
Lab Dept: Microbiology/Virology

Test Name: MISCELLANEOUS CULTURE AND GRAM STAIN

General Information

Lab Order Codes: MMC

CPT Codes: 87070 – Culture, bacterial; any other source except urine, blood or stool, with isolation and presumptive identification of isolates
87205 – Smear, primary source with interpretation; Gram or Giemsa stain for bacteria, fungi or cell types

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) and to aid in patient treatment management.

87076 – Anaerobic isolate, additional methods required for definitive identification of isolates
87077 – Aerobic isolate, additional methods required for definitive identification, each isolate (if appropriate)
87106 – Culture, fungi, definitive identification, each organism, yeast (if appropriate)
87107 – Culture, mold, definitive identification, each organism, mold (if appropriate)
87147 – Culture, typing; immunologic method, other than immunofluorescence (e.g., agglutination grouping), per antiserum (if appropriate)
87184 – Susceptibility studies, disk method, per plate (if appropriate)
87185 – Enzyme detection (eg, beta lactamase), per enzyme (if appropriate)
87186 – Susceptibility studies, microdilution or agar dilution, each multi-antimicrobial, per plate (if appropriate)
87206 – Smear, primary source with interpretation, fluorescent and/or acid fast stain for bacteria, fungi or cell types (if appropriate)

Test Includes: Gram stain, culture for aerobes and less fastidious anaerobes if appropriate. All aerobic organisms will be identified. Anaerobic organisms will be characterized or identified depending on the nature of the culture.

Logistics

Lab Testing Sections: Microbiology

Phone Numbers: MIN Lab: 612-813-5866

STP Lab: 651-220-6555

Test Availability: Daily, 24 hours

Turnaround Time: Preliminary report available at 1 day, final report within 2 - 5 days.

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

Specimen

Specimen Type: Shunt tubing and other specimen types that would not be considered an abscess, body fluid, skin or wound source. Please refer to separate listings for [Abscess Culture](#), [Body Fluid Culture](#), [Skin Culture](#), or [Wound Culture](#).

Container: Sterile container or swab transport system

Transport/Storage: Transport to the Microbiology Laboratory immediately at room temperature.

Sample Rejection: Specimen with a transit time exceeding 2 hours after collection; specimen not submitted in appropriate transport container; improperly labeled specimen; 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

Methodology: Culture

Reference Range: No growth

Alert Value:

- Significant isolates from a sterile site will be called to the physician or patient's nurse.
- Gram-negative rods identified as ESBL or Carbapenemase producers will be called to the physician or patient's nurse. Infection Prevention will be notified.
- If MRSA is isolated for the first time, and the patient location is not Emergency department, the result will be called to the physician or patient's nurse.

Limitations: Specimens routinely screened for rapid growing anaerobes (e.g. *P. acnes*). Fastidious anaerobes may not be recovered despite significant efforts to collect and properly submit a specimen. If fastidious anaerobes are suspected, specifically order [Anaerobic Culture](#).

Any specimen submitted for microbial culture can be contaminated with colonizing organisms that are not contributing to disease. Organisms most likely to contaminate specimens of this type include, but are not limited to, *Corynebacterium* sp and coagulase-negative staphylococci. However, these organisms may be pathogenic in certain settings.

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:

3/7/2011: CPT Updates

4/25/2012: Added Reference Range, Alert Value and Limitations.

6/19/2012: Updated Alert Value message