B

Bacterial Vaginosis

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

Vaginal secretions from the lower 1/3 of the vaginal wall collected using a sterile cotton tipped applicator

Instructions

- • Use a sterile cotton tipped applicator to collect vaginal secretions from the lower 1/3 of the vaginal wall. Do not touch the cervix. **DO NOT USE A STANDARD CULTURE SWAB.**
- Place the sample in a properly labeled, clean, dry, sterile glass or plastic tube and immediately transport to the laboratory.
- Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name

Bacterial Vaginosis Screen

Transport Temperature

- Immediately upon collection (transport within 10 – 15 minutes)
- If delayed, store the specimen at room temperature (15 – 30 degrees celsius) for up to 48 hours, or refrigerated (2 – 8 degrees celsius) for up to 7 days.

Stability

- Room Temperature (15 – 30 degrees celsius): 48 hours
- Refrigerated (2 – 8 degrees celsius): 7 days
- DO NOT FREEZE

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Specimens containing preservatives or fixatives (i.e. Formalin).
- Specimens stored at room temperature >48 hours
- Specimens stored refrigerated > 7 days
- Specimens submitted using transport swabs (standard culture swab)

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 90 minutes of specimen processing.

Normal Value

Negative

Test Results

Positive	An elevated sialidase enzyme level has been detected. This enzyme may be produced by organisms associated with bacterial vaginosis (i.e. Gardnerella vaginosis, Bacteroides species, Prevotella species, Mobiluncus species). Please correlate test results with other clinical findings.
Negative	A normal level of sialidase enzyme activity has been detected.
Invalid	Unable to rule out the presence of the sialidase enzyme. Please correlate results with other available clinical information and patient signs and symptoms.

Limitations

- This test is intended for vaginal fluid only. Do not use samples from the cervix.
- Patients may have mixed infections. This test shows that the sialidase enzyme is active in the sample. It does not show if other organisms (i.e. yeasts, parasites) are present in the sample.
- The test procedure must be followed or incorrect test results may be obtained.
- Insufficient sample volume or samples collected from patients undergoing antimicrobial therapy may cause false negative results.
- Test results should be considered in conjunction with other clinical and patient information.
- Sialidase levels below the detection limit of the test may yield false negative results.

Interfering Substances

Samples contaminated with vaginal creams or ointments, douche, spermicide, vaginal lubricants, or feminine sprays.

Alternate Name(s)

BV, Sialidase

C

Chlamydia trachomatis/Neisseria gonorrhoeae Amplified DNA Probe

Message

A negative test result does not exclude the possibility of infection because test results may be affected by improper specimen collection, technical error, specimen mix-up, concurrent antibiotic therapy, or the number of organisms in the specimen which may be below the sensitivity of the test. All test results should be interpreted in conjunction with other available laboratory and clinical data.

Preferred Specimen

Females: Endocervical specimen
Males: Urine* (1st morning void preferred)
*Please note that we cannot perform this test on male, urethral swabs.

Specimen Container

Cepheid Xpert® CT/NG Vaginal/Endocervical Specimen Collection Kit
Sterile Urine Cup or Tube

Minimum Volume

1 Specimen Collection Kit – Female
1 milliliter (mL) Urine

Instructions
Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name
Chlamydia/GC DNA Probe

Transport Temperature

- Endocervical Specimen: Store the specimen at 2°C – 30°celsius before testing
- Male Urine: Store the specimen at 2° – 8°celsius before testing

Stability

- Endocervical Specimen: 2 – 30 degrees celsius for a maximum of 60 days
- Male Urine: 2° – 8°celsius before testing for a maximum of 8 days

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Specimens collected using swabs other than the manufacturer's collection kit
- Male, urethral swabs.

Test Performed
Mon-Wed-Fri; Day Shift only

Report Available
Within 24 hours of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of Chlamydia trachomatis and/or Neisseria gonorrhoeae

Limitations

- This assay will not be performed for patients less than 14 years of age.
- This assay has not been evaluated for patient samples from patients with a history of hysterectomy.
- The current laboratory test method should not be used for the evaluation of suspected sexual abuse or for other medico-legal indications. Additional testing is recommended in any circumstance when false positive or false negative results could lead to adverse medical, social, or psychological consequences.
- This test method cannot be used to assess therapeutic success or failure since nucleic acids from Chlamydia trachomatis and Neisseria gonorrhoeae may persist following antimicrobial therapy.
- The predictive value of the assay depends on the prevalence of the disease in any particular population. If a negative result is obtained with this assay and Chlamydia trachomatis or Neisseria gonorrhoeae infection is highly suspected, repeat testing using an alternative method is recommended.

Interfering Substances
The following substances may cause indeterminate or false negative results:

Endocervical Specimen:

- Blood > 5% (v/v)
- Mucin > 0.8% (w/v)

Male Urine:

- Blood > 0.3% (v/v)
- Mucin > 0.2% (w/v)
- Bilirubin > 0.2 mg/mL

Alternate Names

Chlamydia/GC
CT/NG

Clostridium Difficile Disease Assay

This test is no longer available. Please see Clostridium difficile Toxin PCR.

Clostridium difficile Toxin PCR

Message

This test does not define the presence of Clostridium difficile disease. This test is not performed on children under the age of 1 year because they have been shown to have relatively high colonization rates with this organism. Test of cure is not recommended because asymptomatic patients may remain positive for weeks to months after a symptomatic episode. Repeat testing will not be performed within 21 days of a positive test.

Specimen Container

Leak-proof screw cap container (XST)

Preferred Specimen

Diarrheal stool

Minimum Volume

1 mL liquid or 1 gram (pea sized) semi-solid human stool.

Instructions

Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name

Clostridium Difficile Panel

Transport Temperature

Refrigerate the specimen (2-8 degrees celsius) if testing will be performed within 5 days.

Stability

Room temperature (20-25 degrees celsius): 24 hours; Refrigerated (2 – 8 degrees celsius): 5 days

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or Leaking containers
- Specimens containing preservatives or fixatives (i.e. Formalin, PVA, etc.)
- Formed stool (Non-diarrheal)
- Specimens collected on swabs

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 24 hours of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of Clostridium difficile toxins

Reflex Tests

Specimens with a positive toxin PCR result will be reflexed to Fecal Lactoferrin testing for the detection of inflammatory diarrheal disease.

Limitations

This test does not define the presence of Clostridium difficile disease. Test of cure is not recommended because asymptomatic patients may remain positive weeks to months after a symptomatic episode. Repeat testing will not be performed within 21 days of a positive test result.

Interfering Substances

Vagisil cream and zinc oxide paste (Listing may not be all inclusive)

Alternative Name(s)

C. DIFF PCR

Cryptococcal AG CSF

Specimen Container

Lumbar puncture tube; Sterile screw cap tube

Preferred Specimen

Cerebrospinal fluid: 3 – 5 mL.

Minimum Volume

1 mL cerebospinal fluid.

Instructions

Inform the laboratory of the patient's recent antimicrobial therapy history, and any prior patient history of cryptococcal infection or treatment.

PowerChart Name
Cryptococcal Antigen CSF

Transport Temperature
Immediately upon collection; if delayed, refrigerate the specimen (2 – 8 degrees celsius).

Stability
Refrigerated (2 – 8 degrees celsius): 1 week; Frozen (- 20 degrees celsius): > 1 week

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or Leaking containers
- Specimens collected on a swab

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available
Within 24 hours of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of cryptococcal antigens

Reflex Tests
If sufficient sample volume is available, quantitative titers will be performed for positive qualitative specimens.

Limitations
Some immunocompromised patients may retain cryptococcal polysaccharide antigens for long periods of time. Positive test may not be indicative of active infection.

Cryptococcal AG Serum

Specimen Container
Sterile screw capped tube; Gold top Vacutainer Tube

Preferred Specimen
2 mL of clotted blood (Minimum Volume: 1 mL)

Instructions

- Immediately transport to the laboratory upon collection. If transportation to the laboratory will be delayed, centrifuge the vacutainer tube to separate the serum from whole blood, and transfer the serum to a sterile screw capped tube for storage.
- Inform the laboratory of the patient's recent antimicrobial therapy history.
- Inform the laboratory of any prior patient history of cryptococcal infection or treatment

PowerChart Name

Cryptococcal Antigen

Transport Temperature

Immediately upon collection; if delayed, refrigerate the specimen (2 – 8 degrees celsius).

Stability

Refrigerated (2 – 8 degrees celsius): 1 week; Frozen (- 20 degrees celsius): > 1 week

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or Leaking containers

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 24 hours of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of cryptococcal antigens

Reflex Tests

If sufficient sample volume is available, quantitative titers will be performed for positive qualitative specimens.

Limitations

Some immunocompromised patients may retain cryptococcal polysaccharide antigens for long periods of time. Positive test may not be indicative of active infection.

Culture AFB Blood

Message

Test performed by a commercial reference laboratory.
NOTE: Positive cultures reflex to organism identification, and antimicrobial susceptibility tests (when appropriate).

Specimen Container

Bactec Myco/F Lytic Bottle (MYC)

Preferred Specimen
Whole Blood or Bone Marrow

Minimum Volume
3 – 5 mL

Instructions

- Inform the laboratory of any prior patient history of mycobacterial infection or treatment
- Notify the laboratory if mycobacteria other than tuberculosis (MOTT or NTM) are suspected.

PowerChart Name
Culture AFB Blood

Transport Temperature
Transport immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius)

Stability
Room Temperature: 48 hours

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens
- Compromised specimen container integrity (i.e. cracked or broken bottle)

Test Performed
Sun – Sat; Test performed by commercial reference laboratory

Report Available

Negative culture	8 weeks
Positive culture	variable

Reference Range

Normal Value	No acid fast bacilli isolated.
Critical Value	Isolation or detection of acid fast bacilli

Limitations
Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Alternative Name(s)
AFB Blood Culture; Acid Fast Bacilli Blood Culture; TB Blood Culture

Culture AFB w/ Smear

Components
AFB Smear; AFB Culture

Specimen Container
Sterile leak-proof screw cap container

Preferred Specimen
1st morning specimen before eating, drinking or performing oral hygiene.

