Division of Laboratory Services
630 Hart Lane
Nashville, TN 37216
615-262-6300
https://www.tn.gov/health/health-program-areas/lab.html

Disease/Agent Suspected or Test Requested:

Clostridium perfringens

Provider Requirements	**Contact CEDEP if a foodborne outbreak is suspected**.
Acceptable Specimen Sources/Type(s) for Submission	• Culture isolate • Clinical specimens with foodborne outbreak
TDH Requisition Form Number	PH-4182
Media Requirements	Anaerobic transport system.
Special Instructions	
Shipping Instructions	**DO NOT FREEZE/REFRIGERATE.**
Laboratory Section Performing Testing	Bacteriology
Lab Location(s) Performing Test	Nashville; Knoxville (food)

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).