
Urine Sediment Guide Idexx

MATTERS

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Kailey & Logan*

INTRODUCTION

Urine sediment analysis remains one of the most valuable diagnostic tools in veterinary medicine, offering a window into the health of the kidneys, urinary tract, and metabolic processes of companion animals. However, traditional manual microscopy can be time-consuming, subjective, and prone to variation between technicians. This is where the **Urine Sediment Guide Idexx** becomes an indispensable resource. Idexx Laboratories has developed an integrated system that combines automated instrumentation, such as the **IDEXX SediVue Dx** analyzer, with comprehensive reference guides to standardize sediment evaluation. This article explores what the guide entails, how it improves clinical accuracy, and why every veterinary practice should incorporate it into their urinalysis workflow. Whether you are a seasoned clinician or a veterinary technician, understanding the IDEXX approach to sediment analysis will help you interpret results more confidently and enhance patient care.

WHAT IS A URINE SEDIMENT GUIDE AND WHY IT

Urine sediment consists of solid elements such as cells, casts, crystals, bacteria, and artifacts that settle after centrifugation. A systematic guide, like the **Urine Sediment Guide Idexx**, provides standardized criteria for identifying and quantifying these particles. Manual evaluation relies heavily on the operator's experience; different technicians may report varying numbers of red blood cells or misidentify hyaline casts. A reliable guide minimizes this variability and ensures that findings are consistent across the clinical team.

Beyond standardization, a sediment guide offers visual references, counting protocols, and interpretive tips. The IDEXX version integrates seamlessly with their automated analyzers, producing high-resolution digital images that can be compared against the guide's examples. This combination reduces diagnostic error and speeds up workflow. For practitioners, the ability to quickly distinguish between clinically significant findings—such as white blood cell casts indicating pyelonephritis versus benign struvite crystals—is critical for appropriate treatment decisions.

IDEXX has revolutionized veterinary urinalysis with the **SediVue Dx** system, an automated microscope that captures multiple digital images of sediment and classifies elements using proprietary algorithms. The **Urine Sediment Guide Idexx** is both a training tool and a diagnostic reference that aligns with these algorithms. Instead of manual scanning, the system identifies and counts red blood cells, white blood cells, epithelial cells, casts, crystals, and bacteria. It then displays representative images and suggests pre-reported values.

The guide helps users interpret the analyzer's output by explaining why certain particles were flagged and what they indicate. For example, if the SediVue Dx detects "many" calcium oxalate monohydrate crystals, the guide correlates this finding with ethylene glycol toxicity or primary hyperoxaluria. This synergy between automated counting and clinical context makes the IDEXX approach particularly powerful. Practices that adopt both the hardware and the guide benefit from more reproducible results and a reduced learning curve for new staff.

KEY ELEMENTS OF THE IDEXX URINE SEDIMENT GUIDE

The **Urine Sediment Guide Idexx** covers all major components that can appear in a routine urine sediment. Each category includes high-quality images, description of morphology, typical clinical associations, and instructions for reporting (e.g., per high-power field). Below are the principal categories.

Cells

THE ROLE OF IDEXX IN URINE SEDIMENT ANALYSIS

Red Blood Cells (RBCs): Small, pale, biconcave disks. Hematuria may result from trauma, infection, neoplasia, or bleeding disorders. The guide helps differentiate lysed or crenated RBCs from artifacts. IDEXX reports RBCs as "rare," "few," "moderate," or "many."

White Blood Cells (WBCs): Larger than RBCs with visible granular cytoplasm and segmented nuclei. Pyuria suggests inflammation from infection, sterile inflammation, or neoplasia. The guide emphasizes differentiating WBCs from small epithelial cells.

Epithelial Cells: Squamous (large, irregular, from distal urethra/vagina), transitional (round to polygonal, from bladder/ureters), and renal tubular (small, cuboidal—strongly indicative of tubular damage). The IDEXX guide provides side-by-side comparisons to avoid misclassification.

Casts

Casts are cylindrical structures formed in the renal tubules. Their presence localizes pathology to the kidney. The guide covers:

- **Hyaline casts:** Transparent, low refractive index—often seen with proteinuria or concentrated urine.
- **Granular casts:** Fine or coarse granules, indicating tubular cell degeneration.
- **Cellular casts:** RBC casts (glomerular disease), WBC casts

(pyelonephritis), epithelial cell casts (acute tubular necrosis).

Identifying casts manually is challenging; the **Urine Sediment Guide Idexx** uses clear microscopy images and explains how the SediVue Dx system quantifies them per low-power field.

