

Microbiology Source Chart

CULTURE	Anaerobic	Eye-Ear-Nose	Fluid	Fungal	Genital	Respiratory	Spinal Fluid	Sputum	Stool	Throat w/ screen	throat wo/ screen	Throat ALL path w/ screen	Throat ALL path-conf	Tissue	Urine	Viral	Wound	To use this chart: 1- Find specimen source on left. 2-On row to right of the specimen type, locate the preferred swab type. 3-Straight above the selected swab type is suggested culture and associated mnemonic.
MNEMONIC	ANAEC	EEN	FLUC	FUNGC	GEN	RESC	CSF	SPC	STC	TH SCR	TH NS	THALL	TCALL CONF	TISC	UC	VIRC	WC	
SPECIMEN TYPE																		
Abscess																	P/G	
Amniotic fluid			X															
Anaerobic spec	G																	
Aspirate			P/G															
Ascites fluid			X															
Bartholin's cyst/gland			P/G															
Bile			X															
Biopsy														X				
Bite wound																	P/G	
Bone														X				
Bone marrow																		Contact MMC's Micro Dept
Bronch						X												
Burn																	P/G	
Buttocks																	P/G	
Cath exit site																	P/G	
Cath tip																		Cath tip culture
Cellulitis																	P/G	
Cervix					P/G													
CSF fluid							X											
Cul de sac					P/G													
Cyst																	P/G	
Decubitis																	P/G	
Dental specimen						P/G												
Dialysis fluid			X															
Dog bite																	P/G	
Drainage																	P/G	
Ear		P/G/W															O	Wound if from outside
Endometriuin					P/G													

Swab Types:

G=Gel

P=Plain

O= Optional

W=Wire

X= Non-swab

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SPECIMEN TYPE																		NOTES	
Exudate																		P/G	
Eye		P/G/W																	
Face																		P/G	
Feces									X										
Foley cath tip																			NOT ACCEPTABLE
Foot																		P/G	
Gastric			X																
GC																		P/G	MUST arrive < 2 hrs of collection.
Genital					P/G														
Groin																		P/G	
Herpes																X			Other options possible
Joint			X																
Labia					P/G														
Laceration																		P/G	
Lesion																		P/G	
Lochia					X														
Lung						X													
Mandibular abscess						P/G													
Mass			X											X					
Monilia/ yeast				P/G															
Mouth											P								TC ONLY if looking for yeast
MRSA																			MRSA Culture (P)
Nasal		P																	Unless specified for MRSA only
Nasal wash																			RSV or Influenza
Nasopharynx		P/W																	Influenza possible
Nose		P/G																O	Wound if from outside
Ocular		P/G/W																	
Paronychia				O														P/G	
Pilonidal																		P/G	

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SPECIMEN TYPE																		NOTES
Perineum					O												P/G	If child, order a genital
Perirectal																	P/G	
Peritoneal fluid			X															
Peritonsillar						P/G												
Pleural			O			X												
Prosthesis																	P/G	
Pus																	P/G	
Rectal									O								P/G	Grp B Strep possible
Scrotum																	P/G	
Sinus						P/G/W												
Skin																	P/G	
Spinal fluid							X											
Sputum								X										
Stool									X									VRE possible
Surgical specimen			O											P/G				
Synovial fluid			X															
Throat										P	O	O	O					
Thorocentesis			X			X												
Ticks																		PATH specimen
Tissue														X				
Tongue											P/G							
Trachea								X									O	Wound -if trach site
Ulcer																	P/G	
Urethra					P/G													
Urine															X			
Uterus			P/G															
Vaginal					P/G													Group B Strep possible
Vulva					P/G													
Wound																	P/G	

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