CMPT Case History Sheet, M163

shipping date: November 7, 2016 report due date: November 22, 2016

CMPT recognizes that some of these samples may not be routinely accepted in their current format. However, these formats are currently used for proficiency testing samples only. Please process samples in this format if the sample type is part of your laboratory's protocol.

CMPT Specimen No.	Sample Type (simulated)	History Description	Instructions Set up and report as per your laboratory protocol.
G163 (companion to M163-4)	Joint Fluid smear	25 year old returning from Thailand	DO NOT heat or alcohol fix the smear prior to staining. Please stain smear label side up. Stain the slide using Gram stain reagents and store the slide for future reference. Perform this challenge if your laboratory does any gram staining. If your laboratory does not routinely read this type of smear, note this with your results. To enter results on-line, use the Gram Smear Report Form.
M163-1	Throat Swab	14 year old with sore throat and rash, treatment failure	To enter results on-line, use the Specimen ID 1 Report Form
M163-2	Sputum sample (please note this EQA sample does not contain neutrophils or epithelial cells)	68 year old patient in haematology clinic with pneumonia on chest x-ray. The sputum sample is considered suitable for culture with a gram smear Q score of 3.	To enter results on-line, use the Specimen ID 2 Report Form
M163-3	Arm Wound swab	50 year old naval diver with arm wound injury, and cellulitis	To enter results on-line, use the Specimen ID 3 Report Form and Susceptibility 3 Report Form Please report quinolones, tetracycline, 3rd generation cephalosporin and trimethoprim-sulfamethoxazole (SXT)
M163-4 (companion to G163)	Joint Fluid sample	25 year old returning from Thailand	To enter results on-line, use the Specimen ID 4 Report Form
M163-5	Blood Culture sample	45 year old patient in ICU, query endocarditis	To enter results on-line, use the Specimen ID 5 Report Form and Susceptibility 5 Report Form

**If your laboratory normally performs susceptibility testing on an isolate and there is no form designated, CMPT does not require a susceptibility report for the challenge. If you would like to report susceptibilities, please enter the results in the comments box of the Specimen Identification form or e-mail the report to info@cmpt.ca.*

NOTE: If you would like to fax your report to CMPT, report forms (Gram Smear, Urine, Clinical Relevancy, Specimen Identification, Susceptibility, and *Clostridium difficile*) can be printed from www.cmpt.ca.

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Reporting Results

- If relevant, state if the organism would be sent to a reference laboratory for complete identification.
- Interpretation of laboratory response is based on organism identification or laboratory phrase.
- For conventional or "classical" testing, include pertinent individual tests and results.
- If a simulated proficiency sample is a specific specimen that your laboratory would normally perform a gram smear, it is advised to do the same for a CMPT swab. Currently CMPT swabs do not contain cells
- If a request accompanies a sample to report "as per your laboratory protocol", include only susceptibility results that would be included in the final clinical report. If antimicrobial testing is not applicable in your laboratory, please note this. Interpretations of susceptibility values must accompany susceptibility results R, I, S).
- Samples designated to be assessed based on clinical relevancy; grades will be based on the exact wording a laboratory would include in a final clinical report (use CMPT "Clinical Relevancy Report Form" or another specified form).
- Fill in the information requested on all the report forms as completely as possible.

Please submit a report even if your laboratory does not normally perform testing on a particular type of specimen and indicate accordingly on the report. If a report for a specimen challenge is not submitted, it will be entered as "no report" for the challenge.

Please Note:

- Follow the instructions enclosed (available at www.cmpt.ca) and use only the forms specified for the corresponding challenge. If the wrong form is used, the challenge will be graded as unacceptable (0).
- Do not use acronyms for reporting bacteria on gram smears. Use of acronyms for reporting bacteria will be graded as unacceptable (0).
- Use only CMPT identifiers when reporting results. All identifiers can be found on the case history sheet included with your package. Report 2 CMPT identifiers when reporting results. Use the CMPT challenge number and the source and specimen type. Also, use full CMPT identifiers, eg. G163, GS163-1, M163-1, when reporting results. Do not use partial/incomplete identifiers, eg. 163, G163-1 or GS163.
- The challenge will be graded with reporting error (RE) points for every component of the challenge, if an identifier is missing, partial or incorrect for the challenge. One RE point will be applied to each challenge component if the identifier is missing, partial or incorrect.

Report forms can be obtained from the web site, www.cmpt.ca or phone by 604-827-1754 or 1-866-579-CMPT (2678).

Results should be entered via the on-line data entry program, www.cmpt.ca (Please see enclosed instructions). If you do not have access to the internet, please **fax** your results to **604-827-1338 or 1-866-580-CMPT (2678)**.

CMPT Blood Culture Sample - Instructions

1. There are two vials enclosed:
   - vial with 10 mLs of defibrinated blood
   - vial with 2 beads

   If you do not have 2 vials or if one or both vials is/are leaking, please contact CMPT for a replacement as soon as possible.

2. Using sterile technique, transfer the vial with the blood to vial with the bead.

3. Recap the blood/bead vial and rock gently for 1 minute.

4. Let vial stand for 10 minutes.

5. Aspirate **5 ml from the blood/bead** mixture and inoculate the contents into an **aerobic** blood culture bottle and the remaining **5 ml from the blood/bead** mixture into an **anaerobic** blood culture bottle.

6. Proceed as per your laboratory's usual blood culture protocol.

If you have any questions, please contact CMPT as soon as possible