Parasitic Investigation of Stool Specimens Algorithm

Patients with watery diarrhea*
- Risk factors for parasitic infection include:
  - AIDS
  - ≤5 years old (or contact)
  - Camper or backpacker
  - Contact with farm animals
  - Involved in outbreak
    - Drinking/Recreational water source
    - Day care center

- CRYPTS / Cryptosporidium Antigen, Feces
- GIAR / Giardia Antigen, Feces**

** Positive
  - No additional testing required unless clinical picture indicates
  - CYCL / Cyclospora Stain and
  - LCMSP / Microsporidia species, Molecular Detection, PCR (if immunocompromised)
  - If diarrhea persists

** Negative
  - If patient has diarrhea
  - If intestinal parasites are still suspected, obtain at least 2 more stool specimens, collected on separate days over a 10 day period

- OAP / Parasitic Examination
  - POSITIVE
    - No additional testing required unless clinical picture indicates

  - NEGATIVE

- PARID / Parasitic Identification
  - POSSITIVE
    - No additional testing required unless clinical picture indicates

  - NEGATIVE

Object submitted is not a parasite. Consider submitting additional specimens or evaluate for delusional parasitosis

* Two specimens should be tested for Giardia antigen to exclude a diagnosis of giardiasis

** Bacterial and viral causes of diarrhea should also be considered. If ordering 3 or more tests for evaluation of infectious causes of diarrhea, it is more cost effective to order the GIP / GI Pathogen Panel, PCR, Feces rather than tests for individual pathogens.

***The primary helminth of concern is Strongyloides stercoralis, which is endemic in regions of the rural south eastern United States (eg Appalachia)