

When blood is cultured, the substances that are added to the blood are called blood culture media. These media are used to grow bacteria or fungi that may be present in the blood. Blood culture media are usually made of a liquid or solid medium that contains nutrients for the bacteria or fungi to grow. The media are usually made of a liquid or solid medium that contains nutrients for the bacteria or fungi to grow. The media are usually made of a liquid or solid medium that contains nutrients for the bacteria or fungi to grow.

Gram stain—a relatively quick test used to detect and identify the general type of bacteria. Blood culture sets that are negative after several days (often reported as “no growth”) mean that the Susceptibility testing—determines the drug (antimicrobial) that may be most effective in treating the infection. Often, a complete blood count (CBC) is ordered along with or prior to the blood culture to determine, such as a fever that does not go away, additional testing may be required. A few reasons that symptoms may not resolve even though blood culture results are negative may include:

- Sometimes other testing is also performed, such as a chemistry panel to evaluate the status of a person's organs, or a urine, sputum, or cerebrospinal fluid (CSF) culture.
- Some microorganisms are more difficult to grow in culture, and additional blood culture media may be done to try to grow and identify the pathogen. Viruses cannot be associated with a urinary tract infection, pneumonia, or meningitis.

Using blood cultures does not help to grow bacteria. If the health practitioner suspects that a viral infection may be the cause of the person's symptoms, then other laboratory tests would need to be performed. The tests that would be ordered depend upon the person's clinical signs and the type of virus the health practitioner suspects is causing the infection. Results from other tests that may be done in conjunction with blood cultures may indicate sepsis even though blood cultures may be negative. Some of these may include:

Complete blood count (CBC). An increased white blood cell (WBC) count may indicate infection. Complement. Levels of C3 may be increased. A urine or sputum culture may be positive, indicating a possible source of infection that may have spread to the blood. A CSF analysis may reveal a possible source of infection.