

# MICROBIOLOGY NOTES

## COLLECTION, TRANSPORT, PROCESSING, AND STAINING OF SPECIMENS

### PRINCIPLES OF SPECIMEN COLLECTION

Major goal of microbiology laboratory – **aid diagnosis of infectious disease**

Goal of specimen collector – **maintain viability w/ minimal contamination**

### FUNDAMENTALS

- Collect in \_\_\_\_\_ and **antibiotics administration** (or within 2-3 days for viral infection)
- **Correct** anatomic site for collection
- **Proper technique and supplies** w/ minimal contamination
- **Appropriate quantity** of specimen
- Container or transport medium designed to maintain viability of organism & avoid hazard from leakage.
- **Accurate labeling** of spx. With:
  - Specific anatomic site
  - Patient's info
- **Immediate transport** of spx. to lab
- Provide environment that won't degrade suspected organism

- Notify lab if unusual / agents of bioterrorism are suspected

### COLLECTION PROCEDURE

Spx. should be collected in **sterile containers**

- Except for **stool**

**Swabs** – not recommended

- Don't provide sufficient quantity
- Easily contaminated
- Can be dried out leading to organism loss
- Often vortexed in **0.5 – 1ml of saline or broth** for **10 – 20 secs.** to dislodge material from fibers.
- **Recommended for:**
  - Upper respiratory tract
  - External ear
  - Eye
  - Genital tract

**“wound”** is not appropriate specimen label (**exact site must be provided**)

### PATIENT-COLLECTED SPECIMEN

Most effective method for instruction – \_\_\_\_\_

### NOTED SPECIMEN COLLECTION GUIDELINES

#### Blood Culture

- Adult - **20 ml/ set**
- Children – **5 – 10ml/ set**

#### Body Fluids

- **≥1ml** (anaerobic transport system)

### CSF

- Bacteria & virus -  $\geq 1$  ml
- Fungi & AFB -  $\geq 2$  ml

### Fungal Scrapings – wipe nails & skins with alcohol

- Hair – **10 – 12 hairs w/ intact shaft**
- Nails – **clip affected area**
- Skin – scrape at **outer edge of lesion**

### Urethra

- Insert **2 – 4 cm** into urethra for **2 – 3 secs.**
- Or **collect discharge**

### Nasopharynx

- Insert flexible swab thru nose – **rotate for 5 secs.**

### Urine

- Preferred – \_\_\_\_\_

### Sputum

- Preferred – **First Early Morning Specimen**

### PRESERVATION, STORAGE, AND TRANSPORT

#### Primary Goal

- **Maintain specimen as near to its original state as possible w/ minimal deterioration**
- **Prevent risk to specimen handler**

Spx. should be transported to lab ideally within \_\_\_\_\_,  
**preferably within 2 hours**

### STORAGE

Specimens that can be maintained @ **4°C for 24 hours**

- Urine
- Stool
- Sputum
- Swabs (not for anaerobes)
- Catheters
- Viral specimens

CSF – if not processed, stored @ \_\_\_\_\_

SPECIMEN STORAGE GUIDELINES	
REFRIGERATED	ROOM TEMPERATURE
Catheter tip (IV)	Abscess, lesion, wound
CSF for virus	Body fluids
Ear: Outer	CSF for bacteria
Unpreserved feces	Ear: inner
Feces for <i>Clostridium difficile</i> toxin assay	Feces (unpreserved)
Sputum	Genital
Unpreserved urine	Nasal, N/P, throat
	Tissue
	Urine (preserved)
Suprapubic urine should be plate as soon as received.	

### PRESERVATION

Specimens that can be preserved by preservatives

- Stool
- Urine

- **Boric acid** – used to maintain **accurate urine colony count**

**Stool** – can be refrigerated

- If delayed for **2 hours** – can be added to \_\_\_\_\_

Stool for ***Clostridium difficile* toxin assay**

- Can be refrigerated
- If delayed >48 hours:
  - **Frozen @ -70°C**
- \_\_\_\_\_/\_\_\_\_\_ – for ova and parasite (O&P) exam

**ANTICOAGULANT**

**Sodium Polyanethol Sulfonate (SPS)**

- Most common anticoagulant used for microbiology spx.
- must not exceed \_\_\_\_\_
  - \_\_\_\_\_ & certain anaerobes are inhibited by higher concentration

**Heparin** – used **for viral culture** and isolation of ***Mycobacterium spp.*** from blood

**HOLDING OR TRANSPORT MEDIA**

- Usually contains substances that do not promote multiplication of microorganisms but ensure their preservation
- Available in swab collection system

**Stuart’s and Amie’s Transport Medium** – commonly used

**JEMBEC (James E. Martin Biological Environmental Chamber) System**

- Used for specimens for \_\_\_\_\_

**SPECIMEN PRIORITY**

LEVELS OF SPECIMEN PRIORITIZATION		
LEVEL	DESCRIPTION	SPECIMENS
1	Critical / Invasive	Amniotic fluid
		Blood
		Brain
		CSF
		Heart valves
		Pericardial fluid
2	Unpreserved	Body fluids (not listed for level 1)
		Bone
		Drainage from wounds
		Feces
		Sputum
		Tissue
3	Quantitation required	Catheter tip
		Urine
		Tissue for quantitation
4	Preserved	Preserved feces
		Preserved urine
		Swabs in holding medium

		(aerobic and anaerobic)
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**Level 1** – critical; represent potentially life-threatening illness; from invasive source

**Level 2** – unprotected; may quickly degrade or have overgrowth of contaminating flora.

**Level 3** – require quantitation; may affect accuracy of quantitation if delayed.

**Level 4** – spx. in holding or transport media

**UNACCEPTABLE SPECIMENS**

- Info on request form doesn't match to spx.
- Not submitted in appropriate transport container or leaking container
- Inadequate quantity of spx.
- Spx. transported >2 hours; not preserved
- Received in formalin
- Requesting anaerobic culture in spx. in w/c anaerobes are indigenous
- Dried up spx.
- More than 1 source was submitted from the same specimen. **Blood culture are exception**
- One swab was submitted with multiple requests for various organisms.

NOTE:

- Never discard an unacceptable spx. before contacting a member of health care team.
- Specimen that **impossible to recollect / require patient to undergo invasive procedure** may need to be processed regardless of the situation.

**MACROSCOPIC EXAMINATION**

- Swab or Aspirate
- Stool Consistency
- Blood or Mucus present – **part that is cultured and direct microscopic exam**
- Volume
- Fluid – clear or cloudy

If presence of **gas, foul smell, sulfur granules** – ANAEROBIC CULTURE

**MICROSCOPIC EXAMINATION**

**Purpose:**

- Determines quality of specimen
- Gives indication of infectious process involved.
- Guides routine culture workup based on the result of the smear
- Dictate the need for nonroutine or additional testing.

**PRIMARY INOCULATION**

**TYPES OF CULTURE MEDIA**

- **Nonselective media** – supports growth of most nonfastidious microbes
  - SBP
- **Selective media** – supports growth of one type or group of microbes but not another.
  - MAC
  - CNA
- **Differential media** – allows group of microbes based on **different characteristics** demonstrated on medium. Has dye or alcohol
  - SBA
- **Enriched media/nutritive media** – **contains growth enhancers** added to nonselective agar to allow fastidious organisms to flourish.
  - Blood agar, chocolate agar

- **Enrichment broth – liquid medium** designed to encourage growth of small numbers of particular organism while suppressing other flora.
  - LIM Broth
  - Todd-Hewitt w/ CNA
- **Broth media** – supplement to agar plates to detect small numbers of most aerobes, anaerobes and microaerophiles
  - Thioglycollate broth
  - Brain-Heart Infusion Agar
  - Tryptic Soy Broth

### SPECIMEN PREPARATION

Forms of specimen arrive in lab

- Fluid
- Swab
- Tissue

### FLUID

- **Inoculated directly** to selected media
  - Sterile body fluids
  - Pus
  - Urine
  - Sputum
- **Large volume of sterile body fluids**
  - If >1 ml – centrifuged @ **3000x g for 20 minutes**
  - If consistency is thin enough to avoid filter clogging
    - **Nalgene filter** can be used

**SWAB** – inoculated directly to culture media

- Should be submitted on \_\_\_\_\_
  - One – for **culture media**
  - Another swab – for **direct smear**

### TISSUES

- Can be prepared thru **homogenization** for culture
  - It **can destroy certain organisms**
- Can be **minced** w/ sterile scissors and forceps into small pieces for culture.

### ISOLATION TECHNIQUE

- **General purpose Isolation Streak**
  - Yields **semiquantitative estimate** of growth
  - Useful for most specimen

Grading

- 1<sup>st</sup> quadrant – **1+ (light growth)**
- 2<sup>nd</sup> and 3<sup>rd</sup> quadrant – **2+ (moderate growth)**
- 4<sup>th</sup> quadrant – **4+ (heavy growth)**

- **Quantitative isolation**
  - For **urine specimen & tissue from burn patients**
  - Uses calibrate loops
    - **0.01**
    - **0.001**

### INCUBATION

- \_\_\_\_\_ – **bacteria, AFBs, & viruses**
- \_\_\_\_\_ – **fungi**
- Most routine bacterial cultures are held for **48 – 72 hours**
- **Anaerobes and broth cultures** – held for **5 – 7 days**

**Aerobes** – grow in ambient air

- **21% O<sub>2</sub>**
- **0.03% CO<sub>2</sub>**

**Anaerobes** – cannot grow in presence of \_\_\_\_\_

PROPERTY OF MEDTECH REVIEW NOTES  
DO NOT DISTRIBUTE

- Atmosphere in anaerobe jars
  - **5 – 10% H<sub>2</sub>**
  - \_\_\_\_\_% CO<sub>2</sub>
  - **80 – 90% N<sub>2</sub>**
  - **0% O<sub>2</sub>**

**Capnophiles** – requires

- \_\_\_\_\_% CO<sub>2</sub>
- **15% O<sub>2</sub>**

**Candle Jar atmosphere – 3% CO<sub>2</sub>**

Examples: *H. influenzae*; *N. gonorrhoeae*

**Microaerophiles** – grows in

- reduced O<sub>2</sub> (**5 – 10%**)
- increased CO<sub>2</sub> (**8 – 10%**)

Example: *Campylobacter jejuni*; *Helicobacter pylori*

### NONROUTINE SPECIMENS

- **Implant soak solution**
  - Requires large volume and
  - Concentration
- **Water sterility specimen**
  - Requires concentration
    - **Millipore Sampler**
      - Uses \_\_\_\_\_
- **Intrauterine device**
  - Cultured for detection of ***Actinomyces* spp.**
  - Inoculated into **THIO**
- **Vascular Catheter tips**
  - Use for **catheter-related infection**
  - Uses **Maki roll technique**

**Maki roll technique** – **5-7cm** segment of catheter is rolled of a blood agar plate **4 times**.

Critical Values in Microbiology
Positive blood culture
Positive CSF gram stain or culture
Positive cryptococcal antigen test or culture
Positive blood smear for malaria
<i>Streptococcus pyogenes</i> from a sterile site
Positive acid-fast smears or positive <i>Mycobacterium</i> culture.
<i>Streptococcus agalactiae</i> or herpes simplex virus from genital site of pregnant woman at term
Detection of significant pathogen

## SMEARS

### Smears for Swab

- Should not be prepared from swab after used to inoculate culture media. (**2 swabs are submitted**)
- Prepared by **rolling the swab back and forth** over contiguous areas of the glass slide to deposit a thin layer of sample material.

### Smears from thick liquid

- Swab method – swab is immersed in specimen for several seconds
  - Used to prepare thin spread of material in the glass slide

### Smears from thick, granular, mucoid materials

- Opaque material must be thinly spread
- Most desirable to have both **thick and thin areas**
- Granules must be **crushed** – to assess their makeup
  - Too hard granules – probably don't represent infectious material

### Smears from Thin Fluids

- Should be dropped but not spread on slide
- **Cytocentrifugation** - preferred for this type of specimen.

## CYTOCENTRIFUGATION

- Excellent for \_\_\_\_\_ (CSF, BAL)

### PROCEDURE

1. Small aliquots of fluid (0.1 – 0.2 ml) are placed into cytocentrifuge holder
2. Material is spun for **10 minutes**
3. Slide is removed. If deposit of cells is too heavy, a portion of cellular deposition can be smeared
4. Fixed and decontaminated in **70% alcohol for 5 mins.**

## MICROSCOPY

### MAGNIFICATION

**100,000x** – for viruses

\_\_\_\_\_ – for bacteria, fungi, parasites

**RESOLUTION** – extent to which **detail in the magnified object is maintained**

**CONTRAST** – needed to make **objects stand out from the background**; achieved by **staining technique** – highlights organisms and allow them to be differentiated.

- If staining is absent – **reduce diameter of microscope aperture diaphragm, increasing contrast at the expense of the resolution.**

### FLUORESCENT MICROSCOPY

- Uses **fluorescent microscope**
- Uses certain dyes – \_\_\_\_\_

Color of fluorescent light depends on:

- Dye
- Light filters

Acridine orange, auramine, FITC

- Requires **blue excitation light** (450- 490λ)

Calcofluor White

- Requires **violet excitation light** (355-425λ)

## TECHNIQUES

### • FLUOROCHROMING

- fluorescent dye is used alone
- **direct** chemical interaction between dye and component of bacterial cell
- Most Common Methods:
  - **acridine orange**
    - binds to \_\_\_\_\_ (bright orange)
    - used in **blood cultures**
    - used also in Mycoplasma
  - **auramine-rhodamine stain**
    - for \_\_\_\_\_ in cell walls of mycobacteria (bright yellow/ orange in greenish background)
  - **calcofluor white**
    - binds to \_\_\_\_\_ of fungi
    - also used to visualize \_\_\_\_\_

### • IMMUNOFLUORESCENCE

- fluorescent dyes have been conjugated to specific antibodies
- **Fluorescein isothiocyanate (FITC)** – most commonly used for conjugation to antibodies (\_\_\_\_\_)

### DARK-FIELD MICROSCOPY

- Condenser does **not allow light to pass directly through the specimen** but directs the light to hit the specimen at an oblique angle.
- Used to detect bacteria that has:
  - Thin dimensions
  - Can't be seen in light microscopy

- Difficult to grow in culture  
Example -*Treponema pallidum*

### ELECTRON MICROSCOPY

- Uses
  - **Electron** - visualize small objects
  - Focused on **electromagnetic fields** to form an image on fluorescent screen
  - Powerful research tools.
  - Not needed for laboratory diagnosis of most infectious disease.
- Allows magnification in **excess of 100,000x**
- **GENERAL TYPES**
  - **Transmission electron microscope (TEM)** – allows visualization of **internal structures**
  - **Scanning Electron Microscope (SEM)** – scan surface of objects; provides \_\_\_\_\_ of surface structures.

