# rear-month-day

## **Certificate of Analysis** Uricult CLED/EMB • Product No. 1000

pH range	Growth results		CLED	EMB	Lactose reaction
CLED	Escherichia coli	ATCC 25922	Growth	Growth	Pos.
6.7–7.3	Proteus vulgaris	ATCC 8427	Growth	Variable	Neg.
	Salmonella typhimurium	ATCC 14028	Growth	Growth	Neg.
EMB	Enterococcus faecalis	ATCC 29212	Growth	Small colonies	Pos.
6.7–7.3	Staphylococcus aureus	ATCC 25923	Growth	No growth	Pos.

This lot meets the Quality Control Criteria set by Aidian Oy for microbial load (contamination). This lot meets the CLSI Approved Standard for commercially prepared media.

Signature:



### Intended use

10 Urine Culture-Paddles® for the detection of bacteriuria and the presumptive identification of uropathogens. The test is intended for in vitro diagnostic use.

Summary and explanation of the test In the mid 1960's, Mackey and Sandys developed a dip inoculum transport medium for rapid urine culturing<sup>1</sup>. Subsequent improvements have been made which increase the accuracy of the results obtained while retaining the convenience of the dip inoculum technique.

URICULT® Urine CULTURE-PADDLES® provide effective bacterial detection and presumptive identification in a simple and reliable manner.

URICULT® Urine CULTURE-PADDLES® are attached to a screw cap. Each side of the culture-paddle is coated with an agar medium suitable for the growth of urinary bacteria, and the culture-paddle is suspended in a clear plastic vial.
The CULTURE-PADDLES® are safely isolated in this vial dur-

ing transport, incubation, storage and handling. Because of the uniform application of agar to the URICULT® Urine CULTURE-PADDLE®, it is possible to obtain semi-quantitative results when the device is used as directed. This is determined by a simple visual comparison of bacterial growth on the agar surface with the Colony Density Chart provided. No actual colony counting is necessary.

## CLED Agar (Cystine-Lactose-Electrolyte-Deficient)

CLED medium was first described by Mackey and Sandys¹ specifically for use in dip inoculum procedures for urinary bacteriology. This agar supports the growth of both Gram positive and Gram negative bacteria commonly encountered in urine specimens. The electrolyte deficient nature of the medium prevents the characteristics swarming of *Proteus*. The inclusion of lactose and the indicator dye, Brom-Thymol Blue, allows differentiation of lactose fermenting bacteria, since the by-products of lactose fermentation cause the color of the agar to change from its original pale green color toward yellow.

# EMB Agar (Eosin Methylene Blue)

rinciples of the procedure

EMB agar is a selective reddish-brown colored medium recommended for the detection and isolation of Gram negative intestinal pathogenic bacteria. The balanced combination of the two dyes (Eosin and Methylene Blue) contained in the EMB agar makes it possible to distinguish lactose fermenting bacteria from non-fermenters. Those bacteria which ferment lactose will have dark colonies, purple or black in color. A green sheen may be observed across the agar surface during the growth of certain lactose fermenting bacteria.

## Reagents Contents

Uricult® CLED/EMB	Product No. 1000
Urine CULTURE-PADDLES® (in individual vials)	10
Patient labels Instructions for use containing the	10
Colony Density Chart	1

An incubator calibrated to maintain a temperature of 97°F ± 4°F (36°C ± 2°C) is necessary but not provided.

# Typical formulation

- Store at 45...77°F (7...25°C) in the package provided. Protection from light and temperature fluctuations will ensure
- product stability to the expiration date.
- Avoid drafts and do not store near heat-generating appliances. DO NOT FREEZE.
- Warnings and precautions
   URICULT® Urine CULTURE-PADDLES® are for in vitro diagnostic use only.
- Do not use product beyond expiration date.
  Do not use URICULT® Urine CULTURE-PADDLES® exhibiting discoloration, dehydration of the agar, media separating from the paddle or evidence of mold or bacterial growth. Because bacterial colonies on inoculated URICULT® Urine
- CULTURE-PADDLES® are actual or potential pathogens, a potential biohazard may exist and the CULTURE-PADDLES® should not be touched or unduly exposed.

