



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:

Streptococcus pneumoniae, invasive disease

Provider Requirements	Isolate submission REQUIRED
Acceptable Specimen Sources/Type(s) for Submission	Culture isolates from normally sterile sites
TDH Requisition Form Number	PH-4182
Media Requirements	Non-selective media slant: TSA, Blood, Chocolate
Special Instructions	
Shipping Instructions	Submit in screw-capped tubes
Laboratory Section Performing Testing	Bacteriology
Lab Location(s) Performing Test	Nashville

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