Minimum Volume

Sputum or other respiratory specimens, gastric aspirates, CSF, sterile body fluids	5-10 mL
Urine	40 mL
Tissue	3-5 punch biopsies or a 1 cm^2 biopsy.

Instructions

- Inform the laboratory of any prior patient history of mycobacterial infection or treatment.
- Optimal Urine and Sputum Specimens: Collect specimen every 8 hours with at least one morning specimen.
- Gastric Aspirates – Contact the laboratory prior to collection. Gastric aspirates must be buffered within 2 hours of collection.
- Notify the laboratory if mycobacteria other than tuberculosis (MOTT or NTM) are suspected.

PowerChart Name
Culture AFB

Transport Temperature
Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability
Room Temperature – Not Established; Refrigerated – 2 days

Rejection Criteria

- Inadequate specimen quantity
- Frozen specimens
- Specimens collected with swabs (Exception: Calcium alginate swabs for laryngeal specimens only.)
- Specimens unsafe to handle (sharps)
- Non-sterile or leaking containers

Test Performed

Monday-Friday; Day Shift Only

Report Available

Smear	24 hours
Negative Culture	8 weeks
Positive Culture	Variable

Reference Range

Normal Value	Smear = No AFB Seen Culture = No AFB isolated.
Critical Value	Isolation or detection of acid fast bacilli.

Limitations

Positive cultures reflex to organism identification, and antimicrobial susceptibility testing performed by a commercial reference laboratory. Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

1. Organism identification
2. Antimicrobial susceptibility testing

Alternative Name(s)

TB Culture & Smear; Acid Fast Bacilli Culture and Smear; AFB Culture and Smear

Culture Autopsy

Message

This test is orderable by the pathologist only.

Specimen Container

Sterile leak-proof screw cap container

Preferred Specimen

Source and test specific; contact the laboratory for assistance if needed

Instructions

Inform the laboratory of any suspected pathogens.

PowerChart Name

Culture Autopsy

Transport Temperature

Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius) unless otherwise specifiied by source specific culture instructions.

Stability

See source specific culture instructions.

Rejection Criteria

- Inadequate specimen quantity
- Frozen specimens
- Specimens collected with swabs
- Specimens unsafe to handle (sharps)
- Non-sterile or leaking containers

Test Performed

Upon pathologist request only; Day and Evening Shift.

Report Available

See source specific culture instructions.

Reference Range

See source specific culture instructions.

Limitations

See source specific culture instructions: delays in specimen collection post mortem may yield false positive (overgrowth of contaminating flora) or false negative (death of fastidious organisms) results.
Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Culture Blood

Message

The quality of the test results is dependent on collection method, the timing of collection , and the volume of the specimen.

Components

Aerobic Blood Culture, Anaerobic Blood Culture

Specimen Container

- Blood Culture Bottle (XBC)
- Standard Aerobic (8- 10 mL)
- Standard Anaerobic (5 -7 mL)
- Plus Aerobic (8-10 mL)
- PEDS Plus (1 – 5 mL)

Preferred Specimen

Whole Blood or Bone Marrow

Minimum Volume

Standard Aerobic	(3 mL)
Standard Anaerobic	(3 mL)
Plus Aerobic	(3 mL)
PEDS Plus	(0.5 mL)

Instructions

- Collect the specimen prior to the administration of antibiotic therapy if possible.
- Notify the laboratory if the patient is suspected of having infection with Bartonella species, Brucella species, Francisella species or any unusual organism.
- DO NOT COVER THE BOTTLE BARCODE WITH THE PATIENT LABEL.
- Inform the laboratory of the patient's recent antimicrobial therapy history.

Instructions for Adult & Pediatric Patients > 80 kg

- Collect 1 set of blood culture bottles per venipuncture site.
- Bacteria = 1 aerobic + 1 anaerobic bottle
- Yeast = 2 aerobic bottles.

Instructions for Neonates & Pediatric Patients < 80 kg

- 1 bottle per venipuncture site
- Bacteria or Yeasts = PEDS PLus bottle
- Add a Standard Anaerobic bottle if anaerobes are suspected.

PowerChart Name

Culture Blood

Transport Temperature

Transport immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).

Stability

Room temperature: 48 hours for non-fastidious pathogens only. NOTE: Delays in the proper incubation of the specimen may significantly delay or prevent the detection/isolation of significant pathogens.

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens
- compromised specimen container integrity (i.e. cracked or broken bottle);
- > 6 sets per 24 hour period

Test Performed

Sun – Sat

Report Available

Within 5 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 5 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	Negative (No growth)
Critical Value	Any detection or isolation of aerobic or anaerobic bacteria, or yeasts.

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.
Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

Routine Blood Culture

Culture Campylobacter

Message

This test is a component of the Gastrointestinal (Stool) Culture

Specimen Container

Sterile leak-proof screw cap container OR Sterile transport swab (X0C)

Preferred Specimen

Fresh specimen or in enteric transport medium

Minimum Volume

1 – 2 grams semi-solid stool or 1 – 2 mL liquid stool

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy.
- Inform the laboratory of the patient's recent travel history or ingestion of tainted food or water sources.
- Submit for testing up to 3 separate specimens collected on different days because organisms may be shed intermittently.

PowerChart Name

Culture Campylobacter Screen

Transport Temperature
Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability
Enteric Transport Medium – Room Temperature: 72 hours; Fresh stool – Refrigerated: 8 hours

Rejection Criteria

- Specimen collected and submitted for testing > 3 days after the patient's hospital admission
- Frozen specimens
- Unlabeled or mislabeled specimens
- Leaking specimens
- Specimens contaminated with urine, soap or disinfectants
- Specimens containing fixatives or additives
- Formed stool.

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen.

Reference Range

Normal Value	No Campylobacter isolated
Critical Value	Any detection or isolation of pathogenic Campylobacter species

Limitations
Overgrowth of contaminating flora or prior antimicrobial therapy may prevent isolation of pathogens.Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests
Positive cultures reflex to organism identification and culture confirmation by the Maryland State Department of Health and Mental Hygiene Laboratory Administration.

Alternative Name(s)
Campylobacter Culture

Culture Catheter Tip

Message
The laboratory uses a semiquantitative culture method.

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

Internal end of an intravenous catheter

Minimum Volume

1 inch length of the internal end of an intravenous catheter

Instructions

1. Collect one set of blood cultures through the catheter just prior to the removal of the catheter for culture submission.
2. Collect one companion set of peripheral blood cultures within 30 minutes after catheter removal.
3. Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name

Culture Catheter Tip

Transport Temperature

Immediately upon collection; if delayed, refrigerate (2 – 8 degrees celsius)
DO NOT DELAY OR REFRIGERATE BLOOD CULTURES.

Stability

Room Temperature: 72 hours; Refrigerated: 8 hours

Rejection Criteria

Frozen specimens, Unlabeled or mislabeled specimens.

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation

Reference Range

Normal Value	No growth or < 15 colonies isolated
Medical Alert:	> 15 colonies isolated;

Limitations

The collection of companion blood cultures is required to evaluate and diagnose catheter related sepsis. Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests
Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)
Catheter Tip Culture, Cath Tip Culture

Culture CSF with Smear

Components
Gram Stain and Aerobic Culture

Specimen Container
Sterile lumbar puncture tube (XCF) Tube #2 or higher; Sterile leak-proof screw cap tube or container

Preferred Specimen
1 – 3 mL of Cerebrospinal Fluid

Minimum Volume
1 mL

Instructions
Inform the laboratory:

- if the specimen is collected from an Ommaya reservoir or ventricular shunt
- of the patient's recent antimicrobial therapy history

PowerChart Name
Culture CSF

Transport Temperature
Transport immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).

Stability
Room Temperature: 24 hours; DO NOT REFRIGERATE THE SPECIMEN.

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Swabs.

Test Performed
Sun – Sat

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation

Reference Range

Normal Value	No growth
Critical Value	Any detection or isolation of aerobic or anaerobic bacteria, or yeasts

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

Cerebrospinal Fluid Culture

Culture E. Coli 0157/H7

Message

This test and Shiga Toxin Assay are components of the Gastrointestinal (Stool) Culture.

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

Fresh specimen OR specimen in enteric transport medium

Minimum Volume

1 – 2 grams semi-solid stool OR 1 – 2 mL liquid stool

Instructions

1. Inform the laboratory of the patient's:
    - recent antimicrobial therapy
    - recent travel history
    - ingestion of tainted food or water sources
2. Submit for testing up to 3 separate specimens collected on different days because organisms may be shed intermittently.

PowerChart Name

Culture Escherichia coli 0157:H7

Transport Temperature
Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability
Enteric Transport Medium – Room Temperature: 72 hours; Fresh stool – Refrigerated: 8 hours

Rejection Criteria

- Specimen collected and submitted for testing > 3 days after the patient's hospital admission
- Frozen specimens
- Unlabeled or mislabeled specimens
- Leaking specimens
- Specimens contaminated with urine, soap or disinfectants
- Specimens containing fixatives or additives
- Formed stool

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No Escherichia coli O157:H7 isolated
Critical Value	Any detection or isolation of Escherichia coli O157:H7

Limitations
Antimicrobial susceptibility testing will not be performed due to the risk of Hemolytic Uremic Syndrome associated with their use. Overgrowth of contaminating flora or prior antimicrobial therapy may prevent isolation of pathogens. Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests
Positive cultures reflex to organism identification and culture confirmation by the Maryland State Department of Health and Mental Hygiene Laboratory Administration.

Culture Eye

Specimen Container
Sterile leak-proof screw cap container (SCM)

Preferred Specimen

Fluid, Aspirate, or moistened sterile swab.