# Specimen collection and preparation Ideally, urine for culture analysis should be incubated in the

bladder for four hours prior to collection. Urine samples may be obtained by voiding, catheterization or supra-pubic aspiration. If a voided specimen is to be used, a mid-stream, clean catch specimen is recommended.

Specimens should be inoculated onto URICULT® Urine CULTURE-PADDLES® immediately following collection. The CULTURE-PADDLES® should be immediately replaced in the protective vial, closing the screw cap. The inoculated CULTURE-PADDLE® may be incubated immediately or stored or transported to a laboratory for incubation and/or interpretation. If stored or transported to a laboratory, the URICULT® cap should be tightened. Storage or transportation should not exceed 48 hours at 45...77°F (7...25°C). Stored or transported Uricult should be incubated at 97°F ± 4°F (36°C ± 2°C) for 18–24 hours. URICULT® paddles which have been stored or transported up to 48 hours before incubation can only be used for growth and/or colony count. Transportation of URICULT® Urine CULTURE-PADDLES® with

tight caps may result in inconclusive agar color reactions and atypical colony morphology, making presumptive identification impossible.

The laboratory should inspect the inoculated URICULT® CUL-TURE-PADDLE® upon arrival to assure the CULTURE-PAD-DLE® was not frozen during transit. In instances where freezing is suspected, a new specimen should be obtained and trans ported to the laboratory for evaluation.
If storage of urine specimens prior to inoculation is necessary,

the specimen should be maintained at refrigerator temperature (36...46°F/2...8°C) in a closed sterile container. Storage should not exceed 24 hours. Note

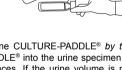
URICULT® test results may be affected if the patient has been receiving antibiotics or anti-infective treatment. Should URI-CULT® test results show the presence of bacterial growth during the course of therapy, the physician may wish to reassess the dosage or organism susceptibility to the anti-infective being used. URICULT® testing may be used to assess the effectiveness of

antibiotic or anti-infective therapy. In this instance, it is recommended that a test be performed no sooner than 48 hours (2 days) following the administration of the final dose of medica-

# Compliance with the following directions is required to achieve reliable test results.

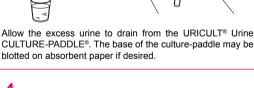




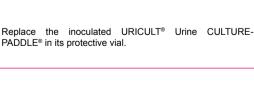


times the case with infants or small children, the urine may be poured over the agar surfaces.









This product was tested and found to meet the CLSI Approved Standard for commercially prepared media as required by CLIA '88 regulations.

Quality control tests are performed on each lot of URICULT® Urine CULTURE-PADDLES® at the time of manufacture. Media

e. Staphylococcus aureus

medium.

Quality control

verifies the ability of the media to support the growth of bacteria most commonly isolated from cases of urinary tract infection. The ability of the media to exhibit the expected biochemical reactions and colony morphology is also verified. Should the user wish to perform their own Quality Control, the following procedure is recommended.

quality is assessed through a "use-test" performed using bacterial strains obtained from clinical urine specimens. This test

Prepare separate suspensions of the following organisms in sterile normal saline and adjust to a concentration of 104 to 105 CFU/mL, so that isolated colonies are provided:

a. Escherichia coli ATCC 25922 ATCC 8427 ATCC 14028 ATCC 29212 b. Proteus vulgaris Salmonella typhimurium d. Enterococcus faecalis ATCC 25923

the manner specified by the American  $\bar{\text{Type}}$  Culture Collection.

