



Urine, Catheter Sample

Synonyms CSU

Clinical Indication Urinary tract infection

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

Part of Profile / See Also

Microscopy and urine dip test are of little value in diagnosing catheter

associated UTI.

Culture for significant pathogens

Request Form Order comms request i.e., ICE or Medway

or clearly handwritten Microbiology form where order comms not

available

Availability / Frequency of

Analysis

On request during normal working hours

Turnaround Time Culture: 72 hours

Patient Preparation

Sample Requirements

Specimen Type

Catheter sample of urine - The sample may be obtained either from a transient ('in and out') catheterisation or from an indwelling catheter. In the latter case, the specimen is obtained aseptically from a sample port in the catheter tubing or by aseptic aspiration of the tubing, NOT from the urine collection bag

Volume

Container



Red capped sterile boric acid universal containers

Samples should be transported to laboratory on day of collection.

Reference Range & Units

Interferences

Inadequately collected specimens may result in misleading results being obtained.

Interpretation & Clinical

Decision Value (if applicable)

CSU may not accurately reflect the true bladder pathogen and often contains several bacterial species. Culture results should be interpreted with caution.



References UK SMI – Investigation of urine | B 41 | Issue no: 8.7 | Issue date:

11.01.19 |

Test code UMIC

Lab Handling Samples should be booked and processed as soon as possible upon receipt.