Eligible Specimen Sources

Conjunctiva, Cornea, Vitreous Fluids, Eye Lid Margin, Intraocular Fluids, Lacrimal Fluid/Drainage

Minimum Volume

1 mL Fluid/Aspriate or 2 moistened sterile swabs

Instructions

1. Specimen transport should occur within 1 hour of collection.
2. Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name

Culture Eye (SS)

Transport Temperature

Transport immediately upon collection; if delayed, room temperature (20 – 25 degrees celsius).

Stability

Room Temperature: 24 hours; DO NOT REFRIGERATE THE SPECIMEN.

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens.

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 10 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No growth
Critical Value	Any detection or isolation of aerobic or anaerobic bacteria, or fungi

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Names
Ocular Culture

Culture Fungal

Message
The quality of the test results is dependent on collection method, the timing of collection , and the volume of the specimen. Prolonged incubation > 30 days may be required.

Components
Fungal Smear and Fungal Culture

Specimen Container
Sterile leak-proof screw cap container (SCM)

Preferred Specimen
See requirements for source specific routine bacterial culture

Minimum Volume
See requirements for source specific routine bacterial culture. EXCEPTIONS:

- CSF and Sterile body fluids: 3 – 5 mL
- Urine = 5 – 20mL

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy history (i.e. antifungal therapy).
- Avoid the use of cotton swabs for the collection of specimens because cotton fibers may interfere with some fungal smear methods.

PowerChart Name
Culture Fungus (w Smear)

Transport Temperature
See requirements for source specific routine bacterial culture.

Stability
See requirements for source specific routine bacterial culture.

Rejection Criteria
See requirements for source specific routine bacterial culture.

Test Performed

Sun – Sat

Report Available

Within 30 days of specimen processing	Preliminary Negative after 7 days incubation
Final Negative	After 30 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal value	No fungus isolated.
Critical Value	Any isolation of thermally dimorphic fungi or Coccidioides immitis

*See requirements for source specific routine bacterial culture.

Limitations

Suboptimal specimen volumes may prevent or delay the detection/isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

Yeast Culture, Fungus Culture

Culture Fungal (Skin, Hair, Nails)

Message

Culture only.

Specimen Container

Sterile leak-proof screw cap container (SCM); Sterile petri dish, microscope slides or envelope

Preferred Specimen

Hair, skin scrapings, or nail clippings

Minimum Volume

2 – 3 flakes of skin, 2 – 3 strands of hair, or 2 – 3 nail clippings

Instructions

Inform the laboratory of the patient's:

- prior use of topical agents (i.e. antifungal cream)
- recent antimicrobial therapy

PowerChart Name
Culture Fungus Hair, Nail, Skin w Smear

Transport Temperature
Immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).

Stability
Room temperature: 48 hours.

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers

Test Performed
Sun – Sat

Report Available

Within 30 days of specimen processing	Preliminary Negative within 14 days incubation
Final Negative	After 30 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal value	No fungus isolated.

Limitations
Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests
Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)
Fungus Culture

Culture Gastrointestinal

Message

- This test provides a culture screen for Salmonella, Shigella, Campylobacter and E. coli 0157:H7, and a serological screen for presence of Shiga Toxin.
- Test stool for Clostridium difficile toxin for all patients over 6 months of age with clinically significant diarrhea and a history of antibiotic exposure.

- Consider C. difficile testing as an alternative to routine microbiologic studies for inpatients who have test requests for routine enteric pathogens.

Components

Includes Culture E. Coli O157/H7, Culture Campylobacter

Specimen Container

- Sterile leak-proof screw cap container (SCM)
- Sterile transport swab (X0C) OR
- Enteric transport medium (i.e. Cary Blair)

Preferred Specimen

- Semi-solid stool
- liquid stool – fresh or in enteric transport medium
- Aspirate
- Moistened transport swab

Eligible Specimen Sources

Stool/Feces, Gastric Contents, Rectal Swab/Bosy, Duodenal Contents, Colostomy Contents, Ileostomy Contents

Minimum Volume

Semi-solid stool	1 – 2 grams
Liquid stool	1 – 2 mL
Biopsy tissue	1 cm^2 in size
Transport swab	1 moistened swab

Instructions

- Inform the laboratory of the patient's:
  - recent antimicrobial therapy
  - travel history
  - ingestion of tainted food or water sources
- Submit for testing up to 2 separate specimens collected on different days because organisms may be shed intermittently.

PowerChart Name

Culture Stool

Transport Temperature

Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability

Enteric Transport Medium – Room Temperature: 72 hours; Fresh stool – Refrigerated: 8 hours

Rejection Criteria

- Specimen collected and submitted for testing > 3 days after the patient's hospital admission
- Frozen specimens
- Unlabeled or mislabeled specimens
- Leaking specimens
- Specimens contaminated with urine, soap or disinfectants
- Specimens containing fixatives or additives
- Formed stool specimens other than for carriage investigations

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No Salmonella, Shigella, Campylobacter or Escherichia coli 0157:H7 isolated. No Shiga Toxins detected.
Critical Value	Any detection or isolation of Salmonella species, Shigella species, Campylobacter species, Escherichia coi 0157.H7 or detection of Shiga Toxins

Limitations

Overgrowth of contaminating flora, prior antimicrobial therapy or suboptimal specimen volumes may prevent isolation or detection of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and culture confirmation by the Maryland State Department of Health and Mental Hygiene Laboratory Administration.

Culture Genital

Message

This test includes culture for Neisseria Gonorrhoeae.

Specimen Container

Sterile leak-proof screw cap container (SCM) or Sterile transport swab

Preferred Specimen

Aspirate, Fluid, Tissue or sterile transport swab;

Alternate Specimens

Amniotic Fluid, Cul de sac (Culdocentesis), Endometrium, Intrauterine Device (IUD), Products of Conception, Urethra, Bartholin Glands, Cervix, Inguinal Lymph Nodes, Labia, Rectum, Vagina/Vaginal Cuff

Minimum Volume

Fluid or Aspirate	1 – 5 mL
Sterile Transport Swabs	2 swabs
Tissue	3 – 5 punch biopsies or a 1 cm^2 biopsy

Instructions

- Anaerobe culture is included for properly collected specimens when indicated by laboratory guidelines.
- Inform the laboratory:
    - of the patient's recent antimicrobial therapy history
    - if the patient is pregnant or has a post partum status.

PowerChart Name

Culture Genital

Transport Temperature

Transport immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).

Stability

Room Temperature: 24 hours; DO NOT REFRIGERATE THE SPECIMEN.

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Dry swabs

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No growth or Normal Flora for Site
Critical Value	All patients – Neisseria gonorrhoeae, Streptococcus pyogenes, Haemophilus ducreyi

	Pregnant or post partum patients – Streptococcus agalactiae, Listeria monocytogenes

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Culture Gonorrhoeae

Specimen Container

Sterile leak-proof screw cap container (SCM) or Sterile transport swab

Preferred Specimen

Aspirate, Fluid, Tissue or sterile transport swab

Alternate Specimens

Amniotic Fluid, Cul de sac (Culdocentesis), Endometrium, Intrauterine Device (IUD), Products of Conception, Urethra, Bartholin Glands, Cervix, Inguinal Lymph Nodes, Labia, Rectum, Vagina/Vaginal Cuff

Minimum Volume

Fluid or Aspirate	1 – 5 mL
Sterile Transport Swabs	2 swabs
Tissue	3 – 5 punch biopsies or a 1 cm^2 biopsy

Instructions

Inform the laboratory:

- of the patient's recent antimicrobial therapy history
- if the patient is pregnant or has a post partum status.

PowerChart Name

Culture GC

Transport Temperature

Transport immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).

Stability

Room Temperature: 24 hours; DO NOT REFRIGERATE THE SPECIMEN.

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Dry swabs

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	Culture negative for Neisseria gonorrhoeae.
Critical Value	Any isolation of Neisseria gonorrhoeae.

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification only. Some testing may be performed by a commercial reference laboratory.

Culture Group A Strep

Components

Group A Streptococcus Culture, GAS Culture, *Streptococcus pyogenes* Culture

Specimen Container

Sterile transport swab (X0C)

Preferred Specimen

Aspirate, Fluid, Tissue or sterile transport swab;

Alternate Specimen

Throat, Genital sources

Minimum Volume

Fluid or Aspirate	1 – 5 mL
Sterile Transport Swabs	2 swabs

Tissue	3 – 5 punch biopsies or a 1 cm^2 biopsy

Instructions

Inform the laboratory

- of the patient's recent antimicrobial therapy history
- if the patient is allergic to penicillin.

PowerChart Name

Culture Strep A Screen

Transport Temperature

Transport immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius) or refrigerate (2 – 8 degrees celsius).

Stability

Room Temperature or Refrigerated: 72 hours.

Rejection Criteria

- Frozen specimens
- Unlabeled or mislabeled specimens
- Expired transport medium
- Non-sterile or leaking containers
- Dry swabs

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 2 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 2 days incubation

Reference Range

Normal Value	Culture negative for Group A Streptoccocus.
Critical Value	Any isolation of beta hemolytic Group A Streptococcus (Streptococcus pyogenes).

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens. Antimicrobial susceptibility testing will be performed only when the patient is allergic to penicillin or has failed penicillin therapy.

Reflex Tests

Positive cultures reflex to organism identification only. Some testing may be performed by a commercial reference laboratory.

Culture Lower Respiratory with Smear

Message

The isolation of Legionella species is performed by a commercial reference laboratory. Contact the Sendout department for specimen collection guidelines. Send Out Phone #: 301-754-7299.

Components

Gram Stain and Aerobic Culture (Lung Aspirate – Anaerobe culture is included for properly collected specimens when indicated by laboratory guidelines or suspected pathogen).

