

<p>Notes <i>Helicobacter</i> culture for susceptibility testing is only performed if a history of treatment failure is indicated.</p> <p>If a pathology diagnosis is required, submit a <u>separate</u> biopsy sample (in formalin) with a <i>DynaLIFE</i> Anatomic Pathology Requisition and send to <i>DynaLIFE</i> Anatomic Pathology.</p>	<p>Beaker Label (Lab Use Only)</p>
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To culture *Helicobacter pylori* from gastric biopsies, please complete the following checklist:

**Materials
required**

***H. pylori* Collection Kit**

(contains Portagerm transport media, requisitions, collection checklist, and biohazard bags)

Obtain the collection kit from the rapid response lab in your hospital (or call # below) **the day before the procedure.**

Alternatively, Tryptic Soy Broth (TSB) media can be used and will be distributed in the event the PortaGerm transport media is unavailable. Process for collection is the same as for Portagerm transport media.



Portagerm transport media

Patient History

☐ Patient has recurrent failure after appropriate *H. pylori* treatment

Patient discontinued use of the following groups of medications	Minimum	if not, state how long
<input type="checkbox"/> Proton pump inhibitors (H ⁺ , K ⁺ - ATPase Inhibitor):	14 days	
<input type="checkbox"/> Antibiotics:	28 days	
<input type="checkbox"/> Bismuth preparations (e.g. Peptol Bismol):	14 days.	

**Before collecting
the sample**

☐ Allow transport media to warm to room temperature prior to collecting samples (if using Portagerm, minimize prolonged exposure to light)

Sample Collection

Collect two double-bite biopsies:

- ☐ One from the Antrum near pylorus
- ☐ One from the Gastric body (greater curvature)
- ☐ Immediately place each biopsy deep into its **own transport media container**

Sample Labelling

- ☐ Label all specimens with patient full first and last name, Personal Health Number (PHN) or Medical Record Number (MRN) **AND body site of biopsy (antrum or gastric body)**
- ☐ Place each biopsy into a **separate** biohazard bag

**Complete the
Requisition**

- ☐ Requisitions are provided in the kit for each specimen site. Label each requisition with:
 - ☐ Patient label providing full first and last name, PHN or MRN
 - ☐ Ordering physician information
 - ☐ Date (yyyy/mm/dd) and time of collection
- ☐ Place requisition in the outside pocket of the respective biohazard bag. Place completed checklist in one of the biohazard bag outside pockets.

**Sample/Media
Transport**

- ☐ Protect samples from light and transport **STAT** to the rapid response lab in your hospital and/or to *DynaLIFE* Microbiology Laboratory

Sample should be received at *DynaLIFE* Microbiology Lab within 2 hours of collection
Need *H. pylori* Collection Kit? Contact *DynaLIFE* Microbiology Lab at 780-451-3702 ext. 8242
Questions? Contact the Medical Microbiologist-on-call (MOC) at 780-451-3702