



**NATIONAL  
RENAL  
COMPLEMENT  
THERAPEUTICS  
CENTRE**



## How to send a STEC HUS sample for testing

Information for clinical staff and microbiology lab teams

Clinical team and Microbiology lab team – please follow the instructions in your section below.

The sample can be either a rectal swab or stool specimen.

If stool sample not collected by morning (or if patient about to start antibiotics) obtain a rectal swab in the first instance.

### Clinical team:

- Speak to the senior biomedical scientist on duty in your microbiology lab. Tell them STEC HUS is in the differential diagnoses for this patient, and that you will send a sample which needs to be sent to UKHSA Colindale
- Arrange for a rectal swab (or stool specimen) to be sent to your lab ASAP

#### How to take a rectal swab:

- A swab with a medium can be used e.g. charcoal (do not use dry swab)
- Insert cotton bud end of swab into rectum
- Cotton swab must have visible faecal matter for it to be tested by UKHSA

- Please complete the UKHSA form (page 3 of this document) – ticking in the “sample details” section, either:

Faeces (STEC, *C. botulinum* & *C. perfringens* enterotoxin only) or  Rectal swab (STEC only)

- Then send sample with this document (with completed form on page 3), to your lab



Please be aware that when STEC HUS is suspected, it is notifiable and must be reported as such to your local Health protection Team

### **Microbiology laboratory team:**

- STEC HUS is in the differential diagnoses for this patient and they have also been referred to the National aHUS Service
- Please send sample to UKHSA Colindale immediately, along with the accompanying UKHSA form on page 3 of this document, *irrespective of whether your lab has in-house PCR testing*
- Please be aware UKHSA have confirmed they are happy to receive both rectal swabs and stool sample for STEC PCR testing
- If clinicians have sent you both a rectal swab and a stool sample, please send rectal swab to UKHSA Colindale. Split stool sample in two, one sample to go to UKHSA Colindale, and the sample should be tested locally as normal
- Invoicing details are pre-populated in the top right of the UKHSA form (National aHUS Service pays for this test)
- Testing will be expedited and results are sent directly to the National aHUS Service who will inform the local clinical team
- Queries can be directed to the National aHUS Specialist Nurses on telephone number 0191 282 5098



UK Health Security Agency

Please write clearly in dark ink

# Gastrointestinal Bacteria Referral Clinical Specimen

(For cultures please use Form L4)

*C. botulinum, C. perfringens, C. tetani, E. coli and Helicobacter*

Bacteriology Reference Department  
GBRU

61 Colindale Avenue  
London NW9 5HT

Phone: +44 (0)20 8327 7887  
GBRU@phe.gov.uk  
www.gov.uk/ukhsa

UKHSA Colindale  
Bacteriology  
DX 6530002  
Colindale NW

**SUSPECTED  
STEC HUS  
CASE**

## SENDER'S INFORMATION

Sender's name and address

Report to be sent FAO **NRCTC Newcastle**

Contact Phone **0191 282 5098** Ext

Purchase order number **FUN100**

Project code

Outbreak/investigation **Referral to National aHUS Service**

ILog number

Postcode

## PATIENT/SOURCE INFORMATION

- Human     Animal\*     Other\*  
 Inpatient     Outpatient     GP Patient     Other\*

\*Please specify

NHS number

Sex  male  female

Surname

Date of birth Age

Forename

Patient's postcode

Hospital number

Patient's HPT

Hospital name (if different from sender's name)

Ward/clinic name

Ward type

## SAMPLE INFORMATION

Your reference

Date of collection Time am/pm

Date sent to UKHSA

**Do you suspect from clinical or lab information that patient is infected with a Hazard Group 3 or 4 pathogen (excluding HIV)?**

- Yes - Group3     Yes - Group4     No

If yes, give **all** relevant details. **Note:** If infection with a Hazard Group 4 pathogen is suspected, from clinical information or travel history, **you must** contact Reference Lab **before** sending

Sample details

- Biopsy (*Helicobacter* only)     Faeces (*STEC, C. botulinum* & *C. perfringens* enterotoxin only)     Rectal swab (*STEC* only)     Serum (*C. botulinum* only)

## TESTS REQUESTED

- C. botulinum*     *C. perfringens* enterotoxin     *C. tetani*     *E. coli* O157/STEC     *Helicobacter*  
 Other (please specify)

## CLINICAL/EPIDEMIOLOGICAL INFORMATION

Clinical details

- Abdominal pain     Fatal     Post-mortem sample  
 Asymptomatic     Guillain Barré syndrome  
 Constipation     HUS  
 Diarrhoea     Meningitis  
 Diarrhoea (Bloody)     Neurological symptoms (please provide details below)  
 Diarrhoea (Watery)     Pyrexia/Fever  
 Encephalitis     Septicaemia  
 Enteritis     Vomiting  
 Other (please specify)

- Renal dialysis     Recent blood transfusion

Antibiotic treatment

Vaccination history

Outbreak Type

- General     Household     Sporadic case

Outbreak details

No. of symptomatic people:

Date of onset Time am/pm

Recent foreign travel?  Yes  No

Duration of symptoms:

Countries visited in past 4 weeks:

## OTHER COMMENTS

**\*\* SUSPECTED STEC HUS CASE \*\***