Specimen Container

Sterile wide-mouth, leak-proof screw cap container or sterile leak-proof screw cap tube (SCM)

Preferred Specimen

First early morning sputum, or other lower respiratory specimens

Alternate Specimen

Bronchial biopsy, Bronchial Brushing, Bronchoalbeolar Lavage, Bronchial Washing, Expectorated Sputum, Endotracheal Suction, Induced or Nebulized Sputum, Lung Aspirate, Lung Biopsy, Transtracheal Aspirare

Minimum Volume

Sputum or other respiratory specimens	5-10 mL
Tissue	3 – 5 punch biopsies or a 1 cm^2 biopsy

Instructions

Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name

Culture Respiratory Lower (SS)

Transport Temperature

Immediately upon collection (for specimen processing with 2 hours of collection); if delayed, refrigerate the specimen (2 – 8 degrees celsius).

Stability

Room temperature: 2 hours; Refrigerated: 48 hours.

Rejection Criteria

- Frozen specimens
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers

- Specimens containing fixatives or additives
- Specimens collected with swabs
- Sputum and Endotracheal Suction specimens: The gram stain will be used to assess specimen quality and acceptability for the performance of culture. Poor – borderline quality specimens will not be cultured.

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 2 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 2 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	Normal flora for Site.
Critical Value	None specific to culture type; see current laboratory critical values listing.

Limitations

Overgrowth of contaminating flora, prior antibiotic therapy, or suboptimal specimen volumes may prevent or delay the detection/isolation of pathogens; Some pathogens require special specimen collection and handling, specimen processing or testing by commercial reference laboratories. Failure to inform the laboratory of the suspected pathogen may delay or prevent detection of certain organisms (i.e. Legionella species or Bordetella species).

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Culture MRSA

Specimen Container

Sterile transport swab (X0C)

Preferred Specimen

Sterile transport swab

Alternate Specimen

Nose/Nares

Minimum Volume

2 sterile transport swabs

Instructions

Inform the laboratory of the patient's recent antimicrobial therapy history and any prior MRSA carriage status, if known.

PowerChart Name
Culture MRSA (SS/BIA)

Transport Temperature
Immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).

Stability
Room temperature: 48 hours; Refrigerated: 24 hours.

Rejection Criteria

- Frozen specimens
- Expired transport medium
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Dry swabs.

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available

Within 2 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 2 days incubation

Reference Range

Normal Value	Culture negative
Critical Value	Any isolation of Methicillin Resistant Staphylococcus aureus (MRSA)

Limitations
Overgrowth of contaminting flora may prevent the isolation/detection of the requested pathogen; Prior antibiotic therapy or suboptimal specimen sampling may prevent or delay the detection/isolation of Methicillin Resistant Staphylococcus aureus (MRSA).

Reflex Tests
Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Culture Prenatal Group B

Message
Culture should be performed between 35-37 weeks gestation.

Components

Group B Streptococcus Culture, GBS Culture, *Streptococcus aglactiae* Culture

Specimen Container

Sterile transport swab (X0C)

Preferred Specimen

Sterile transport swab submitted in LIM Broth (obtain the broth from the laboratory prior to specimen collection).
NOTE: Collect the specimen using one continuous swabbing from the vaginal introitus to the anorectum

Minimum Volume

2 sterile transport swabs

Instructions

Inform the laboratory of the patient's recent antimicrobial therapy history and if the patient is allergic to penicillin.

PowerChart Name

Culture Strep B Screen

Transport Temperature

Immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius) or refrigerate (2 – 8 degrees celsius).

Stability

Room Temperature or Refrigerated: 48 hours.

Rejection Criteria

- Frozen specimens
- Unlabeled or mislabeled specimens
- Expired swab transport medium
- Expired broth medium
- Non-sterile or leaking containers
- Dry swabs.

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation

Reference Range

Normal Value	Culture negative for Group B Strep.

Critical Value	Any isolation of Group B Streptococcus (Streptococcus agalactiae)

Limitations

Transport swabs submitted in the original culturette transport instead of LIM broth will be accepted. However, the overgrowth of contaminating flora, prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/isolation of low numbers of Streptococcus agalactiae; Antimicrobial susceptiility testing will be performed only when the patient is allergic to penicillin or has failed penicillin therapy; Failure to sample from he vaginal intoritus to the anorectum may prevent of delay the detection/isolation of Streptococcus agalactiae.

Reflex Tests

Organism identification only. Antimicrobial susceptibility test will be performed for penicillin allergic patients only.

Culture Sterile Body Fluid with Smear

Components

Gram Stain; Aerobic and Anaerobic Culture

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

> 10 mL of fluid.

Eligible Specimen Sources

Amniotic fluid, Bile, Bone Marrow, Breast Milk, Dialysate Fluid, Pericardial Fluid, Peritoneal (Ascites) Fluid, Pleural Fluid, Synovial (Joint) Fluid, Vitreous Fluid/Vitrectomy Washings

Minimum Volume

Amniotic, Bile, Dialsate, Pericardia, Peritoneal, Pleural, Synovial	10 cc
Bone Marrow, Vitreous, Vitrectomy Washings	1 cc
Breast Milk	3 cc

PowerChart Name

Culture Body Fluid + Direct Smear (SS)

Transport Temperature

Transport immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).

Stability

Room Temperature: 24 hours; DO NOT REFRIGERATE THE SPECIMEN.

Rejection Criteria

- Refrigerated or frozen specimens
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Swabs

Test Performed

Sun – Sat;

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No growth
Critical Value	Any detection or isolation of aerobic or anaerobic bacteria, or fungi

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

Sterile Body Fluid Culture

Culture Upper Respiratory

Message

- The isolation of the following pathogens is performed by a commercial reference laboratory: Bordetella pertussis, Corynebacterium diphtheriae.
- Contact the Sendout department for specimen collection guidelines at 301-754-7299.
- Order Culture MRSA for detection of nasal carriage of methicillin resistant staphylococcus aureus.

Specimen Container

Sterile leak-proof screw cap container (SCM) OR Sterile transport swab (X0C)

Preferred Specimen

Aspirate, Washing, Fluid, or sterile transport swab;

Alternate Specimen

Throat/Pharynx, Nose/Nares/Nasal, Nasopharynx, Epiglottis, External Ear, Tympanocentesis Fluid (Inner Ear)

Minimum Volume
1 – 3 mL Fluid, Aspirate or Washing OR 2 sterile transport swabs

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy history
- Notify the laboratory if the patient is suspected of having infection with *Bordetella pertussis*, *Corynebacterium diphtheriae*, or any other unusual organism.

PowerChart Name
Culture Respiratory Upper or Ear

Transport Temperature

Epiglottis, Nasopharynx, Tympanocentesis (Inner Ear)	Immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius).
Throat/Pharynx, Nose/Nares/Nasal, External Ear	Immediately upon collection; if delayed, refrigerate the specimen (2 – 8 degrees celsius)

Stability

Epiglottis, Nasopharynx, Tympanocentesis (Inner Ear)	Room Temperature: 48 hours.
Throat/Pharynx, Nose/Nares/Nasal, External Ear	Room Temperature or Refrigerated: 72 hours

Rejection Criteria

- Frozen specimens
- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Specimens containing fixatives or additives

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available

Within 2 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 2 days incubation

Reference Range

Normal Value	No Growth or Normal Flora for Site.
Critical Value	None specific to culture type; see current laboratory critical values listing.

Limitations
Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests
Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Culture Urine, Quantitative

Message
Gram stain is not routinely performed for this specimen. If required, order Gram Stain Direct.

Specimen Container
Sterile leak-proof screw cap container (SCM)

Preferred Specimen
3 – 5 mL of urine in a boric acid preservative tube (NOTE: 3 – 5 mL of fresh, unpreserved urine will be accepted if received within 1 hour of collection, preferably transported on ice or with cold packs)

Alternate Specimen
Bladder Aspirate/Wash, Cytoscopy, Midstream Clean Catch, Indwelling Catheter, Straight In & Out Catheter, Ileal Conduit, Kidney, Pediatric Clean Catch (Pediatric Bag), Suprpubic Aspirate, Post Prostatic Massage

Minimum Volume
1 mL of urine

Instructions
Inform the laboratory of the patient's recent antimicrobial therapy history and any prior kidney transplant history for the patient.

PowerChart Name
Culture Urine (SS)

Transport Temperature
Immediately upon collection (for specimen processing with 2 hours of collection); if delayed, refrigerate the specimen (2 – 8 degrees celsius).

Stability
Refrigerated: 24 hours (Optimal storage); DO NOT FREEZE THE SPECIMEN.

Rejection Criteria

- Unpreserved specimens > 2 hours old
- Inadequate specimen quantity
- Frozen specimens
- Specimens collected with swabs

- Specimens unsafe to handle (sharps)
- Specimens containing additives or fixatives (i.e. Formalin) other than boric acid
- Non-sterile or leaking containers

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation

Reference Range

Normal Value	Based on urine specimen type – No growth or growth < 1000 colonies
Critical Value	None specific to culture type. See current laboratory critical values listing

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

Quantitative Urine Culture; Urine Culture

Culture Vibrio

Message

This test is not a component of the Gastrointestinal Culture

Specimen Container

Sterile leak-proof screw cap container (SCM), Sterile transport swab (X0C) or Enteric transport medium (i.e. Cary Blair)

Preferred Specimen

Fresh specimen or specimen in enteric transport medium

Minimum Volume

1 – 2 grams semi-solid stool OR 1 – 2 mL liquid stool

Instructions

- Inform the laboratory of the patient's:

    - recent antimicrobial therapy
    - recent travel history
    - ingestion of tainted food or water sources
- Submit for testing up to 3 separate specimens collected on different days because organisms may be shed intermittently

PowerChart Name

Culture Vibrio

Transport Temperature

Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability

Enteric Transport Medium – Room Temperature: 72 hours; Fresh stool – Refrigerated: 8 hours

Rejection Criteria

- Specimen collected and submitted for testing > 3 days after the patient's hospital admission
- Frozen specimens
- Unlabeled or mislabeled specimens
- Leaking specimens
- Specimens contaminated with urine, soap or disinfectants
- Specimens containing fixatives or additives
- Formed stool.

