

Cystic Fibrosis Culture Panel

Order Name: **CF SPUTUM**Test Number: 6002950
Revision Date: 09/21/2017

TEST NAME		ME	THODOLOGY	LOINC CODE	
Cystic Fibrosis Culture Panel		<u>Cu</u>	lture		
SPECIMEN REQUIREMENTS					
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment	
Preferred	10 mL (5 mL)	Respiratory specimen	Sterile Screwtop Container	Refrigerated	
GENERAL INFORMATION					
Testing Schedule	Daily				
Expected TAT	4 Days				
Clinical Use	Identifies respiratory p	Identifies respiratory pathogens using Cystic protocol			
CPT Code(s)	87070; 87102; 87116	87070; 87102; 87116			
Service Provided By	(labo	corp			

Oklahoma, Inc.