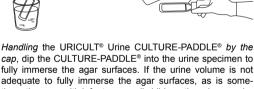
NOTE: We recommend that the test organisms be prepared in

- Inoculate each bacterial suspension onto a separate URI-CULT® Urine CULTURE-PADDLE® and incubate in the manner described in the test procedure section of this in-
- Interpret the results following 24 hour incubation as fol-

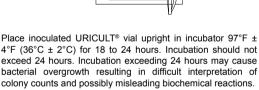
Escherichia coli ATCC 25922: Growth of yellow colonies with a color change toward yellow on the CLED medium

and growth of purple or metallic green colonies on the EMB





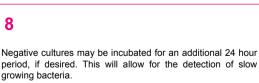




Remove URICULT® vial from incubator following incubation period. Compare colony count density on the agar surfaces with the Colony Density Chart provided to obtain a semiquanti-

tative colony count in CFU/mL of urine. Compare only the number of colonies present, not the size of the colonies or the agar surface area they cover. The colonies on the agar surface may also be observed at this time for morphology and agar color reactions which may be used for presumptive identification of

the bacterial growth.



Salmonella typhimurium ATCC 14028: Growth of translucent colonies with a color change toward blue on the CLED medium and growth of colorless colonies on the EMB me-Enterococcus faecalis ATCC 29212: Growth of yellow colonies with a color change toward yellow on the CLED me-

**Proteus vulgaris ATCC 8427**: Growth of translucent colonies with a color change toward blue on the CLED medium.

dium and growth of pin point colonies on the EMB medium. Staphylococcus aureus ATCC 25923: Growth of yellow

for each organism.

colonies on CLED medium only. Results' interpretation Following the incubation of an inoculated URICULT® Urine CULTURE-PADDLE®, the presence of bacteria may be evidenced by visible signs of colony growth on the agar surface. Separate, distinct areas of the bacterial growth on the agar surface are called "colonies". Since the formation of a colony results from the natural multiplication of a single bacterial cell, and since the agar surfaces on URICULT® Urine CULTURE-PADDLES® are uniform in dimension, the number of colonies can indicate the "colony count" which is the approximate number CFU/mL of urine. At the end of the incubation period, check the agar surfaces on both sides of the URICULT® Urine CULTURE-PADDLE®

for colony growth. If all visible bacterial colonies are similar in characteristics, compare the number of colonies on each side of the culture-paddle. If there is a significant difference in the number of colonies on each side, the side with the greater number should be used for determining the "colony count". In making the determination, the number of colonies and not the dimensions of the individual colonies should be considered. Match the "colony density" on the agar surface with the printed example it most closely resembles on the Colony Density Chart. If the characteristics of visible colonies on either side of the culture-paddle differ enough to indicate more than one type of bacteria, the colony count match-up procedure should be performed and reported "Confluent growth" (complete coverage of the agar surfaces) may occasionally occur when a colony count is more than 100,000 (105) CFU/mL, and may be misinterpreted as a negative culture because there is no clear definition between colonies. To avoid misinterpretation, it is recommended, therefore, that cultures which appear to have no clearly defined colonies be scanned under a bright light. The light will be reflected from the agar surface when there are no bacterial colonies. An agar surface completely coated with confluent bacterial growth will not reflect the light. The use of bright light will also allow relatively small colonies to be seen.

Further confirmation of a negative culture may be obtained by gently swabbing part of the agar surface. Bacterial growth will be evident on the swab itself, and by a difference in appearance between the swabbed and unswabbed portions of the agar surface. The determination of colony color, size, texture, configuration, and observation of the agar media for color changes induced by bacterial growth, can provide information useful in making a presumptive identification of the bacteria present. Reference sources should be consulted for expected colony morphology and biochemical reactions of the various bacterial species frequently encountered in urine specimens.

Limitations of the procedure
URICULT® Urine CULTURE-PADDLES® are capable of detecting bacteriuria concentrations as low as 1,000 CFU/mL of urine. The Colony Density Chart allows the reporting of colony counts to the nearest power of 10. When used as directed, comparison of URICULT® colony count results with conventional pour plate methods shows an overall correlation of 99%3.