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No Vibrio species isolated.
Critical Value	Any detection or isolation of pathogenic *Vibrio species*.

Limitations

Overgrowth of contaminating flora, prior antimicrobial therapy or suboptimal specimen volumes may prevent isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and culture confirmation by the Maryland State Department of Health and Mental Hygiene Laboratory Administration.

Alternative Name(s)
Cholera Culture

Culture VRE

Preferred Specimen
Sterile transport swab (XOC)

Minimum Volume
2 sterile transport swabs

Instructions
Inform the laboratory of the patient's recent antimicrobial therapy.

PowerChart Name
Culture VRE

Transport Temperature
Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees Celsius).

Stability

Enteric Transport Medium	Room Temperature: 72 hours
Fresh stool or Rectal Swab	Refrigerated: 48 hours

Rejection Criteria

- Frozen specimens
- Expired transport medium
- Unlabeled or mislabeled specimens
- Leaking containers
- Dry swabs
- Specimens contaminated with urine, soap or disinfectants
- Specimens containing fixatives or additives.

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available

Within 2 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 2 days incubation

Reference Range

Normal Value	Culture negative for vancomycin resistant *Enterococcus species*.

Critical Value	Any detection or isolation of vancomycin resistant *Enterococcus species*.

Limitations

Overgrowth of contaminating flora, prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/isolation of this pathogen.

Reflex Tests

Positive cultures reflex to organism identification only.

Alternative Name(s)

Vancomycin Resistant Enterococcus Culture

Culture Wound Deep/Trauma with Smear

Message

The extent of anaerobic culture will be determined by the specimen source, collection method, and laboratory guidelines.

Components

Gram Stain, Aerobic and Anaerobic Culture

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

Abscess, pus or drainage aspiration, or deep wound debridement

Alternate Specimen

Abscess/Pus/Drainage, Bite Wound, Burns, Deep Wound, Fistula/Sinus, Wound Debridement

Minimum Volume

Abscess, pus or drainage aspiration	1 – 3 mL
Tissue	3 – 5 pieces of debrided tissue or 1 cm^2 tissue section biopsy

Instructions

1. Inform the laboratory of:
    - the patient's recent antimicrobial therapy history
    - suspected pathogens
    - wound creation type (surgical or trauma)
2. Use sterile non-bacteriostatic saline to keep the tissue specimen moist
3. Use available anaerobe specimen collectors if anaerobes are suspected.

PowerChart Name

Culture Wound (Deep/Abcess)

Transport Temperature
Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability
Refrigerated: 24 hours (Optimal storage); Room Temperature: 24 hours; DO NOT FREEZE THE SPECIMEN.

Rejection Criteria

- Inadequate specimen quantity
- Frozen specimens
- Specimens collected with swabs
- Specimens unsafe to handle (sharps)
- Specimens containing additives or fixatives (i.e. Formalin)
- Non-sterile or leaking containers

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available

Within 5 days of specimen processing	Preliminary Negative after 1 day incubation. Interim after 3 days incubation
Final Negative	After 5 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No Growth or Normal Flora for Site
Critical Value	None specific to culture type; see current laboratory critical values listing.

Limitations
Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests
Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)
Surgical Wound Culture; Trauma Wound Culture; Abscess/Pus Culture

Culture Wound Superficial with Smear

Message
Anaerobic culture will not be performed because the likelihood of an anaerobic cause of infection is remote.

Components

Gram Stain (May be used for the assessment of the specimen quality); Aerobic Culture only

Specimen Container

Sterile leak-proof screw cap container (SCM). Sterile transport swab collection should be avoided due to the increase likelihood of specimen contamination with normal skin flora.

Preferred Specimen

Pus/drainage aspiration, superficial wound debridement

Alternate Specimen

Pus/Drainage, Superficial wound debridement, Rash, Ulcer

Minimum Volume

Abscess, pus or drainage aspiration	1 – 3 mL
Tissue	3 – 5 pieces of debrided tissue or 1 cm^2 tissue section biopsy

Instructions

1. Inform the laboratory of:
    - the patient's recent antimicrobial therapy history
    - any suspected pathogens
2. Use sterile non-bacteriostatic saline to keep the tissue specimen moist.

PowerChart Name

Culture Wound Superficial

Transport Temperature

Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability

Refrigerated: 24 hours (Optimal storage); Room Temperature: 24 hours; DO NOT FREEZE THE SPECIMEN.

Rejection Criteria

- Inadequate specimen quantity
- Frozen specimens
- Specimens collected with swabs
- Specimens unsafe to handle (sharps)
- Non-sterile or leaking containers

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation

Final Negative	After 3 days incubation

Reference Range

Normal Value	No Growth or Normal Flora for Site
Critical Value	None specific to culture type; see current laboratory critical values listing

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and antimicrobial susceptibility testing if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

Superficial culture; Surface culture; Skin culture

Culture Yersinia

Message

This test is not a component of the Gastrointestinal Culture

Specimen Container

Sterile leak-proof screw cap container (SCM), Sterile transport swab (X0C) or Enteric transport medium (i.e. Cary Blair)

Preferred Specimen

Fresh specimen or in enteric transport medium

Minimum Volume

1 – 2 grams semi-solid stool OR 1 – 2 mL liquid stool

Instructions

1. Inform the laboratory of:
    - the patient's recent antimicrobial therapy history
    - recent travel history
    - ingestion of tainted food or water sources
2. Submit for testing up to 3 separate specimens collected on different days because organisms may be shed intermittently.

PowerChart Name

Culture Yersinia

Transport Temperature

Transport immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability

Enteric Transport Medium	Room Temperature: 72 hours
Fresh stool	Refrigerated: 8 hours

Rejection Criteria

- Specimen collected and submitted for testing > 3 days after the patient's hospital admission
- Frozen specimens
- Unlabeled or mislabeled specimens
- Leaking specimens
- Specimens contaminated with urine, soap or disinfectants
- Specimens containing fixatives or additives
- Formed stool

Report Available

Within 3 days of specimen processing	Preliminary Negative after 1 day incubation
Final Negative	After 3 days incubation unless prolonged incubation is required by the suspected pathogen

Reference Range

Normal Value	No *Yersinia species* isolated.
Critical Value	Any detection or isolation of pathogenic *Yersinia species*.

Limitations

Overgrowth of contaminating flora, prior antimicrobial therapy, or sub-optimal specimen volumes may prevent isolation of pathogens.

Reflex Tests

Positive cultures reflex to organism identification and culture confirmation by the Maryland State Department of Health and Mental Hygiene Laboratory Administration.

Alternative Name(s)

Yersina culture

F

Fungal Smear

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

See requirements for source specific routine bacterial culture

Minimum Volume

See requirements for source specific routine bacterial culture. EXCEPTIONS:

- CSF and Sterile body fluids: 3 – 5 mL
- Urine: 5 – 20mL

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy history (i.e. antifungal therapy)
- NOTE: Avoid the use of cotton swabs for the collection of specimens because cotton fibers may interfere with some fungal smear methods.

PowerChart Name

Smear Fungal (Non-Skin)

Transport Temperature

See requirements for source specific routine bacterial culture.

Stability

See requirements for source specific routine bacterial culture.

Rejection Criteria

See requirements for source specific routine bacterial culture.

Test Performed

Sun – Sat

Report Available

Within 24 hours of specimen processing.

Reference Range

Normal Value	No fungus seen on smear.
Critical Value	Detection of fungi in a sterile body fluid, CSF or sterile site/source.

Limitations

Prior antibiotic therapy or suboptimal specimen volumes may prevent or delay the detection/ isolation of pathogens.

Reflex Tests

Positive smears reflex to culture (unless a component of a culture order or otherwise specified) if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

KOH Prep; Wet Prep; Fungal Stain; Fungus Stain

G

Gastric, Occult Blood

Message

Do not use routine occult blood test methods with gastric samples. This is a qualitative test. It cannot be used as an indication of the quantity of blood loss.

Components

Gastric pH, Occult Blood

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

Gastric Aspirate (Minimum Volume: 1 mL)

Alternate Specimen

Vomitus (Minimum Volume: 1 mL)

Instructions

Note any history of the consumption of the following drugs, vitamins and foods within 4 hours of the specimen collection:

- Aspirin or other non-steroidal anti-inflammatory drugs
- Antacids, particularly those containing magnesium hydroxide (Mylanta II and Maalox Plus)
- Vitamin C from all sources both dietary and supplemental
- Red meat (beef, lamb), including processed meats and liver
- Raw fruits and vegetables (especially melons, radishes, turnips and horseradish)

PowerChart Name

Occult Blood Gastric Fluid

Transport Temperature

Immediately upon collection, if delayed, refrigerate the specimen (2 – 8 degrees C)

Stability

Separate serum by centrifugation and store – Refrigerated (2 – 8 degrees celsius): 48 hours; Frozen (-20 degrees celsius or below): 3 months.

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Inadequate specimen quantity
- Specimens containing additives, fixatives or buffers

- Grossly bloody specimens
- Frozen specimens

Test Performed
Sun – Sat; All Shifts

Report Available
Within 1 hour of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of occult blood

Limitations
Inaccurate or incomplete patient histories may compromise the accuracy and/or interpretation of test results; Foods (i.e. incompletely cooked meat, raw fruits and vegetables, etc.) that have peroxidase activity may produce a false positive test result; The results of this test cannot be considered conclusive evidence of the presence or absence of upper gastrointestinal bleeding or pathology; This test is designed to be use a preliminary screen and it not intended to replace other diagnostic procedure such as gastroscopic examination or x-ray studies.

Alternate Names
Gastroccult

Gram Stain Direct

Message
CSF and Sterile Body Fluid specimens will not be processed for gram stain only. If the specimen quantity is insufficient for both gram stain and culture, the culture will be performed.