### SMEARING

#### Reasons why organisms grow in culture that was not seen in Direct Smear

- Slow-growing organism was present
- Patient receiving antibiotic treatment – prevents growth of organism
- Specimen was not appropriately processed
- Organism is no longer viable
- Organism requires special media for growth.

**DIRECT SMEAR** – preparation of primary clinical sample received in the laboratory for processing.

- Provides mechanism to identify \_\_\_\_\_ **present in specimen.**

**INDIRECT SMEAR** – when

- **Primary sample has been processed in culture**
- smear contains organisms following **purification or growth on artificial media.**

### STAINS

- **Simple stains** – directed toward coloring the forms and shapes present
- **Differential stains** – directed toward coloring **specific components** present
- **Diagnostic antibody or DNA probe-mediated stain**
  - Specific at identification of organism

**Gram stain** (by \_\_\_\_\_, 1884)

- Fixative – **heat / methanol**
- Primary stain – **crystal violet** (hexamethyl-p-rosaniline chloride) – (30 secs.)
- Mordant – \_\_\_\_\_ (no water rinse employed; 30 – 60 secs.)
- Decolorizer – **alcohol-acetone** (quick)
- Counterstain – **Safranin** (1 minute)

Quantitation of Organisms in Gram Stain		
Many	4+	10-20 / OIO
Moderate	3+	6-10 / OIO
Few	2+	3-5 / OIO
Rare	1+	<10 on complete smear

Quantitation of Cells in Gram Stain		
Many	4+	≥25 / LPO
Moderate	3+	10-25 / LPO
Few	2+	2-10 / LPO
Rare	1+	<2 / LPO
None		



**Precaution**

- If crystal violet rinsed too vigorously before complexed with iodine
  - **wash away and leave poor/no staining of gram-negative organism**
- If decolorizer is too vigorous or prolonged
  - **Gram-positive complex will be removed; gram-positive organism will not stain.**
- Decolorizer is insufficient
  - **False gram-positive organisms in thicker areas of sample**
- **Presence of inflammatory cells** – key indicator of infectious process.

**BASIC FUCHSIN** – alternative counterstain for faintly-staining gram negative organisms (ex. *Campylobacter*; *Helicobacter*)

**ACID FAST STAINING**

Most common Acid-Fast staining methods

- Auramine-rhodamine
- Ziehl-Neelsen
- Kinyoun

**Fluorescent Stain**

- Primary stain – **auramine-rhodamine T stain** (25 mins.)
- Decolorizer – \_\_\_\_\_ (2 mins)
  - (0.5% HCl in 70% alcohol)
- Counterstain – **potassium permanganate** (4 mins)

**POSITIVE RESULT – BRIGHT YELLOW/ ORANGE against GREENISH BACKGROUND**

REPORTING	
No. of acid-fast bacilli	Report
1 – 20	Number seen
21 – 80	Few
81 – 300	Moderate

>300	Numerous
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**Ziehl-Neelsen Method** (\_\_\_\_\_)

- **Heat** – allows penetration of stain into waxy surface of microorganism
- Primary stain – **carbolfuchsin** (5 minutes)
- Decolorizer – **acid-alcohol** (3% HCl in 95% ethanol)
- Counterstain – **methylene blue** (1 min)

**Kinyoun Method** (\_\_\_\_\_)

- Primary stain – **carbolfuchsin** (5 mins.)
- Decolorizer – **acid-alcohol**
- Counterstain – **methylene blue** (1 min)

**NOTE**

- has higher concentration of phenol in primary stain, therefore heat is not required.
- Identification of a single **acid-fast bacillus** in a single sputum is **considered diagnostic**.

**Modified Kinyoun Method** (for partial acid-fast)

- Primary stain – **carbolfuchsin** (5 mins.)
- Decolorizer – \_\_\_\_\_
- Counterstain – **methylene blue** (30 secs)

**FUNGAL STAIN**

Most common fungal stains are:

- KOH
- PAS
- Grocott's Methenamine Silver Stain
- Calcofluor White

**Calcofluor White**

- colorless dye
- binds to \_\_\_\_\_ **and** \_\_\_\_\_
- for **fungal elements**
- fluoresce maximally at **440 nm**

**Evans Blue** – counterstain

**RESULT:** fungi appears **bright apple-green / blue-white fluorescence**

## SPECIMEN COLLECTION & PROCESSING (PARASITOLOGY)

### STOOL COLLECTION (TYPICAL)

- one spx. collected every other day
- total of \_\_\_\_\_ collected in \_\_\_\_\_

### Diagnosis of Amoebiasis

- \_\_\_\_\_

### If patient in therapy of BISMUTH, BARIUM, & MINERAL OIL

- collect **PRIOR TO THERAPY**
- not until **5-7 or 4 – 5 DAYS** after completion of therapy

**DELAYED FOR 2 WEEKS** – if patient's in **antibiotic/antimalarials**  
\_\_\_\_\_ – acceptable amount of stool (**walnut-size**)

### **Stool**

- Bacterial infection – **1 a day for 3 days**
- Parasitic infection - \_\_\_\_\_
- Stool to preservative ratio – \_\_\_\_\_

### **FOR TROPHOZOITE MOTILITY DEMONSTRATION**

- **FRESH SPX. IS REQUIRED**
- Examined in \_\_\_\_\_

**STOOL FIXATIVES** – **3:1 fixative : stool ratio**

### **FORMALIN**

- **5%** - protozoan cyst
- **10%** - helminth eggs & larvae
- must be fixed within **30 MINS.**

### **ADVANTAGES**

- easy to prepare
- preserves spx. for up to several years
- long shelf-life

### **POLYVINYL ALCOHOL** – for **permanent-stained smear**

- has **plastic powder**
- most often combined with **schaudinn solution**

### **SCHAUDINN SOLUTION**

- Zinc sulfate
- Copper sulfate
- Mercuric chloride (base)

### **SODIUM ACETATE FORMALIN** – for **concentration technique & permanent stained smear**

- Can be used for modified-acid fast stain for coccidian oocysts

## PROCESSING

### **MACROSCOPIC**- must be **FRESH, UNPRESERVED.**

- Consistency
  - \_\_\_\_\_ – possible to see cyst
  - \_\_\_\_\_ - trophozoite
- Color – brown (normal color)

### **MICROSCOPIC EXAM**

- **DIRECT WET PREP**
  - To detect motile trophozoite
  - Used **unfixed specimen**

- 0.85% saline
- Glass slide – **3 x 2 inch-size**
- **22-mm square** cover slip
- \_\_\_\_\_ – temporary seal

- **DIRECT WET PREP**

- Enhance details of cyst
- Drop of **Iugol's or D' Antoni's Formula**

- **BUFFY COAT SLIDES**

- Oxalated / citrated blood
- Placed in **wintrobe tubes**
- **30 mins. @ 100 x g**
- For \_\_\_\_\_

### CONCENTRATION TECHNIQUE

- Detects small no. of parasite
- Best to detect helminth eggs and larvae
- **Types**
  - **Floatation**
  - **Sedimentation**
- **FECT (FORMALIN – ETHYL ACETATE SEDIMENTATION)**
  - **Most widely used**
- **ZINC SULFATE FLOATATION TECHNIQUE**
  - Zn sulfate SG – \_\_\_\_\_
- **KNOTT TECHNIQUE**
  - **1 ml blood**
  - **10 ml 2% formalin**
  - **1 min @ 500 x g**

### PERMANENT STAINS

- Sample of choice – \_\_\_\_\_

**Wheatly Trichrome** – most widely used

**Iron Hematoxylin** – for excellent morphology of intestinal protozoa

## **OTHER SPECIMENS ASIDE FROM STOOL**

- **DUODENAL MATERIAL**

- \_\_\_\_\_
- *Cryptosporidium*
- *Isohora belli*
- *S. stercoralis*
- *Fasciola hepatica*
- *C. sinensis*

- **SIGMOIDAL MATERIAL (COLON)**

- *E. histolytica*
- Coccidian parasite
- *Microsporidia*

- **CELLOPHANE TAPE PREP**

- \_\_\_\_\_
- *Taenia* spp.

- **BLOOD – Giemsa stain** is preferred.

- *L. donovani*
- *Trypanosoma* spp.
- *Plasmodium* spp.
- *Babesia* spp.
- *Microfilaria*

- **CSF**

- *Naegleria* spp.
- *Acanthamoeba*
- *T. gondii*
- *Microsporidia*
- *T. solium cysticercus*

PROPERTY OF MEDTECH REVIEW NOTES  
DO NOT DISTRIBUTE

- *Echinococcus* spp.

#### ○ TISSUE

- *Leishmania*
- *T. gondii*
- *Trypanosoma*
- *T. spiralis*

#### ○ SPUTUM

- \_\_\_\_\_
- *S. stercoralis*
- Microporidia
- *E. histolytica*
- *E. gingivalis*
- *A. lumbricoides*
- Hookworm

#### ○ URINE

- *S. haematobium*
- *T. vaginalis*
- Microfilaria

#### ○ EYE SPECIMENS

- *Acanthamoeba* spp.
- *T. gondii*
- *Loa loa*

#### ○ SKIN SNIPS

- *O. volvulus*

#### ○ NASAL DISCHARGE

- *N. fowleri*

#### ○ MOUTH SCRAPINGS

- *E. gingivalis*
- *T. tenax*

## CULTURE MEDIA

### ACETATE AGAR

**Purpose** – differentiate *E. coli* from *Shigella* spp.

#### **Components:**

- **Acetate** – carbon source
- **Bromthymol blue** – pH indicator

#### **RESULT:**

- Green – negative (didn't utilize acetate)
- Blue – positive (utilized acetate)

### ALKALINE PEPTONE WATER

**Purpose** – for recovery of \_\_\_\_\_ And ***Aeromonas***

#### **spp. Components:**

- **0.5 – 1.0% NaCl** – to recover *Vibrio* spp.

### BACTEROIDES BILE ESCULIN AGAR

**Purpose** – for isolation of ***Bacteroides fragilis*** group **Components:**

- **Oxgall** – separates bile-resistant & bile-sensitive species.
- **1% esculin & ferric ammonium citrate** –
  - to visualize esculin hydrolysis
  - **(+)** reaction – **dark brown or black**

### BILE ESCULIN AGAR

**Purpose** – used to isolate & identify **group D streptococci and enterococci**.

**Components:**

- **Oxgall** - inhibits most gram (+) organisms
- **Esculin** – differential component

Esculin Bacteria -----> Esculetin

Esculetin + **Ferric citrate** □ insoluble iron salts (black)

**NOTES:**

- Addition of **vancomycin** – used to detect vancomycin-resistant streptococci & enterococci
- Addition of **azide** – inhibits gram-negative organism

**BISMUTH SULFITE AGAR**

**Purpose** – isolation of \_\_\_\_\_

**Components:**

- **Selective ingredients** – inhibits gram (+) bacteria
  - Bismuth sulfite
  - Brilliant green
- **Ferrous sulfate** – reacts to H<sub>2</sub>S to produce **black ppt.**
- **COLONIES**
  - *Salmonella* serotype Typhi - **black surrounded with metallic sheen**
  - Serotype Gallinarum, Choleraesuis, Paratyphi – **light green**

**KANAMYCIN AND VANCOMYCIN BLOOD AGAR**

**Purpose** – for isolation of obligate gram (-) anaerobes particularly *Bacteroides* spp.

**Components:**

- **Antimicrobials**
  - Kanamycin
  - Vancomycin

**LAKED BLOOD AGAR W/ KANAMYCIN & VANCOMYCIN & VITAMIN K**

**Purpose** – for isolation of *Bacteroides* and *Prevotella*

**spp. Components:**

- **Antimicrobials**
  - Kanamycin
  - Vancomycin
- **Laked erythrocytes** (lysed by freezing)
- **Vitamin K**

**NOTE:** helpful in isolation of *Prevotella melaninogenica*

**RABBIT BLOOD AGAR**

**Purpose** – for recovery and demonstration of beta- hemolysis of *Haemophilus* spp. & *Gardnerella vaginalis*

**BORDET – GENGOU BLOOD AGAR**

**Purpose** – for isolation \_\_\_\_\_ & *B. paraptussis*

**Components:**

- **Selective agents:**
  - Penicillin
  - Methicillin
  - cephalixin
- **Peptone**
- **Glycerol**
- **Potato infusion**
- Defibrinated **sheep blood** (sterile)
- **15 – 30% Blood enrichment** (3-6 ml/20-ml tube)

**NOTE:** plate must be held for **5 days, but not more than 7 days**, before regarded as negative

### **BRAIN-HEART INFUSION BROTH**

**Purpose** – recommended for **cultivation of pneumococci for bile solubility test**

#### **Components:**

- **Brain & Beef heart** – provide nutrients
- **Peptone**
- **Glucose**
- **NaCl**
- **Buffers**

**NOTE: 6.5% NaCl** can be added – to differentiate salt- tolerant enterococci from streptococci.

### **BUFFERED CHARCOAL YEAST EXTRACT (BCYE) AGAR**

**Purpose** – for isolation of ***Legionella* spp.** **Components:**

- **Ferric pyrophosphate** – provides Iron
- **Enhances growth of *Legionella***
  - Yeast extract
  - Alpha-ketoglutarate
  - L-cysteine
- **Activated charcoal** – absorb toxic compounds from organism's metabolism

