

Nocardia Culture

Order Name: C NOCARDIA
Test Number: 6000305
Revision Date: 09/27/2017

TEST NAME		METHODOLOGY L		LOINC CODE
Nocardia Culture		Culture		
SPECIMEN REQU	JIREMENTS			
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	See Instructions	Tissue or Fluid	Sterile Screwtop Container	Room Temperature
Alternate 1	See Instructions	Swab	Copan eSwab - White (Regular size)	Room Temperature
Alternate 2	See Instructions	Respiratory specimen	Sterile Screwtop Container	Room Temperature
Instructions	Fluid and tissue specimens a	Fluid and tissue specimens are preferred over swabs for optimal recovery of pathogens.		

GENERAL INFORMATION	
Testing Schedule	Sun-Sat
Expected TAT	28 Days
CPT Code(s)	87070
Service Provided By	labcorp Oklahoma, Inc.