

## Campylobacter Isolate

Revised: 1-31-2025

<b>Test Description</b>	Confirmatory identification of enteric bacteria of public health significance, <i>Campylobacter species</i> .
<b>Test Use</b>	Identification of enteric bacterial pathogen
<b>Test Department</b>	Bacteriology Phone: (860) 920-6596 FAX: (860) 920-6721
<b>Methodology</b>	Bacterial culture on selective media, biochemical identification, MALDI-TOF
<b>Availability</b>	Daily, Monday - Friday
<b>Specimen Requirements</b>	Pure culture of enteric pathogen on agar slant or plate (preferred with a Campy GasPak or equivalent).
<b>Specimen Handling &amp; Transport</b>	Transport isolates to the laboratory at room temperature (15-25°C). Avoid temperature extremes. Follow all applicable federal packaging and shipping regulations.
<b>Requisition Form</b>	Clinical test requisition OL-9B
<b>Required Information</b>	<ul style="list-style-type: none"><li>• Name and address of submitter. Two patient identifiers (ie. name, DOB, Acc.#, MRN), town of residence (city, state, zip). Specimen type or source, date collected, test requested, identity of the enteric pathogen to be confirmed</li><li>• Ensure information on the requisition matches the specimen.</li></ul>
<b>Unacceptable Conditions</b>	<ul style="list-style-type: none"><li>• Unlabeled specimens</li><li>• Specimen with less than 2 unique identifiers (ie. name, DOB, Acc.#, MRN)</li><li>• Specimens that leak or containers that have broken in transit</li><li>• Non-viable isolates</li></ul>