

PF-PTD-461



Voided Urine, Meares and Stamey Method

Synonyms

MSU, Prostatic secretions

Clinical Indication

Please give detailed clinical information, including date of onset and

any current or intended antibiotic therapy

Part of Profile / See Also

Microscopy: usually performed by the iQ200 Sprint, which is an automated urine analyser that uses digital imaging for WBC, RBC, bacteria and small particle count.

Culture for significant pathogens

Request Form Order comms request (ICE or Medway) or clearly

handwritten Microbiology request form where order comms are not

available

Availability / Frequency of

Analysis

On receipt during routine working hours

Turnaround Time

Microscopy: Same day

Culture: 24 hours for a 'No growth', 'No significant growth' report. Any specimens with significant growth require identification and antimicrobial sensitivity testing. Most samples are reported within 48 hours. However, 72-96 hours may be required for multi-resistant organisms or those requiring further investigations.

Patient Preparation

The method of Meares and Stamey compares WBC and bacterial counts of urethral, mid-stream and post-prostatic massage urine specimens and expressed prostatic secretions.

Sample Requirements

All specimens are taken at the same time and processed immediately. Where delays in processing are unavoidable, refrigeration at 4°C is recommended, unless boric acid preservative is used, in which case sample must be processed within 72 hours of collection. If received in a plain white top sterile universal container, processing must be performed within 24 hours.

Specimen Type

The following specimens are collected for the diagnosis of prostatis as per Meares and Stamey localisation culture method:

The initial 5-8 mL voided urine (urethral urine)

Mid-stream urine (bladder urine)

Expressed prostatic secretions following prostatic massage The first 2-3 mL voided urine following prostatic massage



Volume

As above and in the case of mid-stream urine: for both boric acid and white top sterile universal containers - 20 ml

Container

Red capped sterile boric acid universal container – CE marked



Plain white top sterile universal container – CE marked



Reference Range & Units

Although, routinely, WBC>40, RBC>50, bacteria>20 and all small particles

>10,000, as detected by iQ200 Sprint, require culture as per the departmental SOP, it is acknowledged that the presence of more than 10 WBC per high-power field suggests a positive diagnosis. Accordingly, manual microscopy may be performed as required.

Interferences

Interpretation & Clinical

Positive culture results will be reported with antibiotic susceptibilities where

appropriate.

Decision Value (if applicable)

References

Test code

UMIC

Lab Handling

Samples should be processed as soon as possible upon receipt and in compliance with the Sample Requirements as stated above.