

Microlife: GP



From your local Clinical Microbiology Team

March 2012

Welcome

In this edition we look at the new technology bringing benefits to the Birmingham lab, and some of the reasons why your samples may be rejected.

We hope you find this newsletter useful. Please send any comments to: Savita.gossain@heartofengland.nhs.uk

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For all results enquiries, contact: 0121 424 3256

Laboratory Opening Hours:

Mon - Fri: 7am - 7pm
Sat, Sun & Bank Holidays: 8am - 4pm

New technology brings rapid processing

The HPA Public Health Laboratory Birmingham, based at Heartlands Hospital, has recently installed an automated specimen inoculation system in their main Bacteriology Laboratory.

Known as the BioMerieux Previ-Isola, it is currently being used to speed up the process of culturing the 500 to 600 urine samples received from hospital and GP practices every day.

This advance has not only reduced the number of manual tasks involved but has also made a huge improvement to the quality of culture plates produced, resulting in improved isolation of bacteria and speedier throughput.

The new instrument (pictured below) has been a great morale boost for laboratory staff being easy to use and allowing rapid and high quality



Sue Williams (left) and Cath Swann with the new equipment

processing of the heavy workload of urine bacteriology.

This new automation works together with existing automated cell counting analysers and has streamlined workflows and revolutionised the way that urines are processed in the laboratory.

In the very near future it is anticipated that the majority of bacterial swabs will be processed using the same Previ-Isola instrument. This will involve the introduction of new liquid swabs for M, C and S of swab samples which will replace currently used charcoal swabs.

These will be introduced in the next few months and we shall keep our users informed of the timing of these changes.

For further information, contact Ann.Myatt@heartofengland.nhs.uk

Clostridium difficile infection Passport

GPs will shortly be receiving information from the PCT about a new regional initiative for *Clostridium difficile* infection (CDI). Patients diagnosed with CDI will be issued with green CDI Passport cards (see image, right) and asked to show these to any doctor, pharmacist, dentist or other healthcare provider. Any inpatients in HEFT who are positive will be issued with the passport card before discharge. The aim of the scheme is to involve the patient, alert you to their condition, optimise antibiotic prescribing and raise the

possibility of relapse. The regional initiative has been adapted from that used successfully in the north west region.



Why samples are rejected by the laboratory

The microbiology laboratory aims to process all samples received in a timely manner. Occasionally, we have to reject some samples that are unsuitable for processing.

In December 2011, we carried out an audit of the reasons for rejecting samples. During that month, 3% of samples received from hospital and GP practices had to be rejected. The graph below shows the reasons for rejection.

Unfortunately, due to the large number of samples received, we are unable to telephone individual practices for each sample we are unable to process. We would therefore be grateful for your help in reducing the number of rejected samples by ensuring the following:

- Complete request forms with patient's full name, PID or NHS number, date of birth, sample details and relevant clinical information
- Label all samples with the patient's name and date of birth as a minimum and send to laboratory in same bag
- Check the sample and request form match prior to sending to the laboratory
- For stool samples, ensure a minimum of 5ml sample is sent in a blue top container so we can test for all the possible pathogens
- For urine samples in red top boric acid containers – fill to the line with 20ml
- Ensure the correct sample type is sent – check www.heftpathology.com

