

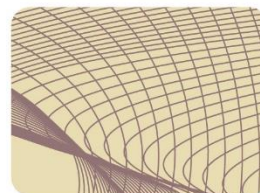
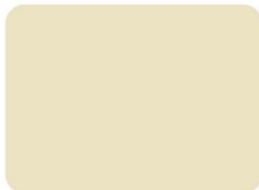
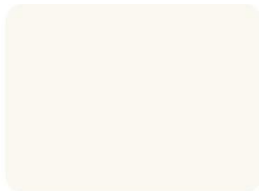


UK Health
Security
Agency

UK Standards for Microbiology Investigations

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

B 05 Investigation of samples from paranasal sinuses



National Institute for Health and Care Excellence (NICE) has renewed accreditation of the process used by the UK Health Security Agency to produce UK Standards for Microbiology Investigations (UK SMIs). The renewed accreditation is valid until 30 June 2026 and applies to guidance produced using the processes described in 'UK Standards for Microbiology Investigations Development Process' (2021). The original accreditation term began on 1 July 2011.

This publication was created by UK Health Security Agency (UKHSA) in partnership with the partner organisations.

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

Issued by the Standards Unit, Specialised Microbiology and Laboratories, UKHSA

RUC | B 05 | Issue no: 1 | Issue date: 16.09.24

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Consultation: 07/05/2024 – 24/05/2024
Version of document consulted on: dl +

Title

Comment number: 1

Date received: 07/05/2024

Laboratory or organisation name: Southwest Pathology Services

Would you consider appending the title to include Antral Washout or AWO? Although SOP later states that Nasal swabs are unsuitable specimens I feel that differentiating this at SOP title level will make this caveat crystal clear.

Recommended action

1. Accept: The title has been changed from 'nasal and paranasal sinus samples' to 'Investigation of samples from paranasal sinuses'.

4 Introduction

Comment number: 2

Date received: 07/05/2024

Laboratory or organisation name: Southwest Pathology Services

What about mentioning *Klebsiella rhinoscleromatis*? Can cause symptoms very similar to sinusitis

Recommended action

1. None: *Klebsiella rhinoscleromatis* is uncommon in developed countries. Only common/clinically relevant species are listed in UK SMIs.

7.3 Culture

Comment number: 3

Date received: 07/05/2024

Laboratory or organisation name: Southwest Pathology Services

I would expect to see the addition of a gram-negative selective plate (CLED or MacConkey) for Enterobacterales - this group of organisms has certainly been associated with symptoms of chronic sinusitis - especially if from a dental or maxillary source.

Recommended action

1. Accept: The table footnotes have been updated with this information.

Comment number: 4

Date received: 07/05/2024

Laboratory or organisation name: UK Health Security Agency in collaboration with North Bristol NHS Trust

In the table, under Common organisms - Enterobacteriaceae should be changed to Enterobacterales.

Recommended action

1. Accept

Algorithm: Investigation of Nasal and Paranasal Sinus Samples

Comment number: 5

Date received: 07/05/2024

Laboratory or organisation name: UK Health Security Agency in collaboration with North Bristol NHS Trust

Under standard media workflow - list of organisms - Enterobacteriaceae should be changed to Enterobacterales.

Recommended action

1. Accept

Health benefits

Respondents were asked: 'Are you aware of any health benefits, side effects and risks that might affect the development of this UK SMI?'

Comment number: 6

Date received: 07/05/2024

Laboratory or organisation name: UK Health Security Agency in collaboration with North Bristol NHS Trust

The H&S recommendation for this SMI is for the specimen to be processed under CL2 facilities, except for risk of fungal infection with dimorphic fungi. This places significant

importance on relevant clinical details, which are often missing. Also, if the specimen is mucoid and needs to be treated with sputazol, most labs are set up with this option only being available in CL3, along with routine respiratory specimens. To prevent possible exposure and logistical issues, how about recommending that specimen processing is carried out in CL3?

Recommended action

1. Partial accept: Sentence added to the 'Safety considerations' section to recommend processing of specimens in CL3 in cases where clinical details regarding patients travel history are missing. However, dimorphic fungi are rare – not endemic in the UK. Therefore, it is unreasonable for all specimen processing be completed under CL3 conditions.

Financial barriers

Respondents were asked: 'Are there any potential organisational and financial barriers in applying the recommendations or conflict of interest?'

Comment number: 7

Date received: 08/05/2024

Laboratory or organisation name: Shrewsbury and Telford Hospital NHS Trust

Increased workload and impact of this on staff. If additional staff needed to help process/read, especially mycology aspects of the investigations, a barrier would be the financial impact of staffing increased establishment as our Trust is struggling financially.

Recommended action

1. None

Improvement

Respondents were asked: Do you have any suggestions on how UK SMIs can be improved.

Comment number: 8

Date received: 07/05/2024

Laboratory or organisation name: Southwest Pathology Services

Possibly reconsider the value of having organism identification SOPs - practically all labs now have MALDI and I feel these ID SOPs are of minimal use for new or recent BMS staff (sadly!).

Recommended action

1. None: Currently, there are no plans to remove/discontinue the development of UK SMI Identification documents as some laboratories still find them useful.

Satisfaction

Respondents were asked: In general, how satisfied are you with the UK SMI service?

Comment number: 9

Date received: 07/05/2024

Laboratory or organisation name: Southwest Pathology Services

Dissatisfied. Do any of the contributors / developers work in a modern and busy clinical microbiology laboratory?

Recommended action

1. None: All UK SMIs are discussed and approved by members of the UK SMI working groups which include practising medical, clinical, and biomedical scientists representing their partner organisations. The UK SMIs also are sent out for public consultation for the wider contribution of experts and staff working in other microbiology laboratories.

For further information, please refer to [UK SMI Development](#).

Respondents indicating they were happy with the contents of the document

Overall number of comments: 3			
Date received	08/05/2024	Lab name/Professional body (delete as applicable)	Shrewsbury and Telford Hospital NHS Trust
Health benefits			
The PCNs covered by our laboratory comprises a large rural/semi-rural population. Investigations of chronic or unusual respiratory/sinus infections would benefit our area. The risk is that we don't have an Infectious Diseases department at the hospital, so don't have the specialists to work alongside Consultant Microbiologists in the treatment of such infections, although this can likely be overcome with education and networking with local specialists.			

Recommended action			
1. NONE			
Date received	21/05/2024	Professional body	Institute of Biomedical Science
Health benefits			
NONE			
Date received	23/05/2024	Professional body	Royal College of General Practitioners
Health benefits			
NONE			

Note: the document's title was 'Investigation of Nasal and Paranasal Sinus Samples' when it was released for consultation, but it has since been updated to the current document title.