



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:

Gonorrhea, culture

Provider Requirements	
Acceptable Specimen Sources/Type(s) for Submission	<ul style="list-style-type: none"> • Cervical • Urethral • Rectal • Throat • Eye swab
TDH Requisition Form Number	PH-4182
Media Requirements	<ul style="list-style-type: none"> • InTray Transport system • Martin-Lewis media
Special Instructions	
Shipping Instructions	Ship under CO ₂ or InTray transport conditions.
Laboratory Section Performing Testing	Bacteriology
Lab Location(s) Performing Test	Nashville; Knoxville

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