
Lab Dept: Microbiology

Test Name: GC CULTURE (*NEISSERIA GONORRHOEAE* ONLY)

General Information

Lab Order Codes: GC

Synonyms: Culture, *Neisseria gonorrhoeae*; Culture, GC Only; Gonorrhoeae Culture

CPT Codes: 87081 - Culture, presumptive, pathogenic organisms, screening only

The following testing may be added if appropriate based on findings for organism identification (multiple additions are possible if more than one organism is identified).

87077 – Aerobic isolate, additional methods required for definitive identification, each isolate (if appropriate)

87206 – Smear, fluorescent and/or acid fast stain for bacteria, fungi, parasites, viruses or cell types

Test Includes: Culture and identification of *Neisseria gonorrhoeae* only.

Gram stain is not included and must be ordered separately. Refer to listing for [Gram Stain](#).

Logistics

Lab Testing Sections: Microbiology

Phone Numbers: MIN Lab: 612-813-5866

STP Lab: 651-220-6555

Test Availability: Daily, 24 hours

Turnaround Time: Results are reported within 3 days.

Special Instructions: **Specimen site** and **date/time of collection** are required for specimen processing.

Specimen

Specimen Type:

Swab of vagina, cervix, urethra, rectum, throat, endocervix, newborn eye

Joint fluid, first few drops of voided urine

Container:

- Sterile container
- Swab transport medium
 - White top, Liquid Stuart (CHC #359) or
 - Red top double swab, Liquid Stuart (CHC #19092) or
 - NP flexible wire swab (CHC #811)

Collection:**Cervix:**

1. Remove mucus and secretions from the cervix with a swab and discard.
2. With a new sterile swab, firmly sample the endocervical canal.
3. Place in swab culturette.

Joint Fluid:

1. Disinfect overlying skin with 2% tincture of iodine
2. Collect 0.5-1 mL of specimen via percutaneous needle aspiration or surgery.
3. Transport to laboratory in sterile container <15 minutes.

Newborn Eye:

1. Swab: Pass moistened swab two times over lower conjunctiva. Avoid eyelid border and lashes.
2. Place in swab culturette.

Rectal Swab:

1. Insert swab approximately 1 inch into anal canal.
2. Gently move the swab from side to side to sample the anal crypts.
3. If fecal contamination occurs, discard swab and use another to obtain specimen.
4. Place swab in culturette.

Throat Swab:

1. Depress tongue with tongue depressor.
2. Sample the posterior pharynx, tonsils, and inflamed areas with a sterile swab.
3. Place swab in culturette.

Urethra (Males):

1. Insert an urethrogenital swab 2 to 4 cm into the urethral lumen, rotate swab.
2. Leave in place for at least 2 seconds to facilitate absorption.
3. Place swab in culturette.

Vaginal:

1. Wipe away excessive amount of secretion or discharge.
2. Obtain secretions from mucosal membrane of the vaginal vault with a sterile swab.
3. If smear is also requested, use a second swab.
4. Place swab in culturette.

Transport/Storage:

Onsite collections: Transport to the Microbiology Laboratory immediately. **Do not refrigerate.** Refrigeration may prevent the recovery of *Neisseria gonorrhoeae*.

Offsite collections: Do not refrigerate, store at room temperature. Specimens must be promptly transported to the laboratory, with the next available courier, not to exceed 24 hours from the time of collection.

Sample Rejection:

Improperly labeled specimen; specimens with prolonged transit time (see Transport/Storage for requirements); specimen not submitted in appropriate transport container; insufficient volume; external contamination. If an unacceptable specimen is received, the physician or nursing station will be notified and another specimen will be requested before the specimen is discarded.

Interpretive**Reference Range:**

No *Neisseria gonorrhoeae* isolated.

Alert Value:

If *Neisseria gonorrhoeae* is isolated, results will be called to the physician or patient's nurse.

Limitations:

Herpes simplex virus, *Chlamydia*, and *Ureaplasma urealyticum* are not recovered by this procedure. Refer to separate listings.

Methodology:

Aerobic culture with selective (Thayer - Martin) and nonselective media.

References:

Cook, JH, and M Pezzlo (1992). Specimen receipt and accessioning. Section 1. Aerobic bacteriology, 1.2.1-4. In HD Isenberg (ed) Clinical Microbiology Procedures Handbook. American Society for Microbiology, Washington DC

Miller, J Michael (1999) A Guide To Specimen Management in Clinical Microbiology, American Society for Microbiology, Washington DC

Miller, J Michael, and HT Holmes (1999) Specimen Collection, Transport, and Storage In PR Murray et al, (ed), Manual of Clinical Microbiology, 7th edition, American Society for Microbiology, Washington DC, pp 33-104

Updates:

3/23/2010: CPT Updates

4/25/2012: Addition of Alert Value.

11/20/2014: Offsite collection information added.

7/1/2016: Direct inoculation procedure no longer performed.