

STATE HYGIENIC LABORATORY Iowa's Environmental and Public Health Laboratory

Requesting Cyclospora Testing at the State Hygienic Laboratory

July 19, 2018

The <u>Iowa Department of Public Health (IDPH)</u> has reported an increase of *Cyclospora* infections that appear to be related to consumption of salads sold by McDonald's Corporation. *Cyclospora* is a reportable disease (<u>https://idph.iowa.gov/CADE/reportable-diseases</u>).

The State Hygienic Laboratory performs testing for the parasite. Labs are not required to use SHL for this testing. At this time, IDPH has not waived the fee for *Cyclospora* testing. SHL will continue to charge for testing as usual. SHL fee for this service is described below.

To order a test for *Cyclospora* at the State Hygienic Laboratory, a collection kit is needed.

 If you need a collection kit, please call the SHL's main number at 319-335-4500 and ask for an ova and parasite kit. Other acceptable transport preservatives include Total-Fix, Proto-Fix or EcoFix.



2. To request a clinical test request form, go the SHL website's home page <u>http://www.shl.uiowa.edu/</u>, and choose Clinical Test Request Forms by clicking on the icon below.

(Continued)

Once on the test request form page, choose the

University of Iowa Research Park 2490 Crosspark Road Coralville, Iowa 52241-4721 319-335-4500 *Fax* 319-335-4555 1-800-421-IOWA lowa Laboratories Complex 2220 South Ankeny Boulevard Ankeny, Iowa 50023-9093 515-725-1600 Fax 515-725-1642 lowa Lakeside Laboratory 1838 Highway 86 Milford, lowa 51351-7267 712-337-3669 Fax 712-337-0227 Mycobacteriology/Mycology/Parasitology test from the menu and the name of your facility from the dropdown list displayed below and then click "Submit."

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| 7824 - ALEGENT HEALTH AT HOME, 703 ROSARY DR, CORNING, IA 7825 - ALEGENT HEALTH CLINIC, 715 HARMONY ST 2ND FL, COUNCIL BLUFFS, IA 7826 - COUNCIL BLUFFS, IA 7827 - ALEGENT HEALTH CLINIC, 715 HARMONY ST 2ND FL, COUNCIL BLUFFS, IA 7828 - COUNCIL BLUFFS, IA 7829 - COUNCIL BLUFFS, IA | 7822 - ALEGENT HEALTH, 1751 M | DISON AVE, COUNCIL BLUFFS, IA |
| 7825 - ALEGENT HEALTH CLINIC, 715 HARMONY ST 2ND FL, COUNCIL BLUFFS, IA | 7823 - ALEGENT HEALTH, 1203 S | OCUST ST, GLENWOOD, IA |
| itep 3. Click submit to generate your customized test request form: | 7824 - ALEGENT HEALTH AT HON | E, 703 ROSARY DR, CORNING, IA |
| | 7825 - ALEGENT HEALTH CLINIC | 715 HARMONY ST 2ND FL, COUNCIL BLUFFS, IA |
| | | |
| Submit | Step 3. Click submit to generate y | ur customized test request form: |
| Submit | | |
| | | Submit |
| This PDF form is preloaded with the selected organization's id and address. Please save the form, fill and print it when you submit | | |

3. After submitting, choose the Modified Acid-Fast Smear for Parasites (*Cyrptosporidium*, *Cyclospora*, *Cystoisospora*) and complete the required fields for sample submission.



Modified Acid-Fast Smear for Parasites (Cryptosporidium, Cyclospora, Cystoisospora)

(Continued)

- 4. The testing fee and description are posted on this SHL web page: <u>http://www.shl.uiowa.edu/testmenu/menupages/smearforoandp.xml</u>
 - a. Fee \$16.77
 - b. CPT Codes 87015, 87207
 - c. Specimen Requirements
 - i. Specimen Type: Stool
 - ii. Patient Preparation: The patient should be instructed not to take any antacids, oily laxatives or anti-diarrheal medications unless prescribed by the physician.
 - iii. Collection Instructions: Collect the specimen using a parasite kit provided by SHL. The kit includes a specimen bag, an absorbent sheet and one Total-Fix vial, which is used to preserve the stool specimen. Pass the stool into a clean, dry, plastic disposable container or place a large plastic bag or kitchen wrap over the toilet seat to catch the specimen. DO NOT MIX URINE OR WATER WITH THE STOOL SPECIMEN.
 - iv. Formed or semi-formed stool: Using the spork built into the lid, add approximately three spoonfuls of firm stool, or five spoonfuls of soft stool to the vial until the liquid reaches the red fill line. Any blood or mucous should be included.
 - v. Liquid stool: Pour the stool into the vial up to the red fill line.
 - vi. Tighten the vial cap completely. A leaking specimen may be unsuitable for testing. Clean the outside of the vial with rubbing alcohol or soap and water if they are soiled. Check to make sure the patient name and date of collection are still readable.
 - vii. Wash your hands thoroughly. Avoid contact with the Total-Fix solution inside the vial. If contact occurs, flush the affected area with water.Contact a physician immediately if you experience any irritation.
 - viii. Temperature and stability: Room temperature (35° C)
 - ix. Unacceptable conditions: Unpreserved stool; improperly collected specimens (rectal swabs); leaking specimen container; submitting multiple specimens within 24 hours; and specimens containing barium, oil, water or urine.