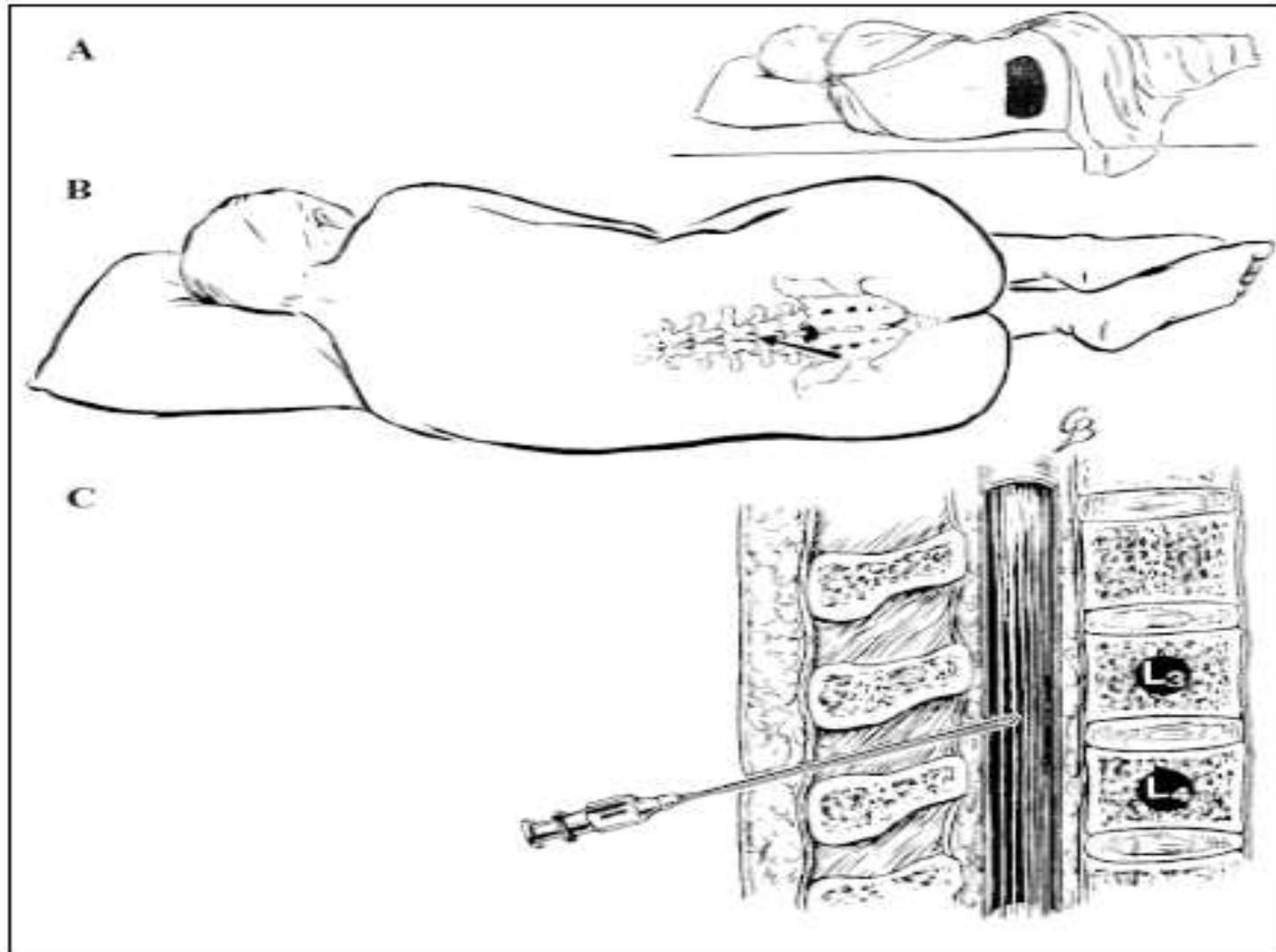




# WELCOME TO THIS EMS ECHO SESSION

# Collection of CSF



# Collection of CSF

CSF is collected under aseptic conditions by experienced personnel

- Biosafety
  - Potentially infectious
    - Hepatitis
    - HIV
- Protective gear
  - Change Gloves in-between patients
  - Do not Recap
  - Wipe the surface of the sample bottle with 70% alcohol  
(Higher concentrations reduce bacterial-cidal activity)

