

## **UTI** Report

Patient: Doe, Jane

Date of Birth: Feb 28, 2000

Sex: Female

Physician: Dr. Amy Miller

NPI #:99999999 Practice: Sample Philadelphia, PA Date Collected: Feb 24, 2019 Date Received: Feb 25, 2019 Date Processed: Feb 25, 2019 Specimen type/Source: Swab

Sample ID: utiabxr1

### 1. About This Report

This UTI Assay is a urinary tract infection screen that consists of clinical, molecular tests for microrganisms implicated in UTIs.

### 2. Molecular Diagnostic Results

nar	ry Tract Infection		STI			
-	A. baumannii	Negative	-		C. trachomatis	
-	C. albicans	Negative		_	N. gonorrhoeae	N. gonorrhoeae N
-	C. freundii	Negative	1-1		C. albicans	C. albicans N
-	E. aerogenes E. cloacae	Negative Negative			C. glabrata	C. glabrata N
Н	E. coli	Positive	-		S. agalactiae	S. agalactiae N
Н	E. faecalis	Positive				
-	E. faecium	Negative				
М	K. oxytoca	Positive				
-	K. pneumoniae	Negative				
-	M. morganii	Negative				
-	P. aeruginosa	Negative				
_	P. mirabilis	Negative				
-	P. stuartii P. vulgaris	Negative Negative				
_	S. agalactiae	Negative				
М	S. aureus	Positive				
-	S. saprophyticus	Negative				

## 3. Antibiotic Treatment Options

The following table shows common treatment options for organisms assayed as present in this sample, combined with any positive or negative assayed resistance markers. "T" indicates a treatment option; "T:R" indicates a treatment option that may be affected by the detected resistance marker(s).

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	E	.coli E	faecali	.OXY	s. dureus S. dureus
Abundance	Н	Н	М	М	
† ceftriaxone (AmpC)	-	T:R	-	-	ampC
fosfomycin (Broad-spectrum antibiotic)	S	-	-	-	Not assayed
ampicillin (Extended-Spectrum-Beta lactam)	-	S	-	s	Not assayed
amoxicillin (Extended-Spectrum-Beta lactam)	-	S	-	-	Not assayed
gentamicin (Glycoside)	-	S	-	-	Not assayed
streptomycin (Glycoside)	-	S	-	S	Not assayed
penicillin g (Narrow-Spectrum-Beta lactam)	-	-	-	S	Not assayed
nitrofurantoin (Nitrofurans)	S	S	S	S	Not assayed
linezolid (Oxazolidinone)	-	S	-	-	Not assayed
daptomycin (Peptide)	-	S	-	-	Not assayed
trimethoprim (Pyrimidines)	S	-	-	-	Not assayed
ciprofloxacin (Quinolone and fluoroquinolone)	-	-	S	-	Negative
levofloxacin (Quinolone and fluoroquinolone)	-	-	S	-	Negative
trimethoprim/sulfamethoxazole (Sulfonamides)	S	-	S	-	Not assayed
tigecycline (Tetracyclines)	-	S	-	s	Not assayed
vancomycin (Vancomycin)	-	S	-	S	Negative

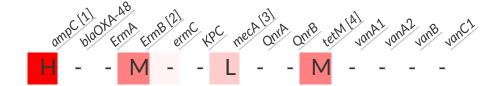
S = Consider alternate treatment due to detected resistance marker(s).

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#### **Antibiotic Resistance**

**Assayed Resistance Markers** 





- 1. AmpC resistance
- 2. Macrolide resistance
- 3. Methicillin resistance
- 4. tetracycline-resistant ribosomal protection protein

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## 4. Microorganisms Tested

Organism/Assay	ctMean	Presence
A. baumannii	N/A	Not
атрС	14 100	Detected
ImpC AmpC resistance)	14.123	Detected
blaOXA-48	N/A	Not
		Detected
Broad-range 16s	16.519	Detected
C. albicans	N/A	Not
C Community	N1/A	Detected
C. freundii	N/A	Not Detected
C. glabrata	29.501	Not
	27.001	Detected
C. trachomatis	N/A	Not
		Detected
E. aerogenes	N/A	Not
E. cloacae	N/A	Detected Not
E. CIOUCUE	IN/A	Detected
E. coli	14.123	Detected
E. faecalis	14.123	Detected
E. faecium	N/A	Not
		Detected
ErmA	N/A	Not
ErmB	23.832	Detected Detected
(Macrolide resistance)	23.032	Detected
ermC	30.339	Not
		Detected
K. oxytoca	22.123	Detected
K. pneumoniae	N/A	Not
VDC	N1 / A	Detected
KPC	N/A	Not Detected
M. morganii	N/A	Not
- <b>U</b>	,	Detected
mecA	29.193	Detected
(Methicillin resistance)		
N. gonorrhoeae	N/A	Not
P. aeruginosa	N/A	Detected Not
1. uci uziiiosu	IN/A	Detected
P. mirabilis	N/A	Not
		Detected
P. stuartii	N/A	Not
D / :		Detected
P. vulgaris	N/A	Not Detected
QnrA	N/A	Not
Quii (	IN/ A	1400

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QnrB	N/A	Detected Not Detected
S. agalactiae	N/A	Not Detected
S. aureus	22.123	Detected
S. saprophyticus	N/A	Not Detected
tetM (tetracycline-resistant ribosomal protection protein)	24.079	Detected
vanA1	N/A	Not Detected
vanA2	N/A	Not Detected
vanB	N/A	Not Detected
vanC1	N/A	Not Detected
Xeno	23.555	Detected

Limitation: An absence of detection does not imply the absence of microorganisms other than those listed or does not exclude the possibility that the target sequence is present below the limit of detection. The UTI Report does not take into consideration patient history, drug-drug interactions, drug sensitivity, and/or allergies. It is the responsibility of the physician to determine appropriate drug and dosing choices based on all available data.

Methodology: Array based assays simultaneously detect a wide array of bacteria, viruses, and parasites at analytical sensitivity

and specificity >99% Administration. The FDA has determined that such approval is not necessary, provided that the laboratory

both (1) maintains its good standing as a clinical testing laboratory with all mandatory accrediting bodies, and (2) continually demonstrates that its testing protocols and procedures achieve a high degree of analytical accuracy.

Laboratory Certification: CLIA # SAMPLE

Laboratory Director: John Doe, M D.

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