#### **NOTE:**

- can be used to isolate ***Francisella* & *Nocardia* spp.**
- ***Legionella* spp.** Not be visible til **3-5 days after inoculation**

### **WADOWSKY – MODIFICATION**

#### **Components:**

- **Inhibitors of Gram (-) organism**
  - Glycine
  - Polymyxin B
- **Vancomycin** – inhibits gram (+) cocci
- **Anisomycin** – inhibits fungi
- **Differential components:**
  - Bromcresol purple
  - Bromthymol blue

**RESULT:** *L. pneumophila* colonies – **light blue w/ pale green tin**

### **BURKHOLDERIA CEPACIA AGAR**

**Purpose** – isolate *B. cepacian* from respiratory spx. of patients with cystic fibrosis

#### **Components:**

- **Inhibitors** – inhibits gram (+) & gram (-)
  - Crystal violet
  - Bile salts
  - Polymyxin B
  - Ticarcillin
- **Inorganic salts**
- **Peptones**
- **Pyruvate**
- **Phenol red** – pH indicator

### **CAMPYLOBACTER BLOOD AGAR**

**Purpose** – for isolation of ***Campylobacter* spp.** **Components:**

- **Brucella agar** – base medium
- **Sodium bisulfite** – lowers redox potential, enhancing recovery of microaerophilic organism.
- **10% sheep blood**
- **Inhibitors**
  - Vancomycin
  - Trimethoprim – prevents *Proteus*
  - Polymyxin B

- Amphotericin B – prevents fungi
- Cefoperazone – antipseudomonal

#### Colony characteristic

- *Campylobacter* spp.
  - **Flat, gray, nonhemolytic, raised or mucoid**
  - Some may be **tan or slightly pink**
  - May appear **swarming / spreading across surface of plate**

#### CETRIMIDE AGAR (pseudose agar / *Pseudomonas*- selective agar)

**Purpose** – for *Pseudomonas* spp. (except for *P. fluorescens*)

#### Components:

- **Inhibitor**
  - **Cetrimide** (cetyl trimethyl ammonium bromide / hexamethyltrimethyl ammonium bromide)
  - **Pyocyanin production Stimulator – Magnesium chloride**
  - Potassium sulfate
- **Low Iron content** – stimulates **pyoverdine** prod.

#### COOKED MEAT (CHOPPED MEAT GLUCOSE) MEDIUM

**Purpose** – useful in cultivation of anaerobes esp.

*Clostridium* spp.

#### Components:

- **Solid Meat Particles** – initiates growth from very small inoculum
- **Peptone**
- **Beef heart**
- **Dextrose**

#### CYCLOSERINE CEFOTAXIME FRUCTOSE AGAR (CCFA)

**Purpose** – for isolation and identification of *Clostridium difficile*

#### Component:

- **Inhibitors** – inhibits intestinal normal flora
  - Cycloserine

- Cefotaxime
- **Fructose**
- **Neutral red** – pH indicator

#### OTHER VARIATIONS

- **1<sup>st</sup> variation**
  - **Mannitol** (instead of fructose)
  - **Bromthymol blue** – pH indicator
- **2<sup>nd</sup> variation**
  - Addition of **egg yolk suspension**
    - Detection of **lipase and lecithinase activity**
  - **COLONY CHARACTERISTIC**
    - *C. difficile* – **yellow colony**
    - In UV light – **gold- yellow**

#### 0.4 % DILUTE GELATIN MEDIUM

**Purpose** – useful in differentiation of:

- *Nocardia* spp. from one another
- *Streptomyces* spp.

#### COLONY CHARACTERISTICS

- *N. asteroides* – doesn't grow / grows poor
- *N. brasiliensis* – compact, rounded colonies
- *Streptomyces* spp.
  - Poor to good growth
  - With stringy or flaky morphology

#### EGG YOLK AGAR (McClung Toabe Agar)

**Purpose** – for detection of **lecithinase, lipase, protease activity**

**Component** – Egg emulsion

- Provides lecithin, lipids, and proteins

**RESULTS:**

- Lecithinase activity – **zone of opacity**
- Lipase activity – **iridescent sheen** around surface of colonies

Protease activity – **clearing of medium**

**HAEMOPHILUS TEST MEDIUM****Purpose**

- for **susceptibility testing of *Haemophilus***
- also for broth minimal inhibitory concentration (MIC)

**Components:**

- Beef
- Yeast
- Casein extract
- Hematin
- NAD

**FLETCHER SEMISOLID MEDIUM** Purpose – for *Leptospira* spp.

**Component:** Rabbit serum w/ hemoglobin – **enrichment** **Growth:** turbidity  
(examined in dark-field microscope)

**HEKTOEN ENTERIC AGAR****Purpose**

- for direct isolation of enteric pathogens
- for indirect isolation from selective enrichment broth

**Components:**

- bile salt – selective component
- lactose
- salicin
- sucrose
- bromthymol blue – pH indicator
- **for detection of H<sub>2</sub>S gas**
  - sodium thiosulfate
  - ferric ammonium citrate

**NOTE:**

- SHOULD NOT BE AUTOCLAVED
- AVOID OVERHEATING

**COLONY CHARACTERISTICS**

- Most nonpathogen
  - **bright orange to salmon-pink**
- *Salmonella* & *Shigella* spp.
  - **Green to blue-green colonies**

**LIM BROTH** (Modified Todd-Hewitt Broth)

**Purpose** – for isolation of ***Streptococcus agalactiae***

**Component:**

- Peptone
- Yeast extract
- Dextrose
- **Inhibitors for gram (-)**
  - Colistin
  - Nalidixic acid

**LOEFFLER COAGULATED SERUM SLANT**

**Purpose** – for primary recovery of ***C. diphtheriae***

**Component:**

- Serum (high content)
- Animal heart muscle
- Dextrose
- Egg
- NaCl

**MacCONKEY AGAR**

**Purpose** – selects for Enterobacteriaceae & other gram (-) rods

**Components:**

- **Inhibitors**
  - Bile salt



- Crystal violet
- **Lactose** – sole carbohydrate source
- **Neutral red** – pH indicators

**NOTE:**

- ***Enterococcus* spp.** may produce tiny colonies
- **MAC w/out crystal violet** – used to help identify mycobacteria

**MacCONKEY SORBITOL AGAR**

**Purpose** – used to isolate ***E. coli* O157:H7 D-sorbitol** is substituted for lactose

**MALONATE BROTH**

**Purpose** – identification of *Salmonella* spp.

**Component:**

- Sodium malonate – carbon source
- Glucose
- Yeast extract
- Bromthymol blue – pH indicator

**REACTION**

- **Prussian blue color** – utilized malonate
- **green (no change of color)** - no growth

**MANNITOL SALT AGAR**

**Purpose** – for recovery & identification of staphylococci

**Components:**

- **7.5% NaCl** – inhibits gram (-) & (+) except staphylococci
- **Mannitol** – carbohydrate source
- \_\_\_\_\_ – pH indicator

**COLONY CHARACTERISTICS**

- *S. aureus* – **yellow zone in colonies**

**NOTE: *Enterococcus* spp.-** may able to grow & weak mannitol fermenter

**MOTILITY TEST MEDIUM**

**Purpose** – to determine if organism is motile or nonmotile

**NOTE:** add **1% triphenyltetrazolium chloride** – to enhance detection of motility

**MODIFIED THAYER-MARTIN AGAR**

**Purpose** – for recovery of *N. gonorrhoeae* & *N. meningitidis*

**COMPONENTS**

- Hemoglobin
- Vitamins
- Diphosphopyridine nucleotide
- L-cysteine
- NAD
- Glutamine
- Cornstarch – absorb inhibitory substances
- **Inhibitors**
  - Vancomycin
  - Colistin
  - Nystatin – prevents fungal growth
  - Trimethoprim – prevents *Proteus* swarm

**Martin-Lewis Agar (Components)**

- **Anisomycin (20ug / mL)** – substitute for nystatin
- **Vancomycin (4ug/mL)** – higher conc. Than MTM

**MUELLER-HINTON AGAR**

**Purpose** – for susceptibility testing of organisms in antimicrobial agents.

**COMPONENTS:**

- Animal infusion
- Casein extract
- Starch

**NOTE:**

- Add **5% sheep blood** – to perform susceptibility testing on **streptococci**
- Add **heated / chocolized SRBC** – for fastidious organism (*Haemophilus* & *Neisseria*)
- **Ca<sup>2+</sup> & Mg<sup>2+</sup> concentration** – critical in testing of *Pseudomonas* isolates w/ aminoglycoside antibiotics

**MUELLER-HINTON AGAR W/ 2% NaCl**

**Purpose** – for detection of **MRSA**

**Cefoxitin & oxacillin** – used for detection of MRSA (in Kirby-Bauer or Etest)

**MHA w/ 4% NaCl & 6ug OXACILLIN**

**Purpose** – to screen *S. aureus* isolates selectively for resistance to **oxacillin** or **nafcillin**

**NEW YORK CITY MEDIUM**

**Purpose** – used also for *N. gonorrhoeae* & *N. meningitidis*

**COMPONENTS:**

- Hemoglobin- from lysed horse RBC
- Yeast dialysate
- Horse plasma
- **Inhibitors**
  - Vancomycin
  - Colistin
  - Amphotericin B
  - Trimethoprim

**NOTE:** also supports growth for *Mycoplasma* as well as *Ureaplasma urealyticum*

**O-F POLYMYXIN B-BACITRACIN-LACTOSE AGAR**

**Purpose** – for isolation of *Burkholderia cepacia*

**INHIBITORS:**

- Polymyxin B
- Bacitracin

**PHENYLETHYL ALCOHOL AGAR**

**Purpose** – for isolation of **gram (+) cocci & rods** **COMPONENT:**

- **Phenylethyl alcohol** – inhibits facultative gram neg. rods

**NOTE:** *Bacillus anthracis* will not grow in this medium

**POTASSIUM TELLURITE BLOOD AGAR**

**Purpose** – for isolation of *C. diphtheriae*

**COMPONENTS:**

- **Cystine**
- **Potassium tellurite** – inhibits gram (-) organisms, staph, strep, while allowing growth of *C. diphtheriae*

**NOTE:**

- Some *Staphylococcus*, gram (-) bacilli, yeast **will overcome inhibition**

**COLONY CHARACTERISTICS**

- *C. diphtheriae* – dull, gray black (reduction of tellurite)
- **Diphtheroids** – light gray-green
- *Staphylococcus* – large, glistening, jet black
- **Gram (-) bacilli & yeast** – dull, gray-black (larger)

**PPLO (Pleuropneumonia-like organism) Agar**

**Purpose** – used to isolate *Mycoplasma* spp.

**Component:**

- NaCl
- Agar
- Antimicrobials

**REGAN-LOWE MEDIUM**

**Purpose** – for isolation of *B. pertussis* & *B. parapertussis*

**Components:**

- Beef extract
- Horse blood
- Niacin
- Pancreatic digest
- **Neutralizers**
  - Charcoal
  - Starch
- Cephalixin – selective agent

**COLONY CHARACTERISTICS**

- *B. pertussis* – domed, shiny, transparent, and tiny; **mercury droplet appearance**

**SALMONELLA-SHIGELLA AGAR**

**Purpose** – selection of *Salmonella* & some strains of *Shigella* spp. from stool

**Components:**

- **Inhibitors:**
  - Bile salts
  - NaCl
  - Brilliant green
- Lactose – carbohydrate source
- Neutral red – pH indicator
- **For detection of H<sub>2</sub>S gas**
  - Sodium thiosulfate
  - Ferric ammonium citrate

**NOTE: HEAVY INOCULUM OF STOOL** should be plated on SS agar – because medium is very inhibitory

**SELENITE BROTH**

**Purpose** – recovery of **low numbers** of *Salmonella* and some strains of *Shigella* spp. from stool

**Component:**

- Sodium selenite – inhibitor; effective at **neutral pH**
- **Maintains neutral pH**
  - Lactose
  - Phosphate buffers

**NOTE: 1-2g of stool** should be inoculated

**SP-4 BROTH & AGAR**

**Purpose** – **primary** isolation media for \_\_\_\_\_

**Components:**

- Yeast
- Preformed nucleic acid
- Fetal bovine serum – supplies cholesterol
- **Inhibitors**
  - Penicillin
  - Amphotericin B
  - Polymyxin B

**STREPTOCOCCUS-SELECTIVE AGAR**

**Purpose** – for isolation primarily for **beta-hemolytic streptococci**

**Component:**

- **Columbia agar** – base
- **Maltose** – enhances prod. Of streptolysin
- **Inhibitors**
  - Polymyxin B
  - Neomycin

**In order formulation, with:**

- Oxolinic acid
- Colistin

### **TETRATHIONATE BROTH**

**Purpose** – recovery of *Salmonella* **except serotypes**

- Typhi
- Arizonae

**Components:**

- **Inhibitors**
  - Iodine-potassium iodide solution (**added**)
  - Bile salt in conjunction with thiosulfate
  - Brilliant green
  - Crystal violet

### **THIOSULFATE CITRATE BILE SALT SUCROSE AGAR**

**Purpose** – isolation of *Vibrio* spp.

**Components:**

- **Inhibitors**
  - Sodium citrate
  - Sodium thiosulfate
  - Oxgall
- Bromthymol or thymol blue – pH indicator
- **For H<sub>2</sub>S detection**
  - Sodium thiosulfate
  - Ferric citrate
- Sucrose – carbohydrate source

### **COLONY CHARACTERISTICS**

- Sucrose fermenters – **yellow**
  - *Vibrio cholerae*
  - *Vibrio alginolyticus*
- Non-sucrose fermenters – **blue-green colonies**

- *Vibrio parahaemolyticus*
- ***Vibrio vulnificus***
- Other organism – **blue colonies**
  - *Pseudomonas*
  - ***Plesiomonas***
  - ***Aeromonas***

**NOTE:** Heavy inoculum should be applied

### **TINSDALE AGAR**

**Purpose** – used for isolation of *C. diphtheriae*

**COMPONENTS:**

- **Inhibitors**
  - Potassium tellurite (high concentration)
- Cystine
- Thiosulfate

### **COLONY CHARACTERISTICS**

- *Corynebacterium* spp. – **gray to black colonies**
  - *C. diphtheriae* – with **brown halo**
  - *C. ulcerans* & *pseudodiphthericum*
    - **Dark halo**
- *Proteus* – **mucoid**
- Staphylococci & Streptococci (rare)
  - **Dark colonies**

### **TODD-HEWITT BROTH W/ GENTAMICIN & NALIDIXIC ACID**

**Purpose** – used to grow streptococci from vaginal & rectal swab **for serotyping**

**COMPONENT:**

- Peptone
- Beef heart infusion
- Glucose
- **Inhibitors**
  - Gentamicin
  - Nalidixic acid

### VAGINALIS AGAR

**Purpose** – isolation of *Gardnerella vaginalis*

**Components:**

- Columbia agar – base
- **Inhibitors**
  - Colistin
  - Nalidixic acid
  - Nystatin

### XYLOSE-LYSINE-DESOXYCHOLATE AGAR

**Purpose** – used to isolate *Salmonella* and *Shigella*

**Components:**

- Sodium desoxycholate – inhibitor
- Sucrose
- Lactose
- Xylose – high concentration
- Phenol red – pH indicator
- **For H<sub>2</sub>S detection**
  - Sodium thiosulfate – sulfur source
  - Ferric ammonium citrate

### **COLONY CHARACTERISTICS**

- **Yellow colonies** – ferments excess carbohydrates
  - *E. coli*
- **Yellow colonies w/ black centers** – ferments excess carbohydrates;  
H<sub>2</sub>S producers
  - *Citrobacter* spp.
  - *Proteus* spp.
- **Colorless or red colonies**
  - *Shigella* spp.
- **Red colonies**
  - *Salmonella* spp.
  - *Edwardsiella* spp.

