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# BD Expands Testing Capabilities to Help Clinicians Improve Diagnostic Accuracy and Efficiency

The BD Vacutainer® Urine Complete Cup Kit preserves specimen quality, streamlines testing, and helps reduce repeat collections to support better patient care

FRANKLIN LAKES, N.J., Feb. 23, 2026 /PRNewswire/ -- BD (Becton, Dickinson and Company) (NYSE: BDX), a leading global medical technology company, today announced the launch of the BD Vacutainer® Urine Complete Cup Kit, a three-tube collection system that expands and supports broader testing capabilities from a single urine specimen.



The new kit is designed to preserve sample integrity and improve workflow efficiency, while reducing exposure risks for healthcare workers and minimizing the need for repeat patient collections. With an innovative third tube design, clinicians can perform greater testing without manually transferring urine or collecting a new sample, helping reduce contamination risks and supporting safer, more efficient patient care.

"Improving diagnostic accuracy starts long before a sample reaches the lab," said Bridget Bagnato, worldwide president of Specimen Management at BD. "This kit reflects the innovation we deliver to help clinicians determine effective treatment options through more accurate diagnosis and ultimately support better patient management."

Urine testing is a critical, non-invasive tool for diagnosing conditions such as pregnancy, urinary tract infections, metabolic disorders, and cancer, as well as for assessing kidney function. Contaminated or improperly collected specimens can lead to the wrong result, inappropriate treatment or delayed care. One recent study found that nearly 44 percent of patients with contaminated urine cultures received inappropriate antibiotic therapy, underscoring the clinical impact of preanalytical errors[i]. Closed-system solutions, including products in the BD Vacutainer® Urine Collection portfolio, help minimize contamination risk and improve overall efficiency across the urine specimen management continuum for accurate, timely results.

The BD Vacutainer® Urine Complete Cup Kit features:

- a sterile urine cup and lid with integrated transfer device
- a tube to support culture and sensitivity testing for detecting and identifying bacteria or fungi causing infection
- a tube to support urinalysis testing for general wellness and signs of disease
- a discard tube that contains no additive
- a castile wipe for patient prep prior to providing the sample

Available in the United States with both Hemogard™ and conventional stoppered tubes, the kit is compatible with a broad range of diagnostic equipment and can support automated workflows.

BD Vacutainer® Urine Complete Cup Kits are now available for order through local sales representatives. More information is available at [bd.com](http://bd.com)

### About BD

BD is one of the world's largest pure-play medical technology companies with a Purpose of *advancing the world of health*™ by driving innovation across medical essentials, connected care, biopharma systems and interventional. The company supports those on the frontlines of healthcare by developing transformative technologies, services and solutions that optimize clinical operations and improve care for patients. Operating across the globe, with more than 60,000 employees, BD delivers billions of products annually that have a positive impact on global healthcare. By working in close collaboration with customers, BD can help enhance outcomes, lower costs, increase clinical efficiency, improve safety and expand access to healthcare. For more information on BD, please visit [bd.com](http://bd.com) or connect with us on LinkedIn at [www.linkedin.com/company/bd1/](https://www.linkedin.com/company/bd1/), X [@BDandCo](https://twitter.com/BDandCo) or Instagram [@becton\\_dickinson](https://www.instagram.com/becton_dickinson).

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<sup>i</sup> Klausning BT, Tillman SD, Wright PW, Talbot TR. The influence of contaminated urine cultures in inpatient and emergency department settings. Am J Infect Control. 2016;44(10):1166-1167. doi:10.1016/j.ajic.2016.03.055.



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