




Accredited to
ISO 15189:2022

Superficial soft tissue and skin (excluding dermatophyte infection)

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| Synonyms | Wound swab, biopsy, pus, tissue, |
| Clinical Indication | <p>Infected ulcers, pressure sores, burns.</p> <p>Cellulitis, impetigo, erysipeloid, infected wound etc.</p> <p>Yeast/thrush type skin infection (excluding dermatophyte infection).</p> <p>Cutaneous abscess, necrotizing fasciitis</p> <p>Please give detailed clinical information, including date of onset and any current or intended antibiotic therapy</p> |
| Part of Profile | <p>Microscopy – Gram stain for organisms and WBCs performed on pus (other samples by specific request)</p> <p>Culture - Aerobic and anaerobic bacteria, also yeast / fungi where indicated.</p> <p>Mycobacteria/AFB by specific request. Refer to PF-PTD-215</p> <p>Mycology for dermatophyte skin infection by specific request. Refer to PF-PTD-216</p> <p>PCR - Bacterial and fungal 16s rDNA PCR by specific request only</p> |
| Request Form | ICE / Medway order comms request or if order comms not available, use handwritten Microbiology request form |
| Availability / Frequency of Analysis | <p>During working day</p> <p>For urgent requests, please contact laboratory on 01268 968285</p> <p>Out of hours contact on-call Biomedical Scientist via hospital Switchboard</p> |
| Turnaround Time | 5 days |
| Patient Preparation | <p>Aseptic technique for sample collection.</p> <p>Clean ulcers and remove debris prior to sample collection</p> |
| Sample Requirements | <p>Collect samples prior to antimicrobial chemotherapy if possible</p> <p>Transport samples to the laboratory as soon as possible</p> <p>Refrigerate sample if there is to be a delay in delivery to the laboratory</p> |

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| Specimen Type | Bacteriology swab ("wound swab") tissue, biopsy, pus |
| Volume | <p>Bacteriology Swab: Volume N/A</p> <p>Tissue /biopsy – Sufficient amount to allow for various investigations. Size of sample may limit extent of investigations.</p> <p>Pus – Up to 20 ml. If only a tiny sample of pus can be obtained, a swab of the pus is preferable to prevent drying / degradation of the sample.</p> |
| Container | <ul style="list-style-type: none"> White capped sterile CE marked container e.g., universal or similar wide mouth container  <ul style="list-style-type: none"> Blue top bacteriology swab or orange top 'ENT' type swab  |
| Test code | RCUL, PUSF, FLCU |
| Reference Range & Units | Full identification and susceptibility testing for "significant" organisms - clinical assessment required |
| References | <p>UK SMI B 11 Issue no: 6.5 December 2018</p> <p>Investigation of swab from skin and superficial soft tissue infection</p> |
| Interferences | <p>A delay in receipt of samples by the laboratory may impact viability of organisms and final culture result.</p> <p>Samples received leaking may be subject to contamination and they may be rejected if they can be repeated.</p> |
| Interpretation & Clinical Decision Value (if applicable) | Positive culture results will be reported with antibiotic susceptibilities where appropriate. |

Results of samples which have been received leaking must be interpreted with caution.

Clinical advice available from Consultant Microbiologist

Lab Handling

Samples will be processed on receipt during normal working hours. Out of hours for urgent samples, please contact on-call Biomedical Scientist via switch board