

Overview

Useful For

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

Testing Algorithm

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

See [Meningitis/Encephalitis Panel Algorithm](#) in Special Instructions.

Special Instructions

- [Meningitis/Encephalitis Panel Algorithm](#)

Reflex Tests

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

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

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

Specimen Type: Body fluid

Container/Tube: Sterile container

Specimen Volume: Entire collection

Specimen Type: Bone marrow

Container/Tube: Sterile container

Specimen Volume: Entire collection

Specimen Type: Fresh tissue

Container/Tube: Sterile container

Specimen Volume: Pea sized

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

Specimen Type: Respiratory specimen

Container/Tube: Sterile container

Specimen Volume: Entire collection

Specimen Type: Swab

Fresh tissue or body fluid is the preferred specimen type instead of a swab specimen.

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

Container/Tube: Culture transport swab (noncharcoal) Culturette

Specimen Volume: 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 swab.
3. If smear and culture are requested or both a bacterial culture and fungal culture are requested, collect a second swab to maximize test sensitivity.

Specimen Type: Urine

Container/Tube: Sterile container

Specimen Volume: 2 mL

Collection Instructions: Collect a random urine specimen.

Forms

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

Reject Due To

Blood or fixed tissue	Rejec
Specimen in viral transport (including but not limited to M4, M5, BD viral transport media, thioglycolate broth)	t
Swab sources of respiratory fluids or nasal swab	

Wood shaft or charcoal swab
Catheter tips
Petri dish
Stool

Specimen Minimum Volume

Bone Marrow or Body Fluid: 1 mL

Respiratory Specimen: 1.5 mL

Tissue: pea-sized piece

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 (eg, persons with AIDS, patients receiving chemotherapy or transplant rejection therapy) 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 or not the presence of an organism is significant. 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.

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 (MALDI-TOF) 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 MF, 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 Sep;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 Jan;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 Apr;49(4):1614-1616; Hall L, Wohlfiel SL, 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 Feb;42(2):622-626; Theel ES, Schmidt 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 Sep;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 Dec;49(12):4067-4071)

PDF Report

No

Specimen Retention Time

Raw specimen saved 7 days

Performing Laboratory Location

Rochester

Fees & Codes

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	580-1

Result ID	Reporting Name	LOINC®
FGEN	Fungal Culture, Routine	580-1