The gram stain may be used for rapid presumptive detection and diagnosis of infectious agents. It also may be sued for the assessment of specimen quality and acceptability for the performance or interpretation of the culture.

Specimen Container
Sterile leak-proof screw cap container (SCM) or Sterile transport swab (X0C)
See source specific routine bacterial culture criteria: Sterile leak-proof screw cap container; Sterile transport swab; Properly labeled, air dried or fixed (heat or methanol), specimen smeared glass microscope slide;

Preferred Specimen
See requirements for source specific routine bacterial culture criteria.

Minimum Volume
See requirements for source specific routine bacterial culture criteria

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy history
- Note the specific source/site of the specimen on the specimen container or glass microscope slide
- Label the microscope slide with 2 patient identifiers (i.e. name and medical record number).

PowerChart Name

Gram Stain

Transport Temperature

See requirements for source specific routine bacterial culture criteria: NOTE: Smears may be stored at a room temperature up to 29 degrees Celsius.

Stability

See requirements for source specific routine bacterial culture criteria.

Sterile transport swab	Room temperature:48 hours
Air dried specimen smeared glass microscope slide	Room temperature:24 hours
Fixed specimen smeared glass microscope slide	Room temperature:10 days.

Rejection Criteria

- See requirements for source specific routine bacterial culture criteria
- Inadequate specimen quantity
- Dry swabs
- Specimens unsafe to handle (sharps)

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Non-STAT request	Within 3 hours of specimen processing.
STAT request	Within 1 hour of specimen processing.

Reference Range

Normal Value	Defined the specimen source.
Critical Value	Detection of an organism in a sterile body fluid, CSF or sterile site/source.

Limitations

Overgrowth of contaminating flora, prior antibiotic therapy, or sub-optimal specimen volumes may prevent detection of pathogens.

Reflex Tests

Positive smears reflex to culture (unless a component of a culture order or otherwise specified) if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)

Gram Smear

Group B Strep PCR

Message

A separate LIM Broth culture must be submitted with this specimen. A positive test result does not indicate the presence of viable organisms; This assay should be used as an adjunct to other available testing. It should not be used as a replacement for antepartum (35 – 37 weeks gestation) culture; this assay is not intended to differentiate between Group B Streptococcus carriage and infection.

Specimen Container

This test requires a special collection and transport swab device (obtain from the laboratory prior to collection)

Preferred Specimen

First sample secretions from the mucosa of the lower one-third part of the vagina with sampling of the anal crypts using the same collection device.

Minimum Volume

One collection device containing 2 special transport swabs

Instructions

Inform the laboratory of the patient's recent antimicrobial therapy history

PowerChart Name

Group B Strep (PCR)

Transport Temperature

Immediately upon collection; if delayed, store the specimen at room temperature (20-30 degrees celsium) if testing will be performed within 24 hours

Stability

Room temperature (20-30 degrees celsius): < 24 hours; Refrigerated: (2 – 8 degrees celsius): ≥ 24 hours up to 6 days

Rejection Criteria

- Unlabeled or mislabeled specimens
- Specimens collection using a non-approved collection device (i.e. routine transport swab)
- Specimen sources or collection sites other than those designated for the test method

Test Performed

Sun – Sat; Day Shift Only

Report Available
Within 24 hours of specimen processing.

Reference Range

Normal Value	Negative: GBS target nucleic acid is NOT detected. Presumed not colonized for GBS
Critical Value	Detection of Group B Streptococus

Reflex Tests
Negative tests require culture confirmation to ensure the accuracy of the negative nucleic acid results. Positive tests may reflex to culture to determine the viability of the organisms detected or to provide antimicrobial susceptibility testing for penicillin allergic patients requiring treatment.

Limitations
Test results may be affected by concurrent antibiotic therapy. Therapeutic success or failure cannot be assessed using this test because DNA may persist after antimicrobial therapy. Erroneous test results might occur from improper specimen collection, technical error, sample mix-up, or because the number of organisms in the specimen is below the detection limit of the test. The use of specimen collection and transport system other than those recommended by the manufacturer may affect the accuracy of the test result.

Alternate Name(s)
GBS PCR, Group B Streptococus Polymerase Chain Reaction, GBS Polymerase Chain Reaction

I

Influenza Antigen A/B Rapid

Components
Influenza A antigen; Influenza B antigen.

Specimen Container
Sterile screw capped tube; Sterile tube containing 1 – 3 mL saline; designated viral transport tube

Preferred Specimen
Nasopharyngeal Swab; Nasopharyngeal Wash or Aspirate.

Minimum Volume
1 Nasopharyngeal Swab; Nasopharyngeal Wash/Aspirate: 2.5 mL

Instructions
Inform the laboratory if the patient has had the administration of live, attenuated influenza virus vaccines with 4 weeks or nasally administered influenza A vaccine within 3 days of testing. Inform the laboratory of the patient’s recent antimicrobial therapy history (i.e. antiviral therapy).

PowerChart Name

Influenza A/B Antigen

Transport Temperature
Immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius) and test within 8 hours.

Stability
Refrigerated (2 – 8 degrees celsius): 8 hours; Frozen (-20 degrees celsius or below): 30 days

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Specimens stored at room temperature > 30 minutes
- Calcium alginate swabs

Test Performed
Sun – Sat; All Shifts

Report Available
Within 1 hour of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of influenza A or B antigens.

Limitations
Test performed within 4 weeks of the administration of live, attenuated influenza virus vaccines may produce false positive results; Tests performed within 3 days of nasally administered influenza A vaccine may produce false positive results up to 3 days after vaccination; A negative test may occur if the antigen level is below the detection level of the test.

Alternative Name(s)
Rapid Flu

L

Legionella Urinary AG

Specimen Container
Sterile screw capped container or boric acid tube

Preferred Specimen
1st morning urine specimen 3 – 5 mL; Midstream Clean Catch, Indwelling Catheter, Straight In and Out Catheter, Kidney, Pediatric Bag or Suprapubic Aspirate Urine

Minimum Volume
1 mL

Instructions
Inform the laboratory of the patient's recent antimicrobial therapy history and/or suspected pathogens.

PowerChart Name
Legionella Antigen Urine

Transport Temperature
Immediately upon collection; if delayed, refrigerate the specimen (2 – 8 degrees celsius).

Stability
Room Temperature (20 – 25 degrees celsius): < 24 hours;
Refrigerated (2 – 8 degrees celsius): >24 hours to < 14 days;
Frozen (- 10 to -20 degrees celsius): > 14 days

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Inadequate specimen quantity
- Specimens collected with swabs or specimens unsafe to handle (sharps)
- Specimens containing additives or fixatives other than boric acid

Test Performed
Sun – Sat; All Shifts

Report Available
Within 1 hour of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of Legionella pneumophila serogroup 1 antigens.

Limitations
This test does not detect infections caused by other Legionella pneumophila serogroups or other Legionella species. An negative antigen result does not exclude infection with the target antigen. A positive result can occur due to current or past infection. The performance of this test on diuretic urine has not been evaluated.

LIM Broth PCR

Message
LIM Broth is used for prenatal Group B Streptococcus screening at 35 – 37 weeks gestation.

A negative test result does not exclude the possibility of infection because test results may be affected by improper specimen collection, technical error, specimen mix-up, concurrent antibiotic therapy, or the number of organisms in the specimen which may be below the sensitivity of the test. All test results should be interpreted in conjunction with other available laboratory and clinical data.

Specimen Container

Sterile transport swab (X0C)

Preferred Specimen

Sterile transport swab submitted in LIM Broth (obtain the broth from the laboratory prior to specimen collection).

Minimum Volume

2 sterile transport swabs

Instructions

- **Collect the specimen using one continuous swabbing from the vaginal introitus to the anorectum**
- Inform the laboratory of the patient's recent antimicrobial therapy history and penicillin allergy history

PowerChart Name

Group B Strep LIM Broth (Probe)

Transport Temperature

- **LIM Broth:**Transport to the laboratory immediately upon collection. If transport must be delayed, store at room temperature.
- **Sterile Transport Swab:**Transport to the laboratory immediately upon collection. If transport must be delayed, store at 2° – 8°celsius before testing.

Stability

- **LIM Broth:**
  - Room Temperature: 48 hours.
  - Upon receipt the laboratory will incubate the LIM Broth at 35° – 37° celsius for 18 – 24 hours before testing.
- **Sterile Transport Swab:**
  - Room Temperature or Refrigerated: 48 hours.
  - Upon receipt the laboratory will place the swab in LIM Broth and incubate the broth at 35° – 37° celsius for 18 – 24 hours before testing.

Rejection Criteria

- Frozen specimens
- Unlabeled or mislabeled specimens
- Expired swab transport medium
- Expired broth medium
- Non-sterile or leaking containers
- Dry swabs.

Test Performed

Daily

Report Available
Within 24 hours of specimen processing by the laboratory.

Normal Value
Negative

Critical Value
Any detection of Group B Streptococcus

Limitations

- Antimicrobial susceptibility testing will be performed only when the patient is allergic to penicillin or has failed penicillin therapy.
- Failure to sample from the vaginal introitus to the anorectum may prevent or delay the detection/isolation of Group B Streptococcus (Streptococcus agalactiae).
- This assay should be used as an adjunct to other available methods. It should not be used for direct specimen testing without overnight incubation of an enriched LIM Broth.
- This assay should be used for antepartum (35 – 37 weeks' gestation) testing.
- This assay is not intended to differentiate between carriers of Group B Streptococcus and streptococcal infection.
- Test results may be affected by concurrent antibiotic therapy. Therapeutic success or failure cannot be assessed using this test because DNA may persist after antimicrobial therapy.

Interfering Substances
None noted

Alternate Name(s)
Prenatal LIM Broth Screen, Group B Strep LIM Broth (Probe)

M

Mononucleosis Test

Message
Some patients who contract infectious mononucleosis do not produce measurable levels of heterophile antibodies.

