Advanced Diagnostic Laboratories National Jewish Health®

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SHIP TO: National Jewish Health
Mycobacteriology Laboratory
1400 Jackson Street, Room K422
Denver, CO 80206

1. PATIENT INFORMATION

Patient Name (Last, First) ☐ Male ☐ Female DOB

2. SPECIMEN/ISOLATE INFORMATION

Specimen Source	Isolate Submission Medium
☐ BAL ☐ CSF ☐ Sputum ☐ Sputum (induced) ☐ Stool ☐ Urine	**Liquid**
☐ Tissue (specify) _____	☐ 7H9 broth ☐ MGIT broth ☐ BacT/ALERT broth
☐ Processed Specimen (specify) _____	☐ VersaTrek broth ☐ Other (specify) _____
☐ Cystic Fibrosis (CF) Patient	**Solid**
☐ Environmental Samples: **Contact laboratory before collection**.	☐ 7H10 slant ☐ 7H11 slant ☐ Blood slant
☐ Veterinary sample (specify animal) _____	☐ Chocolate slant ☐ Lowenstein-Jensen slant
☐ Other (specify) _____	☐ Other (specify) _____

Submitted By Phone Fax

Submitter Identification of AFB _____ Actual Specimen Collection Date _____

Identification must be provided for isolates when AST only is ordered. If identification is not provided, identification testing will be performed and billed accordingly.

3. BILLING INFORMATION - INSTITUTIONAL BILLING ONLY

National Jewish Health Advanced Diagnostic Laboratories does not bill patients directly or third-party health insurance. Visit njlabs.org or call for details.

Account Name

Address

City State Zip

Billing Contact

PO # Account #

4. REPORT DELIVERY INFORMATION

Attention

Account Name

Address

City State Zip

☐ Duplicate Report Requested

Name

Phone Secure Fax

5. MOLECULAR, GROWTH DETECTION AND ISOLATE IDENTIFICATION

* If colony morphology resembles MTB complex, DNA probe will be performed. If positive, differentiation within the MTB complex and first-line drug AST on all initial isolates will be performed. All others will be identified using DNA sequencing. If *M. abscessus* is identified, *erm*(41) and *hsp65* will be performed & billed accordingly. Nontuberculous mycobacteria (NTM) AST will be performed upon request.

☐ AFB1	Acid-fast Bacilli (AFB) Smear, Culture & Identification* NAAT on first specimen or by request for subsequent specimen. If AFB smear and NAAT are positive, MTB1 and MTB4 will be performed.	☐ AFB3	Acid-fast Bacilli (AFB) Smear, Culture & Identification (NTM)*
		☐ AFB4	Acid-fast Bacilli (AFB) Identification*
☐ AFB2	Nucleic Acid Amplification Test (NAAT)	☐ AFB5	Differentiation within *M. abscessus* *

6A. ANTIMICROBIAL SUSCEPTIBILITY TESTING (AST) FOR MTB COMPLEX

☐ MTB1	10-Drug agar proportion method	☐ MTB4	Molecular multidrug-resistant (MDR) TB Screen
☐ MTB2	First-Line Drugs: isoniazid, rifampin, ethambutol & pyrazinamide. If resistant, a 10-drug agar proportion test (MTB1) will be performed.	☐ MTB5	Molecular extensively drug-resistant (XDR) TB Screen
		☐ MTB6	Single-Drug MIC (specify)
☐ MTB3	Pyrazinamide MIC (individual test)		

6B. ANTIMICROBIAL SUSCEPTIBILITY TESTING (AST) FOR NTM

Slowly Growing NTM		Rapidly Growing NTM	
☐ NTM1	8-Drug MIC: includes rifampin/ethambutol combo	☐ NTM4	15-Drug MIC: includes amikacin/clofazimine combo
☐ NTM2	12-Drug MIC: includes rifampin/ethambutol combo	☐ NTM5	Single-Drug MIC (specify)
☐ NTM3	Single-Drug MIC (specify)	☐ NTM6	20-Drug Veterinary Panel MIC

7. SPECIAL INSTRUCTIONS

☐ Isolation of mycobacteria from contaminated or impure specimens

INTERNAL USE

Received By Date Account# MRUN Accession