

**NG*****Neisseria gonorrhoeae* by PCR - Qualitative**

<b>GA Test Code</b>	<b>0180</b> <i>Note:</i> GA recommends ordering Test Code #3333 <i>Chlamydia trachomatis</i> by PCR – Qualitative, in conjunction with this assay, because patients infected with <i>N. gonorrhoeae</i> may be co-infected with <i>C. trachomatis</i> .
<b>Method</b>	Abbott RealTime in vitro polymerase chain reaction (PCR) assay - Qualitative
<b>Specimens</b>	<b>ThinPrep:</b> 2.0 mL (1.0 mL), store and ship ambient (up to 3 months). <b>SurePath:</b> 1.0 mL (0.5 mL), store and ship ambient (28 days). <b>Genital Swab:</b> place vaginal or male urethral swab in 1-2 mL of specimen transport medium, store and ship ambient or refrigerated (14 days). If longer storage is needed, store frozen (90 days). Abbott multi-Collect Specimen Collection Kits can be provided by GA. <b>Urine:</b> 10.0 mL (5.0 mL). Collect first-catch (not mid-stream) urine in sterile, leakproof container. The patient should not have urinated for 2 hours prior to collection. Immediately refrigerate urine and ship within 24 hours on cold pack. <b>Others:</b> Please contact GA with questions regarding other specimen types. <i>Note:</i> The presence of blood, mucus, some spermicidal agents, feminine powder sprays, and treatments for vaginal conditions such as yeast infection may interfere with nucleic acid test based assays.
<b>Causes for Rejection</b>	Quantity not sufficient (QNS) for analysis; time and/or temperature instructions not followed.
<b>Reference Range</b>	Not Detected
<b>Turnaround Time</b>	24-48 hours
<b>CPT Code</b>	87591

**Description**

The Abbott RealTime NG assay is an in vitro polymerase chain reaction (PCR) assay for the direct, qualitative detection of the genomic DNA of *Neisseria gonorrhoeae*. The assay uses PCR technology with homogeneous real-time fluorescence detection.

**Clinical Utility**

*Neisseria gonorrhoeae* infections are one of the most frequently reported bacterial infections in the world. In men, gonorrhea infection usually results in acute anterior urethritis accompanied by a purulent exudate. In women, the infection is most often found in the cervix, but the vagina and uterus also may be infected. Frequently the infection is asymptomatic, especially in women. Without treatment, local complications of gonococcal infection can occur including PID or acute salpingitis for women and epididymitis for men. Culture is commonly used for the detection of *N. gonorrhoeae*. Presumptive diagnosis of gonorrhea is based on the morphological examination, Gram stain, and oxidase measurement of the culture isolate. Nucleic acid tests are widely available for definitive identification of *N. gonorrhoeae*. Performance characteristics of the Abbott RealTime NG assay were established in a multi-center clinical study. The overall sensitivity and specificity for NG was 98.0% and 99.7%, respectively.

MMWR. Sexually transmitted diseases treatment guidelines 2002. *Morb Mortal Wkly Rep* [serial online] 2002;51 (RR-06). Available at <http://www.cdc.gov/STD/treatment/4-2002TG.htm>.

Johnson RE, Newhall WJ, Papp JR, et al. Screening tests to detect *Chlamydia trachomatis* and *Neisseria gonorrhoeae* infections-2002. *MMWR Recomm Rep* 2002;51 (RR-15):1-27.