

Urine Collection

General considerations:

- Never collect urine from a bedpan or urinal but use sterile urine cup.
- Thoroughly clean urethral opening (and vaginal vestibule in females) prior to collection procedures to ensure that the specimen obtained is not contaminated with colonizing microorganisms in this area.
- Transport inpatient specimens to the laboratory such that it will be plated within 2 hours of collection.
- Clinics should place urine specimens for culture in a Urine Culture Transport tube for 48 hour stability. Urine specimens for urinalysis should be placed in Gold/Red Transport tubes for forty eight hour stability. Urine specimens, if refrigerated in sterile cups, are acceptable for 24 hours or less

Clean catch urine specimen collection (female)

- Do not touch the inside of the container
- While sitting on the toilet with legs apart, separate the labia (vaginal lips) with the fingers of one hand (hold this position until specimen is obtained)
- With sterile towelettes, cleanse the urethral opening and vaginal vestibule area, wiping from front to back.
- Begin urinating into the toilet. After urine has passed for several seconds, put container in the urine stream and collect urine until the container is $\frac{1}{2}$ to $\frac{3}{4}$ full.
- Continue to empty your bladder into the toilet.
- If you are collecting the urine at the clinic, give the sample to a member of the clinic staff.
- If you are collecting the urine at home, place the lid on the container, make sure it is closed tightly.
- Make sure your name and date of birth are on the container
- Refrigerate as soon as possible until delivery to the clinic or lab

Clean catch urine specimen collection (male)

- The person obtaining the urine specimen should wash hands with soap and water, rinse and dry. If the patient is collecting the specimen, he should be given detailed instructions.
- Completely retract the foreskin and cleanse the glans penis with a towelette.
- With sterile towelettes or equivalent, cleanse the head of the penis, beginning at the urethra and working away from it.
- Pass the first portion of urine.
- Collect the midstream portion of urine into a sterile container until it is about $\frac{1}{2}$ to $\frac{3}{4}$ full.
- Continue to empty bladder into the toilet.

Ileal Conduit Urine Collection

- Remove the external urinary appliance and discard the urine within the appliance.
- Gently swab and clean the stoma opening with a 70% alcohol pad and then with an iodine solution.
- Remove excess iodine with an alcohol pad.
- Using sterile technique, insert a double catheter into the stoma.
- Catheterize the ileal conduit to a depth beyond the fascial level.
- Collect the urine drained into a sterile container.

Indwelling Catheter Urine Collection

- Clean the catheter collection port with a 70% alcohol swab
- Using sterile technique, puncture the collection port with a needle attached to a syringe
- Aspirate the urine and place it into a sterile container.
- Do not use urine from collection bag.

Straight Catheter Urine Collection

- Clean the patient's urethral opening (and in females the vaginal vestibule) with soap, and carefully rinse the area with water.
- Using sterile technique, pass a catheter into the bladder.
- Collect the initial 15 to 30 ml of urine and discard
- Collect a sample from the mid- or later flow of urine in a sterile container