$\sqrt[\infty]{7}$ The University of Kansas Health System

When Blood Bank and Micro Collide

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Objectives

- Discuss methods taken to ensure staff safety when dealing with potentially highly infectious material.
- Observe interprofessional relationships between clinical departments

Patient History

- Patient arrived to ED via EMS due to shortness of breath
 - Patient had been living in car. Complained to EMS of pain in left toe and glute pain due wounds
 - Patient found to have necrotizing infection
 - Emergent intubation and debridement
- Blood Bank received sample for Type & Cross
 - ABO/RH: B Pos
 - Aby Screen: Negative

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Patient History

- Patient moved to ICU
- One day later patient moved to OR for additional debridement
- Second day Additional debridement required, transferred to ICU
- Third day Micro alerted Blood Bank...





- Gram Positive Rod with spores (easily decolorizes)
- Commonly found in the environment, notably in soil and aquatic habitats
- Spores provide a protective layer and can survive harsh conditions for long periods of times
- Botulism toxins is the
 reason why honey should
 be avoided for babies <12
 months old

Erasmus MC Microbe Canvus.

Clostridium botulinum Accessed 4/3/2025

Historical method of ID

- Obligate anaerobe
- Catalase negative
- Oxidase negative
- Indole negative
- Urease negative
- Lecithinase negative
- Motile
- Beta-hemolysis variable
- Rotten-egg smell



Intensity [a.u.]



m/z [Da]

Schaumann, Reiner & Dallacker-Losensky, Kevin & Rosenkranz, Christiane & Genzel, Gelimer & Stingu, Catalina-Suzana & Schellenberger, Wolfgang & Schulz-Stübner, Sebastian & Rodloff, Arne & Eschrich, Klaus. (2018). Discrimination of Human Pathogen Clostridium Species Especially of the Heterogeneous C. sporogenes and C. botulinum by MALDI-TOF Mass Spectrometry. Current Microbiology. 75. 10.1007/s00284-018-1552-7.

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C. sporogenes/botulinum

- Matrix-Assisted Laser Desorption/Ionization Time-of-Flight (MALDI-ToF)
- Method of Mass Spectrometry
- Due to the peak similarities between Clostridium sporogenes and Clostridium botulinum, unable to distinguish from biochemical or MALDI-ToF methods
- Consultation with SPHL and CDC, it was recommended to send the isolate to CDC for further testing
 - Organism introduced to mice with specific anti-toxin. If the organism was *Clostridium botulinum* and produced botulism toxin, then the toxin would be identified

• What is botulism and why is it bad

- Once Blood Bank was notified:
 - Patient samples were quarantined Micro alerted BB that risk was very low, but wanted to be cautious

- Blood Bank set up a new testing location....
 - Complete with validations for moved equipment!

- Memo sent out to Blood Bank staff on how best to handle the specimens – All sample manipulation and testing to be done under the biosafety cabinet
 - Sample to be hand delivered to the Blood Bank or sent in two biohazard bags if sent via tube station
 - Aliquot patient sample into 12X75 tube and seal with parafilm – centrifuge to separate plasma and RBCs.
 Done to prevent sporulation
 - Antisera/Reagent red cells were aliquoted into tubes and brought to micro biosafety cabinet

- All washing was done manually
 - All tubes were sealed prior to centrifugation



 Any testing requiring 37C was done under the newly dubbed "Micro Heat Block"



• We also used a second tech to document results so there was no risk of contamination





- Patient discharged on day 25!
 - Patient being released to care facility



• Patient came back 18 hours later...



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- Blood Bank had not moved the equipment
 - Micro was gracious enough to let us continue using their space
 - Blood Bank received one additional sample before the patient was discharged for the second time
- Lessons Learned
 - Communication between departments is crucial, even if the subject may seem trivial
 - Processes can always change learn to evolve/adapt

Questions?

- Big thanks to Microbiology for allowing Blood Bank to invade their space ⁽³⁾
- Big thanks to Blood Bank staff for being adaptable