


**Cytomegalovirus (CMV) Rapid Culture**

Order Name: **C CMV Rapid**  
Test Number: 6908209  
Revision Date: 06/26/2024

TEST NAME	METHODOLOGY	LOINC CODE
Cytomegalovirus (CMV) Rapid Culture	Shell Vial Culture	

SPECIMEN REQUIREMENTS				
Specimen	Specimen Volume (min)	Specimen Type	Specimen Container	Transport Environment
Preferred	1 mL lung exudate or 1 cc lung biopsy	See Instructions	Sterile Screwtop Container	Refrigerated
Instructions	<p><b>Specimen Type:</b> Sterile leakproof urine container or two green-top (heparin) tubes or viral transport tube (throat, cervical, semen, biopsy sources) Either sodium heparin or lithium heparin tubes are acceptable for this test.</p> <p><b>Specimen Storage:</b> <b>Do NOT freeze.</b> Maintain blood at room temperature; other specimen sources should be refrigerated.</p> <p><b>Specimen Collection:</b> <b>BRONCHOALVEOLAR LAVAGE:</b> Submit 10-50 mL fluid in sterile leakproof container and refrigerate.</p> <p><b>URINE:</b> A first morning clean catch urine should be submitted in a sterile screw-cap container. Refrigerate immediately and ship at 4°C. <b>Do NOT freeze.</b></p> <p><b>BLOOD/BUFFY COAT/BONE MARROW:</b> Collect two green-top (heparin) tubes. Transport at room temperature as soon as possible. <b>Do NOT freeze.</b></p> <p><b>OTHER:</b> Collect a viral transport for throat, cervical, semen, and biopsy sources. Refrigerate immediately and ship at 4°C. <b>Do NOT freeze.</b></p> <p><b>Special Instructions:</b> If reflex test is performed, additional charges/CPT code(s) may apply. Submit one specimen per test requested. Specify the exact specimen source/origin (eg, urine). Indicate a specific test number on the request form.</p>			

GENERAL INFORMATION	
Expected TAT	2 - 5 days
CPT Code(s)	87254
Service Provided By	 <b>labcorp</b> Oklahoma, Inc.