

**Amniotic Fluid Testing for Infection**

Send a minimum of 3 cc amniotic fluid to Microbiology laboratory for:

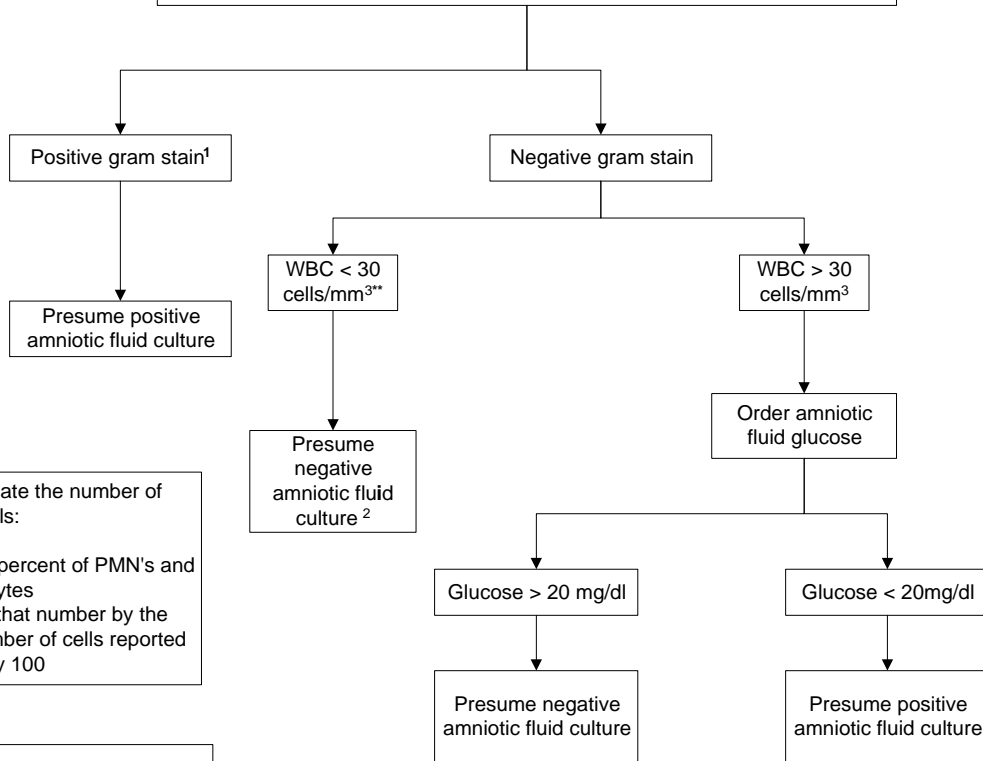
- 1) gram stain (unspun)
- 2) Mycoplasma/Ureoplasma cultures
- 3) aerobic culture
- 4) anaerobic culture

**AND**

send a minimum of 2 cc to Core laboratory for:

- 5) Cell count

Note: if karotype desired; send additional fluid (20 cc minimum) in separate containers to Core laboratory for cytogenetics



\*\* To calculate the number of white cells:

- 1) Add the percent of PMN's and lymphocytes
- 2) Multiply that number by the total number of cells reported
- 3) Divide by 100

Approved 01/2003  
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## References

1. Romero R, Yoon BH, Mazor M, Gomez R, Diamond MP, Kenney JS, et al. The diagnostic and prognostic value of amniotic fluid white blood cell count, glucose, interleukin-6, and Gram stain in patients with preterm labor and intact membranes. **Am J Obstet Gynecol 1993; 169:805-16.** *Amniotic fluid IL-6 determinations had the highest sensitivity (100%, 11/11) for the detection of a positive amniotic fluid culture, but the Gram stain had the highest specificity (99.1%, 108/109).*
2. Romero R, Yoon BH, Mazor M, Gomez R, Gonzalez R, Diamond MP, et al. A comparative study of the diagnostic performance of amniotic fluid glucose, white blood cell count, interleukin-6 and Gram stain in the detection of the microbial invasion in patients with preterm premature rupture of membranes. **Am J Obstet Gynecol 1993, 169:839-51.** *The combined use of the Gram stain and amniotic fluid white cell count determinations ( $> 30/\text{mm}^3$ ) showed the highest specificity (77.9%, 53/68) .... in the detection of a positive amniotic fluid culture.*

*Revised January 2003.*

### *Notification to Users*

*These algorithms are designed to assist the primary care provider in the clinical management of a variety of problems that occur during pregnancy. They should not be interpreted as a standard of care, but instead represent guidelines for management. Variation in practices should take into account such factors as characteristics of the individual patient, health resources, and regional experience with diagnostic and therapeutic modalities.*

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