

## Microbiology Sample Preparation and Handling Guide

IDEXX BioAnalytics recognizes that sample quality is directly correlated to receiving quality results. We recommend the following guidelines. Please specify source for all cultures. IDEXX BioAnalytics provides these collection supplies at no charge. Contact your local Account Manager, or Client Support Services at [idxxbioanalytics@idexx.com](mailto:idxxbioanalytics@idexx.com) for further assistance.

Type of Source	Collection Supply Type	Specimen Preparation and Collection	Test to Request
Abscess or Wound	Culturette or sterile tube*	Aseptically prepare collection site. Aspirate fluid or pus from pustules or vesicular wounds and abscesses. Keep at room temperature.	Aerobic and/or anaerobic culture
Blood	One blood culture bottle per time point. Do not submit swabs, serum or whole blood in LTT or RTT.  For animals >5 lbs., use an 80 mL oxiod blood culture. For animals <5 lbs., (and all blood fungal cultures), use a yellow-top Wampole™ ISOLATOR™ pediatric bottle	Collection using sterile technique is critical for accurate results. Aseptically prepare venipuncture site. Disinfect the top of the culture bottle with alcohol and let dry. Ideally two samples drawn approximately one hour apart from different venous sites should be submitted. Do not refrigerate. >40 lbs., place 10 mL blood in one 80 mL bottle. 20–40 lbs., place 7.5 mL blood in one 80 mL bottle. 5–20 lbs., place 5 mL blood in one 80 mL bottle. <5 lbs., place 1.5 mL blood in one ISOLATOR™ pediatric bottle. Keep at room temperature.	Blood culture: If ruling out <i>Brucella canis</i> – blood culture should be ordered.  Fungal culture: If ruling out fungus from blood.
Bone Marrow	Sterile tube*	Aseptically prepare collection site.	Aerobic and/or anaerobic culture
Central Nervous System	Sterile tube* Keep at room temperature.	Collect CSF (Cerebrospinal Fluid) by an ascetic ubdural tap, ventricular aspiration or lumbar puncture.	Aerobic and/or anaerobic culture
Ears	Culturette	Posterior pharyngeal cultures may also reveal organisms causing otitis media.  Note: Topical treatments may inhibit bacterial growth.	Aerobic and/or anaerobic culture
Eyes	Culturette	Use swab to collect suppurative material from cul-de-sac or media canthus.  Note: Topical anesthetic may inhibit bacterial growth.	Aerobic and/or anaerobic culture.

\* Use a sterile plastic or plain non-additive tube without clot activator. Plastic RTT with clot activator (serum tubes) or Lavender Top Tube (LTT) are not recommended for cultures as these may inhibit bacterial growth.

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Feces	Fecal culture transport media (preferred) or sterile tube*	Avoid contamination with urine and soil. If <i>Clostridium perfringens</i> and <i>Clostridium difficile</i> enterotoxin testing will be performed, include 3–5 fresh feces in a sterile container.	Fecal culture
Joint Fluid	Sterile tube* or blood culture bottle	Aseptically inject fluid into a sterile tube or blood culture bottle. Specimens >48 hours old are not suitable for culture. Keep at room temperature.	Aerobic and/or anaerobic culture
Nail, Skin or Hair Culture (Fungal)	Sterile tube,* envelope preferred for hair	Use a sterile blade or swab to collect material from infected nail. Scrape or swab active border of skin lesions. Hair should be plucked (not cut) in order to include roots.	Aerobic and/or fungal culture
Sinus	Culturette or sterile tube*	Aspirate from maxillary, frontal or other sinuses. Note: Chronic sinusitis often involves anaerobic bacteria.	Aerobic and/or anaerobic culture
Tissue	Sterile tube*	Place tissue in sterile tube with a small amount of saline or sterile Lactated Ringers solution to keep specimen hydrated. Do not submit in formalin or ethanol.	Aerobic and/or anaerobic culture
Tracheal Wash/ Bronchoalveolar lavage (BAL)	Sterile tube*	Place wash fluid in sterile tube. Best results can be expected when a buffered solution, such as Lactated Ringers Solution (LRS), is used, rather than acidic isotonic saline solutions.	Aerobic and/or anaerobic culture
Urine	Sterile tube*	Indicate collection method. Cystocentesis is strongly recommended (except in large animals). Avoid contamination with feces.	Urine culture (aerobic organism ID and susceptibility), aerobic and/or anaerobic culture

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