MYCOBACTERIAL CULTURE

I. GENERAL CONSIDERATIONS:

Mycobacterial diseases including tuberculosis, caused by *Mycobacterium tuberculosis*, and infections by other species of mycobacteria are assuming a relatively greater importance, particularly in the immune-suppressed host. Mycobacterial disease, pulmonary and otherwise, should be suspected whenever there is evidence of progressive, chronic infection not otherwise explained by cultures or serologic tests for nonmycobacterial organisms, and are nonresponsive to antibiotics.

II. SPECIMEN COLLECTION:

- (1) Sputum, tracheal aspirate, gastric aspirate or other applicable specimens from the respiratory tract should be obtained whenever there is reason to suspect mycobacterial pulmonary disease. Certain mycobacteria can also be a significant cause of skin and soft tissue infection. These specimens should be collected by aspiration or by scrapings whenever possible.
- (2) Swab specimens are generally unacceptable for isolation of Mycobacteria. **If swabs are** used, do not wet with tap water prior to specimen collection.
- (3) Clinical specimens for AFB culture should be collected and transported in screw-capped, leak-proof containers with no obvious external contamination.

Note: For further questions, please contact the Infectious Disease Department at Nationwide Children's Hospital.