## MEDIA FOR MYCOBACTERIA

### AMERICAN TRUDEAU SOCIETY MEDIUM

- Egg-based

**Purpose** – isolation of *M. tuberculosis*

**Component:**

- Eggs – provides fatty acid
- Potatoes – carbon source
- **Malachite green** – inhibitor

### LOWENSTEIN-JENSEN MEDIUM

**Purpose** – for cultivation of *Mycobacterium* spp.

**Component:**

- Potato flour
- Egg
- Glycerol
- **Asparagine** – for **max. production of niacin** by certain *Mycobacterium* spp.
- **Malachite green** – inhibitor

### MODIFICATIONS

- **LJ medium w/ 5% NaCl** – to aid in identifying **rapid growers**
- **Gruft modification** – more selective  
**Components:**
  - **Selective agents**
    - Penicillin (50 U/ml)
    - Nalidixic acid (35 ug/ mL)
  - **Ribonucleic acid** (0.05 ug/ml)
    - Increases rate of mycobacterium isolation

- **Petran and Vera modification** – permits gentler decontamination or digestion procedures  
**Components:**
  - **Selective agents (added):**
    - **Cyclohexamide**
    - **Lincomycin**
    - **Nalidixic acid** MIDDLEBROOK 7H10 & 7H11

**AGARS Purpose** – used to cultivate *Mycobacterium* spp.

**NOTE: Isoniazid-resistant strains** grows better in this medium

#### **Components (7H11)**

- Casein hydrolysate – stimulates growth of **drug- resistant** *Mycobacterium tuberculosis*

#### **Components (Both)**

- **Oleic-acid-dextrose-catalase (OADC)** –simulates egg components
  - **Oleic acid**– fatty acid used by mycobacteria
  - **Dextrose** – for energy production
  - **Catalase** – neutralize toxic peroxidase
- **Albumin** – inhibits toxic agents; source of CHON
- **Malachite green** - inhibitor

#### **MITCHISON 7H11 SELECTIVE AGAR**

##### **Component:**

- **Inhibitors:**
  - Amphotericin B
  - Carbenicillin
  - Polymyxin B
  - Trimethoprim

#### **MEDIA w/ BROMTHYMOL BLUE**

- **Acetate agar**
- **BCYE**
- **CCFA**
- **Hektoen Enteric Agar**
- **Malonate Broth**

#### **w/ BROMCRESOL PURPLE**

- **Wadowsky-Yee BCYE**
- **CCFA**
- **Moeller**
- **LIA**

#### **w/ NEUTRAL RED**

- **CIN**
- **MacConkey**
- **Sorbitol McConkey**

#### **w/ PHENOL RED**

- **Burkholderia cepacia Agar**
- **TSI**
- **Kligler**
- **MSA**

## **MOLECULAR DIAGNOSTICS**

#### **POLYMERASE CHAIN REACTION**

- **DENATURATION – 94 – 95 degree Celsius (15 – 30 secs)**
  - For dsDNA separation
- **PRIMER ANNEALING – 45 – 65 degree Celsius (30 secs. – 2 mins.)**
  - Anneals primer to target DNA

- **PRIMER EXTENSION – 68 – 72 degree Celsius**
  - Synthesis of new strands of DNA

**PCR COMPONENTS**

- **Template DNA** – target for PCR
- **Oligonucleotide Primers** – starts synthesis new strands of DNA
- **Thermostable DNA** – synthesizes new strands of polymerase of DNA
- **Magnesium** – required by DNA polymerase for proper reaction
- **Buffer** – ensures proper conditions and pH for DNA polymerase
- **Deoxynucleotides** – used by polymerase to synthesize new DNA
- **Thermal Cycler** – heats and cools PCR cycle steps.

**ANTIMICROBIAL SUSCEPTIBILITY TEST**

**AST STANDARDIZATION**

- **McFarland Turbidity Standards**
  - 1% H<sub>2</sub>SO<sub>4</sub>
  - 1.175% BaCl<sub>2</sub>

**0.5 McFarland** – most commonly used

**Growth Medium –**

- pH – **7.2 – 7.4**
- cation concentration
- blood and serum components
- thymidine content

**TESTING MEDIUM FOR DIFFERENT ORGANISM**

Organism	Media	Inoculum size			Incubation
		Broth Dilution	Agar dilution	Disk diffusion	
Enterobacteriaceae P. aeruginosa Enterococci	Mueller-Hinton	5 x 10 <sup>5</sup> cfu/ml	1 x 10 <sup>4</sup> cfu/spot	1.5 x 10 <sup>8</sup> cfu/ml	35°C; air 16 – 20 hrs.
Staphylococci	MH w/ 2% NaCl				30-35° C; 5-10% CO <sub>2</sub>
Streptococcus	MHA w/ 5% Sheep's Blood		Not needed for s. pneumoniae		35°C 5-10% CO <sub>2</sub>
H. influenzae	HTM		1 x 10 <sup>4</sup> cfu/spot		20 – 24 hrs
N. meningitidis	MH w/ 2-5% lysed horse blood				35°C; 5-7% CO <sub>2</sub> ; 24 hrs.
N. gonorrhoeae	GC agar + supplements	None			35°C; 5% CO <sub>2</sub> ; 24 hrs.
Anaerobes	Brucella BA w/ Hemin	1 x 10 <sup>6</sup> cfu/ml	1 x 10 <sup>5</sup> cfu/spot	-----	Anaerobic, 35-37°C; 48 hrs.

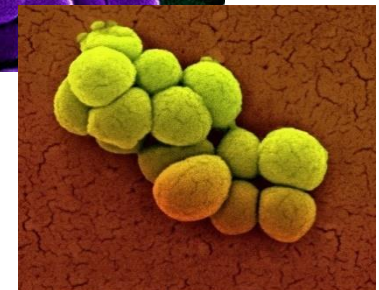
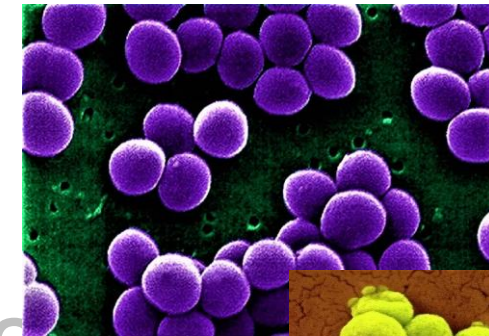
AUTOMATED ANTIMICROBIAL SUSCEPTIBILITY SYSTEMS	
Vitek 2	<ul style="list-style-type: none"> <li>64-well; has specific concentration of antibiotics</li> <li>Advanced Expert System (AES)</li> </ul>
MicroScan WalkAway	<ul style="list-style-type: none"> <li>Microdilution manullary inoculated with <b>multiprong device</b></li> </ul>
Phoenix System	<ul style="list-style-type: none"> <li>Convenient, albeit manual, <b>gravity-based</b> inoculation process</li> <li>Growth monitoring – based on <b>redox indicator system</b></li> </ul>

SUPPLEMENTAL METHODS FOR ANTIMICROBIAL RESISTANCE DETECTION	
Oxacillin Agar screen	For staphylococcal resistance to penicillinase-resistant penicillin
Vancomycin agar screen	For enterococcal resistance to vancomycin
Aminoglycoside screens	For acquired enterococcal high-level resistance to aminoglycosides that would compromise synergy with a cell wall-active agent
Oxacillin disk screen	For streptococcus resistance among <i>S. aureus</i> resulting from efflux
Cefoxitin disk test 30 ug	To improve detection of oxacillin-resistant CoNS
Aminoglycosides	For serious enterococcal infections, and acquired high-level resistance

## STAPHYLOCOCCUS & MICROCOCCUS

- Gram (+) cocci
- Facultatively anaerobes (except for *S. saccharolyticus* – **OBLIGATE ANAEROBE**)

- In tetrads or in clusters
- Catalase (+)
- Oxidase (+)
- Non-motile
- Grows in 7.5 – 10% NaCl



### Characteristics:

#### COLONY

- Produced after **18-24 hrs.**
- Medium-sized (4-8 um)
- COLORS:
  - Cream-colored
  - White
  - Rarely light gold
  - “ \_\_\_\_\_ ”

### HUMAN NARIS (NOSTRILS) – PRIMARY RESERVOIR FOR STAPHYLOCOCCI

#### *S. aureus* Disease Association

- Folliculitis
- Furuncles (Boil)
- Carbuncles
- Bullous impetigo
- Scalded skin syndrome / Ritter's Disease / Pemphigus neonatorum
- Toxic Shock Syndrome
- Toxic Epidermal Necrolysis
- Food poisoning
- Staphylococcal pneumonia
- Osteomyelitis



- S. aureus Virulence Factors:**

- | Enterotoxin                                    | Disease Association  |
|--|----------------------|
| <b>B</b> (10%), <b>A</b> (78%), <b>D</b> (38%) | FOOD POISONING       |
| <b>B, C, G, I, F</b>                           | TOXIC SHOCK SYNDROME |

**Enterotoxin B – assoc. w/ staphylococcal pseudomembranous colitis**

- **Other Virulence Factors**

Virulence Factor	Function and role in disease
Alpha-hemolysin	Lyses: <b>RBCs, platelets, Macrophages</b> Causes: <b>Severe Tissue Damage</b>
Beta-hemolysin (Sphingolmeylinase C)	<ul style="list-style-type: none"> <li>• “ ”</li> <li>• Enhance hemolysis @ <b>37°C &amp; 4°C</b></li> <li>• Exhibited in <b>CAMP test</b></li> <li>• Acts on <b>sphingomyelinase of RBC</b></li> </ul>
Staphylococcal enzymes	Enzymes: <ul style="list-style-type: none"> <li>• Protease</li> <li>• Lipase</li> <li>• Hyaluronidase (Duran-Reynal Factor)</li> <li>• Staphylocoagulase</li> </ul> Facilitates <b>spread of infection</b> (protease, lipase, hyaluronidase)
Panton-Valentine Leukocidin (PVL)	<ul style="list-style-type: none"> <li>• Exotoxin lethal to PMNs</li> <li>• <b>Assoc. w/ gamma-hemolysin</b></li> <li>• Causes:               <ul style="list-style-type: none"> <li>- <b>severe cutaneous infection</b></li> <li>- <b>necrotizing pneumonia</b></li> </ul> </li> <li>• Assoc. w/:               <ul style="list-style-type: none"> <li>- <b>community-acquired staph infection</b></li> </ul> </li> </ul>
	antiphagocytic

OTHER STAPHYLOCOCCI		
Organism	Virulence factor	Disease association
<i>S. epidermidis</i>	Biofilm Delta toxin Poly-γ-glutamic acid	<ul style="list-style-type: none"> <li>Prosthetic valve endocarditis <b>(most common)</b></li> <li>Nosocomial infection.</li> </ul>
<i>S. saprophyticus</i>	Adheres to epithelial lining	UTI; ( ) – <b>significant</b>
<i>S. lugdunensis</i>	mecA gene for oxacillin resistance	UTI and endocarditis <b>Catheter-related bacteremia</b>
<i>S. haemolyticus</i>	Vancomycin resistance	UTI and endocarditis

## TESTS TO DIFFERENTIATE STAPHYLOCCOCUS & MICROCOCCUS

TEST	STAPHYLOCOCCUS	MICROCOCCUS
Furoxone-Tween 80-ORO Agar (growth)	-	+
Lysosome (50-mg disk)	Resistant	Susceptible
Anaerobic acid prod. From glycerol in presence of erythromycin	+	-
O/F Test	Fermenter	Oxidizer
Modified oxidase	-	+
Bacitracin ( )	Resistant <10mm	Susceptible >10mm
Furazolidone (100 ug)	Susceptible	Resistant
Lysostaphin (200ug/ml)	Susceptible	Resistant

Organism	PYR	VP Test
----------	-----	---------

<i>S. aureus</i>	-	+
<i>S. lugdunensis</i>	+	+
<i>S. intermedius</i>	+	-
<i>S. schleiferi</i>	+	+

**COAGULASE TEST:** differentiates *S. aureus* from CoNS; uses **rabbit or pig plasma**

- **Slide method** – for **clumping factor** (\_\_\_\_\_)
- **Tube method** – for **staphylocoagulase** (\_\_\_\_\_)

**Coagulase (+) Staphylococci:**

- *S. delphini*
- *S. aureus*
- *S. hyicus*
- *S. intermedius*
- *S. luteus*

**Contains CLUMPING FACTOR**

- *S. lugdunensis* - confused w/ *S. aureus* in slide method
- *S. schleiferi*

**SMALL COLONY VARIANTS STAPHYLOCOCCI**

- **Fastidious**
- Requires: **CO<sub>2</sub>, Hemin, Menadione**
- Grows on media containing **blood**.

