

PURPOSE: To obtain a urine specimen free from contamination.

MAY BE IMPLEMENTED BY: RN, LPN, CNA, ED Care Tech

POLICY:

If a urine specimen is ordered as: "Urine, culture if positive" or "Urine culture", the RN has the option of collecting this specimen via a straight catheterization (see *Specimen, Urine, Straight Catheterization* policy/procedure).

Pathophysiology/EBP:

The vaginal and perineal areas are colonized by GI flora and this can contaminate urine specimens. Normal female urethra is 3.8 cm in length and is colonized by 2 to 11 different organisms with total population of between 10⁵ and 10⁶ viable microbes. Organisms commonly found include: Lactobacilli (protective!), Coag neg Staph, diptheroids, anaerobes & mycoplasma. The normal microflora changes based on ones age/sexual maturity; older age groups have more number of organisms present and increase in different types including gram negative rods. Dissemination of microbes from urethra occurs during urination. The initial stream is filled with microbes from the urethra that is not a true reflection of contents in the bladder. This is why obtaining a "mid-void" specimen is so important.

EQUIPMENT:

Standard precautions apparel, as appropriate

CONSIDERATIONS FOR COLLECTION:

- a. **If patient is unable** to spread apart the labia while collecting the specimen or is unable to handle equipment/supplies, staff needs to assist the patient to perform the procedure or **consider obtaining specimen by RN via straight catheterization.**
- b. If patient is unable to use the bathroom, consider using a bedside commode.
- c. If the patient can only use the bedpan or urinal, nursing personnel need to assist the patient in collecting the specimen. The urine specimen cannot be obtained directly from the bedpan or urinal. Consider obtaining specimen by RN via straight catheterization.
- d. Explain to patient the importance of following the specimen collection procedure so that accurate results can be obtained.

PROCEDURE:
Instruction for males

METHODIST HOSPITAL
PATIENT EDUCATION (402) 354-4301

How To Provide A Clean Catch Urine Sample

IMPORTANT: It is important to follow the instructions below exactly, to properly clean the bacteria from the skin and urinary opening. A dirty specimen may result in the need for a second test, or worse yet, may be the cause of a wrong diagnosis, unnecessary medicine, or the wrong medicine being given to you.

Instructions for males:

1. Wash the hands with soap and water, rinse and dry.
2. **WASH.** Expose the penis, retract the foreskin (if not circumcised), and wash the end of the penis with one soap towelette.
3. **RINSE.** Rinse with one sterile saline towelette.
4. **VOID.** Pass the first portion of urine into the toilet, then pass a portion of remaining urine into the specimen container. The cup should be held to avoid contact with any skin and clothing. Keep the fingers away from the rim and inner surface of the container.
5. When voiding is completed, close the container, wash the hands, label the container, dress, and give the container to the attendant.

If you are collecting the specimen at home, take the labeled container to the place directed by your health professional (office or lab) immediately. It is important to **keep the specimen cold** from the time it is collected until you are ready to take it to the office or lab.

Questions About Your Test:
If you have any questions about the test, call the doctor that ordered the test or the Pathology Center, 354-4541 or 888-432-8980.

(Instructions for females on other side)

Instruction for females

How To Provide A Clean Catch Urine Sample

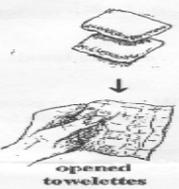
IMPORTANT: It is important to follow the instructions below exactly, to properly clean the bacteria from the skin and urinary opening. A dirty specimen may result in the need for a second test, or worse yet, may be the cause of a wrong diagnosis, unnecessary medicine, or the wrong medicine being given to you.

Instructions for females:

1. Wash your hands with soap and water, then rinse and dry.
2. Open all the towelettes and place them on a clean surface. (i.e. a cloth or paper towel)
3. Place towelettes and specimen container within easy reach.
4. Remove all undergarments.
5. Sit comfortably on the seat and swing one leg to the side as far as possible.
6. **With one hand spread the labia folds and keep them spread during the cleansing and collection of the urine specimen. (see the diagram)**
7. **WASH** the area from which the urine is passed. Use the three soap towelettes. Using one towelette at a time, begin to wash gently wiping only from front to back between the folds of skin. Discard that towelette. Repeat the front and back wash process, using one towelette at a time.
8. **RINSE.** Rinse with one sterile saline towelette. Use the front to back motion
9. **VOID** a small amount of urine into the toilet, then collect a portion of the urine in the specimen container. The cup should be held to avoid contact with skin and clothing. Keep the fingers away from the rim and inner surface of the container.



labia
urinary opening
vagina



opened towelettes



Questions About Your Test:
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2. Request feedback from patient to determine patient's understanding of the collection procedure.
3. Label the urine specimen with patient label, date/time of collection and method of collection (Urine clean catch, midvoid)
4. Place specimen in biohazard bag (double bagged).
5. Wash hands.
6. Send urine specimen to the lab with requisition form within 15 minutes of collecting
7. Special Note:
For Outpatient Clinics: if UA is needed and not performed on site, submit separate urine in sterile container without preservative and transport at 4°C.

DOCUMENTATION:

1. Document specimen obtained in computer via PAL or the "Urine Specimen Collection" AdHoc form.
2. Patient's tolerance of procedure and signs/symptoms of urinary problems.

References:

Medical Executive Committee, October 2002

Perry, A., and Potter, P.: *Clinical Nursing Skills and Techniques*, 7th Edition, St. Louis, 2010, Mosby.

Clarridge, J., Pezzlo, M., and Vosti, K. "Laboratory Diagnosis of Urinary Tract Infections". *Cumitech 2A*, Washington, DC, March 1987, American Society of Microbiology.

A Guide to Specimen Management in Clinical Microbiology, 2nd Edition, 1999.

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<http://www.thepathologycenter.org/Education.asp>