

histopathology

1. All tissues from immunocompromised (including corticosteroid treated patients) with suspected infection should be stained with fungal stains such as Periodic acid-Schiff (PAS), silver, or fluorescent (for chitin) stains, in parallel with regular stains. Positive results should be telephoned through to clinicians immediately
2. Reporting of specimens containing any fungal elements should always include the presence and absence of yeast forms and the presence and absence of hyphae, and whether hyphae are or are not septate, if it is possible to tell, and whether there is any melanin present. The relative size of any fungi should be described, their cellular location, and any specialised structures or forms

radiology

1. profoundly neutropenic patients (<500 neutrophils/mL) with any one of the following:
 - a new cough, chest pain or haemoptysis
 - an abnormal chest radiograph
 - recovery of *Aspergillus* spp or other mould from any site
 - microscopic evidence of hyphae in tissue or sterile fluid
 - unresolved fever after 7 days of antimicrobial therapy
2. transplant recipients with a new positive culture of aspergillus or other mould
3. immunocompromised patients with new neurological features or possible or proven meningitis

microbiology

1. fungi from sterile sites should be identified to species level except for *Candida* spp recovered from bronchoscopy fluid
2. fungi from urine of patients in intensive care, special care baby and burn units, and any transplant patients should be speciated
3. bronchoscopy fluids should be examined microscopically for hyphae and cultured on specialized media
4. clinical isolates of *Aspergillus* should be identified to species level
5. cerebrospinal fluid (CSF) specimens showing abnormal concentrations of glucose, protein, or leucocytes and CSF from HIV seropositive patients, transplant recipients or patients with sarcoidosis should be tested for cryptococcal antigen if the Gram stain is negative
6. CSF specimens from immunocompromised patients or those with sarcoidosis, or CSF specimens showing concentrations of glucose, protein, or leucocytes without an adequate explanation should be
 - Tested for cryptococcal antigen
 - Cultured on bacterial plates incubated for ≥ 5 days
 - Cultured on fungal plates at 30 °C for 21 days