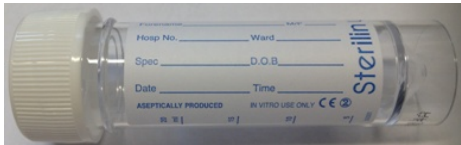


## Schistosoma in Urine sample

<b>Synonyms</b>	Urine for parasites, bilharzia, snail fever, flatworms
<b>Clinical Indication</b>	Haematuria is the most common presentation of <i>S. haematobium</i> infection. Chronic infection can lead to bladder cancer. Please give detailed clinical information including date of travel/ Country of travel/ symptoms/ date of onset / contact with suspected infection source (e.g. contaminated water contact or consumption).
<b>Part of Profile / See Also</b>	<b>Microscopy:</b> for presence of Schistosomes.
<b>Request Form</b>	ICE or Medway order comms request or clearly handwritten Microbiology form <a href="#">where order comms not available</a>
<b>Availability / Frequency of Analysis</b>	On request during routine working hours.
<b>Turnaround Time</b>	3 days
<b>Patient Preparation</b>	Sample collection may be undertaken on urine taken at a specific time coinciding with maximum egg excretion, or on the terminal portion of voided urine. Eggs may be found trapped in the blood and mucus in the terminal portion of the urine specimen.
<b>Sample Requirements</b>	Terminal stream urine collected when output of ova is at its maximum i.e., between 10am and 2pm
<b>Specimen Type</b>	Terminal stream urine
<b>Volume</b>	Minimum 5 ml
<b>Container</b>	 <p>White topped universal container CE marked.</p>
<b>Reference Range &amp; Units</b>	N/A
<b>Interferences</b>	<b>Do NOT collect urine into red top boric acid container as the crystals may interfere with microscopy.</b>
<b>Interpretation &amp; Clinical Decision Value (if applicable)</b>	The presence of Schistosome ova in urine is diagnostic of Schistosomiasis.
<b>References</b>	<a href="#">UK SMI Bacteriology   B 31   Issue no: 5.1   Issue date: 28.06.17   Investigation of specimens other than blood for parasites</a>
<b>Test code</b>	USCH
<b>Lab Handling</b>	Process on receipt. 1ml of formalin may be added to the sample to preserve.