SCIENCE + INSIGHT

A clinical laboratory providing innovative, accurate specialty testing since 1972.

GI 360

Introducing the GI360™ Profile: an innovative, comprehensive and clinically-applicable stool profile, utilizing multiplex PCR molecular technology coupled with growth-based culture and ID by MALDI-TOF, sensitive biochemical assays and microscopy to detect and assess the status of pathogens, viruses, parasites and bacteria that may be contributing to acute or chronic gastrointestinal symptoms and disease.
Learn more »

Turnaround Time

6 to 8 days

Analytes Tested

Click any analyte name for additional clinical information, including reference ranges, specimen collection, stability and rejection criteria.

Analyte	CPT	ABN Required
Acetate; stool	*	Yes
Additional pathogens culture; stool	87046	No
Bacteriology culture, aerobic; stool	87045	No
Butyrate; stool	82542	Yes
Calprotectin; stool	83993	Yes
Carbohydrates; stool	*	No
Elastase; stool	82656	No
Fat Stain; stool	89125	No
GI Pathogens 12-25 targets; stool PCR	87507	Yes
Lactoferrin; stool	83631	No
Lysozyme; stool	85549	Yes
Microbiome Abundance; stool PCR	87999	Yes

Mucus; stool	*	No
Muscle Fibers; stool	89160	No
Occult Blood; stool	82272	Yes
Parasitology, concentrate; stool	87177	No
Parasitology, trichrome; stool	87209	No
Propionate; stool	*	Yes
Red Blood Cells; stool	*	No
Valerate; stool	*	Yes
Vegetable Fibers; stool	*	No
White Blood Cells; stool	*	No
Yeast culture; stool	87102	No
ph; stool	83986	No
sIgA, stool	82784	Yes

List price applies when filing with insurance or Medicare, or when billing a patient directly.

Prompt payment pricing applies when billing to a physician account or prepayment is received with the test.

Doctor's Data offers profiles containing multiple analytes. *Multiple analytes may be billed under a single CPT code. Many analytes can be ordered individually. Pricing may vary. Click on a specific analyte for more information or read our detailed billing and payment policies.

The CPT codes listed on our website are for informational purposes only. This information is our interpretation of CPT coding requirements and may not necessarily be correct. You are advised to consult the CPT Coding Manual published by the American Medical Association. Doctor's Data, Inc. takes no responsibility for billing errors due to your use of any CPT information from our website.

Sign in at the top of any page to view pricing and order tests. Or click here to create an account. You may also contact us for assistance placing an order.

This test is useful for

- Gastrointestinal Symptoms
- Inflammation
- Joint Pain
- Mucosal Barrier Dysfunction
- Autoimmune Disease

- Food Sensitivities
- Chronic or Acute Diarrhea
- Abdominal Pain
- IBD/IBS
- Nutritional Deficiencies
- Bloody Stool
- Fever and Vomiting

Detailed Information

The GI360™ Profile is an innovative, comprehensive and clinically-applicable stool profile, utilizing multiplex PCR molecular technology coupled with growth-based culture and ID by MALDI-TOF, sensitive biochemical assays and microscopy to detect and assess the status of pathogens, viruses, parasites and bacteria that may be contributing to acute or chronic gastrointestinal symptoms and disease.

Microbiome Abundance and Diversity The GI360™ Profile is a gut microbiota DNA analysis tool that identifies and characterizes the abundance and diversity of more than 45 targeted analytes that peer-reviewed research has shown to contribute to dysbiosis and other chronic disease states.

The GI360™ can identify the presence of pathogenic viruses, bacteria, and parasites using multiplexed, real-time PCR. Viruses are the primary cause of acute diarrhea, and the least commonly tested. The identification of pathogenic bacteria, viruses and parasites improves treatment strategies and patient outcomes.

The Dysbiosis Index (DI) is a calculation with scores from 1 to 5 based on the overall bacterial abundance and profile within the patient's sample as compared to a reference population. Values above 2 indicate a microbiota profile that differs from the defined normobiotic reference population (i.e., dysbiosis). The higher the DI above 2, the more the sample is considered to deviate from normobiosis.