

CONSIDERATIONS:

1. Two methods for obtaining a urine specimen for culture are used in home care:
 - a. Clean catch specimen
 - b. Sterile urine specimen from indwelling catheter, see *Genitourinary – Catheter: Indwelling: Specimen Collection*
2. Ideal urine specimen for culture has been in the bladder for several hours, usually, the first morning void.
3. A “clean catch” urine specimen (one that contains no outside bacteria) is necessary for an accurate urine culture. Nothing can touch the inside of the container or the inside of the lid.
4. A clean catch urine specimen can be obtained by the patient with instructions or by the nurse.
5. The contents of a clean catch kit can vary. Options include cleansing solution, sponges, cotton balls, antiseptic towelettes, and applicators. If items within the tray need to be prepared, sterile gloves will be included in the tray.
6. Microscopic examination of urine should be done within 1 hour after collection to prevent bacterial growth, unless refrigerated. Once obtained, a specimen for culture must be either:
 - a. Brought to the lab within one hour
 - b. Kept refrigerated, for no more than 24 hours

EQUIPMENT:

Clean catch urine kit:

- Antiseptic towelettes or cleansing solution/sponges
- Sterile specimen container
- Sterile gloves or applicator

Wash cloth, soap and towel (for women)

Disposable wash cloth or disinfectant wipes

Gloves

Impervious trash bag

PROCEDURE:

1. Use two patient identifiers.
2. Adhere to Standard Precautions and explain procedure to the patient.
3. If female, ask the patient to wash perineal area with a soapy washcloth and to dry thoroughly.
4. Position patient to use toilet, bedpan or urinal.
5. Open the clean catch kit, using aseptic technique:
 - a. Put on non-sterile gloves
 - b. Prepare items inside the kit
 - c. Pour antiseptic solution over cotton balls
 - d. Open sterile container, assuring “no touch” of inside container or lid
6. Male Patient:
 - a. If uncircumcised, retract the foreskin, keeping it retracted until specimen collected

- b. Clean meatus of penis, with a circular motion, moving from meatus to area surrounding meatus and area surrounding area
 - b. Initiate urination
 - c. Pass specimen container into the stream, without touching inside of container with hands or penis
 - d. Fill container to about 60 cc
 - e. Remove container from stream before it stops
 - f. Complete urination into toilet or urinal
7. Female patient:
 - a. Separate labia to expose the meatus
 - b. Cleanse each side of labia using a downward stroke with cleansing solution, using 3 cleansing pads/swabs. One for each side, one down middle
 - c. Instruct patient to void forcibly (so urine doesn't dribble over skin) while continuing to keep labia separated
 - d. Pass specimen container into the stream, without touching inside of container with hands, pubic hair or skin
 - e. Fill container to about 60 cc
 - f. Remove container from stream before it stops and before allowing labia to close
 - g. Complete urination into toilet or bedpan
8. With gloved hands, place the lid on the container, screwing firmly. Some kits have you transfer urine to a tube with a screw cap.
9. Clean outside of container with a soapy disposable wash cloth or a disinfectant wipe.
10. Dispose of gloves. Wash hands.
11. Place label, with patient's first and last name, date of birth, date and time of collection, on the container – not the lid.
12. Place container into specimen biohazard bag.
13. Place requisition in pocket of biohazard specimen bag.
14. Dispose of gloves. Cleanse hands.
15. Place bag in biohazard transportation bag.
16. Dispose of used supplies in impervious trash bag.
17. Deliver specimen to lab or refrigerate it immediately.

AFTER CARE:

1. Make arrangements to take the specimen to the lab as soon as possible, refrigerating it, if there will be any delay.
2. Document in patient record:
 - a. Date and time specimen collected
 - b. Color and amount of urine collected
 - c. Specimen collected using clean catch technique
 - d. Laboratory where specimen taken and what time specimen delivered
 - e. Presence of any signs/symptoms of UTI
 - f. Instructions given to patient/caregiver

3. Communicate with lab personnel about urine specimen being delivered for culture.

REFERENCE:

- CDC (2010). Clinician Guide. Retrieved on May 30, 2012 from <http://www.cdc.gov/getsmart/healthcare/learn-from-others/resources/clinician-guide.html>
- Perry, A., Potter, P. & Elkin, M. (2012). Nursing Interventions and Clinical Skills, 5th Edition. St. Louis: Elsevier/Mosby

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