

Annex 2

Laboratory Procedure

For Collection and Culturing of Urine Sample: Midstream urine specimen: - a specimen obtained from the middle part of urine flow:

A clean urine specimen was collected. The ideal technique uses “clean catch” urine, which is collected in the following ways:

- After thoroughly cleaning with soap and water, the genital region should be rinsed. This is done to prevent skin microorganisms from contaminating the sample of urine. A tiny amount of urine should be produced by the patient and disposed of.
- The next urine sample, known as the mid-stream specimen, needs to be collected into a 30- to 50-milliliter sterile container.
- The patient keeps urinating after the specimen is taken, and this is discarded.
- If the urine exhibits a noticeably alkaline or acidic response, including bacteria, cells, protein, or nitrite, a urine culture is necessary.
- For both blood agar and MacConkey agar, thoroughly mix the urine by repeatedly tilting the container. On blood agar and MacConkey agar, inoculate a loopful of urine using a sterile, calibrated wire loop.
- Only the loop needs to be dipped in the urine, and it must be held vertically. More pee will be injected than necessary if the stem is submerged as well.
- In addition to MacConkey agar, blood agar is advised for the quick identification of pathogens and for isolating hemolytic streptococci and other Gram-positive organisms that do not grow well or at all on MacConkey agar.
- For the duration of the night, inoculate the plates aerobically at 35–37°C.
- Calculating the number of microorganisms
- Estimating the estimated amount of bacteria in urine is required since normal specimens typically contain fewer than 10,000 (10⁴) contaminating organisms per milliliter of urine. Untreated urinary infection patients typically have urine that has 100,000 (10⁵) or more bacteria per milliliter. (Cheesbrough, 2004).