

Fungal Culture, Routine

# **Overview**

### **Useful For**

Diagnosing fungal infections from specimens other than blood, skin, hair, nails, and vagina (separate tests are available for these specimen sites)

### **Reflex Tests**

Test Id	Reporting Name	Available Separately	Always Performed
D2F	D2 Fungal Sequencing	No, (Bill Only)	No
	Identification		
FUNA	Fungal Ident Panel A	No, (Bill Only)	No
FUNB	Fungal Ident Panel B	No, (Bill Only)	No
LCCI	Ident Rapid PCR	No, (Bill Only)	No
	Coccidioides		
LCHB	ld,	No, (Bill Only)	No
	Histoplasma/Blastomyces		
	PCR		
RMALF	Id MALDI-TOF Mass Spec	No, (Bill Only)	No
	Fungi		
TISSR	Tissue Processing	No, (Bill Only)	No
RMALY	Id MALDI-TOF Mass Spec	No, (Bill Only)	No
	Yeast		
LCCA	Id, Candida auris Rapid PCR	No, (Bill Only)	No

## **Testing Algorithm**

When this test is ordered, the reflex tests may be performed at an additional charge.

For more information see Meningitis/Encephalitis Panel Algorithm.

## **Special Instructions**

• Meningitis/Encephalitis Panel Algorithm

### **Method Name**

Conventional Agar Culture/Macroscopy/Microscopy/D2 rDNA Gene Sequencing/Real-Time Polymerase Chain Reaction (rtPCR)/Matrix-Assisted Laser Desorption/Ionization Time-Of-Flight Mass Spectrometry (MALDI-TOF MS) Dimorphic Pathogen Identification Confirmation: D2 rDNA Gene Sequencing/rtPCR/MALDI-TOF MS

## **NY State Available**

Yes



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# **Specimen**

## **Specimen Type**

**Varies** 

# **Ordering Guidance**

*Nocardia* and the other aerobic actinomycetes are not fungi, therefore a fungal culture should not be ordered. However, these organisms grow well on mycobacterial medium. When infection with this group of organisms is suspected, order CTB / Mycobacteria and *Nocardia* Culture, Varies.

# **Shipping Instructions**

Specimen should arrive within 24 hours of collection.

### **Necessary Information**

Specimen source is required.

### **Specimen Required**

Submit only 1 of the following specimens:

#### **Preferred:**

Specimen Type: Body fluid

Container/Tube: Sterile container
Specimen Volume: Entire collection

Specimen Type: Fresh tissue
Container/Tube: Sterile container
Specimen Volume: Pea size

Collection Instructions: Tissue should be placed in small amount of sterile saline or sterile water.

#### Acceptable:

Specimen Type: Bone marrow

Container/Tube: Sterile container, SPS/Isolator system, or green top (lithium or sodium heparin)

**Specimen Volume:** Entire collection

Specimen Type: Respiratory specimen Container/Tube: Sterile container Specimen Volume: Entire collection

Specimen Type: Urine

Container/Tube: Sterile container

Specimen Volume: 2 mL



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Collection Instructions: Collect a random urine specimen.

Fresh tissue or body fluid are preferred over a swab specimen. Recovery of mycobacteria from swabs is generally very low yield. Only submit a swab specimen if tissue biopsy or fluid aspiration is not possible.

Specimen Type: Swab
Supplies: BD E-Swab (T853)

Sources: Dermal, ear, mouth, ocular, throat, or wound

Container/Tube: Sterile, screw-capped tube containing Liquid Amies Medium with flocked swab (eg, E-Swab)

Specimen Volume: 1 mL in swab container with swab

**Collection Instructions:** 

- 1. Before collecting specimen, wipe away any excessive amount of secretion and discharge, if appropriate.
- 2. Obtain secretions or fluid from source with sterile flocked swab. **Paranasal sinus collections must use a nasopharyngeal flocked swab.**
- 3. Place flocked swab in sterile, screw-capped tube containing 1 mL of Liquid Amies Medium.
- 4. If smear and culture are requested or both a bacterial culture and fungal culture are requested, collect a second swab to maximize test sensitivity. Submit each swab in a separate sterile, screw-capped tube with 1 mL of Liquid Amies Medium

#### **Forms**

If not ordering electronically, complete, print, and send a Microbiology Test Request (T244) with the specimen.

