



CONWAY MEDICAL CENTER

PROCEDURE

When in hard copy form, refer to Policy Manager to validate this as the most current revision.

TITLE:	LAB-SPC-CYT-08.07 Urine Cytology Collections-PRO		
ISSUED BY:	Cytotechnologist	REFERENCE #:	LAB-SPC-CYT-08.07 - PRO
APPROVED BY:	Lab Director	EFFECTIVE DATE:	2005-11-01

SCOPE: All potential collectors and submitters of urine samples for cytology testing.

I) PROCEDURE:

There are three basic specimens; voided urine, catheterized urine, and brushing/washing specimens

- 1) The procedure consists of hydrating the patient with several glasses of water over an extended period of time. At the end of the hydration period the first voiding is usually discarded. The second voiding is collected in a clean specimen container and sent to the laboratory. The specimen container should be labeled per hospital policy and sent to cytology.
 - A) Voided Urine: The optimum number of voided urine specimens to submit is three (3). Of the neoplasm's that can be diagnosed with voided urine cytology, about 80% will be on the first specimen. The patient should be well hydrated, with the collection of the second voiding in the morning and the collection of three successive morning specimens. The first morning voided urine is not a good one, due to degenerative changes.
 - B) Catheterized Urine: Simple catheterization increases the cellularity over the voided urine specimens and the specimen may be somewhat better preserved. Interpretation of low-grade lesions is made more difficult. Catheterized urine is the preferred specimen from female patients.
 - C) Bladder wash specimens are diagnostically superior to voided urine specimens. In cases where there is a high clinical suspicion for bladder malignancy, bladder washing is the method of choice. The specimens are better preserved and more cellular than voided urine. Bladder washings are obtained by vigorously irrigating the bladder lumen via catheter with saline or Ringer's solution and recovering the cells from the irrigant. Both the saline wash and urine present in the bladder at cystoscopy should be submitted.

To detect lesions of ureter or urethra, directed washings or brushings may be necessary.

II) MATERIALS NEEDED:

- A) Several clean specimen containers.
- B) Vial of CytoLyt solution (available from the cytology laboratory upon request).



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III) SUBMISSION REQUIREMENTS:

- A) A fresh urine specimen should be sent to the lab immediately. Refrigeration will preserve a specimen for a short period of time.
- B) All specimen containers should be labeled per hospital policy and sent to cytology.

RECORDS: EHR

REFERENCE STANDARDS: CAP GEN.40000; GEN.40100; GEN.40016; GEN.40032; GEN.40050;
GEN.40100

REVISION/REVIEW HISTORY:

Date	Affected Section(s)	Summary of Changes ('Reviewed' or details of change)
6-23-11 tas	None	Reviewed/revised-Saved electronically in the lab G drive.
10-25-11tlp	Format	Change in format for MCN. Shortened Title.
3-28-13 tlp	None	Reviewed. No content changes.
5-20-14 tlp	ALL	Deleted unnecessary content. Name change from 8.18 to 8.07.
2-25-15tlp	ALL	Reviewed. No content changes.
2-24-17tlp	ALL	Reviewed. No content changes.