Specimen Container
Sterile Screw cap tube; Gold top vacutainer tube

Preferred Specimen
Serum. (Minimum Volume: 0.5 mL)

Instructions
The vacutainer tube must be centrifuged to separate serum from whole blood. Once separated the serum must be transferred to a sterile screw cap tube for storage.

PowerChart Name

Mononucleosis Screen

Transport Temperature
Immediately upon collection, if delayed, refrigerate the specimen (2 – 8 degrees C) and test within 48 hours.

Stability
Separate serum by centrifugation and store – Refrigerated (2 – 8 degrees celsius): 48 hours; Frozen (-20 degrees celsius or below): 3 months.

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Severely hemolyzed sera

Test Performed
Sun – Sat; Day and Evening Shifts

Report Available
Within 24 hours of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	None.

Limitations
The antibody level may be below the detectable limit of this assay yielding a negative result; Biological false positive tests for infectious heterophile antibodies have been seen with such disorders as leukemia, cytomegalovirus, Burkitt's lymphoma, rheumatoid arthritis, adenovirus, viral hepatitis, and Toxoplasma gondii infections.

Alternate Names
Heterophile Antibodies

N

Nocardia Stain

Message
This test is performed on a direct specimen. Both Acid Fast and Modified Acid Fast stains will be performed as required for interpretation of the Modified Acid Fast result. NOTE: Direct Acid Fast stains are not performed for the detection of mycobacteria.

Specimen Container
Sterile leak-proof screw cap container (SCM) or Sterile transport swab (X0C); See source specific routine bacterial

culture criteria: Sterile leak-proof screw cap container; Sterile transport swab; Properly labeled, air dried or fixed (heat or methanol), specimen smeared glass microscope slide;

Preferred Specimen

See requirements for source specific routine bacterial culture criteria.

Minimum Volume

See requirements for source specific routine bacterial culture criteria.

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy history
- Note the specific source/site of the specimen on the specimen container or glass microscope slide
- Label the microscope slide with 2 patient identifiers (i.e. name and medical record number).

PowerChart Name

Nocardia Smear (SS)

Transport Temperature

See requirements for source specific routine bacterial culture criteria: NOTE: Smears may be stored at a room temperature up to 29 degrees celsius.

Stability

See requirements for source specific routine bacterial culture criteria.

Sterile transport swab	Room temperature:48 hours
Air dried specimen smeared glass microscope slide	Room temperature:24 hours
Fixed specimen smeared glass microscope slide	Room temperature:10 days.

Rejection Criteria

- See requirements for source specific routine bacterial culture criteria
- Inadequate specimen quantity
- Dry swabs
- Specimens unsafe to handle (sharps)

Test Performed

Sun – Sat; Day Shift Only.

Report Available

Non-STAT request	Within 3 hours of specimen processing.
STAT request	Within 1 hour of specimen processing.

Reference Range

Normal Value	No modified acid fast organisms seen.
Critical Value	Detection of an organism in a sterile body fluid, CSF or sterile site/source.

Limitations
Overgrowth of contaminating flora, prior antibiotic therapy, or sub-optimal specimen volumes may prevent detection of pathogens.

Reflex Tests
Positive smears reflex to culture (unless a component of a culture order or otherwise specified) if indicated by laboratory guidelines. Some testing may be performed by a commercial reference laboratory.

Alternative Name(s)
Modified Acid Fast Stain, Modified AFB Stain

O

Occult Blood Diagnostic Fecal

Message
This is a single test for the diagnosis of the presence of occult bleeding. Single point testing IS NOT the standard of care for colorectal cancer screening.

Specimen Container
Sterile leak-proof screw cap container or the manufacturer’s collection container for the specific test method used.

Preferred Specimen
Unpreserved stool/feces or a test specimen collection container containing unpreserved stool/feces.

Minimum Volume
1 gram (pea sized) stool sample or the sample specified by the manufacturer of the test method in use

Instructions

- **THIS TEST SHOULD NOT BE USED TO TEST GASTRIC SPECIMENS.**
- Reconcile the patient’s medication history prior to the collection of specimens for this testing.
- Do not collect specimens from patients suffering from bleeding hemorrhoids or during menses.

PowerChart Name
Occult Blood Diagnostic Fecal

Transport Temperature
Immediately upon collection; if delayed, store the specimen at ambient temperature ≤ 37 degrees celsius or refrigerate the specimen (4 degrees celsius)

Stability

For unpreserved stool/feces	Room temperature (20 – 25 degrees celsius): 1 hour; Refrigerated (2 – 8 degrees celsius): 36 hours.
For the manufacturer's collection tube	Ambient room temperature ≤ 37 degrees celsius: ≤ 14 days; Refrigeration at 4 degrees celsius: ≤ 6 months; Frozen at -20 degrees celsius: ≤ 12 months

Rejection Criteria

- Unlabeled or mislabeled specimens
- Leaking containers
- Inadequate specimen quantity
- Specimens containing preservatives or fixatives (i.e. Formalin, PVA, etc).
- Grossly bloody specimens

Test Performed

Sun – Sat; All Shifts

Report Available

Within 1 hour of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of occult blood

Limitations

A negative test result may be obtained in the presence of a gastrointestinal disorder because blood may not be evenly distributed in the specimen or bowel lesions may not bleed at all or may bleed intermittently; The results of this test cannot be considered conclusive evidence of the presence or absence of upper gastrointestinal bleeding or pathology; This test is designed to be use a preliminary screen and it not intended to replace other diagnostic procedure such as gastroscopic examination or x-ray studies.

R

Rapid Group A Streptococcus

Message

Specimens with negative test results reflex to Group A Streptococcus culture.

Specimen Container

Sterile dacron or rayon transport swab.

Preferred Specimen

2 Sterile culturette swabs.

Minimum Volume
2 Sterile culturette swabs.

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy history.
- Inform the laboratory if the patient is allergic to penicillin.

PowerChart Name
Streptococcus A Screen Rapid

Transport Temperature
Immediately upon collection; if delayed, store at room temperature (20 – 25 degrees celsius) or refrigerate (2 – 8 degrees celsius).

Stability
Room temperature or refrigerated: 24 hours

Rejection Criteria

- Unlabeled or mislabeled specimens
- Frozen specimens
- Expired transport medium

Test Performed
Sun – Sat; All Shifts

Report Available
Within 24 hours of specimen receipt by the laboratory

Reference Range

Normal Value	Negative
Critical Value	None

Reflex Tests
Group A Streptococcus culture

Limitations
The contents of this test are intended for use in the qualitative detection of Group A streptococcal antigen from throat swabs and culture colonies only; This test does not distinguish between actual infection, colonization or carriage; A negative result may indicate an antigen level below the detection limit of the test. Culture confirmation is strongly recommended.

Interfering Substances
In rare cases, test specimens heavily colonized with Staphylococcus aureus can yield false positive results; Blood specimens may interfere with interpretation of the color reactions of the test.

Alternate Name
Rapid Group A Strep

Rotavirus Stool

Specimen Container
Leak-proof, clean, dry, screw cap wide-mouth container

Preferred Specimen
Diarrheal stool

Minimum Volume
1 mL liquid or 1 gram (pea sized) semi-solid human stool

Instructions

- Inform the laboratory of the patient's recent antimicrobial therapy history.
- Specimen transport should occur within 1 hour of collection.

PowerChart Name
Rotavirus Antigen Feces

Transport Temperature
Immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius).

Stability
Refrigerated (2 – 8 degrees celsius): 72 hours; Frozen (-20 degrees celsius or below) in a non-defrosting freezer: >72 hours.

Rejection Criteria

- Unlabeled or mislabeled specimens
- Specimens containing preservatives or fixatives (i.e. Formalin, PVA, etc.)
- Formed stool (Non-diarrheal)
- Meconium stools
- Specimens collected on swabs

Test Performed
Sun – Sat; All Shifts

Report Available
Within 2 hours of specimen processing

Reference Range

Normal Value	Negative

Critical Value	Any detection of Rotavirus antigens

Limitations

This test does not define the presence of rotavirus associated gastrointestinal disease. The performance of meconium stools has not been evaluated with this test, so these specimens should not be tested. The reactivity of positive samples may decrease with time due to declining levels of antigen particles.

Interfering Substances

Very high levels of antigen may cause an invalid test result; Bloody specimens may interfere with the interpretation of the color reactions of the test.

RPR Qualitative

Message

Positive qualitative tests will reflex to quantitative titer and fluorescent treponemal antibody (FTA) confirmatory testing.

Specimen Container

Sterile Screw cap tube; Gold top vacutainer tube

Preferred Specimen

Serum (Minimum Volume 0.5 mL)

Instructions

Centrifuge the vacutainer tube to separate the serum from whole blood, and transfer the serum to a sterile screw capped tube for storage.

PowerChart Name

RPR

Transport Temperature

Immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius) and test within 48 hours.

Stability

Separate serum by centrifugation and store. Refrigerated (2 – 8 degrees celsius): 72 hours; Frozen (-20 degrees celsius or below): 1 year

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Severely lipemic or hemolyzed specimens

Test Performed

Monday, Wednesday, Friday; Day Shift

Report Available
Within 24 hours of specimen processing

Reference Range

Normal Value	Nonreactive
Critical Value	Detection of reagin. (Weakly reactive or reactive test result.)

Reflex Tests
Quantitative RPR

Limitations
FTA assays are performed by a commercial reference laboratory. This may results in delays in the turnaround time to reporting of these results. Biological false positives have been seen with such disorders as lupus erythematosus, rheumatic fever, pneumococcal pneumonia, infectious mononucleosis, leprosy, malaria, rheumatoid arthritis, pregnancy, infectious hepatitis, vaccinia and viral pneumonia, and in elderly patients.

Interfering Substances
Very high levels of antigen may cause an invalid test result.

