

SECTION C

16. How many stool cultures were performed IN YOUR LABORATORY from August 1 to August 31, 1995?

17. Of those stool cultures, how many were obtained from inpatients and how many from outpatients? [if actual numbers not available, please give an estimate]

inpatients outpatients

18. Are these the actual numbers or estimates?

1=actual numbers 2=estimates

19. Which of the following descriptions characterize the population that your laboratory serves? (mark yes or no)

patients seen at a tertiary care hospital (that is, a major referral hospital for the area) and/or its affiliated clinics

patients seen at a primary care community hospital and/or its affiliated clinics

patients seen in private physicians' offices and/or other outpatient clinics

other (explain <A >) don't know

20. For ROUTINE stool cultures, are stools tested for the same organisms regardless of whether the patient is an inpatient or an outpatient?

1=yes [GO TO SECTION D] 2=no 9=don't know

[If NO]: 21. Please describe in detail how routine stool cultures for inpatients differ from routine stool cultures for outpatients:

[For the rest of the questionnaire, please indicate your laboratory's practice for culturing OUTPATIENT stools.

SECTION D

22. Of the following organisms, which are ALWAYS tested for IN YOUR LABORATORY when an outpatient stool culture is ordered (that is, no specific requests are made by a clinician and no specific criteria needs to be met, such as whether or not the stool is watery)? [1=yes 2=no 9=don't know]

Salmonella
Shigella
Campylobacter

E. coli O157

Other E. coli

(such as enterotoxigenic E. coli or non-O157 Shiga-like toxin producing E. coli)

if YES, which E. coli?

Vibrios

Yersinia

other

(if YES to OTHER, please list):<A >

SECTION E

23. In addition to the organisms for which you checked YES for Question 22 on page 2, which of the following organisms will be tested for IN YOUR LABORATORY if specifically requested by the physician?
[1=yes 2=no 9=don't know]

Salmonella

Shigella

Campylobacter

E. coli O157

Other E. coli

(such as enterotoxigenic E. coli or non-O157 Shiga-like toxin producing E. coli)

if YES, which E. coli?

Vibrios

Yersinia

other

(if YES to OTHER, please list) <A >

SECTION F

24. Do you ever (ie, either routinely or upon physician request) send stool specimens to another laboratory (besides the state public health laboratory) for primary isolation of bacterial pathogens? PRIMISOL
1=yes 2=no 9=don't know

[If NO or DONT KNOW]: GO TO SECTION G (top of page 4)

[If YES]:

25. For isolation of which of the following organisms do you send stool specimens

to another laboratory? [1=yes 2=no 9=don't know]

Salmonella

Shigella

Campylobacter

E. coli O157

Other E. coli,

(such as enterotoxigenic E. coli or non-O157 Shiga-like toxin producing E. coli)

(if YES, which E. coli

Vibrios

Yersinia

other

(if YES to OTHER, please list)

26. To what laboratory are stool specimens usually sent?

27. Does that laboratory typically report the results back to your laboratory?

1=yes 2=no 9=don't know

SECTION G

The next questions ask about how your laboratory's stool culturing practice may vary according to the characteristics of the stool. That is, without a specific request from the physician, does your laboratory change its culture practices for any of the following stool characteristics?

28. In addition to the organisms for which you checked YES for Question 22 on page 2, are other organisms cultured for if the stool is watery?

1=yes 2=no 9=don't know

[If YES]: 29. Which organism(s)?

30. In addition to the organisms for which you checked YES for Question 22 on page 2, are other organisms cultured for if the stool has a high fecal leukocyte count on microscopic inspection?

1=yes 2=no 3=not applicable (don't test for fecal leukocytes) 9=don't know

[If YES]: 31. Which organism(s)?

32. In addition to the organisms for which you checked YES for Question 22 on page 2, are other organisms cultured for if the stool is bloody?

1=yes 2=no 9=don't know

[If YES]: 33. Which organism(s)? <A >

[If YES]: 34. How is the stool determined to be bloody?

gross inspection
microscopic inspection
test for occult blood
patient or physician report
other

SECTION H

Without a specific request from the physician, does your laboratory vary its culture practices for any of the following patient characteristics, if that characteristic is known? If the patient characteristic listed is never known by the laboratory, please check NA for not applicable.

