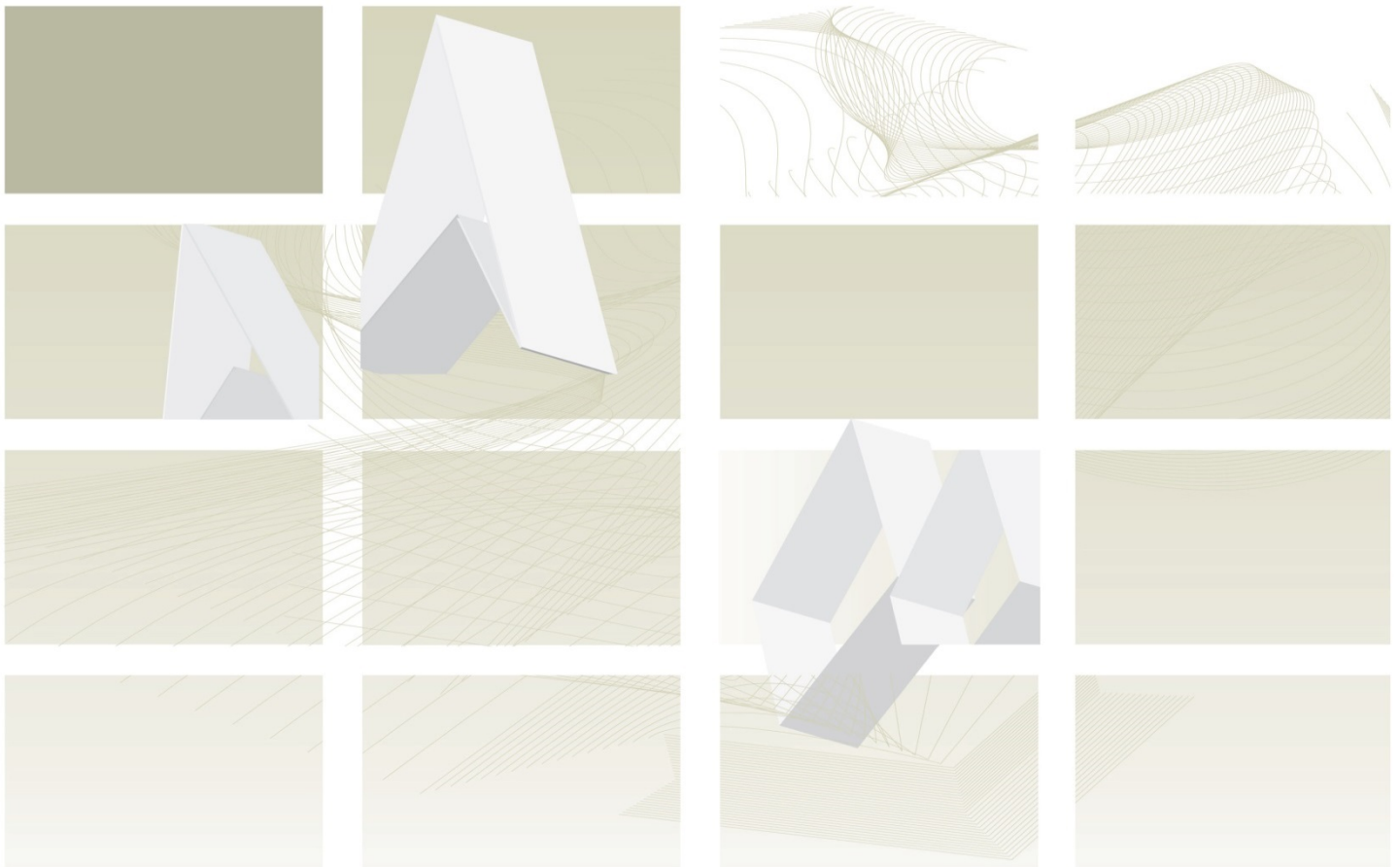




# UK Standards for Microbiology Investigations

**Review of users' comments** received by  
Working group for microbiology standards in clinical  
bacteriology

## B 6 Investigation of whooping cough



"NICE has renewed accreditation of the process used by **Public Health England (PHE)** to produce **UK Standards for Microbiology Investigations**. The renewed accreditation is valid until **30 June 2021** and applies to guidance produced using the processes described in **UK standards for microbiology investigations (UKSMIs) Development process, S9365', 2016**. The original accreditation term began in **July 2011**."