- **Gram (+) cocci**
- **In pairs or chains**
- **Aerotolerant anaerobes**
- Some are **capnophilic**

**Characteristics**

COLONY

- Usually **small and transparent**

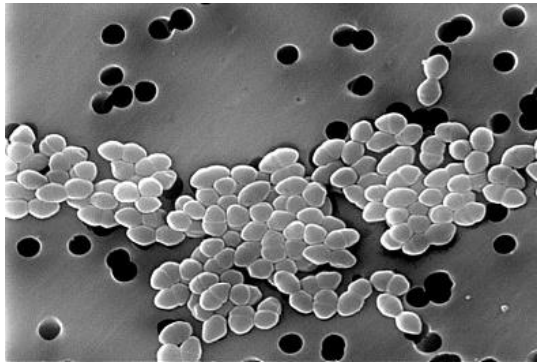
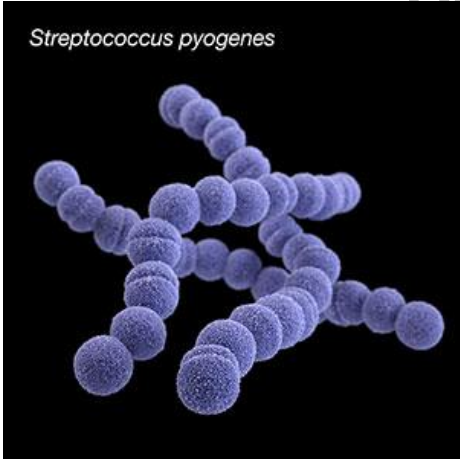
CATEGORIES OF NECROTIZING FASCIITIS	
Type	Description
1	Polymicrobial infection (aerobic & anaerobic)
2	Consist of <b>Group A Streptococci</b>
3	Clostridial myonecrosis
<b>Saltwater Necrotizing Fasciitis</b>	Caused by <b><i>Vibrio</i> spp.</b>

Organism	Lancefield	Smith and Brown's
<i>S. pyogenes</i>	A	Beta
<i>S. agalactiae</i>	B	Beta
<i>S. dysgalactiae, S. equi</i>	C	Beta
<i>S. bovis</i> group	D	Alpha, Gamma
<i>E. faecalis, E. faecium</i>	D	Alpha, Beta, Gamma
<i>S. pneumoniae</i>	None (has _____)	Alpha
<i>S. anginosus, mutans, mitis</i>	A, C, F, G, N	Alpha, Beta, Gamma

# **STREPTOCOCCUS & ENTEROCOCCUS**

Organism	Virulence Factor	Disease Assoc. / Characteristics
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<b>S. pyogenes</b>		Antiphagocytic	<ul style="list-style-type: none"> <li>Necrotizing fasciitis / galloping gangrene</li> <li>Erysipelas (St. Anthony's Fire)</li> <li>Impetigo</li> <li>Puerperal Sepsis</li> <li>Childbed Fever</li> <li>Scarlet Fever</li> <li>Post-streptococcal acute glomerulonephritis (Bright's Disease)</li> </ul>
	<b>Protein F</b>	Fibronectin-binding protein	
	<b>Hyaluronic acid</b>	Capsule, <b>prevents opsonization</b>	
	<b>Streptolysin O</b>	O <sub>2</sub> labile, antigenic, <b>subsurface hemolysis</b>	
	<b>Streptolysin S</b>	O <sub>2</sub> stable, non-antigenic, <b>surface hemolysis</b>	
	<b>Streptokinase</b>	Thrombolytic drug, fibrinolysis	
	<b>Hyaluronidase (_____)</b>	Spreading factor	



	<b>Erythrogenic Toxins (Streptococcal Pyrogenic Exotoxins)</b>	<b>SPEs A, B, C, F A</b> – Scarlet Fever & Toxic shock syndrome	
<b><i>S. agalactiae</i></b>	<b>Sialic acid</b>	Critical virulence determinant	Meningitis, obstetric complications, mastitis in cattles
<b><i>S. pneumoniae</i></b>	<b>Capsular polysaccharide</b>	Serotypes <b>1, 2, 3</b> – common cause of <b>lobar pneumonia</b>	Meningitis, _____, otitis media, sinusitis, bacteremia, <b>2° atypical HUS</b>
<b>Enterococci</b>	<b>cytolysin</b>	Capable of producing <b>pseudoperoxidase reaction (weak bubbling)</b>	
<b>Viridans Streptococci</b>	<ul style="list-style-type: none"><li>• Common cause of <b>subacute bacterial endocarditis</b></li><li>• Gingivitis</li><li>• Dental caries (_____)</li></ul>		
<b><i>S. bovis</i> group (<i>S. gallolyticus</i> subsp. <i>Gallolyticus</i>)</b>	<ul style="list-style-type: none"><li>• Associated with <b>gastrointestinal carcinoma (colorectal tumors)</b></li></ul>		

TESTS FOR STREPTOCOCCI

Bacitracin Disk Test / Taxo A (0.04 U)	Differentiates <i>S. pyogenes</i> from other Beta-hemolytic groups Result: Group C and G are susceptible
Sulfamethoxazole & Trimethoprim (SXT) test	Result: Group B – <b>resistant</b> to SXT Group C – <b>sensitive</b> to SXT
Pyrrolidonyl Arylamidase (PYR) test	More specific than bacitracin test <i>S. pyogenes</i> is the only Beta-hemolytic strep that is positive.
CAMP (Christie, Atkins, Munch-Petersen) test	Used to differentiate <i>S. agalactiae</i> from other Beta-hemolytic streptococci. Result: (+) Beta-hemolysis.
Hippurate Hydrolysis Test	Used to differentiate <i>S. agalactiae</i> from other Beta-hemolytic streptococci. Result: <b>(+) purple color</b>
Dick's Test	Skin test for
Schultz-Charlton Test	Immunity test for Scarlet fever
	Capsular swelling test for <i>S. pneumoniae</i> & other bacteria that has capsule.
Francis Skin Test	Detection of presence of antibodies against pneumococci.
Bile solubility test	Evaluates the ability of <i>S. pneumoniae</i> to lyse in the presence of bile salt.

Organism	SXT (1.26 ug) Group A and B vs. others	CAMP for Group B	Hippurate Hydrolysis	CAMP	PYR
Group A	S	R	-	-	+
Group B	R	R	+ (Enhance hemolysis)	+	-
Group C, F, G	R	S	-	-	-

Organism	Bile Esculin hydrolysis	6.5% NaCl	Optochin	PYR
<i>Enterococcus</i>	+	+	R <14mm	+
Non- <i>Enterococcus</i>	+	-	R <14mm	-
<i>S. pneumoniae</i>	-	-	S >14mm	-

Organism	Bile Esculin	6.5% NaCl	PYR	LAP	MRS broth
<i>Enterococcus</i>	+	+	+	+	-
<i>Pediococcus</i>	+	+	-	+	-
<i>Leuconostoc</i>	+	+	-	-	+

NUTRITIONALLY VARIANT STREPTOCOCCI

- requires **SULFHYDRYL COMPOUNDS**
- causes **hard-to-treat endocarditis** (surgery is required for cure)
  - **Abiotrophia**
  - **Granulicatella**

# BACILLUS

- Aerobic and facultatively anaerobic
- Gram (+)
- Catalase (+)
- Spore-forming bacilli



Organism	characteristics	Virulence factors	Disease association
<i>B. anthracis</i>	<ul style="list-style-type: none"><li>• non-motile</li><li>• “_____” appearance</li><li>• Produces endospores</li></ul> <p>Appearance in 5% SBA:</p> <ul style="list-style-type: none"><li>• _____</li><li>• Ground-glass appearance</li><li>• Beaten egg-whites</li></ul> <p>In MHA:</p> <ul style="list-style-type: none"><li>• String of Pearls</li></ul>	<ul style="list-style-type: none"><li>• Protective Antigen – facilitates transport of two other protein into the cell.</li><li>• Edema factor (adenylate cyclase) - responsible for edema</li><li>• Lethal factor (protease) – primarily responsible for death.</li><li>• D-glutamic acid capsule – resistant to hydrolysis</li></ul>	<ul style="list-style-type: none"><li>• Cutaneous anthrax – most common</li><li>• Eschar (malignant pustule) – black necrotic lesion.</li><li>• Gastrointestinal Anthrax – most severe</li><li>• Pulmonary Anthrax (Woolsorter’s / Ragpicker’s Disease)</li><li>• Injectional Anthrax – assoc. w/ “skin popping”</li></ul>

<i>B. cereus</i>	<ul style="list-style-type: none"><li>• Penicillin-resistant</li><li>• Beta-hemolytic</li><li>• MOTILE</li><li>• Frosted glass-appearing colony</li><li>• Feathery, spreading, beta-hemolytic colonies</li></ul>	<p>Diarrheal</p> <p>- responsible for most symptoms.</p> <ul style="list-style-type: none"><li>• Hemolysin BL</li><li>• Nonhemolytic enterotoxin</li><li>• Cytotoxin K</li></ul> <p>Emetic</p> <ul style="list-style-type: none"><li>• Cereulide – heat-stable, proteolysis, acid-resistant</li></ul>	<ul style="list-style-type: none"><li>• Opportunistic</li><li>• Assoc. w/ food-borne disease</li><li>• Causes PROGRESSIVE ENDOPHTHALMITIS</li><li>• Some strains can carry <i>B. anthracis</i> toxin genes.</li></ul>
<i>B. thuringensis</i>	Produces parasporal crystals	Harbors genes of <i>B. cereus</i> -associated enterotoxins.	

DIFFERENTIATION		
Test	<i>B. anthracis</i>	<i>B. cereus</i>
Capsule	-	+
Growth @ 45°C	-	+
Salicin Fermentation	-	+
Hemolysis	-	+
Motility	-	+
Penicillin susceptibility	S	R
Growth in Penicillin (10 U/ml) agar	-	+
“string of pearls” reaction	+	-
Gelatin hydrolysis	-	+
Growth in PEA agar	-	+

BIOLOGICAL INDICATORS	
	Autoclave
	Ionizing radiation
	Ethylene oxide sterilization

## LISTERIA, CORYNEBACTERIUM

- Gram (+) bacilli
- Catalase (+)
- Non-spore forming
- Non-branching

Organism	Virulence Factors	Disease Assoc.	Characteristics
<i>Corynebacterium diphtheriae</i>	<p><b>Diphtheria Toxin</b></p> <ul style="list-style-type: none"> <li>- blocks protein synthesis</li> <li>- causes <b>demyelinating peripheral neuritis</b></li> </ul> <p>Bacteria is infected by <b>lysogenic Beta-phage</b>.</p> <p><b>TONSIL / PHARYNX</b></p> <ul style="list-style-type: none"> <li>– most common site of infection.</li> </ul>	<p><b>Respiratory Diphtheria</b> – development of <b>pseudomembrane</b> (gray to white)</p> <p><b>Cutaneous Diphtheria</b> – non-healing ulcers (dirty gray)</p>	<ul style="list-style-type: none"> <li>• Pleomorphic (<b>club-shaped</b>)</li> <li>• Irregular staining.</li> </ul>

*C. minutissimum* – causes **erythrasma**

*C. pseudotuberculosis* – causes **granulomatous lymphadenitis**

- also produces **dermonecrotic toxin**

**Babe’s-Ernst Granules / Volutin Granules** – accumulation of nutrient reserves

\_\_\_\_\_ – for visualization of Babe’s-Ernst Granules

**Cardiac Failure** – often cause of death of diphtheria

**Antitoxin** – treatment for the toxin.

Organism	Virulence Factor	Disease Assoc.	Characteristic
<i>Listeria monocytogenes</i>	<p><b>Hemolysin (Listeriolysin O)</b></p> <ul style="list-style-type: none"> <li>- damages the phagosome</li> </ul> <p><b>Intermalin (Protein p60)</b></p> <ul style="list-style-type: none"> <li>- induces phagocytosis; increase adhesion, penetration into mammalian cells</li> </ul>	<p><b>Listeriosis</b></p> <ul style="list-style-type: none"> <li>- Newborn (bacteremia and meningitis)</li> <li>- Pregnant Women (spontaneous abortion – <b>3<sup>rd</sup> trimester</b>)</li> </ul> <p>Has highest tropism in <b>CNS</b>.</p>	<p>Small, round, smooth translucent forms narrow zone of Beta-hemolysis.</p> <p>Optimal growth: <b>30 – 35°C</b> but growth occurs @ <b>0.5 – 45°C</b></p> <p><b>Tumbling or end-over-end motility</b></p> <p><b>Umbrella-shaped or</b></p> <hr/> <p>(semi-solid tube @ 22-25°C)</p>

Test	<i>Listeria</i>	<i>Corynebacterium</i>
<b>CAMP</b>	+	-
<b>Hippurate Hydrolysis</b>	+	-
<b>Esculin Hydrolysis</b>	+	-

Motility	+	-
Salicin	+	-

## Erysipelothrix rhusiopathiae

- Gram (+) bacilli
- Catalase (-)
- Non-branching
- H<sub>2</sub>S (+) in TSI

<i>Erysipelothrix rhusiopathiae</i>		
Disease Association	Colony Appearance on BAP	ID
<ul style="list-style-type: none"> <li>• <b>Erysipeloid</b></li> <li>• bacteremia</li> <li>• cutaneous infection</li> </ul>	<p>Large, rough, or small, smooth and translucent</p> <p>Shows <b>alpha-hemolysis</b> after prolonged incubation.</p>	in gelatin stab culture.

