routine culture, and such specimens will be discarded.

Sample Requirements

Samples for routine culture MUST be delivered to lab on day of collection Refrigerate sample if there is to be an unavoidable delay in delivery to the lab Salivary or muco-salivary samples are not suitable for processing for routine culture and will usually be rejected (exceptions eg. High dependency and CF patients)

Samples of insufficient volume may be rejected

Specimen Type Sputum (Cough swab is acceptable from CF)

Volume At least 1 ml of sputum required for each type of investigation

If AFB **and** Routine culture is required submit two sputum samples or a single sample of at least 2 mls.

Version 1.7 / June 2024



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Container

White capped sterile CE marked container e.g., Universal or similar wide mouth container



Blue top bacteriology swab for 'cough swab'

Reference Range & Units

N/A

Interferences

Interpretation & Clinical

Decision Value (if applicable)

References

Test code

CAT3, MPRL

Lab Handling

Process on receipt. Handle at containment level 3