[1=yes 2=no 3=not applicable 9=don't know]

35. Children

[If YES]: 36. Describe what is done differently and for what ages:

37. Travel history

[If YES]: 38. Describe: <A >

39. Patient is immunocompromised

[If YES]: 40. Describe:

41. Are there other criteria used to decide what organisms to culture for? CRITERIA

[If YES]: 42. Please explain these criteria<A > CRITCHG

SECTION I

The next set of questions concern testing for E. coli O157.

43. What is your laboratory's policy regarding testing for E. coli O157?

Does YOUR LABORATORY perform testing for E. coli O157...

... on all stools submitted for culture?

... on all bloody stools?

... on physician request?

... on stools from patients with the hemolytic uremic syndrome?

- ... on stools from children? (if YES, ages)
- ... using other criteria? (explain)
- ... our laboratory never tests for E. coli O157 [Go to SECTION J]

44. What method does YOUR LABORATORY use to test for E. coli O157?
 1=plate on sorbitol-MacConkey (SMAC) agar and pick sorbitol negative colonies
 2=pick colonies from MacConkey agar and test for sorbitol fermentation
 3=other (describe
45. Once sorbitol negative colonies are detected, which of following are done in YOUR LABORATORY?
 ... perform a test to detect the O157 antigen (such as agglutination)
 ... perform biochemical tests to identify it as E. coli
 ... send isolate to state laboratory or other reference laboratory
 ... other (
46. If a colony is determined in YOUR LABORATORY to be sorbitol negative AND O157 positive, what is done about H typing? [please check ALL that apply]
- ... perform H type testing in your laboratory
 - ... send isolate to state laboratory or other reference laboratory
 - ... no further testing is done on isolate and isolate is not sent out
 - ... not applicable (we do not perform O157 antigen testing in our lab)
 - ... other (<A >

SECTION J

The next set of questions deals with subtyping of Salmonella and Shigella.

47. Are isolates of Salmonella serogrouped (A through Z) IN YOUR LABORATORY?
 1=yes 2=no 9=don't know
- [If YES]: 48. Which serogroups?
49. Are isolates of Salmonella serotyped IN YOUR LABORATORY?
 1=yes 2=no 9=don't know
50. Are isolates of Shigella serogrouped or speciated IN YOUR LABORATORY?
 1=yes 2=no 9=don't know

[If YES]: 51. Which serogroups or species?

SECTION K

These questions have to do with reporting and forwarding of bacterial enteric pathogens.

52. Are isolates of E. coli O157 REPORTED from your laboratory to either the local or state health department or to the state public health laboratory?
1=yes 2=no 9=don't know

[If YES]: 53. To where are they reported?

54. Are isolates of E. coli O157 in your laboratory FORWARDED to either the local or state public health laboratory?
1=yes 2=no 9=don't know

55. Are isolates of Salmonella REPORTED from your laboratory to either the local or state health department or to the state public health laboratory?
1=yes 2=no 9=don't know

[If YES]: 56. To where are they reported?

57. Are isolates of Salmonella FORWARDED to either the local or state public health laboratory?
1=yes 2=no 9=don't know

58. Are isolates of Shigella REPORTED from your laboratory to either the local or state health department or to the state public health laboratory?
1=yes 2=no 9=don't know

[If YES]: To where are they reported?

59. Are isolates of Shigella FORWARDED to either the local or state public health laboratory?
1= yes 2=no 9=don't know

SECTION L

The next 3 questions have to do with testing stool isolates for antimicrobial

susceptibility.

60. Are ANY isolates recovered from stool cultures in your laboratory routinely tested for antimicrobial susceptibility?

1=yes 2=no 9=don't know

[If YES]: 61. Which organisms do you routinely test for antimicrobial susceptibility?

[If YES]: 62. What method or methods are used to determine susceptibility?

- ... Disk diffusion
- ... Vitek automated system
- ... Microscan automated system
- ... E-test
- ... Other (list)

SECTION M

The last question has to do with your perceived role in educating physicians regarding the appropriate tests to order.

63. If a physician were to order only a stool for ova and parasites in a case in which a bacterial stool culture was indicated (for example, a grossly bloody stool specimen), what would be your response?

- ... contact physician and suggest that he/she order a bacterial stool culture
- ... not contact physician and perform stool for ova and parasites only
- ... without contacting the physician, perform both stool for ova and parasites and bacterial stool culture
- ... other (list)

This ends the questionnaire. Thank you very much for your time. Please return the completed questionnaire in the enclosed envelope.

To be completed by investigator at multicenter site:
How was this questionnaire completed initially?

