

Screening for Chagas Disease: A Guide for Laboratory Testing



Adult Screening

- Collect blood specimen in a red top tube. Specimen should be collected, centrifuged, and transferred to a leak-proof tube. At least 0.5mL of serum is required for testing.



Infant Screening

- Collect at least 0.2mL of cord blood at birth OR collect 0.2 mL of whole blood from the infant within 6 weeks of birth using a lavender top tube for PCR and microscopy (i.e. Giemsa stain for *T. cruzi* trypomastigotes).
- Whole blood collected at 4–6 weeks of age should have repeat microscopic examination of blood smear and PCR if initial testing at time of birth was negative.
- If all testing was negative, then a serum specimen for the infant should be collected in a red top tube between 9–12 months after birth. Specimen should be collected, centrifuged and transferred to leak proof tube. At least 0.5mL of serum is required for testing.

Specimen Handling

- Serum specimen can be kept refrigerated (2-8°C) for up to 7 days prior to being frozen (-20°C or lower), or stored frozen for up to 8 weeks. EDTA-treated whole blood specimen being forwarded to CDC for molecular testing must be stored refrigerated (2-8°C) and shipped to CDC within 7 days of collection (note: only CDC offers molecular testing, commercial options are unavailable at this time). Glass slides for microscopy can be stored for up to 7 days at room temperature.
- Laboratory employees should use standard precautions when working with specimen for Chagas disease screening.