

## Medical Microbiology

(Please submit all specimens in leak-proof container)

TEST	SPECIMEN REQUIRED	AMOUNT REQUIRED	SPECIAL INSTRUCTIONS	TEST FREQUENCY	NORMAL VALUES
<p>Primary Specimen for <u>M. tuberculosis</u></p> <p>Identification and/or Susceptibility testing</p>	<p>Sputum, Tissue Bronchial Lavage Bronchial Washing, Bronchial Brush, Blood (BACTEC Vial or 5 ml of Blood in ACO (yellow top) tube, Urine, Feces, Body fluids (on special request)</p>	<p>5-10 ml of sputum  30-50 mls urine  1-5 gm or 10 ml feces</p>	<p>Sputum or induced sputum</p> <p>Tissue should be kept moist in a container with sterile 0.85% NaCl.</p> <p>Must be accompanied by a completed Mycobacteriology Form ML1, HHSD 485</p> <p>Feces is processed only on special request.</p> <p>Susceptibility testing no longer performed on <u>M. avium</u> complex.</p> <p>Positive fluorochrome smears called or faxed to submitting doctor, laboratory or agency.</p> <p>Form ML1, HHSD 485 or Form HHSD 534</p>	<p>Daily</p>	
<p>Primary Specimen for Fungus Culture</p>	<p>Skin scraping, fluids, sputum, biopsy material, tissue</p>	<p>10 ml fluids 10 gm tissue 10 ml sputum</p>	<p>Skin scraping, tissue, biopsy material should be received in moistened (0.85% NaCl) gauze inside a sealed container.</p> <p>Fluids and/or sputum should be transported in sputum collection kit or closed container.</p>	<p>Daily</p>	

			Form ML1, HHSD 485 or Form HHSD 534		
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**Continuation of Medical Microbiology**  
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<b>TEST</b>	<b>SPECIMEN REQUIRED</b>	<b>AMOUNT REQUIRED</b>	<b>SPECIAL INSTRUCTIONS</b>
Lyme's Disease	Serum	1-10 ml	<p>Sent to Texas State Department Health, Austin</p> <p>Must have clinical history of patient.</p> <p>Form HHSD 534</p>
<p><u>Clostridium botulinum</u> toxin detection, toxin typing, isolation</p>	<p>Feces, Serum, Food, if available, Gastric Aspirate, Vomitus</p>	<p>10 gm stool</p> <p>10 ml serum</p>	<p>Must have clinical history of patient.</p> <p>Specimen must be kept cold (2-8EC) or frozen.</p> <p>Telephone before sending specimens.</p> <p>Specimen sent to Texas State Department of Health, Austin.</p> <p>Positive results will be called as soon as possible to submitting doctor or laboratory.</p> <p>Form HHSD 534</p>