

**Reporting Title:** Streptococcus pneumoniae Ag, CSF  
**Performing Location:** Rochester

**Additional Testing Requirements:**  
According to the College of American Pathologists (CAP, IMM.41830), cerebrospinal fluid (CSF) samples collected to make an initial diagnosis and submitted for detection of *Streptococcus pneumoniae* antigen testing should also be submitted for routine bacterial culture. Mayo Clinic Laboratories recommends that CSF bacterial cultures be performed at the **originating site**.

**Specimen Requirements:**  
**Container/Tube:** Sterile vial  
**Specimen Volume:** 1 mL  
**Collection Instructions:** Submit specimen collected in vial 2, if possible. If not possible, note which vial from which the aliquot was obtained.

**Forms:**  
If not ordering electronically, complete, print, and send [Infectious Disease Serology Test Request](#) (T916) with the specimen.

Specimen Type	Temperature	Time	Special Container
CSF	Refrigerated (preferred)	14 days	
	Frozen	14 days	

**Result Codes:**

Result ID	Reporting Name	Type	Unit	LOINC®
31667	Streptococcus pneumoniae Ag, CSF	Alphanumeric		20489-1

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

**Supplemental Report:**  
No

**CPT Code Information:**  
87899

**Reference Values:**  
Negative  
Reference values apply to all ages.