## Gardnerella vaginalis

- gram variable / gram (-)
- beta-hemolytic (HBT agar) / nonhemolytic (BAP)
- causes bacterial vaginosis

### Causes Bacterial Vaginosis

- *Gardnerella vaginalis*
- *Prevotella* spp.

- *Peptostreptococcus* spp.
- *Porphyromonas* spp.
- *Mobiluncus* spp.
- *Mycoplasma hominis*

\_\_\_\_\_ – most accurate means of diagnosing bacterial vaginosis than culture.

NUGENT SCORING SYSTEM					
<i>Lactobacillus</i> morphotypes (boxy, gram (+) bacilli)		<i>Gardnerella &amp; Bacteroides</i> (pleomorphic, gram-variable, gram (-), short bacilli)		<i>Mobiluncus</i> morphotypes (curved, gram-variable bacilli)	
Quantity	Points	Quantity	Points	Quantity	Points
4+	0	0	0	0	0
3+	1	1+	1	1+ to 2+	1
2+	2	2+	2	3+ to 4+	2
1+	3	3+	3		
0	4	4+	4		

### NUGENT SCORING INTERPRETATION

**0 – 3** – NORMAL VAGINAL MICROBIOTA

**4 – 6** – INDETERMINATE FOR BACTERIAL VAGINOSIS

\_\_\_\_\_ – BACTERIAL VAGINOSIS

## NOCARDIA, RHODOCOCOCCUS

- Gram (+)
- Branching
- Partially acid-fast

Organism	Characteristics	Disease Assoc.
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<b>Nocardia</b>	<ul style="list-style-type: none"> <li>• Beaded appearance</li> <li>• <b>Strictly aerobic</b></li> <li>• Presence of DAP</li> <li>• Produces <b>Nocobactin</b> – iron-chelating compound</li> <li>• <b>Urease (+)</b></li> </ul>	<ul style="list-style-type: none"> <li>• Cutaneous infection</li> <li>• Actinomycotic mycetoma</li> </ul>
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**Nocardia brasiliensis** – most common cause of cutaneous infection and actinomycotic mycetoma.

**Nocardia asteroides** – causes **pulmonary infection**

Organism	Casein Hydrolysis
<b>Nocardia brasiliensis</b>	+
<b>Nocardia asteroides</b>	-

Organism	Characteristics	Disease Assoc.
<b>Rhodococcus equi</b>	<ul style="list-style-type: none"> <li>• Facultative intracellular organism; replicate within macrophage.</li> </ul>	Infections in immunocompromised patients such as patients with HIV.

	<ul style="list-style-type: none"> <li>• <b>Salmon-pink pigment</b></li> <li>• <b>Cocci to rods – 24 hours</b></li> <li>• <b>CAMP (+) w/ <i>S. aureus</i></b></li> </ul>	
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Test	Nocardia	Actinomyces spp.
<b>O<sub>2</sub> requirement</b>	Aerobic	Anaerobic
<b>AFS</b>	Acid-fast	Non acid-fast
<b>Catalase</b>	+	-
<b>Urease</b>	+	-
<b>Sulfur Granules</b>	+	+

## ENTEROBACTERIACEAE

- Non-spore forming
- Facultatively anaerobes
- Glucose fermenters
- Oxidase (-) (exc. *Plesiomonas*)
- Catalase (+) (exc. *Shigella dysenteriae*)
- Commensal flora except *Salmonella*, *Shigella*, *Yersinia* (true pathogen)
- Nonencapsulated except (*Klebsiella* & *Enterobacter*)

Organism	Disease Association	Description
<b><i>E. coli</i></b>	Most common cause of nosocomial infections	Primary marker for fecal contamination in water.



<b>E. coli BIOTYPES</b>		
<b>Strain</b>	<b>Infection</b>	<b>Virulence Factors</b>
<b>Meningitis/sepsis-associated E. coli</b>	Meningitis	<b>K1 antigen</b> – identical capsule to <i>N. meningitis</i>
<b>Enteropathogenic E. coli (EPEC)</b>	Infantile diarrhea (without blood) – large amounts of mucus	<b>Adhesive properties (pili and intimin)</b> – no exotoxins.
<b>Enterohemorrhagic E. coli (EHEC)</b> (Serotoxigenic/verotoxigenic)	Bloody diarrhea (NO WBCs)  Assoc. w/	<u><b>Cytotoxin</b></u> <b>- Verotoxins I &amp; II</b> – produces damage to vero cells.  Most common serotypes – <b>O157:H7</b>
	Traveler's diarrhea / Montezuma's revenge  Watery diarrhea	<b>Cholera-like toxin</b> <b>Heat-labile enterotoxin (LT);</b> <b>Heat-stable (ST) toxin</b>
<b>Enteroinvasive E. coli (EIEC)</b>	<b>Dysentery-like / shigella-like infection</b>  Watery Diarrhea (w/ WBCs)	Direct invasion  <b>HEp-2 cells</b> – used to detect invasiveness <b>(stacked-brick pattern)</b>
<b>Enteraggregative E. coli (EAEC)</b>	<b>Watery diarrhea</b>	Global aggregative regular gene, <b>AggR</b> , responsible for cellular adherence.

<b>Uropathogenic E. coli (UPEC)</b>	MOST COMMON CAUSE OF UTI  Considered cause of diarrhea in HIV patients.	<b>Pili</b> (primary virulence factor to cause UTI) <b>Cytolysins</b> – kill phagocytes.  <b>Aerobactin</b> – chelates iron
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**Escherichia albertii** – newest species to the genus  
- Assoc. w/ diarrhea in children.

#### **YELLOW-PIGMENTED**

- *E. hermannii*
- *E. vulneris*

<b>Organism</b>	<b>Disease Assoc.</b>	<b>Description</b>
<b>Citroacter spp.</b>	Septicemia, meningitis, brain abscesses	<i>C. freundii</i> – may harbors inducible _____ genes (encode resistance to ampicillin and first-generation cephalosporin)  - endocarditis in intravenous drug abusers
<b>Cronobacter sakazakii</b>	Bacteremia, causes neonatal meningitis from powdered infant formula, necrotizing colitis in neonates;	Produces yellow pigment that is enhanced by incubation @ 25°C

<b>Edwardsiella tarda</b>	Gastroenteritis	Assoc. w/ harboring fish or turtles
<b>Enterobacter spp.</b>	Healthcare – associated infection (contaminated medical device)	
<b>Hafnia alvei</b>	Gastrointestinal infection	Motile; non-lactose fermenter  <b>DELAYED CITRATE POSITIVE REACTION</b>
<b>Klebsiella pneumoniae (Friedlander's Bacillus)</b>	Lobar pneumoniae – _____	K1 capsular-containing Mucoid colonies – tends to string
<b>Morganella spp.</b>	Normal inhabitants of gastrointestinal tract; neonatal sepsis	Resembles <i>E.coli</i> in IMVIC patter
<b>Pantoea agglomerans</b>	Sporadic infections can occur due to trauma	Yellow-pigmented colony;  Lysine, arginine, ornithine and arginine
<b>Proteus spp.</b>	Assoc. w/ UTI <b>P. mirabilis</b> - most common isolate  _____ - due to urease activity	Swarming Odor: <b>chocolate cake or burnt chocolate smell</b>  <b>Swimmers</b> – standard vegetative cells  <b>Swarmers</b> – hyperflagellated; capable of

		coordinated movement
<b>Providencia spp.</b>	Most commonly associated w/ UTI ( <i>P. retgerii</i> ) and the feces of children w/ diarrhea	<b>P. stuartii</b> – outbreaks in burn units
<b>Serratia spp.</b>	Colonization and cause of pathogenic infection in healthcare setting	_____ – red pigment produced by <i>Serratia</i> .
<b>Salmonella spp.</b>	-Acute gastroenteritis or food poisoning -Enteric fever (Typhoid Fever) assoc. w/ Typhi & Paratyphi  Isolated in: - blood (1 – 2 weeks) - urine (3 – 4 weeks) - stool (2 – 3 weeks)	Diagnosed with _____  <b>Fimbriae</b> – initiates intestinal infection  -Ability to traverse intestinal mucosa  -enterotoxin
<b>Shigella spp.</b>	Bacterial dysentery <ul style="list-style-type: none"> <li>• Blood</li> <li>• Pus</li> <li>• Mucus</li> </ul>	Non-motile; low infectious dose (100-200)
<b>Yersinia pestis</b>	Plague  Only species that is transmitted from animals by bite of an insect vector ( <i>Xenopsylla cheopis</i> )	- non-motile - Grows best @ <b>25°C – 30°C</b> - Colonies: <b>pinpoint</b> @ 24 hrs. but resemble those of other Enterobacteriaceae after 48 hrs. - <b>cauliflower appearance</b> @ 48 hrs in SBA

		- _____ in broth culture
<b><i>Yersinia enterocolitica</i></b>	Acute enteritis (enterocolitis) – <b>most common form</b>  Arthritis & Erythema nodosum – <b>mimics appendicitis</b>	48 hrs. incubation @ RT in CIN – develops _____

Other <i>Klebsiella</i> spp.	
Organism	Disease Assoc. / Characteristics
<b><i>K. oxytoca</i></b>	Assoc. w/ antibiotic-associated hemorrhagic colitis  <b>Indole (+)</b>
<b><i>K. pneumoniae</i> subsp. <i>Rhinoscleromatis</i></b>	Isolated from patient's with <b>rhinoscleroma</b>
<b><i>K. pneumoniae</i> subsp. <i>Ozaenae</i></b>	- Causes <b>atrophic rhinitis</b> - Assoc. w/ presence of <b>plasmid-mediated ESBLs</b>
<b><i>K. granulomatis</i></b>	Causes <b>donovanosis</b>

FACTS ABOUT <i>Salmonella</i> spp.	
SPECIES	
<i>Salmonella enterica</i>	
<i>Salmonella bongori</i>	
<i>Salmonella enterica</i> SUBSPECIES	
<b>I</b>	Enterica
<b>II</b>	Salamae
<b>IIIa</b>	Arizonae
<b>IIIb</b>	Diarizonae
<b>IV</b>	Houtenae

VI	Indica
<i>Salmonella enterica</i> SEROTYPES	
Typhi	
Choleraesuis	
Paratyphi	
OTHER FACTS	
<b>Causes Typhoid fever</b>	Typhi
<b>Causes Enteric fever</b>	Choleraesuis & Paratyphi
<b>Salmonellosis infective dose</b>	10 <sup>6</sup> bacteria
<b>Development of typhoid fever</b>	9-14 days
<b>Gallbladder</b>	Site of CHRONIC CARRIAGE
<b>Vi antigen</b>	Important in identifying <i>Salmonella</i> Typhi

FACTS ABOUT <i>Shigella</i> spp.	
SEROGROUP	
<b>A</b>	Dysenteriae
<b>B</b>	Flexneri
<b>C</b>	Boydii
<b>D</b>	Sonnei
<b>Kiyoshi Shiga</b>	First man who isolated <i>Shigella</i>

FORMS OF PLAGUE	
Bubonic/Glandular – most common; high fever w/ BUBOES	
Septicemic	
Pneumonic	
<b><i>Y. pseudotuberculosis</i></b>	- 1 <sup>o</sup> pathogen of rodents - causes caseous swelling (pseudotubercles) - typically looks like plague bacillus

**BIPOLAR STAINING**

- Wayson stain
- Methylene blue

**PSEUDOMONAS, BURKHOLDERIA**

Organism	Disease Assoc.	Virulence factor	Appearance on BAP	Odor	Motility
<i>P. aeruginosa</i>	- Primary cause of pneumonia in Cystic Fibrosis patients. - Swimmer's ears - contact lens infection - _____ - erythema gangrenosum	<ul style="list-style-type: none"><li>• Exotoxin A – most important</li><li>• Hemolysins</li><li>• Pili</li><li>• Alginate – mucoid</li><li>• Pyocyanin – specific</li><li>• Biofilm production</li></ul>	Spreading and flat; serrated edges, silver metallic sheen, bluish green, red or brown pigmentation  Beta-hemolytic  MAC – colorless w/ green	Rubber-like  Grape-like  Corn-tortilla like	+
<i>B. mallei</i>	Glander's disease		N/A	N/A	-

<i>B. pseudomallei</i>	-Meliodosis - _____ - _____	Capable of survival in human macrophage	Smooth; mucoid to dry and wrinkled	Earthy odor	+
<i>B. cepacia</i>	Infections in patients w/ CF	Can survive hospitals due to intrinsic resistance to antibiotics	Smooth and raised  MAC – pink colonies (lactose oxidizer)	Dirtlike/earthy odor	+

Organism	Growth @ 42°C	Lysine Decarboxylase	Glucose oxidation
<i>B. mallei</i>	-	-	+
<i>B. pseudomallei</i>	+	-	+
<i>B. cepacia</i>	Variable	+	+
<i>P. aeruginosa</i>	+	-	+

FLUORESCENT PSEUDOMONADS GROUP			
Organism	Growth @ 37°C	Growth @ 42°C	Pyocyanin
<i>P. fluorescens</i>	+	+	+
<i>P. putida</i>	+	-	-
<i>P. aeruginosa</i>	+	-	-

# VIBRIO, AEROMONAS, CHROMOBACTERIUM

## Vibrio

- Motile (monotrichous) – \_\_\_\_\_
- Oxidase (+), except for *V. metschnikovii*
- Halophilic except *V. cholerae* and *V. mimicus*
- LOA = ++-
- O129 Susceptible vs. *Aeromonas* (R)

## Vibrio cholerae

- Agent of \_\_\_\_\_
- Hallmark: \_\_\_\_\_ (caused by cholera toxin)
- Somatic antigens – **O1 & O139**
  - Assoc. w/ *V. cholerae* envelope
  - Positive markers for spread of pandemic and epidemic cholera
  - **Cholera toxin / Choleragen** – increase cAMP → dehydration, loss of water, Na and K.