Bacterial identifications based on the biochemical reactions evidenced by URICULT® and colony morphology will result only in a presumptive identification. Bacterial variation may occur and atypical strains may be isolated. In instances where a definitive bacterial identification is necessary for proper patient management, the incubated paddle may be used as a transport media to forward the bacterial culture to a laboratory for further study. Incubation of the inoculated URICULT® CULTURE-PADDLE® at 97°F ± 4°F (36°C ± 2°C) should not exceed 48 hours.

In instances where the inoculated paddle cannot be incubated and read within 48 hours, the URICULT® paddle may be stored or transported at 45...77°F (7...25°C) for 48 hours after tightening the URICULT® caps and placing the vial in an area protected from direct sunlight and temperature fluctuations. Following storage or transport, inoculated URICULT® paddles should be incubated at  $97^{\circ}F \pm 4^{\circ}F$  ( $36^{\circ}C \pm 2^{\circ}C$ ) for 18-24 hours. URICULT® paddles which have been treated in this manner can only be used for colony count and growth. Inoculated paddle storage up to 48 hours with caps tightly closed may result in inconclusive agar color reactions and atypical colony morphology, making a presumptive identification not possible. In instances where a definitive bacterial identification is necessary for proper patient management, the incubated paddle may be used as a transport media to forward the bacterial culture to a laboratory for further study.

When the recommended procedure for a clean catch, mid-stream specimen collection is followed, contamination of the specimen is minimized. Kass² has recommended the following guidelines for the interpretation of urinary colony counts on voided specimens:

Less than 10,000 CFU/mL urine 10,000 to 100,000 CFU/mL urine NORMAL DOUBTFUL POSITIVE Greater than 100,000 CFU/mL urine

Many factors such as use of antimicrobial therapy, time of bladder incubation of the specimen, and means of specimen collection may influence the colony count obtained. In all cases, the physician must be the final judge of the proper interpretation of the URICULT® results.

Performance characteristics
URICULT® Urine CULTURE-PADDLES® are capable of detecting bacteriuria in the range of  $10^3$  (1000) to  $10^7$  (10,000,000)

In a published study³ involving 340 clean catch, mid-stream urine specimens, the agreement between URICULT® and the pour plate method was 99%.

No false negatives resulted from the use of URICULT®. Three specimens provided positive results with URICULT® but were negative by the pour plate technique; therefore, URICULT® demonstrated a specificity of 99%.

Because bacterial colonies on inoculated URICULT® Urine CULTURE-PADDLES® are actual or potential pathogens, they should not be touched and should not be unduly exposed to other office personnel or patients. It is advised that the procedure to dispose of inoculated culture media be in accordance with existing state or local laws. To avoid any risk of contamination after a culture has been interpreted, it is also recommended that used URICULT® Urine CULTURE-PADDLES® be promptly and completely immersed in a cup of bactericidal "biocide" solution such as 3% phenol, Staphene® (Vestal Labs) or Cidex® (Cursilice Labs) (Surgikos, Inc.). Bactericidal-treated paddles and protective vials can then be

placed in a large wide mouthed jar or other suitable disposal container filled about 1/3 of its capacity with additional biocide. Keep the container tightly capped and discard when filled.

# **Colony Density Chart**



**EMB** 



1.000





10.000





111-122, 1973.









## Mackey JP, Sandys GH: Laboratory Diagnosis of Infections of the Urinary Tract in General Practive by Means of

References

- a Dip-Inoculum Transport Medium. British Medical Journal 2: 1286–1288, 1965. Kass EH: Bacteriuria and the Diagnosis of Infections of the Urinary Tract. Arch.Int.Med. 100: 709-714, 1957.

McAllister TA, Arneil GC, Barr W, Kay P: Assessment

of Plain Dipslide Quantitation of Bacteriuria. Nephron 11:

## **Explanation of symbols** IVD REF



medical device







LOT

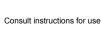


Protect from draught and













Uricult is a registered trademark of Aidian Oy.

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