1=mail or fax

2=in-person interview

3=via telephone

Were any answers verified with a follow-up telephone interview?

1=yes Which questions?

2=no

Date questionnaire received (or interview completed)

Name of investigator

**CDC's Emerging Infections Program
Foodborne Diseases Active Surveillance Network (FoodNet):
1997 Baseline Survey of Laboratory Practices**

Lab ID # _____

Name of laboratory _____

Person interviewed _____

Title _____

Address _____

City _____ State _____ Zip _____

Phone number () _____ - _____

Date form completed (mo/day/yr) _____/_____/_____

SECTION A: Introduction

- 1. Does your laboratory perform **any** on-site bacterial stool culture testing? *[check one]*
 - G** yes, our laboratory performs stool cultures on site *[skip to q. 4]*
 - G** no, **ALL** stool specimens for culture are sent to another laboratory *[answer questions 2& 3 and then skip to q. 26]*

- 2. To what laboratory are stool specimens usually sent? _____

- 3. Does that laboratory typically report the results back to your laboratory?
 - G** yes
 - G** no
 - G** don't know

SECTION B: General Information

The first two questions regarding the number of stool specimens tested in your laboratory in 1996 are from the introduction letter.

- 4. How many stool specimens, including whole stools and rectal swabs, were received in your laboratory for bacterial enteric screening (excluding *Clostridium difficile* testing) in 1996?
total number of specimens _____

- 5. How many of these stool specimens were cultured in your laboratory for...

<i>Salmonella</i>	_____	<i>E. coli</i> O157	_____
<i>Shigella</i>	_____	<i>Yersinia</i>	_____
<i>Campylobacter</i>	_____	<i>Vibrio</i>	_____

- 6. Which of the following **BEST** describes the type of laboratory this is? *[Check one]*
 - G** hospital-based laboratory
 - G** independent (that is, non-hospital-based) laboratory
 - G** other (explain _____)

- 7. Which of the following descriptions characterize the population that your laboratory serves? *[Check all that apply]*
 - G** patients seen at a tertiary care hospital (that is, a major referral hospital for the area) and/or its affiliated clinics
 - G** patients seen at a primary care community hospital and/or its affiliated clinics
 - G** patients seen in private physicians' offices and/or other outpatient clinics
 - G** other (explain _____)
 - G** don't know

8. For **routine** stool cultures, are stools tested for the same organisms regardless of whether the patient is an inpatient or an outpatient? *[Check one]*

G yes *[skip to q. 9]*

G no

G don't know *[skip to q. 9]*

8A. Please describe in detail how routine stool cultures for inpatients differ from routine stool cultures for outpatients: _____

9. Which of the following information is readily accessible to your laboratory, either on laboratory submission forms or laboratory computer records, for stool specimens submitted to your laboratory for bacterial culture? *[Note: By readily accessible, we mean information that is routinely available to the technologist that may alter culturing practices, not information that could be looked up from computer records but isn't generally used.]* *[Read all responses and check all that apply]*

Patient demographics:

G age

G sex

G zip code

G county

G inpatient or outpatient

G stool characteristics

G date of specimen collection

G time of specimen collection

Patient clinical history

G patient history of fever

G patient history of bloody diarrhea

G patient history of travel

G other (specify _____)

[If any patient clinical history is checked] How is this information obtained?

G check box on form **G** write information on form **G** computer records

10. Does your laboratory have any **rejection criteria** for culturing **inpatients** stool specimens based on length of hospitalization?

G yes

G no *[skip to q. 11]*

G don't know *[skip to q. 11]*

G not applicable (don't receive stool specimens from inpatients) *[skip to q. 11]*

10A. What are the rejection criteria?

G No bacterial stool cultures performed on inpatients after ____ days of hospitalization

G Other (describe): _____

11. Does your laboratory have a limit on the number of stool specimens cultured from any individual (either from inpatients or outpatients)?

G yes

G no *[skip to q. 12]*

G don't know *[skip to q. 12]*

11A. What are the limits?

G No more than ____ specimen accepted per day

G No more than ____ specimens accepted per ____ days

G Other (list): _____

11B. How is this policy of limiting the number of stool specimens enforced?