CLASSIFICATION OF VIBRIO CHOLERAЕ O1 (PANDEMIC TYPE)		
Biotype	Classical	El Tor (Common Type)
Polymyxin Susceptibility	S	R
Lysis BY bacteriophage	+	-
Chicken RBC Agglutination	-	+
Hemolysis of Sheep RBC	-	+
Vogues-Proskauer Test	-	+

Serotype	Ogawa	Inaba	Hikojima
Anti – Ogawa	+	-	+
Anti – Inaba	-	+	+

Organism	Vibrio	Aeromonas	Plesiomonas
TSI	A/A ( <i>V. cholerae</i> ) K/A ( <i>V. parahaemolyticus</i> )	A/A gas+	K/A or A/A (glu + inositol)
NaCl	+ (vs. Aero and Plesio)	-	-
Oxidase	+	+	+
O129 Sensitivity / Vibrio Static Test	S (vs. Aero and Plesio)	R	S/R
Motility	+	+	+
LOA	++-	+ - +	+++
DNAse	-	+	-
Esculin hydrolysis	-	+	-

	Disease	8% NaCl	TCBS	Other
<i>V. cholerae</i>	Cholera (rice watery)	-	Yellow	String test + (0.5% Na desoxycholate)
<i>V. alginolyticus</i>	Wound and ear infection <b>LEAST PATHOGENIC</b> Most frequently isolated	+	Yellow	Strict halophilic (1% NaCl; can tolerate up to 10%)
<i>V. parahaemolyticus</i> (O3:K6)	Gastroenteritis <b>2nd most common cause of gastroenteritis</b>	+	Green	Arabinose + Kanagawa + Beta-hemolytic in <b>Wagatsuma agar</b> )

<b>V. vulnificus</b>	Primary septicemia, wound infection Seen in blood cultures <b>2<sup>nd</sup> most serious type of infection</b>	+	Green	Lactose +
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**Aeromonas spp.** – Beta – hemolytic  
 - grows on Modified Cefsulodin-Irgasan-Novobiocin (CIN)

- C. violaceum**
- Violacein** – ethanol soluble, \_\_\_\_\_ (Room Temp.)
  - Beta-hemolytic with \_\_\_\_\_

## EIKENELLA

	<i>Eikenella corrodens</i>	<i>Methylobacterium spp.</i>
Normal flora of human	+	-
Spectrum of Disease and Infections		Bacteremia and peritonitis in patients undergoing chronic ambulatory peritoneal dialysis
Gram Staining	Slender, medium length gram (-) straight rod with rounded ends.	Short medium-length gram (-) bacillus <b>vacuolated, pale staining, may resist decolorization</b>
Colonial appearance and characteristic	Hallmark characteristic:	<ul style="list-style-type: none"> <li>Pink to coral pigment</li> </ul>

<b>Medium: BA</b>	Improved detection: Selective media + clindamycin	<ul style="list-style-type: none"> <li>Optimal growth occurs: 15°C – 30°C</li> <li>Temperature-sensitive</li> <li>Chlorine-resistant</li> </ul>
TESTS		
<b>Catalase</b>	-	+
<b>Xylose-oxidizing</b>	-	+
<b>Indole</b>	-	-

## PASTEURELLA

- Gram (-)**
- Non-motile**
- Oxidase (+)**
- Ferments glucose**
- Most are susceptible to penicillin**
- Catalase (+)** exc. *P. bettyae* and *P.caballi*
- Reduce nitrate to nitrite**

	Disease Assoc.	Gram Stain	BAP
<i>P. multocida</i>	<ul style="list-style-type: none"> <li>Focal soft tissue infection</li> <li>Respiratory disease</li> <li>Systemic disease</li> </ul> _____ – risk factor for systemic disease	Coccobacilli; frequent <b>bipolar staining</b>	Convex, smooth, gray, <b>nonhemolytic</b> , some are rough and mucoid; some have _____
<i>P. pneumotropica</i>	Rare systemic infection	Short, straight bacilli	Convex, smooth nonhemolytic

<b><i>P. bettyae</i></b>	Genital tract-associated disease; neonatal infection	Thinner, short, straight bacilli	Convex, smooth, nonhemolytic
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***Aggregatibacter actinomycetemcomitans* – STAR-SHAPE W/ FOUR TO SIX POINTS COLONIES.**

**Capnocytophaga – \_\_\_\_\_**

# HAEMOPHILUS

- Gram (-) coccobacilli
- Pleomorphic
- Requires X and V factor
- Facultative anaerobes

	X	V	Porphyrin	Others
<b><i>H. haemolyticus</i></b>	+	+	-	Beta-hemolysis in Horse BAP
<b><i>H. aegypticus</i></b> (Koch-Weeks Bacillus)	+	+	-	Pink-eye conjunctivitis; Brazilian Purpuric fever
<b><i>H. influenzae</i></b> (Pfeiffer's bacillus)	+	+	-	Virulence factor: Type B capsule, IgA protease, pili, <b>LPS</b> – has paralyzing effect on ciliated respiratory epithelium. <b>Major cause of epiglottitis</b> Otitis media, pneumonia, cellulitis.
<b><i>H. parainfluenzae</i></b>	-	+	+	Primary site of infection – <b>mitral valve</b>

<b><i>H. parahaemolyticus</i></b>	-	+	+	Beta-hemolysis on Horse BAP
<b><i>H. paraphrophilus</i></b>	-	+	+	
<b><i>H. ducreyi</i></b>	+	-	-	_____ school of fish, grows well @ 33°C
<b><i>H. aphrophilus</i></b>	-	-	+	

## SPECIMEN COLLECTION

- *Haemophilus* spp. are **susceptible to DRYING and TEMP. EXTREMES.**
- **Lower RT spx: bronchoalveolar lavage**
- **Pneumonia and CSF infection – STERILE FLUID AND BLOOD**
- *H. ducreyi* - **genital ulcers**

# BARTONELLA

- Negative to
  - Catalase
  - Urease
  - Nitrate reductase
  - Oxidase
- Facultatively intracellular bacterium
- Multiply and persist in the RBCs
- Angioproliferation, can inhibit endothelial cell apoptosis

Organism	Disease Assoc.
<b><i>B. alsatica</i></b>	Human accidental host
<b><i>B. bacilliformis</i></b>	Carrion's disease
<b><i>B. Quintana</i></b> (form. <i>Rochalimea Quintana</i> )	Bacillary angiomatosis
<b><i>B. henselae</i></b>	1° cause of cat-scratch disease Peliosis hepatitis
<b><i>B. clarridgeiae</i></b>	
<b><i>B. elizabethae</i></b>	Endocarditis

## CAMPYLOBACTER, HELICOBACTER

- Gram (-) bacilli
- Microaerophilic (5-10% O<sub>2</sub>)

	<b>Campylobacter</b>	<b>Helicobacter</b>
<b>Disease Assoc.</b>	<b>Most common cause of</b> <hr/> <ul style="list-style-type: none"> <li>• Febrile systemic disease</li> <li>• Periodontal disease</li> <li>• Gastroenteritis</li> </ul> <b>Postinfection complication:</b> <ul style="list-style-type: none"> <li>• Reactive arthritis</li> <li>• <b>Guillain-Barre Syndrome</b></li> </ul>	<b><i>H. pylori</i></b> <ul style="list-style-type: none"> <li>• Can cause peptic ulcer disease &amp; gastric carcinoma, gastritis</li> <li>• <b>Major cause of Type B gastritis</b></li> </ul>
<b>Laboratory Diagnosis</b>	Blood, feces, rectal swabs are acceptable	Tissue biopsies Placed in Stuart's Refrigerated for 24 hrs.
<b>Direct Detection</b>	_____, <b>S-shaped</b> ; <b>DARTING MOTILITY</b> (Hanging drop)	Warthin-Starry or Silver stain and Giemsa stain on biopsy specimen.
<b>Media and Cultivation</b>	<ul style="list-style-type: none"> <li>• Skirrows</li> <li>• Medium V</li> <li>• Butzler Medium</li> <li>• Campy-CVA</li> <li>• Charcoal Cefoperazone Deoxycholate Agar (CCDA)</li> </ul>	<ul style="list-style-type: none"> <li>• Brucella agar w/ 5% SB</li> <li>• Selective Media</li> <li>• Skirrow's Media</li> <li>• Modified Thayer Martin Agar</li> </ul>

	<b><i>C. jejuni</i> subsp. <i>jejuni</i></b>	<b><i>C. coli</i></b>	<b><i>C. fetus</i></b>	<b><i>H. pylori</i></b>
<b>Hippurate hydrolysis</b>	+	-	-	-
<b>Growth in 25°C</b>	-	-	-/+	-
<b>Growth @ 42°C</b>	+	+	-	+
<b>Catalase</b>	+	+	+	+
<b>Urease</b>	-	-	-	+
<b>Nitrate to nitrite</b>	+	+	+	+/-
<b>H<sub>2</sub>S in TSI</b>	-	-	-	-
<b>Nalidixic acid</b>	S	S	R	R
<b>Cephalotin</b>	R	R	S	S

## LEGIONELLA

- Gram (-) fastidious bacilli
- Mesophilic (20-45°C)
- Obligate aerobe, motile

<b><i>Legionella pneumophila</i></b>	
<b>Disease Association</b>	<ul style="list-style-type: none"> <li>• Legionnaires Disease</li> <li>• Pontiac Fever</li> <li>• Wound abscesses, encephalitis, or endocarditis</li> </ul>
<b>Direct Directions</b>	<b>0.1% Fuchsin</b> substituted for safranin in the gram stain <ul style="list-style-type: none"> <li>• Tissue sections use silver or Giemsa stains</li> </ul>
<b>Media and Cultivation</b>	Two agar plates (at least one BCYE)



## BRUCELLA

- Poorly stained by conventional gram stain
- Resembles **fine grain of sand**
- Requires erythritol
- Urease (+), catalase (+)

Brucella	
<b>Disease association</b>	Brucellosis-zoonosis, systemic infection
<b>Lab Diagnosis</b>	Blood (routine), Bone marrow (preferred), CSF, pleural, synovial, urine, abscesses, other tissues.
<b>Media and cultivation</b>	<ul style="list-style-type: none"> <li>• Brucella agar or infusion base-spx other than blood</li> <li>• 5% heated horse or rabbit serum enhances growth on all media</li> <li>• 5-10% CO<sub>2</sub> in a humidified atmosphere (BHI, TSB)</li> <li>• <b>Incubated 3 weeks</b> before considered negative</li> </ul>

Species	CO <sub>2</sub> required for growth	Time to positive in urease	H <sub>2</sub> S produced	INHIBITION BY DYE	
				Thionine	Fuchsin
<b>B. abortus</b>	±	2 hrs (rare 24hrs)	+	+	-
<b>B. melitensis</b>	-	2 hrs (rare 24hrs)	+	-	-
<b>B. suis</b>	-	15 mins.	±	-	+
<b>B. canis</b>	-	15 mins.	-	-	+

## BORDETELLA

- **PERTUSSIS/ WHOOPING COUGH**
  - Usually disease of children
  - Has 3 symptomatic stages
    - **Catarrhal** - mild cold; runny nose
    - **Paroxysmal** – vomiting and with “whooping”
    - **Convalescent**

Lab Diagnosis	
Culture	<ul style="list-style-type: none"> <li>• Most sensitive early in the illness</li> <li>• Traditional diagnostic standard for pertussis</li> <li>• May become undetectable by culture 2 weeks after start of paroxysms</li> </ul>
	<p>Nasopharyngeal aspirates or nasopharyngeal swab;</p> <p>Calcium alginate or Dacron  <b>COTTON SWABS – INHIBITORY</b>  <b>THROAT, SPUTUM – UNACCEPTABLE</b>  <b>ANTERIOR NOSE – SITES ARE NOT LINED WITH CILIATED EPITHELIUM</b></p>
Cultivation	Regan – Lowe – with <b>charcoal supplemented w/ horse blood</b>
	Bordet-Gengou – potato fusion base
	Cephalexin
Colony Appearance	small and shiny; resembles _____; becomes whitish gray w/ age.

Characteristics	<i>B. pertussis</i>	<i>B. parapertussis</i>	<i>B. bronchiseptica</i>
<b>Catalase</b>	+	+	+
<b>Oxidase</b>	+	-	+
<b>Motility</b>	-	-	+
<b>Nitrate</b>	-	-	+
<b>Urease</b>	-	+ (24 hrs.)	+ (4 hrs.)
<b>Growth Regan-Lowe agar</b>	3-6 days	2-3 days	1-2 days
<b>Blood agar</b>	-	+	+
<b>McConkey Agar</b>	+	+/-	+

**VIRULENCE FACTORS OF *Bordetella pertussis***

- **Pertussis toxin** – exotoxin; interferes signal transduction
- **Adenylate Cyclase toxin** – inhibits immune effector cells; induces supraphysiologic conc. of cAMP
- **Tracheal toxin** – causes ciliostasis; inhibits DNA synthesis; promotes cell death
- **Filamentous hemagglutinin**

**FRANCISELLA**

- Gram (-) coccobacilli
- Strict aerobes
- Urease (+), motility (-), oxidase (-)
- MAJOR VIRULENCE FACTOR – CAPSULE

	<i>Francisella</i> spp.
<b>Disease association</b>	<b>Tularemia</b> – one of the most common lab acquired infection -Rabbit fever -Deer fly fever -Market men's disease
<b>Lab diagnosis</b>	BSL Level 2 Pathogen

	Specimen: - scrapings from infected ulcers - lymph node biopsies - sputum <b>Whole blood</b> – acceptable specimen for all types of tularemia
<b>Direct Directions</b>	Gram stain – little use with primary specimen. <b>Basic fuchsin</b> - used as counterstain for better staining.
<b>Media and Cultivation</b>	Media with <b>sulphydryl compounds</b> (cysteine, _____, thiosulfate, or IsoVitalX) – for primary isolation

**STREPTOBACILLUS AND SPIRILLUM**

	<i>Streptobacillus moniliformis</i>	<i>Spirillum minus</i>
<b>General characteristics</b>	<ul style="list-style-type: none"> <li>• Requires blood, serum or ascite fluid in the medium and incubation under CO<sub>2</sub></li> <li>• Facultative, <b>nonmotile anaerobe</b></li> <li>• <b>Highly pleomorphic</b></li> </ul>	Gram (-), <b>helical</b> , strictly aerobic
<b>Disease Association</b>	Haverhill fever	Ratbite fever (SODOKU)
<b>Lab diagnosis</b>	Blood	Blood, exudate, or lymph node tissues
<b>Direct Detections</b>	Pus or exudates – stained with gram or giemsa stain	Characteristic spirochetes – using Giemsa or Wright stain / dark-field microscopy