Recommendations are listed as ACCEPT/ PARTIAL ACCEPT/DEFER/ NONE or PENDING

Consultation: 01/09/2017 – 15/09/2017

Version of document consulted on: B 6dd+

Proposal for changes

<b>Comment number</b>	1		
<b>Date received</b>	06/09/2017	<b>Lab name</b>	University Hospitals of Leicester NHS Trust
<b>Section</b>	5.3		
<b>Comment</b>			
Given that section 4.7 Antimicrobial susceptibility testing, does not give a methodology for susceptibility testing, it seems inappropriate for section 5.3 to state, Report susceptibilities as clinically indicated. Otherwise, the SMI seems to me to be a clear and useful document.			
<b>Evidence</b>			
<i>Not completed.</i>			
<b>Financial barriers</b>			
No.			
<b>Health benefits</b>			
No.			
<b>Recommended action</b>	<b>ACCEPT</b> To add "Not applicable" in the section 4.7 of the document.		

<b>Comment number</b>	2		
<b>Date received</b>	07/09/2017	<b>Lab name</b>	PHL Bristol
<b>Section</b>	All of it		
<b>Comment</b>			
My main problem with this SMI is that it does not adequately fulfil the criteria of an SMI as stated on page 5: UK SMIs also provide clinicians with information about the available test repertoire and the standard of laboratory services... and UK SMIs comprise a collection of recommended algorithms and procedures covering all stages of the investigative process in microbiology from the pre-analytical (clinical syndrome) stage to the analytical (laboratory testing) and post analytical (result interpretation and reporting) stages. The document is primarily about culturing samples, although some useful information on PCR testing and a very brief mention of serological testing is also included. Since the SMI is titled Investigation of Bordetella pertussis and Bordetella parapertussis what is required is an overarching document which advises both clinician and microbiologist on the available tests, their clinical utility, and flow diagram which			

describes which tests should be used in different clinical scenarios.

**Evidence**

A joined up approach to culture based and PCR testing is lacking, leading to confusion in how best to diagnose pertussis. This apparent prevarication at SMI level is reflected by a similar disconnect in my laboratory (Bristol) and probably others. In Bristol a clinician can request B. pertussis culture on the bacteriology page of our Order Comms, B. pertussis PCR on the virology page, and B. pertussis serology on the serology page. This means that clinicians have a 2 in 3 chance of requesting the wrong test if they are not sure what test is appropriate. Given the acknowledged low sensitivity of culture, SMI should take a lead in recommending PCR as the diagnostic test of choice in a patient with recent symptom onset. The role of culture as a means of strain characterisation needs to be much more clearly defined.

**Financial barriers**

No.

**Health benefits**

No.

**Recommended action**

**ACCEPT**

Document name changed to "Investigation of whooping cough" and rewritten in a way to make clear when to request PCR, culture or serology.

<b>Comment number</b>	3		
<b>Date received</b>	08/09/2017	<b>Lab name</b>	University Hospitals of Coventry and Warwickshire
<b>Section</b>			
<b>Comment</b>			
Page 10 - 'Meticillin' is usually spelt as 'Methicillin'.			
<b>Evidence</b>			
Mandell, Douglas and Bennett's Principles and Practice of Infectious Diseases 8th Edition, Volume 1 Chapter 20 pg 271.			
<b>Financial barriers</b>			
<i>Not completed.</i>			
<b>Health benefits</b>			
<i>Not completed.</i>			
<b>Recommended</b>	<b>NONE</b>		

<b>action</b>	Meticillin is correctly used.
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**Respondents indicating they were happy with the contents of the document**

<b>Overall number of comments: 4</b>			
<b>Date received</b>	07/09/2017	<b>Lab name</b>	University Hospitals of Leicester NHS Trust
<b>Health benefits</b>			
<i>Not completed.</i>			
<b>Date received</b>	08/09/2017	<b>Lab name</b>	Microbiology Antrim Area Hospital
<b>Health benefits</b>			
<i>Not completed.</i>			
<b>Date received</b>	15/09/2017	<b>Professional body</b>	Society for Applied Microbiology
<b>Health benefits</b>			
<i>Not completed.</i>			
<b>Date received</b>	15/09/2017	<b>Lab name</b>	Ninewells Hospital, Dundee
<b>Health benefits</b>			
None.			