

| Louisiana Office of Public Health Laboratories | |
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| Test Name | Confirmation and Serotyping of <i>Shigella</i> |
| PHL Location | Office of Public Health Laboratory Baton Rouge |
| CPT Code | 87077, 87045, 87147 x 6 |
| Synonyms | <i>Shigella</i> , <i>Shigella dysenteriae</i> , <i>Shigella flexneri</i> , <i>Shigella boydii</i> , <i>Shigella sonnei</i> |
| Brief Description of Test | Confirmatory test for <i>Shigella</i> species and the determination of the serotype to track outbreaks. |
| Possible Results | <i>Shigella dysenteriae</i> , <i>Shigella flexneri</i> , <i>Shigella boydii</i> or <i>Shigella sonnei</i> <i>Note: Isolates confirmed by culture methods are reflexed to conventional PCR for molecular characterization.</i> |
| Reference Range | N/A |
| Specimen Type | Pure viable isolate of <i>Shigella</i> from any source. |
| Specimen Container(s): | Agar slant in screw cap tube that will support growth of the organism. Specimens must be labeled with two patient identifiers which match the identifiers on the lab submission form. |
| Minimum volume accepted: | N/A |
| Collection Instructions | N/A |
| Storage and Transport Instructions | Specimens should be maintained at ambient temperatures or refrigerated temperatures (2°C to 37°C) to protect viability. Do not freeze or ship frozen. The specimen should be received in the State Lab as soon as possible after the original collection date to allow for prompt epidemiological investigation |
| Causes for Rejection | <ul style="list-style-type: none"> • Leaking or broken container. • The Lab form 93 is missing required information. • No Lab form 93 received with specimen. • Mislabeled and Unlabeled specimen • Specimen temperature unacceptable upon receipt |
| Limitations of the Procedure | Culture submitted must be pure and viable. |

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| Interfering Substances | N/A |
| References | Manual of Clinical Microbiology 10 th Edition |
| Additional Information | <p>Use Lab Form 93 and supply the following information:</p> <ul style="list-style-type: none"> • Patient's first and last name • Second Unique Identifier • Gender • Date of birth • Date specimen was collected • Source of specimen • Test requested • Submitter's name, address, telephone number, fax number and contact person |
| Release Date | 4/2018 |
| <p>Warning: If you have printed a copy of this information please be advised that the Louisiana Office of Public Health Laboratories website and methods are updated on a regular basis. Please check the on-line version of this document to ensure you are relying on the most recent release.</p> | |