[Check all that apply]

G Not enforced

G Technologists try to remember which patients' specimens have already been sent

G A log is maintained of stool specimens and technologists refer to the log when a new specimen is received

G The laboratory computer limits repeat specimens

G The hospital computer limits repeat specimens

G Policy disseminated to medical and/or nursing staff

G Other (please specify): _____

12. Are the results of stool cultures processed in your laboratory recorded electronically (that is, using a computer)?

G yes (specify computer system: _____)

G no

G don't know

13. How do you report a negative bacterial stool culture?

G No *Salmonella, Shigella, Campylobacter*, _____, _____, isolated.

G No enteric pathogens isolated

G Other _____

SECTION C: Stool handling methods

14. What proportion of stool specimens cultured in your laboratory are received as whole stools and what proportion are received as rectal swabs? *[Note: Answer all-responses a-d should total 100%. If unable to provide actual numbers, please estimate. If both a and c= 0%, then skip q. 15, and if both b and d= 0%, skip q. 16]*

whole stools _____%

rectal swabs _____%

- 14A. What proportion of whole stools are received... 14B. What proportion of rectal swabs are received...
- a. with transport media _____% c. with transport media _____%
- b. without transport media _____% d. without transport media _____%

15. For stool specimens, including whole stools and rectal swabs, received **without transport media**, is there a length of time from stool specimen collection to receipt in your laboratory after which you will not accept such specimens for culturing?

- G** yes *[If yes:]* What is that length of time? _____ hours
- G** no
- G** don't know

15A. For stool specimens **without transport media**, how does your laboratory usually store these stool specimens before plating?

- G** hold at room temperature without transport media
- G** place in transport media and hold at room temperature
- G** put in refrigerator (4-6° C) without transport media
- G** place in transport media and refrigerate (4-6° C)
- G** put in freezer What temperature? **G** -20° C **G** -70° C **G** other _____° C
- G** not applicable (all specimens processed immediately)
- G** don't know
- G** other (specify: _____)

16. For stool specimens **with transport media**, what proportion of specimens are received in...

[Answer all-If unable to provide actual numbers, please estimate]

Cary-Blair (e.g. Meridian C&S, Enteric Plus or other Cary-Blair) _____%

Amies transport media _____%

[If Yes] Is charcoal used? **G** yes **G** no

Buffered glycerol saline _____%

Stuarts transport media (includes Culturette) _____%

Other (please specify: _____) _____%

SECTION D: Culturing practices

17. Assuming no special request is received, what enrichment broths are used as part of your **routine** stool culture procedure? *[Check all that apply]*

- Alkaline peptone water
- Campy thio broth
- GN (gram-negative) broth
- MSRV (modified semisolid Rappaport-Vassiliadis)
- PBS cold enrichment
- Selenite
- Tetrathionate
- Do not use enrichment broth routinely
- Other (list _____)

18. Assuming no special request is received, what plating media are used as part of your **routine** stool culture procedure? *[Check all that apply]*

- | | |
|--|--|
| <input type="checkbox"/> blood | <input type="checkbox"/> campyBap |
| <input type="checkbox"/> desoxycholate | <input type="checkbox"/> CVA |
| <input type="checkbox"/> MacConkey | <input type="checkbox"/> CCDA |
| <input type="checkbox"/> sorbitol-MacConkey | <input type="checkbox"/> CSM |
| <input type="checkbox"/> hektoen enteric | <input type="checkbox"/> Skirrow's |
| <input type="checkbox"/> SS agar | <input type="checkbox"/> Karmali's |
| <input type="checkbox"/> EMB (eosin methylene blue) | <input type="checkbox"/> CIN (cefsulodin-Irgasan-novobiocin) |
| <input type="checkbox"/> XLD (xylose lysine deoxycholate) | <input type="checkbox"/> TCBS (thiosulfate-citrate-bile salts-sucrose) |
| <input type="checkbox"/> Any blood free media (list _____) | |
| <input type="checkbox"/> Other (list _____) | |

19. Are all stool specimens received at your laboratory for routine enteric screening cultured for *Salmonella*?

- yes *[skip to q. 19A]* no *[skip to q. 19B]*

19A. Are stool specimens cultured for *Salmonella* in your laboratory or at another laboratory?

- on site *[skip to q. 19C]*
- another laboratory (where: _____) *[skip to q. 20]*

19B. If a physician specifically requests a culture for *Salmonella*, is the stool specimen cultured in your laboratory or another laboratory?

G on site

G another laboratory (where: _____) [skip to q. 20]

G don't know [skip to q.20]

G never test for *Salmonella* [skip to q.10]

19C. How many colonies do you evaluate for each potential *Salmonella* morphology?

