



**CITY AND COUNTY OF SAN FRANCISCO  
PUBLIC HEALTH LABORATORY**  
101 Grove Street, Room 419  
San Francisco, CA 94102  
Tel: (415) 554-2800 Fax: (415) 431-0651  
Godfred Masinde, PhD., Lab Director  
CLIA ID # 05D0643643

## Test Order

### Culture for Identification (Special Pathogens)

|   |   |
|---|---|
| Synonym(s)                              |   |
| Methodology                             | Culture, biochemical identification, MALDI-TOF, 16s sequencing  |
| Acceptable Specimen Type(s) for Testing | Pure isolates   |
| Transport / Collection Medium           | Transport in tubed media, packaged and sealed according to regulations.                               |
| Storage and Preservation of Specimen    | Refrigerate until transported to the laboratory. Transport at room temperature.                       |
| Minimum Volume Required                 | N/A   |
| Additional Collection Instructions      | N/A   |
| Additional Required Information         | <b>Laboratory identification results, laboratory findings, and patient clinical history required.</b> |
| Send Out?                               | Yes   |
| Turnaround Time                         | Up to 8 weeks   |
| Testing Restrictions                    | <b>Patient clinical history required.</b>   |
| Requisition Form(s)                     | <a href="http://sfcddcp.org/document.html?id=1036">http://sfcddcp.org/document.html?id=1036</a>       |
| Limitations / Notes / Disclaimers       |   |

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