

## Test Information Summary

### Amniotic Fluid Bacteria/Mycoplasma/Ureaplasma by Endpoint PCR

Test Code:	AFPCR100
CPT Code:	87801
Preferred Specimen:	1.0 mL of Amniotic Fluid
Minimum Volume:	0.5 mL of Amniotic Fluid
Transport Container:	ProteoGenix Molecular Transport Tube
Transport Temperature:	Room temperature (15°C-30°C) Frozen (-20 °C)
Specimen Stability:	Room temperature (15°C-30°C) for 72 hours Frozen (-20 °C) 12 months
Limitations:	Non-sterile collection
Methodology:	The ProteoGenix amniotic fluid 16S rDNA polymerase chain reaction (PCR) assay provides a qualitative and sensitive tool for detecting the presence of eubacteria DNA in amniotic fluid. The PCR assay amplifies a 500 bp region of the 16S rDNA gene in order to determine the presence or absence of eubacterial DNA. This test employs the endpoint PCR format and uses agarose gel electrophoresis and ethidium bromide dye to visualize PCR products.
Set up and Reporting: (All times refer to Pacific Time Zone)	Mon-Friday: specimens received at ProteoGenix Clinical Laboratory in Costa Mesa, California by 12:00 PM will have results available by 5:00 PM that same day.  Specimens received after 12:00 PM, will have results available by 12:00 PM the following day. Specimens received after 12 PM on Friday will have results released by 12:00 PM the following Monday.
Reference Interval:	Negative
Alert Value:	All positive results are considered evidence of Intraamniotic infection and will be communicated to the ordering physician or their designee within one hour of resulting final report.
Clinical Significance:	Intraamniotic infection is an acute bacterial infection of the amniotic fluid and intrauterine contents that complicates 4 – 10% of all pregnancies. Intraamniotic infection is also an important cause of preterm birth, responsible for 10 – 20% of all preterm births and more than 50% of preterm births occurring before 30 weeks of gestation.

(The CPT codes provided are based on AMA guidelines and are for informational purposes only. CPT coding is the sole responsibility of the billing party. Please direct any questions regarding coding to the payer being billed.)