Stool or enema specimens from California inpatients or outpatients with suspected infant botulism (IB) must be submitted directly to the Infant Botulism Treatment and Prevention Program (IBTPP) laboratory. Physicians seeking testing for their patients should first call the IBTPP on-call physician at (510) 231-7600 prior to specimen submission to provide case information and review indications for testing.

Testing will not be initiated without prior clinical consultation with the IBTPP on-call physician.

Specimen Collection:

The specimen required for the definitive diagnosis of infant botulism is stool or enema.

Fecal specimens for infant botulism diagnostic testing can be collected before or after antitoxin administration. BabyBIG® does not neutralize botulinum toxin present in the lumen of the intestine, nor does it kill or prevent the growth of C. botulinum or inhibit the formation of botulinum toxin in the infant’s large intestine.

The best container in which to collect, store and submit fecal specimens is a sterile urine container with a tight, screw-capped lid. Do not use containers containing fixatives or preservatives. If spontaneously passed stool is difficult to obtain due to constipation, an attempt to collect stool in the rectal vault should be made by gentle digital examination. If no stool can be obtained digitally, do not wait for a spontaneous bowel movement. Instead, please follow the enema collection procedure outlined below.

IMPORTANT: Glycerin suppositories yield an unsatisfactory specimen and should not be used. The procedure described below will yield the best enema specimen for diagnostic testing.

Enema Collection Procedure:

1. Attach a 12 to 16 French red rubber (Robinson) catheter to a tapered, catheter-tip syringe.
2. Trim catheter tip to enlarge hole.
3. Lubricate the catheter tip with petroleum jelly or equivalent and insert into distal colon.
4. The volume of sterile, non-bacteriostatic water to use should be a bedside clinical decision based on the patient’s body mass.
5. Inject up to 30 ml of sterile, non-bacteriostatic water slowly into distal colon and maintain catheter in rectum. Please note that a minimum volume of 6 ml is required to enable the most accurate diagnostic analysis.
6. Wait approximately 3 minutes, and then draw enema effluent into the syringe.
7. Have an assistant hold a sterile urine container under the anus during this time to collect any expelled material.
8. Expel all fluid collected in the syringe into the same sterile urine container.
9. Tightly seal the lid. Properly label the container with patient’s name, date and time of collection.
10. If more than 5 ml of water is retained in the colon, exert gentle pressure onto left lower abdomen (with your hand or with infant’s knee to abdomen) to aid in excretion and to minimize intestinal absorption of water.
11. Send the enema specimen to your laboratory with instructions to keep it refrigerated and to expedite shipment to the appropriate botulism diagnostic laboratory.

Please retain all subsequent stool specimens and have your laboratory store them in their refrigerator until a diagnosis has been established by the appropriate laboratory. Please do not send extra stool specimens unless requested.

For California only - please contact 510-231-7676 with any questions regarding specimen collection, storage or submission requirements. For all other states, please contact your local public health agency. Thank you.

Storage of stool or enema specimens prior to shipping:
All fecal specimens (stool or enema) collected for infant botulism testing require refrigeration only. Do not freeze them.

Specimen Submission:
NOTE: The following specimen shipping instructions are for California ONLY.
For all other states, please contact your local public health agency for specimen submission instructions.

1. Keep the specimen refrigerated at all times. Do not freeze.
2. Tightly seal cap on collection container. Package the primary container of stool or enema in a secondary, leak-proof container; e.g., a zip-top specimen bag.
3. Place the “Infant Botulism Diagnostic Testing Specimen Submission Form” in a separate bag pouch or second bag. A link to this form (PDFfillable) may be found on the Infant Botulism Laboratory and Diagnostic Information page of this website.
4. Follow IATA regulations and package the specimen in a styrofoam box with one or more cold-packs. Do not use dry-ice. Label box with a UN 3373, "Biological Substance Category B" label.
5. Send specimens directly to the California Department of Public Health (California patients only). Do not send through your local county public health laboratory as this will delay testing. See address below.

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6. Expedite specimen shipment by using a local courier for same day delivery before 2 PM, or by using a major courier service for "priority overnight" delivery. Packages should be shipped for overnight delivery **Monday through Thursday** only. The Infant Botulism Laboratory does not accept deliveries on Saturday or Sunday.

Address the package exactly as below:

**Infant Botulism Laboratory – IBTPP**  
California Department of Public Health  
Specimen Receiving, Room B106  
850 Marina Bay Parkway  
Richmond, CA 94804

**IMPORTANT:**

Properly identify and label all packages that contain diagnostic specimens when submitting them to the IBTPP laboratory. Always include the sender's name and submitting institution's name and address. Improperly identified packages may be subject to destruction for bio-security reasons.

Please do not hesitate to contact the lab with any questions.

**Infant Botulism Treatment and Prevention Program Laboratory**  
Phone: (510) 231-7676; Fax: (510) 231-7679