



Microbiology Specimen Rejection Criteria

General Microbiology	
PROBLEM	ACTION TAKEN
Specimen received in fixative (formalin, CytoLyt, or Saccomano.)	Notify physician or patient's nurse and request a new specimen; indicate "received in fixative" on requisition or in computer.
Incorrect technique or method of collection: i.e., swab instead of fluid, or 24-hour urine collection etc.	Notify the physician or patient's nurse and request a new specimen.
Improper or non-sterile containers Unpreserved urines held in refrigerator >24 hours	Notify the physician or patient's nurse and request a new specimen. If physician or nurse insists specimen be processed, refer to supervisory personnel/pathologist.
Inappropriate or incorrectly used transport system i.e., non-sterile container, dry swab, UA tube submitted for urine culture, etc.	Notify the physician or patient's nurse and request a new specimen properly submitted in appropriate transport device.
Dry Swab Exception: Swabs for throat cultures	Notify the physician or patient's nurse and request a new specimen properly submitted in appropriate transport device. If physician insists dry swab be cultured, make a note on the laboratory record.
More than one specimen of urine, stool, sputum, wound or routine throat specimen submitted on the same day from the same source.	Notify the physician or patient's nurse that as stated in collection manual, only one specimen will be processed per day.
Inadequate specimen quantity or volume for multiple requests for various organisms (bacteria, AFB, fungi, virus, etc.).	Notify the physician or patient's nurse and request additional material. If additional material is unavailable, ask physician to prioritize.
Anaerobes	
Specimens for anaerobes not received in appropriate container.	Notify the physician or patient's nurse and request properly handled specimen. If the physician insists the specimen be processed, refer to supervisory personnel or alternatively make a note on the laboratory record.
Specimens for C. diff testing received in the laboratory >24 hours after the order was placed.	Order is automatically rejected.
Anaerobic cultures requested on improper specimen type: e.g., autopsy material, bronch wash, decubitus (not punch Bx), drain site, environmental, exudates, feces (ex C diff), gastric washings (other than newborns), urine, mouth, nose, prostatic secretions, sputum, fistula, intestinal contents, throat, vaginal secretion	Inform physician or patient's nurse that these specimens are not cultured for anaerobic bacteria since these anatomic sites harbor anaerobes normally and usually. If physician insists, refer to supervisory personnel or pathologist.
Aerobic Bacteriology	
Gram stain for Neisseria gonorrhoeae on specimen from cervix, vagina and crypts	Notify physician or patient's nurse that these smears are not examined for GC since these anatomic loci may harbor nongonococcal neisseriae.
Specimens for GC and or Chlamydia culture received in GenProbe Aptima or Roche PCR transport media	Notify physician or patient's nurse that the specimen is in a fixative that kills bacteria; only molecular testing may be offered with this fixed specimen.
Urine vacutainer tubes >48 hours old	Notify physician or patient's nurse and request a new urine sample.
Foley catheter tips Foley catheter urines collected from collection bags	Notify physician or patient's nurse that the specimen is inappropriate and needs to be recollected correctly.
Sputum specimens with <25 WBC and >10 epithelial cells/lpf	Inform physician or patient's nurse that specimen is mostly saliva and is not appropriate for culture. Exception: Immunocompromised patients.
Rectal swab received with less than minimum material (3-4 mm pellet)	Notify physician or patients nurse and request a new specimen.
Mycobacteriology / Mycology	
24 hour collection of urine or sputum for AFB or fungus culture	Notify physician or patient's nurse that as per collection manual, three separate first morning specimen of sputum or urine are the best samples for analysis; reject 24-hour specimens.
Swabs for AFB. Swabs are sub-optimal for AFB Culture. Tissue or fluid has a much higher yield. When using eSwab collection kits a separate eSwab vial is required exclusively for AFB Culture.	Notify physician or patient's nurse that specimen is inadequate in quantity for the isolation of AFB. Request properly collected specimen.
Parasitology	
O&P received in PVA or SAF.	Notify physician or patient's nurse that specimen has been improperly collected. Request new specimen collected in Total Fix vial.
Stool for Cryptosporidium and or Isospora spp. received in PVA only.	Notify physician or patient's nurse that specimen has been improperly collected. Request new specimen collected in Total Fix or 10% formalin vial.
Excess barium or oil noted in stool submitted for ova & parasite examination.	Recollect specimen after stool has cleared.