NOTICE DATE:      May 17, 2017  
EFFECTIVE DATE:  May 31, 2017  

NEW TEST  

**Mycoplasma genitalium RNA, Urogenital**  
Order Code:      MGEN  
Fee Code:        LA015  
CPT:             87797  

**Mycoplasma genitalium RNA, Urine**  
Order Code:      MGENU  
Fee Code:        LA015  
CPT:             87797  

The MLabs Microbiology Laboratory will begin testing for Mycoplasma genitalium effective May 31, 2017. Testing will be performed on the Hologic Panther platform and can be run from the same Aptima transport collected for Chlamydia trachomatis, Neisseria gonorrhoea and/or Trichomonas vaginalis. Acceptable specimens include Vaginal (Aptima Vaginal Swab Collection Kit), Endocervical (Aptima Unisex Swab Collection Kit), and male or female Urine (Aptima Urine Collection Kit).

Mycoplasma genitalium is a sexually-transmitted bacterium that lives on and in the epithelial cells of the urinary and genital tracts of men and women. M. genitalium has become recognized as a cause of male urethritis, and according to the CDC (STD Treatment Guidelines, MMWR 64:20, 2015) is responsible for approximately 15%–20% of nongonococcal urethritis (NGU) cases, 20%–25% of non-chlamydial NGU, and approximately 30% of persistent or recurrent urethritis (250). In most settings, it is more common than N. gonorrhoeae but less common than C. trachomatis. While M. genitalium is often the sole pathogen detected, coinfection with C. trachomatis is not uncommon in selected areas.

The pathogenic role of M. genitalium is less definitive in women than it is in men. M. genitalium can be found in the vagina, cervix, and endometrium and, like chlamydial and gonococcal infections, M. genitalium infections in women are commonly asymptomatic. M. genitalium can be detected in 10%–30% of women with clinical cervicitis, and most studies have found that this organism is more common among women with cervicitis than those without this syndrome. In addition, M. genitalium has been detected in the genital tract of women with pelvic inflammatory disease (PID) more frequently than women without PID, although less frequently than occurs with C. trachomatis.

M. genitalium infections largely go unrecognized, and infected individuals are either asymptomatic or have symptoms similar to those associated with other bacterial infections of the urogenital tract. In patients with relevant signs or symptoms, current treatment recommendations are focused on chlamydial, gonorrheal or trichomonal infections. However, optimal antimicrobial therapy for bacterial-associated urethritis and cervicitis is organism-specific, and therapeutic regimens effective against these organisms lack efficacy for curing M. genitalium infections. Because M. genitalium is fastidious and difficult to culture, the CDC recommends the use of nucleic acid amplification test (NAAT) for detecting M. genitalium.
EFFECTIVE DATE: May 18, 2017

TEST RESUMED

G-6-PD, Qualitative Screen
Order Code: G6PD
Fee Code: 22507

The MLabs Hematology Laboratory will resume the G-6-PD Qualitative Screen effective May 18, 2017.