Test Definition: MCRNA

Chlamydia trachomatis, Miscellaneous Sites, by Nucleic Acid Amplification (GEN-PROBE)

Reporting Title: C. trach, Misc, Amplified RNA
Performing Location: Rochester

Specimen Requirements:

Specimen source is required.

Submit only 1 of the following specimens:

Swab specimen must be collected using an APTIMA Collection Unisex Swab (Supply T583) or APTIMA Collection Vaginal Swab (Supply T584). These swabs are contained in the APTIMA Collection Kit.

Specimen Type: Oral/throat or ocular (corneal/conjunctiva) or rectal/anal
Container/Tube: APTIMA Swab Collection System (Supply T583)
Specimen Volume: Swab
Collection Instructions:
1. Swab site using APTIMA Collection Unisex Swab.
2. Place swab in transport tube provided in collection kit. Snap off swab at score line so swab fits into closed tube.
3. Cap tube securely, and label tube with patient's entire name, and date and time of collection.
4. Transport swab container to laboratory and store (refrigerated is preferred) within 60 days of collection.

Specimen Type: Peritoneal fluid (pelvic wash, cul-de-sac fluid)
Container/Tube: APTIMA Specimen Transfer Tube (Supply T652)
Specimen Volume: 1 mL
Collection Instructions:
1. Transfer specimen into the APTIMA Specimen Transfer Tube (Supply T652).
2. Cap tube securely, and label tube with patient's entire name, and date and time of collection.
3. Transport APTIMA Specimen Transfer Tube to laboratory (refrigerated is preferred) within 30 days of collection.

Specimen Type	Temperature	Time
Varies	Refrigerated (preferred)	
	Ambient	
	Frozen	

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
MCRNA	SRC11	SOURCE:	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
SRC11	SOURCE:	Alphanumeric		N/A
34507	C. trach, Misc, Amplified RNA	Alphanumeric		43304-5

CPT Code: 1 × 87491

Reference Values:

Negative