

**Reporting Title:** Acid Fast Smear For Mycobacterium

**Performing Location:** Rochester

**Ordering Guidance:**

For the preferred test for rapid, direct detection of *Mycobacterium tuberculosis* from clinical specimens, order MTBRP / *Mycobacterium tuberculosis* Complex, Molecular Detection, PCR, Varies.

**Necessary Information:**

**Specimen source is required.**

**Specimen Requirements:**

**Submit only 1 of the following specimens:**

**Specimen Type:** Body fluid

**Container/Tube:** Sterile container

**Specimen Volume:** 1 mL

**Specimen Type:** Bone marrow

**Container/Tube:** SPS/Isolator System or green top (lithium heparin)

**Specimen Volume:** Entire collection

**Specimen Type:** Gastric washing

**Container/Tube:** Sterile container

**Specimen Volume:** 10 mL

**Collection Instructions:** Neutralize specimen within 4 hours of collection with 100 mg of sodium carbonate per 5 to 10 mL of gastric wash.

**Specimen Type:** Respiratory

**Sources:** Bronchoalveolar lavage fluid, bronchial washing, sputum

**Container/Tube:** Sterile container

**Specimen Volume:** 4 mL

**Collection Instructions:** Collect 3 respiratory specimens for acid-fast smears and culture in patients with clinical and chest X-ray findings compatible with tuberculosis. These 3 specimens should be collected at 8- to 24-hour intervals (24 hours when possible) and should include at least 1 **first-morning** specimen.

**Specimen Type:** Stool

**Supplies:** Stool Collection Kit, Random (T635)

**Container/Tube:** Sterile container

**Specimen Volume:** 5-10 g

**Specimen Type:** Tissue

**Container/Tube:** Sterile container

**Specimen Volume:** 5-10 mm

**Collection Instructions:** Collect a fresh tissue specimen.

**Specimen Type:** Urine

**Container/Tube:** Sterile container  
**Specimen Volume:** 2 mL  
**Collection Instructions:** Collect a random urine specimen.

**Specimen Type:** Swab  
**Additional Information:** Fresh tissue or body fluid is the preferred specimen type instead of a swab specimen. Recovery of mycobacteria and aerobic actinomycetes from swabs is variable.

**Sources:** Wound, tissue, or body fluid  
**Container/Tube:** Culture transport swab (noncharcoal) Culturette  
**Specimen Volume:** Adequate specimen  
**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 mycobacterial culture are requested, collect a second swab to maximize test sensitivity.

**Forms:**  
If not ordering electronically, complete, print, and send 1 of the following forms with the specimen:  
[-Microbiology Test Request](#) (T244)  
[-General Request](#) (T239)

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	7 days	
	Ambient	7 days	

Ask at Order Entry (AOE) Questions:

Test ID	Question ID	Description	Type	Reportable
SAFB	Q00M0050	Specimen Source	Plain Text	Yes

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
SAFB	Acid Fast Smear For Mycobacterium	Alphanumeric		676-7

LOINC® and CPT codes are provided by the performing laboratory.

**Supplemental Report:**  
No

**CPT Code Information:**  
87206

87176-Tissue processing (if appropriate)  
87015-Mycobacteria culture, concentration (if appropriate)

Reflex Tests:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
TBT	Concentration, Mycobacteria	1	87015	No	No, (Bill Only)
TISSR	Tissue Processing	1	87176	No	No, (Bill Only)

Reference Values:

Negative (reported as positive or negative)