

**HACKETTSTOWN REGIONAL MEDICAL CENTER
LABORATORY POLICY MANUAL
CEREBRAL SPINAL FLUID COLLECTION REQUIREMENTS**

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Effective Date: March, 1998

Policy No: SC 100.09

Cross Referenced:

Origin: Special Collections

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Authority: Laboratory Director

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PURPOSE: To describe conditions under which CSF is handled.

POLICY: As follows:

Departments: Chemistry and Hematology

Scheduling: Stat

Container: Sterile CSF lumbar puncture tubes, labeled 1, 2 and 3

Tests Included: Color
Appearance
Xanthochromia
Total WBC Count
Differential if the WBC is greater than or equal to $5/\text{mm}^3$
Total RBC
Glucose
Total Protein

Any other tests such as: Culture (Gram stain is automatically performed with all CSF cultures), Bacterial Antigens, VDRL, Cytology, etc. must be ordered separately.

Instructions:

1. Specimen must arrive in the laboratory within 30 minutes of collection. Deliver the specimen to specimen processing and bring the specimen to laboratory personnel's attention
2. All tubes are to be labeled with the patient's name, medical record number, doctor, admitting location, and date.
3. Tubes will be used in the following order unless specified by the physician on the tube, #1 for chemistry, #2 or #3 for cell count and culture.
4. Stat gram stain performed and results called to doctor.
5. Culture and/or Bacterial Antigens sent stat to St. Clare's. Record results of gram stain on requisition.