Alternate Name(s)
Rapid Plasmin Reagin Test

RSV (Respiratory Syncytial Virus) Antigen

Specimen Container
Sterile screw capped tube; Sterile tube containing 1 – 3 mL saline; Designated viral transport media tube

Preferred Specimen
Nasopharyngeal Swab; Nasopharyngeal Wash or Aspirate

Minimum Volume
1 Nasopharyngeal Swab; Nasopharyngeal Wash/Aspirate: 2.5 mL

Instructions
Inform the laboratory of the patient’s recent antimicrobial therapy history (i.e. antiviral therapy).

PowerChart Name
RSV (Respiratory Syncytial Virus) Antigen

Transport Temperature
Immediately upon collection; if delayed, refrigerate the specimen (2-8 degrees celsius) and test within 48 hours.

Stability

Room Temperature (20 – 25 degrees celsius): 4 hours; Refrigerated (2 – 8 degrees celsius): 48 hours; Frozen (- 70 degrees celsius): 30 days

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Specimens stored at room temperature > 30 minutes
- Calcium alginate swabs

Test Performed

Sun-Sat; All Shifts

Report Available

Within 1 hour of specimen processing

Reference Range

Normal Value	Negative
Critical Value	Any detection of RSV antigens

Limitations

Inadequate sample collection or low levels of virus shedding may produce false negative results; A negative test may occur if the antigen level is below the detection limit of the test; This test may not detect all antigenic variants or new strains of RSV; This test is suitable for the pediatric population (< 18 years of age) only.

Alternate Name(s)

RSV

S

Shiga Toxin Assay

Message

This assay should be used as an adjunct to other available methods.

Specimen Container

Moistened transport swab; Clean, dry, wide-mouth screw cap container; Enteric transport medium

Preferred Specimen

Semi-solid or liquid stool – fresh or in enteric transport medium;

Minimum Volume

1 – 2 grams semi-solid stool; 1 – 2 mL liquid stool; 1 moistened transport swab

Instructions
Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name
Shiga Toxin Assay

Transport Temperature
Immediately upon collection; if delayed, refrigerate (2 – 8 degrees celsius)

Stability

Unpreserved Stool or Rectal swab	Room temperature: 2 hours
Enteric Transport Medium	Room Temperature: 72 hours;
Fresh stool	Refrigerated: 8 hours; Frozen (-70 degrees celsius or below): 1 week

Rejection Criteria

- Unlabeled or mislabeled specimens
- Leaking specimens
- Specimens containing preservatives or fixatives other than Enteric transport media (i.e. Formalin, PVA, etc.)
- Formed stool (non-diarrheal)

Test Performed
Sun – Sat; Day Shift

Report Available
Within 48 hours of specimen processing

Reference Range

Normal Value	Negative
Critical Value	Any detection of shiga toxins

Reflex Tests
Positive toxin assays reflex to organism identification and culture confirmation by the Maryland State Department of Health and Mental Hygiene Laboratory Administration.

Limitations
The performance of this test with direct stool specimens has not been evaluated; The toxin produced by Shigella dysenteriae type 1 is nearly identical to Shiga toxin 1 produced by Escherichia coli. This test may yield false positive results for patients infected with this Shigella species.

Interfering Substances

Colonization or infection with Shigella dysenteriae type 1

STL Occult Blood Screen

Message

Colorectal screening involves the use of 2 – 3 test specimens collected on consecutive days.

Specimen Container

Sterile leak-proof screw cap container or the manufacturer's collection container for the specific test method used.

Preferred Specimen

Unpreserved stool/feces or a test specimen collection container containing unpreserved stool/feces.

Minimum Volume

1 gram (pea sized) stool sample or the sample specified by the manufacturer of the test method in use

Instructions

- **THIS TEST SHOULD NOT BE USED TO TEST GASTRIC SPECIMENS.**
- Reconcile the patient's medication history prior to the collection of specimens for this testing.
- Do not collect specimens from patients suffering from bleeding hemorrhoids or during menses.

PowerChart Name

Occult Blood Feces

Transport Temperature

Immediately upon collection; if delayed, store the specimen at ambient temperature ≤ 37 degrees celsius or refrigerate the specimen (4 degrees celsius)

Stability

For unpreserved stool/feces	Room temperature (20 – 25 degrees celsius): 1 hour; Refrigerated (2 – 8 degrees celsius): 36 hours.
For the manufacturer's collection tube	Ambient room temperature ≤ 37 degrees celsius: ≤ 14 days; Refrigeration at 4 degrees celsius: ≤ 6 months; Frozen at -20 degrees celsius: ≤ 12 months

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Inadequate specimen quantity
- Specimens containing preservatives or fixatives (i.e. Formalin, PVA, etc).
- Grossly bloody specimens

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available
Within 1 hour of specimen processing.

Reference Range

Normal Value	Negative
Critical Value	Any detection of occult blood

Limitations
A negative test result may be obtained in the presence of a gastrointestinal disorder because blood may not be evenly distributed in the specimen or bowel lesions may not bleed at all or may bleed intermittently; The results of this test cannot be considered conclusive evidence of the presence or absence of upper gastrointestinal bleeding or pathology; This test is designed to be use a preliminary screen and it not intended to replace other diagnostic procedure such as gastroscopic examination or x-ray studies.

Alternate Names
Colorectal Screening, Fecal Occult Blood, FOBT, IFOBT

Strep Group B AG Serum

Message
Patients who have had partial antibiotic treatment prior to specimen collection may yield false negative results

Specimen Container
Sterile Screw cap tube; Gold top vacutainer tube

Preferred Specimen
Serum (Minimum Volume: 0.4 mL)

Instructions

- Centrifuge the vacutainer tube to separate serum from whole blood.
- Transfer the serum to a sterile screw cap tube for storage.
- Inform the laboratory of the patient's recent antimicrobial therapy history.

PowerChart Name
Strep Group B

Transport Temperature
Immediately upon collection; do not delay transport to the laboratory.

Stability
Separate serum by centrifugation and store. Refrigerated (2 – 8 degrees celsius): 48 hours; Frozen (-20 degrees celsius or below): 1 year

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers

Test Performed
Sun – Sat; All Shifts

Report Available
Within 1 hour of specimen processing

Reference Range

Normal Value	Negative
Critical Value	Any detection of Streptococcus agalactiae

Limitations
A positive or negative result is not diagnostic for the presence or absence of Group B Streptococcus disease; This test should not be used as a substitute for culture.

Interfering Substances
Partial antibiotic treatment; Extremely low or high antigen levels.

Alternate Name(s)
GBS antigen

Strep Pneumo Urinary AG

Specimen Container
Sterile screw capped container or boric acid tube

Preferred Specimen
1st morning urine specimen 3 – 5 mL; Midstream Clean Catch, Indwelling Catheter, Straight In and Out Catheter, Kidney, Pediatric Bag or Suprapubic Aspirate Urine

Minimum Volume
1 mL

Instructions
Inform the laboratory of the patient's recent antimicrobial therapy history and/or suspected pathogens.

PowerChart Name
Strep pneumoniae Antigen Urine

Transport Temperature
Immediately upon collection (transport within 2 hours); if delayed, refrigerate the specimen (2 – 8 degrees celsius).

Stability

Room Temperature (20 – 25 degrees celsius): 24 hours; Refrigerated (2 – 8 degrees celsius): >24 hours to 14 days; Frozen (- 10 to -20 degrees celsius): >24 hours to 14 days

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Inadequate specimen quantity
- Specimens collected with swabs or specimens unsafe to handle (sharps)
- Specimens containing additives or fixatives other than boric acid

Test Performed

Sun – Sat; All shifts

Report Available

Within 1 hour of specimen processing

Reference Range

Normal Value	Negative
Critical Value	Any detection of Streptococcus pneumoniae antigens

Limitations

An negative antigen result does not exclude infection with the target antigen. Do not perform testing with 5 days of the administration of the Streptococcus pneumoniae vaccine. The performance of this test on diuretic urine has not been evaluated.

Interfering Substances

Extremely bloody specimens may interfere with the interpretation of the test results.

T

Trichomonas Test

Specimen Container

Sterile leak-proof screw cap container (SCM)

Preferred Specimen

- Vaginal secretions in 1 mL sterile physiological saline
- Vaginal swab (Rayon) in 1 mL sterile physiological saline
- Dual sterile culturette swab in liquid Stuart’s transport medium

Instructions

- Specimen transport should occur IMMEDIATELY (no later than within 5 – 10 minutes of collection.)

- Inform the laboratory of the patient's recent antimicrobial therapy history

PowerChart Name

Trichomonas Antigen

Transport Temperature

Immediately upon collection (transport within 10 – 15 minutes); if delayed, store at room temperature (20 – 25 degrees celsius)

Stability

Room Temperature (20 – 25 degrees celsius): 24 hours; Refrigerated (4degrees celsius): 36 hours; Frozen (-20 degrees celsius): 36 hours

Rejection Criteria

- Unlabeled or mislabeled specimens
- Non-sterile or leaking containers
- Specimen containing preservatives or fixatives (i.e. Formalin)
- Specimens stored at room temperature >24 hours
- Specimens stored refrigerated or frozen > 36 hours
- Specimens submitted using transport swabs other than Liquid Stuart's
- Swabs with cotton tips or wooden shafts

Test Performed

Sun – Sat; Day and Evening Shifts

Report Available

Within 90 minutes of specimen processing

Reference Range

Normal Value	Negative
Critical Value	Any detection of Trichomonas antigens

Limitations

This test detects both viable and non-viable antigens. Test performance depends on the antigen load of the specimen; Inadequate sample collection or low antigen levels may yield false negative results; This test does not differentiate between patients who are carriers and those that have acute infection.

Interfering Substances

Samples containing douche medicated with iodine may interfere with the reading of negative test results; Specimens containing Staphylococcus aureus at concentrations higher than 1 x 108 organisms per milliliter

Alternate Name(s)

Trich