



Penn Medicine | Hospital of the
University of Pennsylvania

3400 Spruce Street, Philadelphia, PA 19104

DIVISION OF LABORATORY MEDICINE

Clinical Microbiology ■ 4th Floor Gates ■ 662-3406 (available 24/7)
Client Services: 215-662-4808

Label Area

Note: If submitting multiple specimens, complete a requisition for each one

OR Location

OR Phone Number

Name of Collector (required by law)

Collector's Cell Phone Number

Date Collected (required by law)

Time of Collection (required by law)

Tests ordered were verified with the following Attending Physician
(only complete if the collector is not the Attending Physician)

Clinical details; include organism sought if known:

Note: Specimen collection/test ordering information can be found in the **Laboratory Tests Services Guide** which is accessible on the HUP Intranet Home Page.

Specimen Source (Required Information)

Note: If submitting multiple specimens, complete a requisition for each one.

☐ Abscess

☐ Bronchial biopsy

☐ Decubiti ulcer

☐ Sinus

☐ Ascites

☐ Bronchial brushing

☐ Joint fluid

☐ Tissue

☐ Aspirate

☐ Bronchial lavage

☐ Peritoneal fluid

☐ Urine ☐ catheterized ☐ cystoscopy

☐ Biopsy

☐ Catheter tip

☐ Pleural fluid

☐ Wound ☐ open ☐ closed

☐ Bone

☐ CSF

☐ Pus

☐ Other, specify;

Body site (required)

Is this specimen from a joint? ☐ Yes ☐ No

Test Request ■ Bronchoscopy Specimens

Is this a lung transplant patient? ☐ Yes ☐ No

☐ Routine bacterial (aerobic*) culture; includes Gram stain

☐ Mycobacterial (AFB) culture; includes AFB stain

☐ Fungal culture

☐ Legionella PCR

☐ Other:

Notes:

Optimal volume for bronchoscopy specimens is 20 mL.

Bronchoscopy specimens are not acceptable for anaerobic culture

Fungal stains are not done on these type specimens.

The tests listed below are not performed in Microbiology. Send a separate sample (5 mL) and requisition to the locations indicated:

Respiratory virus and/or CMV PCR: Send to Central Receiving and Processing on 7 Founders (will be forwarded to Molecular Pathology)

***Pneumocystis jiroveci* (formerly PCP):** Requests for **DFA** and/or **PCR** are sent to Central Receiving and Processing on 7 Founders. Requests for **Grocott stain** are sent to Cytology on 6 Founders.

Test Request ■ Other Specimens

☐ Routine bacterial (aerobic) culture; includes Gram stain

☐ Anaerobe culture (includes routine aerobic culture and Gram stain)

☐ Fungal culture

☐ Mycobacterial (AFB) culture and stain

☐ Urine culture

☐ Other:

☐ If STAT Gram stain; please provide a call back number (required)

Notes:

Tissue or material obtained by aspiration submitted in a sterile cup is always superior to specimens collected on a swab.

If specimen must be collected using a swab an **Eswab** must be used.

Do not use Eswab for collection of **fluids** or **CSF** as the specimen will be diluted; collect in a **sterile cup**.

Person completing this form.
Please **print name** legibly.

Person sending the specimen if different from
person completing this form.
Please **print name** legibly.

If applicable, person hand-delivering the
specimen to Microbiology.
Please **print name** legibly.

FOR LAB USE
ONLY

AFFIX CERTIFIED
LABEL

Routine Specimens for Micro Checklist

Obtaining the specimen

Match patient label to patient using 2 patient identifiers

Label a **sterile**, leak proof container (not a ziplock bag) for each specimen

Place specimen in the container and ensure the cap or lid is tightly secured

Use "read- back" methodology to confirm type of specimen, specimen name and destination

Completing the requisition

Use 1 requisition form for each specimen

Check off appropriate tests – if unsure call Phone # on front with questions

Confirmed patient identifier on the requisition match the label on the container and the patient

Legibly print appropriate names at the bottom of the form on the front of this sheet

Packaging specimen for transport

Place specimen container in plastic bag

Validate integrity of zip lock seal on plastic bag

Fold requisition where patient identification is visible

Place folded requisition form in the plastic bag sleeve with patient identifier information visible

Specimen transport

Use pneumatic tube. Send to Micro-tube Station 03

Complete information in the log book

For hand delivered specimens for Micro

Follow steps outlined in checklist up to Specimen transport:

Call coordinator's office for specimen pick-up

Transporter prints name on the front of this sheet

Nurse provides transporter with patient ID label for OR log in Micro

Specimen hand-off – deliver to MICRO (4 Gates) – record transporters name, date, time and place patient ID label into OR log book in Micro