BABESIA SCREEN

London Health Sciences Centre

Pathology and Laboratory Medicine

Orderable - BABS

Turn Around Time: 24 hours

STAT: 4 hours

Specimen:

Adult	Pediatric
$4 \text{ mL } K_2 \text{ or } K_3 \text{ EDTA}$	2 mL K_2 or K_3 EDTA Lavender top
Lavender top Vacutainer	Vacutainer tube
tube	

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Laboratory: Core Lab



Requisition: GENERAL LABORATORY REQUISITION

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Method of Analysis: Initial screening of a routine blood film is performed and if babesial parasites are noted, a parasitemia level is resulted. Confirmatory testing will follow with examination of thick and thin films stained with Gurr's Giemsa.



Test Schedule: As required

Collection Information:

Minimum volume required is 2 mL.

Reference Ranges:

No babesial parasites seen.

Interpretive Comments:

Babesia microti is the main cause of babesiosis in non-splenectomized patients. Cases of this disease have been reported during spring, summer and fall in northwestern Wisconsin and in coastal areas in northeastern United States, especially Nantucket Island off the Massachusetts shore and on Long Island, New York. Cases have also been reported in California, Georgia and some European countries. It is transmitted by ticks, which serve as an intermediate host. Mammals such as deer and mice serve as the reservoir and humans are only incidentally infected.

Most patients have subclinical or mild undiagnosed disease, although fatal infections with severe hemolysis can occur, typically in splenectomized or immune-compromised patients. If symptoms develop, they occur 10-14 days after the tick bite and include malaise with chills, fever, diaphoresis, weakness, headache, myalgia and arthralgia.

Critical Information Required:

Travel history specifying where potential infection has occurred.



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Storage and Shipment:

Ship sample at room temperature.

Samples must be sent within the laboratory for blood film preparation within 1 hour of collection.