_____ number

G don't know

20. Are all stool specimens received at your laboratory for routine enteric screening cultured for *Shigella*?

G yes [skip to q. 20A]

G no [skip to q. 20B]

20A. Are stool specimens cultured for *Shigella* in your laboratory or at another laboratory?

G on site [skip to q. 20C]

G another laboratory (where: _____) [skip to q. 21]

20B. If a physician specifically requests a culture for *Shigella*, is the stool specimen cultured in your laboratory or another laboratory?

G on site

G another laboratory (where: _____) [skip to q. 21]

G don't know [skip to q. 21]

G never test for *Shigella* [skip to q. 21]

20C. How many colonies do you evaluate for each potential *Shigella* morphology?

_____ number

G don't know

21. Are all stool specimens received at your laboratory for routine enteric screening cultured for *Campylobacter*?

G yes [skip to q. 21A]

G no [skip to q. 21B]

21A. Are stool specimens cultured for *Campylobacter* in your laboratory or at another laboratory?

G on site [skip to q. 21D]

G another laboratory (where: _____) [skip to q. 22]

21B. If a physician specifically requests testing for *Campylobacter*, is testing done in your laboratory or sent to another laboratory for testing?

G on site

G another laboratory (where: _____) [skip to q. 22]

G don't know [skip to q. 22]

G never test for *Campylobacter* [skip to q. 22]

- 21C. Which of the following plating media are used to culture for *Campylobacter*?
- CVA Karmali's
- campyBap CCDA
- Skirrow's CSM
- Any blood free media (list _____)
- Other (list _____)
- Don't know
- 21D. At what temperature are selective plates for *Campylobacter* usually incubated?
- _____ • Celsius don't know
- 21E. How is the microaerobic atmosphere for *Campylobacter* created?
- candle jar
- commercial pack
- evacuation and replacement systems
- other (specify: _____)
- 21F. During stool specimen processing for *Campylobacter*, is filtration used?
- yes
- no *[skip to q. 21H]*
- don't know *[skip to q. 21H]*
- 21G. At what temperature are filtration plates usually incubated? _____ • Celsius don't know
- 21H. During stool specimen processing for *Campylobacter*, is enrichment broth used?
- yes (specify _____)
- no
- don't know
- 21I. Are isolations of *Campylobacter* **reported** to the local or state health department?
- yes
- no
- don't know
- 21J. Are isolates of *Campylobacter* **routinely sent** to the local or state public health laboratory?
- yes
- no
- don't know

21K. Are *Campylobacter* isolates **routinely** tested for antimicrobial susceptibility?

G yes What method? _____

G no

G don't know

22. Are all stool specimens received at your laboratory for routine enteric screening cultured for *E. coli* O157?

G yes [skip to q. 22A] **G** no [skip to q. 22B]

22A. Are stool specimens cultured for *E. coli* O157 (that is, plated on selective media) in your laboratory or at another laboratory?

G on site [skip to q. 23]

G sent to another laboratory (where: _____) [skip to q. 23]

22B. If a physician specifically requests a culture for *E. coli* O157, is the stool specimen plated in your laboratory or another laboratory?

G on site

G another laboratory (where: _____)

G don't know [skip to q. 23]

G never test for *E. coli* O157 [skip to q. 23]

22C. If a **bloody stool specimen** is received at your laboratory, but a physician has not specifically requested a culture for *E. coli* O157, is the specimen cultured for *E. coli* O157, either in your laboratory or another laboratory?

G yes, culture on site testing

G yes, bloody specimens routinely sent to another laboratory

G no, but physician is contacted and *E. coli* O157 culture is recommended

G no

G don't know

22D. How many colonies do you evaluate for each potential *E. coli* O157 morphology?

_____ number **G** don't know

23. Does your laboratory use direct non-culture methods to test for *E. coli* O157?

G yes

G no [skip to q. 24]

G don't know [skip to q. 24]

