

URINE TRANSPORT SURVEY

Please read through each survey question with the following elements in mind—

1. Consistency: Question made sense, logical possible responses.
 2. Navigation: Easy to move through survey, any technical difficulties.
 3. Text: Easy to read.
 4. Other: Comments and/or suggestions for how to improve the question (e.g., there was not an answer that fit my laboratory, too few or too many responses).
- If you have no comments on the question, please write “no comment” in the “Other” box.
 - If there are more questions fields on the form than you answered, disregard them.
 - Keep track of how many minutes it takes you to complete the survey (not the collection form).

Name: _____

Question	Elements	Specific Observations
2 ¹	Does your laboratory perform urine cultures? Yes/No	
3	Do you refrigerate or use a chemical preservative if urines cannot be delivered within two hours? Yes/No	
Other		Should there be 48 hour time limit after collection for refrigerated or preserved specimens?
4.	What is it? Refrigeration Boric Acid Other	
Consistency		Sounds like an either/or answer instead of yes/no.
Other		Specimens collected in the hospital are refrigerated. Specimens from urgent care facilities or Doctor’s offices are in transport tubes.
5.	Do you require females collecting a midstream urine to clean their genital area prior to collection? Yes/No	

¹ The first survey question is the “name” field.

Other	It is requested at least
6. Do you require males collecting a midstream urine to clean their penis prior to retracting the foreskin? Yes/No	
Other	We just ask men to clean the head of the penis
7. What type of specimen do you prefer for newborns and children? Diaper Suprapubic aspirate Other	
Other	-Our physicians very seldom do suprapubic aspirates but that would be the preferred specimen -The question re: What type of specimen do you prefer for newborns & children...I would choose "other" & fill in the text box with single catheterization. It won't recognize the answer in the textbox. It wants me to choose one of the 2 options, but they don't fit our laboratory. I just chose the one closer to what we do. -Would like a not applicable response because we do not do pediatrics. That's done at a sister pediatric hospital (Lebonheur).
8. Do you know your percent of contamination of urine cultures? Yes/No	
Other	-Our lab has a UF1000 Urine Particle Analyzer (AUWI). Cultures are only setup if a urine is flagged based on preset criteria. Our criteria is - Trace bacteria and/or >15 ubc's/HPF. The instrument measures cellsperal and converts to cells/HPF, also flags presence of yeast. -Contamination rates - including outpatient or just facility? -not done at this time
9. If yes, what is it?	
10. Do you know your positivity rate for your urine cultures? Yes/No	
Consistency	Define positivity rate

19. Additional thoughts/comments:

I think I would also want to know if labs reject specimens that do not meet the criteria or if they attach a comment to the result saying the quality of the specimen may have been compromised by delay in transport.

Questions -> easy to read text & easy to understand as well as navigate.