# Collection of CSF

- Skin disinfectant 70% alcohol
- Sterile Gloves
- Surgical Mask
- Adhesive Bandage
- Lumbar Puncture Needle
  - 22gauge / 89mm for adults
  - 23 gauge / 64mm for children



# Collection of CSF

- 3 tubes (1 ml each)
  - Microbiology
  - Chemistry
  - Cytology
- Traumatic Samples with blood should not be sent for Microbiology

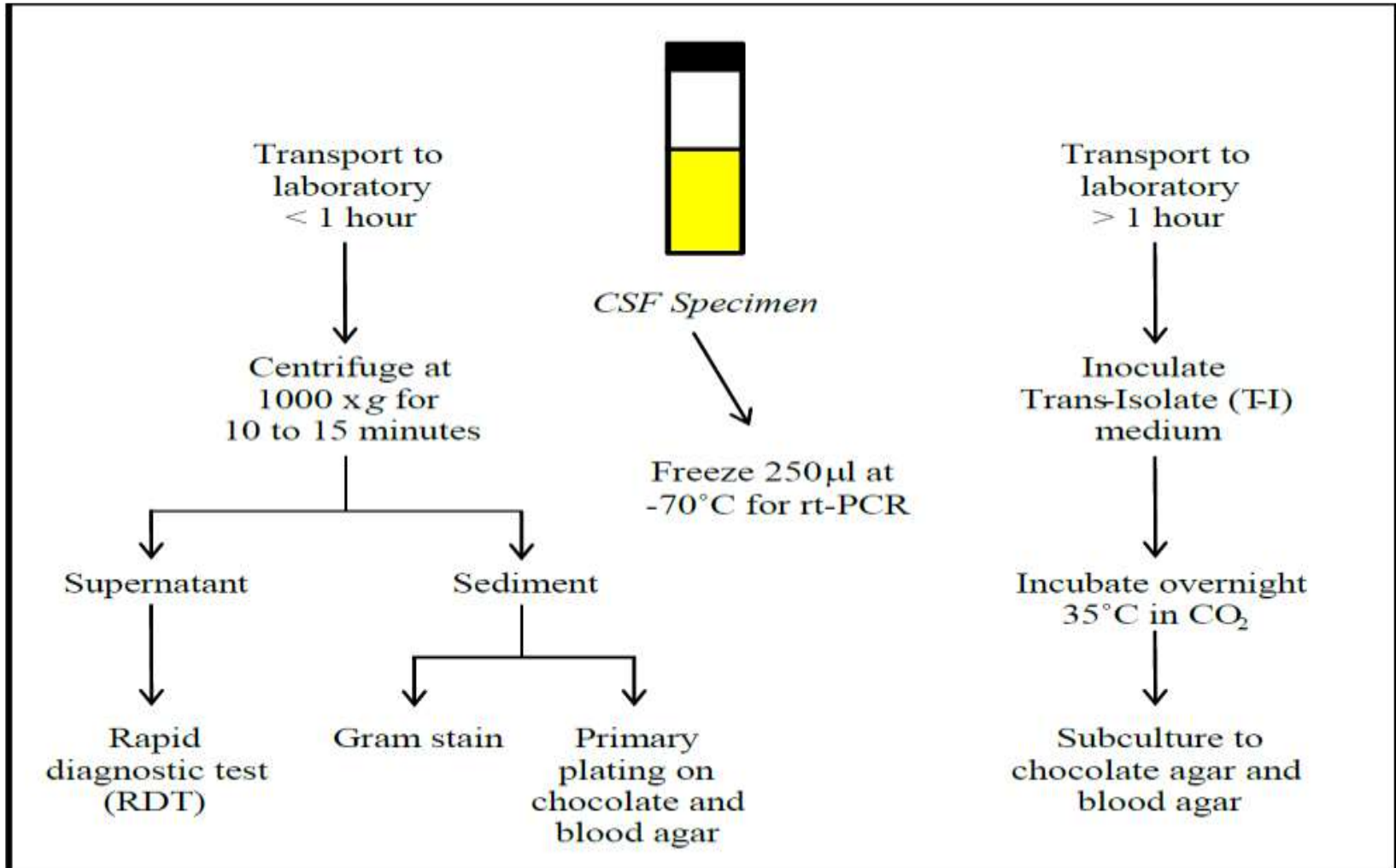
## Note!!!

