

Date: October 2, 2013

To: All physicians, Nurse Managers, Educators and Practitioners, Laboratory Directors and Managers, Zone Executive Leadership (ZEL), CPSM

<u>This change will impact the following sites:</u>			
North Zone Health Centers and Hospitals		Central Zone Health Centers and Hospitals	
Barrhead	Onoway	Hardisty	Provost
Edson	Radway Continuing Care	Islay	Tofield
Fort McMurray	Rainbow Lake	Lamont	Two Hills
Fort Vermilion	Slave Lake	Mannville	Vermillion
High Level	Swan Hills	Mundare	Viking
Hinton	Thorhild		Wainwright
Jasper	Wabasca		
LaCrete	Westlock		
Mayerthorpe	Whitecourt		

<u>This change will impact all Edmonton zone sites EXCEPT the following sites:</u>
University of Alberta Hospital Stollery Children's Hospital Mazankowski Alberta Heart Institute Kaye Edmonton Clinic

From: AHS Laboratory Services and *DynaLIFE_{Dx}*

Re: Discontinuation of Urine Dip 'N Count Media for Microbiology Testing

PLEASE POST OR DISTRIBUTE AS WIDELY AS APPROPRIATE

Key Messages:

- **Effective October 15,** *DynaLIFE_{Dx}* will be discontinuing the Dip 'N Count and Uricult urine culture media. **A new and improved culture method will be implemented for which a fresh urine sample in preservative is required.**
- The BD Vacutainer® Urine Collection system will be used for collection and transport of all urine specimens, including pediatric collections and invasive urines (cystoscopy, suprapubic aspirates, nephrostomy, in/out catheters).
- **Urine collection/transport for toxicological testing or for *Chlamydia trachomatis* and *Neisseria gonorrhoea* (CT/GC) testing and 24 hour urine collections will not be changing.**
- There **will be a change** in the way bacterial counts will be reported. With the new method, *DynaLIFE_{Dx}* will report bacterial counts as 10⁵ CFU/L, 10⁶ CFU/L or ≥ 10⁷ CFU/L.
- Counts of 10⁵ are usually due to contamination from perineal flora and will not be worked up. Counts of 10⁶ CFU/L may also represent contamination, and are only significant **when a uropathogen is pure or predominant AND the patient is symptomatic of UTI.**
- A report of ≥ 10⁷ CFU/L will not differentiate between 10⁷ and 10⁸ CFU/L. Since currently, both counts are worked up in the same way, this will NOT change how they continue to be processed.

Key Messages (Continued):

- During the transition to the new culture method, both types of reporting may be seen depending on the culture method used.
- The change in collection device also affects urine collections for urinalysis, urine chemistry and urine cytology.
- If the time from collection to receipt in the laboratory is > 48hrs for a specimen in preservative, the culture results may be unreliable and clinical correlation will be recommended. These specimens will still be processed with a comment added.
- Small volume urine collections (< 10 mL) should be submitted in orange-top, sterile containers which need to be REFRIGERATED during storage and transported with ice packs.

Why this is important:

- The BD Vacutainer® Urine Collection System of products provides many advantages including:
 - More accurate culture results, using additives to preserve the specimen, without requiring refrigeration.
 - Closed system that benefits healthcare workers by reducing exposure to potentially hazardous specimens.
 - Improved safety because plastic vacutainer tubes will not leak in transit
- Proper urine collection methods, to minimize contamination with perineal flora, remain extremely important. Together with the new collection system, the best quality specimen can be provided, ensuring accurate culture results and better patient care

Action Required:

- Review your current supply of Dip 'N Count media with the expectation to no longer use this product after October 15,. More information will follow on managing unused product.
- BD Vacutainer Urine Collection System supplies are available through established supply sources (i.e. AHS for AHS hospitals and facilities; *DynaLIFE_{Dx}* Materials Management for other locations).
- Arrange training sessions by contacting Laura Keat, Business Development/Product Manager Containment, BD Diagnostics at: laura_keat@bd.com or mobile: 289-259-6533.
- To access a training video on how to use the new product, patient collection instructions and more information, visit the *DynaLIFE_{Dx}* website <http://www.dynalifedx.com/HealthProfessionals> or InSite > Laboratory Partners > *DynaLIFE_{Dx}* <http://insite.albertahealthservices.ca/1980.asp>

AHS Supplies Ordering Information

Vendor Part #		Oracle	MediTech Former RHA				Vax
BD	Description	R12#	E. Central	Aspen	Peace	N. Lights	Edmonton
364975	Collection cup	175430	12454	29264	19671	2774	1519073
364951	C&S tube	177906	12455	29265	19672	2775	1550896
364980	conical bottom tube	296033	12456	29266	19673	2776	2013560
364979	round bottom tube	175431	12457	29267	19674	2777	1519081
364902A	Luer-Lok device	103656	11794	14358	19675	13980	1423862

Note: Sharps containers – there may be a need to convert from a small to larger size of container. Further information will be forthcoming.

Inquiries and feedback may be directed to DynaLIFE_{Dx} at 1-800-661-9876 or 780-451-3702

- Shane Hunter, Microbiology Manager, *DynaLIFE_{Dx}* Ext. 8223
Email: Shane.hunter@dynamifedx.com
- Dr. Bob Verity, Microbiology Director, *DynaLIFE_{Dx}* Ext. 8157, Dr. Shobhana Kulkarni, Medical Microbiologist Ext. 8256 or the *DynaLIFE_{Dx}* Microbiologist on-call at 780-451-3702
- Tamara Stock, Executive Associate, Clinical Operations, *DynaLIFE_{Dx}* Ext. 3231
Email: Tamara.stock@dynamifedx.com

This bulletin has been reviewed and approved by:

Dr. Lai, Medical Director, *DynaLIFE_{Dx}*

Dr. Carolyn O'Hara, AHS Medical/Scientific Director and ZCDH, Laboratory Services – Edmonton Zone

Dr. James Wesenberg, AHS Provincial Medical/Scientific Director