

TEST CHANGE

Gastrointestinal Pathogens Panel by PCR

3003279, GIPPCR

Specimen Requirements:

Patient Preparation:

Collect: Stool.

Specimen Preparation: Transfer stool to enteric transport media (Cary-Blair) (ARUP supply #29799) available online through eSupply using ARUP Connect(TM) or contact ARUP Client Services at (800-)522-2787. (Min: 0.5 mL)

Transport Temperature: Refrigerated

Unacceptable Conditions: Unpreserved stool, stool in media other than Cary-Blair, rectal swabs, specimens outside stability.

Remarks: This test is New York DOH approved; however, per NYDOH regulations, testing cannot be performed for New York City clients.

Stability: In enteric transport media: Ambient: 4 days, Refrigerated: 74 days, Frozen: Unacceptable.

Methodology: Qualitative Polymerase Chain Reaction (PCR)

Note: This assay detects *Campylobacter* spp. (*C. jejuni*, *C. coli*, *C. upsaliensis*), *Plesiomonas shigelloides*, *Salmonella* spp., *Vibrio* spp. (*V. parahaemolyticus*, *V. vulnificus*, *V. cholerae*) including specific identification of *V. cholerae*, *Yersinia enterocolitica*, Enteroaggregative *Escherichia coli* (EAEC), Enteropathogenic *Escherichia coli* (EPEC), Enterotoxigenic *Escherichia coli* (ETEC) *lt/st*, Shiga-like toxin-producing *Escherichia coli* (STEC) *stx1/stx2* including specific identification of *E. coli* O157, *Shigella*/Enteroinvasive *Escherichia coli* (EIEC), *Cryptosporidium* spp., *Cyclospora cayetanensis*, *Entamoeba histolytica*, *Giardia lamblia* (also known as *G. intestinalis* and *G. duodenalis*), Adenovirus F40/41, Astrovirus, Norovirus GI/GII, Rotavirus A, and Sapovirus (Genogroups I, II, IV, and V).

CPT Codes: 87507

New York DOH Approval Status: This test is New York DOH approved.

Interpretive Data:

Reference Interval:

