

Requesting *Cyclospora* Testing at the State Hygienic Laboratory

July 19, 2018

The [Iowa Department of Public Health \(IDPH\)](#) 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 (<https://idph.iowa.gov/CADE/reportable-diseases>).

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.

1. 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 <http://www.shl.uiowa.edu/>, and choose Clinical Test Request Forms by clicking on the icon below.

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Once on the test request form page, choose the

Mycobacteriology/Myiology/Parasitology test from the menu and the name of your facility from the dropdown list displayed below and then click "Submit."

Step 1. Select the test request form:

- Antibiotic Resistance Surveillance
- Bacteriology
- Blood Lead
- Chlamydia trachomatis/Neisseria gonorrhoeae
- Cystic Fibrosis
- Maternal Screen
- Mycobacteriology/Myiology/Parasitology
- Rabies
- Serology/Immunology
- Viral and Bacterial PCR and DFA

Step 2. Select your organization (listing is sorted by name):

If your organization is not listed or your address is incorrect, please contact the laboratory by calling 319-335-4500 or 800-421-4692, and ask for Client services.

- 7812 - ACKLEY MEDICAL CENTER, 1000 10TH AVE, ACKLEY, IA
- 2062 - ADAIR COUNTY HOME CARE, 117 NW HAYES, GREENFIELD, IA
- 7813 - ADAIR COUNTY MEMORIAL HOSPITAL, 609 SE KENT ST, GREENFIELD, IA
- 7814 - ADAIR COUNTY VETERINARY CLINIC, 407 SE NOBLE, GREENFIELD, IA
- 14308 - ADAMS CO PUBLIC HEALTH, 401 6TH ST, CORNING, IA
- 7815 - ADAMS PET HOSPITAL, 5875 SARATOGA RD, DUBUQUE, IA
- 7816 - ADVANCED PET CARE CLINIC, 4507 ALGONQUIN DR STE A, CEDAR FALLS, IA
- 7817 - AKRON MERCY MEDICAL CLINIC, 321 MILLS ST, PO BOX 200, AKRON, IA
- 7818 - ALBURNETT VETERINARY SERVICE, 412 S MAIN AVE, ALBURNETT, IA
- 7819 - ALEGENT CREIGHTON HEALTH CLINIC, 210 S MAIN, LENOX, IA
- 7820 - ALEGENT CREIGHTON HEALTH CLINIC, 1502 MADISON AVE, BEDFORD, IA
- 7821 - ALEGENT CREIGHTON HEALTH CLINIC, 601 ROSARY DR, PO BOX 188, CORNING, IA
- 7822 - ALEGENT HEALTH, 1751 MADISON AVE, COUNCIL BLUFFS, IA
- 7823 - ALEGENT HEALTH, 1203 S LOCUST ST, GLENWOOD, IA
- 7824 - ALEGENT HEALTH AT HOME, 703 ROSARY DR, CORNING, IA
- 7825 - ALEGENT HEALTH CLINIC, 715 HARMONY ST 2ND FL, COUNCIL BLUFFS, IA

Step 3. Click submit to generate your customized test request form:

This PDF form is preloaded with the selected organization's id and address. Please save the form, fill and print it when you submit samples to SHL. [Adobe Acrobat Reader](#) is required to view PDF documents.

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



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

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4. The testing fee and description are posted on this SHL web page:
<http://www.shl.uiowa.edu/testmenu/menupages/smearforoandp.xml>
- 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.

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