

Overview

Useful For

Detecting *Chlamydia trachomatis* using throat swabs collected by the patient in a healthcare setting

This test is **not intended for use** in medico-legal applications.

This test is **not useful for** the detection of other *Chlamydia* species.

Method Name

Only orderable as part of a profile. For more information see SCCGT / *Chlamydia trachomatis* and *Neisseria gonorrhoeae*, Self-Collect, Amplified RNA, Throat.

Transcription-Mediated Amplification

NY State Available

Yes

Specimen

Specimen Type

Varies

Specimen Required

Only orderable as part of a profile. For more information see SCCGT / *Chlamydia trachomatis* and *Neisseria gonorrhoeae*, Self-Collect, Amplified RNA, Throat.

Specimen Type: Oropharynx/pharynx/throat

Supplies: Aptima Throat Swab Self-Collection Kit (T1002)

Container/Tube: Aptima Multitest Swab

Specimen Volume: Swab

Collection Instructions:

1. **Specimens must be collected in a healthcare setting by the patient using the Aptima Multitest Swab** (provided in T1002 or available separately).
2. Provide patient with the Aptima Throat Swab Self-Collection Kit or Aptima Multitest Swab and collection instructions.
3. Instruct patient to collect the specimen following the instructions provided and then return swab to the healthcare professional once complete.
4. Once patient returns the specimen, ensure the tube is securely capped, and label tube with patient's entire name and collection date and time.
5. Maintain swab container at either 4 to 30 degrees C (refrigerated temperature is preferred) or -20 to -70 degrees C,

and transport within 60 days of collection.

Specimen Minimum Volume

See Specimen Required

Reject Due To

Transport tubes containing a cleaning swab or more than 1 swab No swab present in Aptima vial	Reject
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Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)		APTIMA VIAL
	Ambient		APTIMA VIAL
	Frozen		APTIMA VIAL

Clinical & Interpretive

Clinical Information

Chlamydia is caused by the obligate intracellular bacterium *Chlamydia trachomatis* and is the most prevalent sexually transmitted infection (STI) caused by bacteria in the United States. In 2020, over 1.5 million documented cases were reported to the Centers for Disease Control and Prevention (CDC). Given that 3 out of 4 infected women and 1 out of 2 infected men are initially asymptomatic, the actual prevalence of disease is thought to be much greater than reported. *C trachomatis* causes genitourinary infections in women and men and may be associated with dysuria as well as vaginal, urethral, or Throat discharge. In women, complications include pelvic inflammatory disease, salpingitis, and infertility. Approximately 25% to 30% of women who develop acute salpingitis become infertile. Complications among men are rare but include epididymitis and sterility. Rarely, genital chlamydial infection can cause arthritis with associated skin lesions and ocular inflammation (Reiter syndrome). *C trachomatis* can be transmitted from the mother during delivery and is associated with conjunctivitis and pneumonia in the newborn. Finally, *C trachomatis* may cause hepatitis and pharyngitis in adults.

Once detected, the infection is easily treated by a short course of antibiotic therapy. Annual chlamydia screening is now recommended for all sexually active women aged 25 years and younger and for older women with risk factors for infection, such as a new sex partner or multiple sex partners. The CDC also recommends that all pregnant women be given a screening test for chlamydia infection. Repeat testing for test-of-cure is not recommended after treatment with

a standard treatment regimen unless patient compliance is in question, reinfection is suspected, or the patient's symptoms persist. Repeat testing of pregnant women, 3 weeks after completion of therapy, is also recommended to ensure therapeutic cure, although residual nucleic acid may remain in the absence of active infection.

Reference Values

Only orderable as part of a profile. For more information see SCCGT / *Chlamydia trachomatis* and *Neisseria gonorrhoeae*, Self-Collect, Amplified RNA, Throat.

Negative

Interpretation

A positive result indicates the presence of nucleic acid from *Chlamydia trachomatis*.

A negative result indicates the absence of *C trachomatis* nucleic acid. A negative result does not exclude the possibility of infection. If clinical indications strongly suggest chlamydial infection, additional specimens should be collected for testing.

A result of inconclusive indicates that a new specimen should be collected.

The predictive value of an assay depends on the prevalence of the disease in any specific population. In settings with a high prevalence of sexually transmitted infections, positive assay results have a high likelihood of being true-positive results. In settings with a low prevalence of sexually transmitted infections, or in any setting in which a patient's clinical signs and symptoms or risk factors are inconsistent with chlamydial urogenital infection, positive results should be carefully assessed, and the patient retested by other methods if appropriate.

Cautions

The performance of this assay has not been evaluated in adolescents younger than 14 years.

This report is intended for clinical monitoring or management of patients; it is not intended for use in medico-legal applications.

Appropriate specimen collection and handling is necessary for optimal assay performance.

Results should be interpreted in conjunction with other laboratory and clinical information.

A negative test result does not exclude the possibility of infection. Improper specimen collection, concurrent antibiotic therapy, presence of inhibitors, or low numbers of organisms in the specimen (ie, below the sensitivity of the test) may cause false-negative test results.

In low-prevalence populations, positive results must be interpreted carefully, as false-positive results may occur more frequently than true-positive results in this setting.

In general, this assay should not be used to assess therapeutic success or failure since nucleic acids from these organisms may persist for 3 weeks or more following antimicrobial therapy.

No interference is expected due to:

- Blood
- Lubricants and spermicides

The effects of specimen types other than those listed in Specimen Required and specimen collection variables have not been determined.

This assay detects plasmid-free variants of *Chlamydia trachomatis*.

This assay does not detect *Chlamydia pneumoniae* or other *Chlamydia* species.

Clinical Reference

1. Workowski KA, Bachmann LH, Chan PA, et al. Sexually transmitted infections treatment guidelines, 2021. MMWR Recomm Rep. 2021;70(4):1-187. doi:10.15585/mmwr.rr7004a1
2. Adamson PC, Klausner JD. Diagnostic test for detecting Chlamydia trachomatis and Neisseria gonorrhoeae in rectal and pharyngeal specimens. J Clin Microbiol. 2022;60(4):e0021121. doi:10.1128/JCM.00211-21

Performance**Method Description**

The HOLOGIC APTIMA Combo 2 Assay combines the technologies of target capture, transcription-mediated amplification, and dual kinetic assay. The detection of the ribosomal RNA amplification product sequences (amplicon) is achieved using nucleic acid hybridization. Single-stranded chemiluminescent DNA probes are labeled and combine with amplicon to form stable RNA:DNA hybrids. Light emitted from the labeled RNA:DNA hybrids is measured as photon signals in a luminometer. (Package insert: APTIMA Combo 2 Assay, AW-25929-001. Hologic, Inc; Rev 002, 06/2023)

PDF Report

No

Day(s) Performed

Monday through Sunday

Report Available

1 to 4 days

Specimen Retention Time

7 days

Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Superior Drive

Fees & Codes

Fees

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

This test has been modified from the manufacturer's instructions. Its performance characteristics were determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the US Food and Drug Administration.

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
SCCTT	C trach, RNA, SelfCollect, Throat	43304-5

Result ID	Test Result Name	Result LOINC® Value
621932	Chlamydia trachomatis amplified RNA	43304-5