



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:

Corynebacterium diphtheriae

Provider Requirements	<u>CEDEP</u> approval required prior to isolate submission.
Acceptable Specimen Sources/Type(s) for Submission	Pure culture isolate, throat, or skin lesion swab.
TDH Requisition Form Number	PH-4182
Media Requirements	<p>Isolate: Pai/Loeffler's media or other appropriate media such as Amies or Stuart's Transport Media.</p> <p>Throat or skin lesion Swab: Use PAI or Loeffler's media or other appropriate media such as Amies or Stuart's Transport Media. If no media is available, a swab can be placed in a sterile container.</p>
Special Instructions	
Shipping Instructions	Ship overnight refrigerated (ice packs).
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).