

#### D. Rejection criteria

❑ **NOTE:** Urine and vaginal swabs should not be tested for GBS using a direct antigen assay. According to an alert from the CDC on 24 March 1997, gravely erroneous information and potentially fatal misdiagnoses can result from the use of direct antigen testing to detect GBS directly in urine of pregnant women or infants.

1. If a direct antigen assay is performed on CSF, always perform a culture for confirmation of viable organisms.
2. Do not accept urine or vaginal swabs for direct antigen assay.
3. For the neonate, screening cultures (e.g., axilla, throat, etc.) and urinary antigen tests are not recommended because of their lack of sensitivity and specificity for diagnosis.

❑ **NOTE:** Collect blood, CSF, and respiratory secretions to diagnose disease in symptomatic neonates.

## DIAGNOSIS

Isolation of GBS from a normally sterile body site (eg, blood, cerebrospinal fluid [CSF], pleural fluid, bone, joint) confirms the diagnosis of GBS infection. GBS antigen may be detected in CSF, which occasionally can assist in the diagnosis of infection [1]. However, antigen testing of other body fluids is not recommended, because of poor specificity.

資料來源：UpToDate