

Reporting Title: Herpes Simplex Virus PCR
Performing Location: New England

Specimen Requirements:

Specimen source is required.

Submit only 1 of the following specimens:

Specimen Type: Genital

Sources: Cervix, rectum, urethra, vagina, other genital site

Container/Tube: BBL CultureSwab (Supply T092)

Specimen Volume: Swab

Collection Instructions: Place swab back into swab cylinder.

Specimen Type: Spinal fluid

Container/Tube: Sterile vial

Specimen Volume: 0.5 mL

Collection Instructions: Do not centrifuge.

Specimen Type: Swab

Sources: Dermal, eye, throat, anal/rectal, urethral

Container/Tube: BBL CultureSwab (Supply T092)

Specimen Volume: Swab

Collection Instructions: Place swab back into swab cylinder.

Specimen Type	Temperature	Time
Varies	Refrigerated (preferred)	7 days
	Frozen	7 days

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
LCHSV	SS010	Specimen Source	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
SS010	Specimen Source	Alphanumeric		31208-2
34638	HSV 1, PCR	Alphanumeric		In Process
34639	HSV 2, PCR	Alphanumeric		In Process
34640	HSV type Indeterminate, PCR	Alphanumeric		In Process

CPT Code: 1 x 87529**Reference Values:**

Negative