

au of Public I Laboratories	Test Menu
ΤΟΡΙΟ	DESCRIPTION
Test Name	Blood Parasite Smear
Other Name (s)	N/A
Analyte(s)	N/A
Test Code	1200
Lab location	Jacksonville and Miami locations
Department	Microbiology
Pre-Approval Required	None
Required Forms	DH1847
Specimen Sources	Whole Blood
Supplemental Information- Special Specimen Preparation	N/A
Minimum Volume	1 mL (3mL preferred)
Storage Conditions	Store at 2-8°C until shipping
Collection Media	EDTA blood tube, microscopy slides
Specimen Labeling	Patient name, DOB, Collection date and NPI
Packaging and Shipping Instructions and Handling	Ship slides and EDTA blood tube at 15-30°C, to be received at the lab within 48 hours of collection. Ice packs are optional for shipping. Include paperwork with specimens but separate them physically.
Test Methodology	Blood smear microscopy
Turnaround Time	3 days
Result Indicator	Qualitative: Presence and identification of <i>Plasmodium</i> sp, species ID, presence of <i>Babesia</i> genus
Unsatisfactory Specimen	No patient identification on specimen Name on specimen tube and requisition do not match Specimen damaged or leaked in transit Not sent within acceptable temperature range Not sent in EDTA blood tube
Interferences and Limitations	N/A
Additional Information & Notes	Whole blood specimens are analyzed microscopically for the presence of bloodborne parasites
Reference Range	Negative-Positive
Reference Lab	CDC
Reflex testing	N/A