- Great care must be taken when handling c.s.f. because the specimen is obtained by lumbar puncture.
  - Only a limited amount of fluid can be withdrawn from a patient at any one time.

# Processing CSF

- For Glucose, collect 0.5–1.0 ml of the fluid into fluoride-oxalate preservative
- *For measuring protein* collect about 1 ml of fluid into a dry tube or bottle.
  - Total protein can also be measured using the supernatant fluid which remains after the bacteriological tests have been completed.

# Processing CSF



# Sample Rejection



- Incorrect container
  - Preservative
- Insufficient sample
- Improper Labeling
- CSF- Blood stained
  - Chemistry
  - Microbiology



# Cerebrospinal Fluid (CSF) Analysis and Interpretation in Neurocritical Care for Acute Neurological Conditions

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# Normal Composition of CSF

	<i>Normal range</i>
Color	Clear
Specific gravity/pH	1.006–1.007/7.4
Opening pressure	50–200 mm H <sub>2</sub> O
RBCs count	Nil
WBC count	0–5 (upto 30 in neonates)
WBC types	Lymphocytes
CSF Proteins	15–40 mg/dL
CSF lactate	1–3 mmol/ L
CSF glucose	50–80 mg/dL (two thirds of blood glucose)
Microbial examination	No microorganism

# Indications for LP



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## *Diagnostic*

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CNS infections

Autoimmune CNS diseases like Guillain Barrie syndrome

CNS vasculitis

CT negative subarachnoid hemorrhage

Malignant cells in metastasis

For injection of dye like fluorescein to identify site of CSF leaks

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## *Therapeutic*

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Benign intracranial hypertension

Acute communicating hydrocephalus

Cryptococcal meningitis in HIV infections

For CSF leaks

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## *Delivery of intrathecal drugs*

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Delivery of antibiotics

Delivery of antineoplastic drugs

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# Contraindications for LP

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## Relative contraindications

- Platelet count of less than 20000–40000/cu mm
  - Thienopyridines therapy
- 

## Absolute contraindications

- Non-communicating obstructive hydrocephalus
  - Uncorrected bleeding diathesis
  - Anticoagulant therapy (timing of LP depends on the stopping of anticoagulant drug)
  - Platelet count less than 20000/ cu mm
  - Spinal canal stenosis or spinal cord compression above level of puncture
  - Local skin infections
-

# Various Types of Meningitis

<i>CSF analysis</i>	<i>Bacterial</i>	<i>Tuberculosis</i>	<i>Viral</i>	<i>Fungal</i>	<i>Aseptic</i>
Pressure	Increased	Increased	Normal to elevated	Normal to mild increase	Increased
Color	Turbid	Turbid	Clear	Clear	Clear to turbid
Glucose	< 40 mg%	Low	Normal to mild less	Low to normal	Low
Proteins	Elevated	Greatly elevated	Normal to mild elevation	Normal to mild increase	Elevated
Lactate	Elevated (> 6 mmol/L)	Elevated	0–6 mmol/L	Normal	Normal
RBCs	Elevated	Elevated	Normal	Normal	Elevated
WBCs	10-2000/ cu mm	Elevated, but < 500	>100/ cu mm	10–50/ .cu mm	Mildly elevated
WBC types	Neutrophils	Lymphocytes	Lymphocytes	Lymphocytes	Neutrophils
Gram stain	Positive	Acid fast bacilli	Negative	Negative India ink for spores/fungi	Negative
Microbial Culture	Positive	Positive (yield is high in early stages)	Negative	Positive	Negative
Biomarkers	Elevated C-reactive proteins	Antibodies in CSF (detection of anti-M37Ra, anti-antigen 5, and anti-M37Rv)			
		Elevated CSF procalcitonin, Adenosine deaminase	Low CRP and adenosine deaminase		Seen following neurosurgery or antibiotic use
PCR test		Help in identification of organisms even after antibiotics are started	Helps in identification of the organisms		