Crystals

Crystalluria findings vary by species, diet, and urinary pH. The guide lists common crystals in dogs and cats:

- **Struvite** (magnesium ammonium phosphate): Coffin-lid or prismatic shapes; often associated with urinary tract infections and alkaline urine.
- **Calcium oxalate dihydrate**: Envelope-shaped; linked to hypercalciuria and oxalate urolithiasis.
- **Calcium oxalate monohydrate**: Dumbbell or ovoid forms—suggestive of ethylene glycol toxicity or hyperoxaluria.
- **Urate/Ammonium biurate**: Yellow-brown spheres with spikes; seen in Dalmatians, English Bulldogs, and portosystemic shunts.
- **Cystine**: Hexagonal flat crystals; indicate cystinuria.

The IDExx guide emphasizes that crystal presence does not always equate to disease; quantitative counts and concurrent findings (e.g., WBCs, bacteria) are considered.

Bacteria and Artifacts

Bacteria appear as small rods or cocci. The analyzer may flag a “bacteria present” category, but the guide reminds clinicians to correlate with urine culture results. Artifacts such as starch granules, lipid droplets, or pollen fragments can mimic crystals or cells. The guide highlights distinguishing features—for example, lipid droplets are highly refractile and float above the focal plane, while true cells stay in focus.

HOW TO USE THE URINE SEDIMENT GUIDE IDExx EFFECTIVELY

Integrating the guide into daily practice requires a structured approach. Here is a step-by-step workflow:

1. **Collect and handle the sample properly:** Use a sterile cystocentesis or free-catch sample. Process within 30 minutes or refrigerate and warm before analysis.
2. **Prepare the SediVue Dx cartridge:** Fill with well-mixed urine (0.2 mL) and load into the analyzer.
3. **Initiate automated sedimentation:** The instrument centrifuges, images, and classifies particles. Results appear in about 5 minutes.
4. **Review the digital images:** Compare the on-screen findings with the **Urine Sediment Guide Idexx**. Look for any elements the algorithm may have misidentified (e.g., large sperm tails mistaken for hyaline casts).
5. **Correlate with dipstick chemistry:** The guide provides

tables linking sediment findings to urine protein, blood, pH, and specific gravity. For instance, moderate hematuria with a negative dipstick for blood may indicate myoglobinuria.

6. **Document and report:** Use the standardized nomenclature from the guide to write clear reports for clinicians and medical records.

Regular training sessions using the guide's image library help maintain consistency among team members.

COMMON PATTERNS AND CLINICAL CORRELATIONS USING IDEXX

The **Urine Sediment Guide Idexx** is most valuable when used to interpret patterns. Below are three common scenarios:

- **Urinary Tract Infection (UTI):** Increased WBCs (pyuria), rod-shaped bacteria, and occasionally amorphous crystals. If ≥ 10 WBC/HPF and bacteria are seen, a culture is recommended. The guide helps rule out contamination (e.g., squamous epithelial cells indicating distal urethral origin).
- **Chronic Kidney Disease (CKD):** Often presents with isosthenuria, proteinuria, and granular or waxy casts. The IDEXX guide differentiates between degenerative casts and benign hyaline casts. Few RBCs may be present due to renal microbleeding.
- **Lower Urinary Tract Disease:** Hematuria and transitional epithelial cells predominate. Crystals (struvite) may be found. The guide assists in confirming crystal morphology

and distinguishing from iatrogenic air drying artifacts.

By using the IDEXX system's quantitative data alongside the guide's interpretive notes, clinicians can make more informed decisions about imaging, culture, or dietary changes.

ADVANTAGES OF IDEXX AUTOMATED SEDIMENT ANALYSIS OVER MANUAL MICROSCOPY

Manual urine sediment exam has been the gold standard for decades, but it suffers from inherent limitations. The **Urine Sediment Guide Idexx** in combination with the SediVue Dx offers several advantages:

- **Consistency:** Automated classification reduces inter-observer variability. The same sample analyzed by different technicians yields identical initial reports.
- **Time Efficiency:** The entire process from loading to result takes about 5 minutes, freeing staff for other tasks.
- **Digital Archiving:** Images can be stored, compared over time, and shared with specialists for telemedicine consultations.
- **Quantitative Precision:** Counting of elements per high-power field is standardized; manual counting often suffers from imprecise estimation.
- **Training Tool:** The guide serves as a built-in training resource. Staff can compare real-time microscope images with reference images to accelerate learning.

Although automated analysis may still incorrectly classify rare crystal morphologies or fragmented casts, the guide provides

corrective guidance, and the user can verify the algorithm's decisions.

INTEGRATING THE IDEXX SEDIMENT GUIDE INTO PRACTICE WORKFLOW

To maximize the benefits, practices should embed the **Urine Sediment Guide Idexx** into their standard operating procedures. Consider these tips:

- Place laminated copies of the guide near the S