### **Specimen Minimum Volume**

Bone marrow or body fluid: 1 mL; Cerebrospinal fluid: 0.5 mL; Respiratory specimen: 1.5 mL; All other specimen types: See Specimen Required

### Reject Due To

Blood or fixed	Reject
tissue	
Specimen in	
viral transport	
medium	
(including but	
not limited to	
M4, M5, BD	
viral transport	
media,	
thioglycolate	
broth)	
Swab sources	
of respiratory	
fluids (eg,	
sputum) or	
nasal swab	
Wood shaft or	



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Ī	charcoal swab
	Catheter tips
	Petri dish
	Stool
	Blades from
	scalpels or
	razors
	Boric acid
	tubes
	Aptima swab
	Culture
	transport
	swabs (eg,
	Culturette)

## **Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	7 days	
	Ambient	7 days	

# Clinical & Interpretive

## **Clinical Information**

Many fungi in the environment cause disease in immunocompromised human hosts. Accordingly, the range of potential pathogenic fungi has increased as the number of immunosuppressed individuals (persons with AIDS, patients receiving chemotherapy or transplant rejection therapy, etc) has increased. Isolation and identification of the infecting fungus in the clinical laboratory can help guide patient care.

### **Reference Values**

Negative

If positive, fungus will be identified.

### Interpretation

Positive cultures of yeast and filamentous fungi are reported with the organism identification.

The clinician must determine whether the presence of an organism is significant or not. A final negative report is issued after 24 days of incubation.

# **Cautions**

For optimal recovery of organisms, sufficient specimen should be transported within 24 hours of collection.

Fungi can be pathogens, colonizers, or contaminants. Correlation of the patient clinical condition with culture results is necessary.



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#### Clinical Reference

Ashbee HR. General approaches for direction detection and identification of fungi. In: Carroll KC, Pfaller MA, Landry ML, et al, eds. Manual of Clinical Microbiology. 12th ed. Vol 1. ASM Press; 2019:2035-2055

# **Performance**

# **Method Description**

Specimens are cultured on selective fungal media (eg, inhibitory mold agar and brain heart infusion blood agar with chloramphenicol and gentamicin). Respiratory sources also are cultured on brain heart infusion agar with chloramphenicol, gentamicin, and cycloheximide. Cultures are incubated for 24 days at 30 degrees C.

Identification of fungi is based on colonial and microscopic morphology, matrix-assisted laser desorption/ionization time-of-flight mass spectrometry, laboratory-developed real-time polymerase chain reaction assays and/or D2 ribosomal RNA gene sequencing, as applicable. (Babady NE, Buckwalter SP, Hall L, Le Febre KM, Binnicker MJ, Wengenack NL. Detection of Blastomyces dermatitidis and Histoplasma capsulatum from culture isolates and clinical specimens by use of real-time PCR. J Clin Microbiol. 2011;49[9]:3204-3208; Binnicker MJ, Buckwalter SP, Eisberner JJ, et al. Detection of Coccidioides species in clinical specimens by real-time PCR. J Clin Microbiol. 2007;45[1]:173-178; Dhiman N, Hall L, Wohlfiel SL, Buckwalter SP, Wengenack NL. Performance and cost analysis of matrix-assisted laser desorption ionization-time of flight mass spectrometry for routine identification of yeast. J Clin Microbiol. 2011;49[4]:1614-1616; Hall L, Wohlfiel S, Roberts GD. Experience with the MicroSeq D2 large-subunit ribosomal DNA sequencing kit for identification of filamentous fungi encountered in the clinical laboratory. J Clin Microbiol. 2004;42[2]:622-626; Theel ES, Schmitt BH, Hall L, et al. Formic acid-based direct, on-plate testing of yeast and Corynebacterium species by Bruker Biotyper matrix-assisted laser desorption ionization-time of flight mass spectrometry. J Clin Microbiol. 2012;50[9]:3093-3095; Theel ES, Hall L, Mandrekar J, Wengenack NL. Dermatophyte identification using matrix-assisted laser desorption ionization-time of flight mass spectrometry. J Clin Microbiol. 2011;49[12]:4067-4071; Fida M, Wengenack NL, Theel ES. Mycology: General approaches for direct and indirect detection and identification of fungi. In: Carroll KC, Pfaller MA, Pritt BS, et al. Manual of Clinical Microbiology. 13th ed. ASM Press; 2023)

### **PDF Report**

No

### Day(s) Performed

Monday through Sunday

### Report Available

24 to 35 days

## **Specimen Retention Time**

Raw specimen:7 days

### Performing Laboratory Location

Mayo Clinic Laboratories - Rochester Main Campus



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### **Fees & Codes**

#### **Fees**

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

### **Test Classification**

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

### **CPT Code Information**

87102-Fungal culture, routine

87106-Id MALDI-TOF Mass Spec Yeast (if appropriate)

87107-Id MALDI-TOF Mass Spec Fungi (if appropriate)

87107-Fungal identification panel A (if appropriate)

87107-Fungal identification panel B (if appropriate)

87150 x 2-Identification *Histoplasma/Blastomyces*, PCR (if appropriate)

87153-D2 fungal sequencing identification (if appropriate)

87176-Tissue processing (if appropriate)

87150- Id, Candida auris Rapid PCR (if appropriate)

### **LOINC®** Information

Test ID	Test Order Name	Order LOINC® Value
FGEN	Fungal Culture, Routine	51723-5

Result ID	Test Result Name	Result LOINC® Value
FGEN	Fungal Culture, Routine	51723-5