- 23A. What test do you use?
G EIA /ELISA for O157 antigen (brand _____)
G EIA /ELISA for shiga toxin (brand _____)
G other _____
24. Are all stool specimens received at your laboratory for routine enteric screening cultured for *Yersinia*?
G yes [skip to q. 24A] **G** no [skip to q. 24B]
- 24A. Are stool specimens cultured for *Yersinia* in your laboratory or at another laboratory?
G on site [skip to q. 24C]
G sent to another laboratory (where: _____) [skip to q. 25]
- 24B. If a physician specifically requests a culture for *Yersinia*, is the stool specimen cultured in your laboratory or another laboratory?
G on site
G another laboratory (where: _____) [skip to q. 25]
G don't know [skip to q. 25]
G never test for *Yersinia* [skip to q. 25]
- 24C. When testing for *Yersinia*, is CIN (cefsulodin-Irgasan-novobiocin) agar used?
G yes What temperature are CIN plates incubated? _____ • C
G no What agar is used? _____
 What temperature are these plates incubated? _____ • C
G don't know
- 24D. When culturing for *Yersinia*, are cold enrichment procedures used?
G yes
G no
G don't know
- 24E. How many colonies do you evaluate for each potential *Yersinia* morphology?
_____ number **G** don't know
25. Are all stool specimens received at your laboratory for routine enteric screening cultured for *Vibrio*?
G yes [skip to q. 25A] **G** no [skip to q. 25B]
- 25A. Are stool specimens cultured for *Vibrio* in your laboratory or at another laboratory?
G on site [skip to q. 25C]
G sent to another laboratory (where: _____) [skip to q. 26]

25B. If a physician specifically requests a culture for *Vibrio*, is the stool specimen cultured in your laboratory or another laboratory?

G on site

G another laboratory (where: _____) *[skip to q. 26]*

G don't know *[skip to q. 26]*

G never test for *Vibrio* *[skip to q. 26]*

25C. When culturing for *Vibrio*, does your laboratory use TCBS (thiosulfate-citrate-bile salts-sucrose) agar?

G yes

G no- what agar is used? _____

G don't know

25D. How many colonies do you evaluate for each potential *Vibrio* morphology?

_____ number **G** don't know

26. Does your laboratory perform on-site examinations for ova and parasites (O&P)?

- yes *[go to q. 27]*
- no *[go to q. 26a.]*

26a. If no, when you receive stools with a request for O&P testing do you forward them to another laboratory for testing?

- yes, If so, Where: _____
Person to Interview? _____
Phone: _____

[skip to q. 71]

- no, we receive them but don't forward them to another lab *[skip to the END]*
- no, we never receive specimens with a request for O&P testing *[skip to the END]*

27. What criteria, if any, does your laboratory use for rejecting a stool specimen for O&P?

- if it is from an inpatient who has been hospitalized for ____ days
- if it exceeds a limit of ____ specimens from the patient per ____ days
- poor condition of the specimen, specify, _____
- poor condition of the container, specify, _____
- other, specify, _____
- we don't have any rejection criteria

28. What was the total number of stool specimens submitted to your laboratory for O&P testing in 1996?

|_|_|_|_| total number

- don't know

SECTION D: *Cryptosporidium*

29. Does your laboratory perform on-site testing of stool specimens submitted for O&P for *Cryptosporidium*?
- yes *[go to q. 34]*
 - no *[skip to q. 30]*
 - don't know *[skip to q. 30]*
30. Does your laboratory send stool specimens submitted for O&P to another laboratory, e.g., reference lab, for *Cryptosporidium* testing at any time?
- yes *[go to q. 31]*
 - no *[skip to q. 33]*
 - don't know *[skip to q. 33]*
31. To what laboratory do you send the specimens? _____
32. Does this laboratory send the results of their testing to your laboratory?
- yes, our laboratory receives a report of their results *[skip to q. 33]*
 - no, the laboratory sends the report only to the requesting physician or health care provider *[continue to q. 32A]*
- 32A. Does your laboratory have a method to retrieve the results of the other laboratory?
- yes *[continue to q. 33]*
 - no *[continue to q. 33]*
 - don't know *[continue to q. 33]*
33. If a stool examination such as O&P or AFB reveals structures suggestive of *Cryptosporidium*, what does your lab do next?
- test the specimen on-site with a stain/technique for *Cryptosporidium* *[skip to q. 51]*
 - send the specimen to a reference lab for *Cryptosporidium* testing *[skip to q. 51]*
 - report it as suggestive but do no further testing here or elsewhere *[skip to q. 51]*
 - don't know *[skip to q. 51]*
 - other, specify and then *skip to q. 51*: _____
34. Does your laboratory test on-site all stool specimens submitted for O&P for *Cryptosporidium*?
- yes *[go to q. 35]*
 - no *[skip to q. 37]*
 - don't know *[skip to q. 37]*
35. Does your laboratory perform on-site testing for *Cryptosporidium* on liquid stool specimens submitted for bacterial culture?
- yes
 - no
 - don't know