



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Test Title	Shigella Spp. Identification / Confirmation of Referred Isolate Methodology: Biochemical Testing, Serotyping
Sample Requirements	1. Sample type(s): actively growing pure culture on suitable medium 2. Rejection criteria: N/A
Sampling Materials	1. Sample container: taped plate or parafilm culture tube
Procedural Notes	1. Clinical Test Request Form 2. CPT code: 87077, 87147 x 5
Shipping Instructions	1. Temperature/preservative instructions: room temperature 2. Package according to Biological Substance, Category A for suspect <i>S. dysenteriae</i> and B for all other <i>Shigella</i> shipping guidelines. 3. Ship to: Idaho Bureau of Laboratories ATTENTION: Bacteriology Laboratory 2220 Old Penitentiary Rd Boise, ID 83712
Reporting and Turnaround Time (TAT)	1. TAT: 4-6 working days if pure culture 2. This disease must be reported to your local health district or to the state Bureau of Communicable Disease Prevention according to the rules and regulations governing Idaho reportable diseases (IDAPA 16.02.10). 3. Reference range: N/A