<b>Media and cultivation</b>	Broth cultures – “ _____ ”	nonculturable
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## NEISSERIA & MORAXELLA

- Gram (-) cocci
- Positive for
  - Catalase
  - Oxidase
  - Superoxol (Neisseria)
  - Glucose fermenters exc. For Moraxella (asaccharolytic)
- Gonorrhea
  - Flow of seeds
  - “Clap” – “clapoir” (French) – brothel

	<i>N. gonorrhoeae</i>	<i>N. meningitidis</i>
<b>Disease Association</b>	<ul style="list-style-type: none"> <li>Leading cause of sexually transmitted disease</li> <li>always pathogenic; not a normal flora</li> <li>Ophthalmia neonatorum</li> </ul>	<ul style="list-style-type: none"> <li>Leading cause of fatal bacterial meningitis</li> <li>Waterhouse-friderichsen syndrome</li> <li>Endemic epidemic meningitis &amp;</li> <li>Meningococemia</li> <li>Pneumonia</li> <li>Purulent arthritis</li> <li>Endophthalmitis</li> </ul>
<b>Lab diagnosis</b>	<ul style="list-style-type: none"> <li>Specimen: <b>rectal, pus, throat swab, gastric washing, joint fluid</b></li> <li>Very sensitive to drying and extreme temp.</li> <li>Swabs are acceptable</li> <li>_____ – inhibits <i>N. gonorrhoeae</i></li> </ul>	

	<ul style="list-style-type: none"> <li>Dacron/Rayon – recommended</li> <li>JEMBEC plates</li> </ul> <p><b>ENDOCERVIX</b> – most common site of infection in women</p> <p><b>URETHRA</b> – for men</p>
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Media	
<b>Thayer-Martin Agar</b>	V+C+N
<b>Modified thayer-martin agar</b>	V+C+N+ Trimethoprim lactate
<b>Martin-Lewis Agar</b>	V + C + Anisomycin + T
<b>New York City Agar</b>	V + C + Amphotericin B + T
<b>GC – LECT</b>	Lincomycin + V + C + Amphotericin B + T

	Glucose	Maltose	Lactose	Sucrose	DNase, Nitrate, Butyrate Disk	Others
<i>N. meningitidis</i>	+	+	-	-	-	
<i>N. gonorrhoeae</i>	+	-	-	-	-	
<i>N. sicca</i>	+	+	-	+	-	Wrinkled colony / breadcrumb
<i>N. lactamica</i>	+	+	+	-	-	ONPG +
<i>M. catarrhalis</i>	-	-	-	-	+	

	Beta-galactosidase	Gamma-glutamyl aminopeptidase	Prolyl-hydroxylprolyl aminopeptidase
<i>N. meningitidis</i>	-	+	-
<i>N. gonorrhoeae</i>	-	-	+
<i>M. catarrhalis</i>	-	-	-

### Neisseria gonorrhoeae VIRULENCE FACTORS

- **LOS** – endotoxin; major in-vivo virulence factor; protective device
- **Pili** (fimbriae) – inhibits phagocytosis
- **IgA protease** – cleaves IgA
- **Cell Membrane Proteins** – protective device for organism
  - **Protein I** (por) – channels nutrients to pass into waste products to exit cells.
  - **Protein II** (opa) – adherence to phagocyte and epithelial cells
  - **Protein III** (rmp) – blocks host IgG against organism

### **Specimen collection**

- *N. gonorrhoeae*
  - **Urethra** – insert 2 cm swab in anterior
  - **Rectal culture** – 4-5 cm in and canal
- *N. meningitidis*
  - **CSF**
    - 1ml
    - 1000 x g for 10 mins
    - Cytocentrifuge (recommended)

## **ANAEROBIC ORGANISM**

- Gram positive **SPORE-FORMING BACILLI**

- *Clostridium perfringens*
- *Clostridium botulinum*
- *Clostridium tetani*
- *Clostridium difficile*
- *Clostridium septicum*
- **Gram positive Bacilli**
  - *Actinomyces* spp.
  - *Propionibacterium* spp.
  - *Bifidobacterium* spp.
- **Gram negative bacilli**
  - *Bacteroides fragilis*
  - *Porphyromonas* spp.
  - *Prevotella* spp.
  - *Fusobacterium* spp.
- **Gram negative cocci**
  - *Veillonella* spp.

	Virulence Factor	Disease Association	Others
<i>Clostridium perfringens</i>	<ul style="list-style-type: none"> <li>• Alpha &amp; Beta toxins</li> <li>-Type A (mild)</li> <li>-Type C -food poisoning (enteritis necrotans)               <ul style="list-style-type: none"> <li>• Enterotoxin</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• _____ – myonecrosis / eating sore</li> <li>• <b>Pig-bel-necrotic enteritis</b></li> </ul>	<ul style="list-style-type: none"> <li>• Encapsulate d, nonmotile</li> <li>• _____</li> <li>• _____</li> <li><b>DOUBLE ZONE HEMOLYSIS</b></li> <li>• <b>reverse CAMP +</b></li> <li>• stormy milk formation</li> <li>• _____</li> </ul>
<i>C. botulinum</i>	<b>Botulinum toxin</b>	<ul style="list-style-type: none"> <li>• flaccid paralysis</li> <li>• wound botulism</li> </ul>	<ul style="list-style-type: none"> <li>• Toxin used to treat <b>strabismus</b></li> </ul>

	<ul style="list-style-type: none"> <li>most potent toxin</li> <li>neurotoxin</li> </ul>	<ul style="list-style-type: none"> <li>infant botulism (floppy baby syndrome)</li> <li>SIDS</li> <li>Crib death</li> </ul>	<ul style="list-style-type: none"> <li>Tennis racket spores</li> <li>Terminal spore</li> </ul>
<b>C. tetani</b>	<b>Tetanospasmin</b> <ul style="list-style-type: none"> <li>Neurotoxin that causes spastic paralysis with continuous muscle spasm</li> </ul>	<ul style="list-style-type: none"> <li>Tetanus</li> <li>Tetanus neonatorum</li> </ul>	<ul style="list-style-type: none"> <li>Drumstick, lollipop</li> <li>Narrow zone of hemolysis</li> <li>_____</li> </ul> <p>vs. <i>C. ramosum</i> – terminal spore but <b>glucose fermenter</b></p>
<b>C. difficile</b>	<b>Toxin A</b> <ul style="list-style-type: none"> <li>Toxic to cells of intestinal mucosa</li> </ul> <b>Toxin B</b> (cytotoxin) <ul style="list-style-type: none"> <li>Necrosis of colonic mucosa</li> </ul>	<ul style="list-style-type: none"> <li>Antibiotic-associated diarrhea</li> <li>Pseudomembranous colitis</li> <li>Associated with <b>CLINDAMYCIN</b></li> </ul>	<ul style="list-style-type: none"> <li><b>Horse-stable, barnyard odor</b></li> <li><b>Yellow “ground-glass” in CCFA</b></li> </ul>
<b>C. septicum</b>		Associated with <b>colorectal cancer</b>	<ul style="list-style-type: none"> <li>Subterminal spore</li> <li>Beta-hemolytic</li> </ul>

			<ul style="list-style-type: none"> <li>Medusa head in Anaerobic BAP</li> </ul>
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	Swarming	Motility	Glucose	Lactose	Lecithinase	Lipase	Spore Formation
<i>C. perfringens</i>	-	-	+	+	+	-	ST
<i>C. botulinum</i>	-	+	+	-	-	+	ST
<i>C. tetani</i>	+	+	-	-	-	-	T
<i>C. difficile</i>	-	+	+	-	-	-	ST
<i>C. septicum</i>	+	+	+	-	-	-	ST

## MYCOBACTERIA

- Slender, rod-shaped (0.2- 0.6 um x 1- 10um in size)
- Nonmotile; non-spore formers
- Strictly aerobic
- Increased CO<sub>2</sub> – enhances growth

### RAPID GROWERS

- Grows in simple media
- Grows 2-3 days
- 20-40°C

### DISEASE-ASSOCIATED MYCOBACTERIA

- Requires **2-6 weeks**
- Requires complex media
- Has specific optimal temp.

### MTB COMPLEX

- M. microti** – TB in immunocompetent and compromised
- \_\_\_\_\_ – TB in tropical africa
- M. tuberculosis**

- \_\_\_\_\_ – TB in cattle and other ruminants
- ***M. canettii***

\_\_\_\_\_ – size of droplet that can transmit MTB

**Decreased antigen; Increased Hypersensitivity rxn.** – granuloma formation

**Increased antigen and hypersensitivity rxn** – tissue necrosis

#### **MOST COMMON SITES OF SPREAD OF MTB (in-order)**

- Spleen
- Liver
- Lungs
- Bone marrow
- Kidney
- Adrenal glands
- Eyes

#### **MOST COMMON EXTRAPULMONARY SITES IN HIV PATIENTS**

- Lymph nodes
- Genitourinary tract
- Abdominal cavity

#### **Miliary TB**

- Most cases is in \_\_\_\_\_
- Common form of TB in HIV-infected people

\_\_\_\_\_ – skeletal TB of the spine

\_\_\_\_\_ of the deformed spine in Pott's Disease

**MDR-TB** – resistant to atleast **Isoniazid & rifampin (1° treatment)**

**XDR-TB** – resistant to **1° treatment, fluoroquinolone, atleast 1 of 3 injectable 2<sup>nd</sup>-line anti-TB drugs**

## **Mycobacterial Test**

- \_\_\_\_\_ – primary diagnostic method
- **Chest X-ray** – used to complement bacteriologic testing
- **TB culture & DST (Ogawa & LJ)** – routine diagnostic test for DR – TB
- **Tuberculin Skin test / Mantoux Test / PPD Test** – basic screening tool for TB infection
- **Xpert MTB / RIF & Line Probe Assay** -rapid test that detects MTB and rifampicin resistance

<b>DSSM Results &amp; Interpretation</b>	
<b>IUATLD / WHO Scale</b>	<b>Conventional Light Microscope</b>
<b>0</b>	No AFB seen in 300 OIO fields
<b>+n</b>	1 – 9 AFB / 100 OIF
<b>1+</b>	10 – 99 AFB / 100 OIF
<b>2+</b>	1 – 10 AFB/ OIF in 50 fields
<b>3+</b>	>10 AFB / OIF in atleast 20 fields

<b>Xpert MTB / RIF Results &amp; Interpretation</b>	
<b>T</b>	MTB detected; rifampicin resistance not detected
<b>RR</b>	MTB detected; rifampicin resistance detected
<b>TI</b>	MTB detected; rifampicin resistance intermediate
<b>N</b>	MTB not detected
<b>I</b>	Invalid/ no result/ error

# **PARASITOLOGY**

# NEMATODES

## Characteristics

- Cylindrical, elongated, & bilaterally symmetrical
- Anterior end equipped with hook, teeth, plates and papillae
- Alimentary tract is simple, extending from mouth to anus. NO CIRCULATORY SYSTEM

UNHOLY THREE
Hookworm
<i>Ascaris lumbricoides</i>
<i>Trichuris trichiura</i>
HEART-LUNG MIGRATION
<i>Ascaris lumbricoides</i>
<i>Strongyloides stercoralis</i>
Hookworm
SMALL INTESTINE
<i>Capillaria philippinensis</i>
Hookworm
<i>Ascaris lumbricoides</i>
<i>Trichuris trichiura</i>
<i>Strongyloides stercoralis</i>
LARGE INTESTINE
<i>Enterobius vermicularis</i>
<i>Trichuris trichiura</i>

## *Ascaris lumbricoides*

- Largest intestinal worm

- Anterior end has **3 lips** and **triangular buccal cavity** with sensory papillae
  - INFECTIVE STAGE – **EMBRYONATED EGGS**
  - MODE OF TRANSMISSION – **INGESTION**
  - DIAGNOSIS – **(+) EGG IN THE FECES**

## PATHOLOGY & MANIFESTATION

- “worm ball” / bolus formation in heavy infection
- *Ascaris* pneumonitis
- Eosinophilia
- Abdominal pain
- Loeffler’s syndrome

## VECTORS

- *Periplaneta Americana*
- *Blattella germanica*

## TREATMENT

- Benzimidazole
- Pyrantel pamoate

## *Trichuris trichiura*

- Whipworm; holomyrian
- Anterior resembles “\_\_\_\_\_”
- Adult worm inhabits the cecum and colon
  - INFECTIVE STAGE – **EMBRYONATED EGG (lemon/football shaped)**  
“\_\_\_\_\_”
  - MODE OF TRANSMISSION – **INGESTION**

## PATHOLOGY & CLINICAL MANIFESTATION

- Petechial hemorrhage – may predispose amebic dysentery ulcers and invasion of *E. histolytica*

- Cause anemia
- Rectal prolapse
- Adult worm produces pore-forming protein caplled TT47

**TREATMENT**

- Mebendazole
- Albendazole

**HOOKWORMS: Necator americanus & Ancylostoma duodenale**

- INFECTIVE STAGE – **FILARIFORM LARVAE**
- MODE OF TRANSMISSION – \_\_\_\_\_
  - Egg – **resembles** \_\_\_\_\_

**PATHOLOGY AND CLINICAL PRESENTATION**

- Mazza mora, ground itch, dew itch, water sore
- Wakana Disease
- Iron Deficiency Anemia
- Hypoalbuminemia

	<i>A. Duodenale</i>	<i>N. americanus</i>
<b>Position of the head</b>	Anterior head continuous in the same curve as the body	Anterior and strongly reflexed dorsally
<b>Buccal cavity</b>	2 pairs of teeth	1 pair semilunar cutting plates
<b>Copulatory bursa</b>	Large tripartite	Small, tripartite
<b>Copulatory spicules</b>	2 hair-like spicules	Spicules fuse at tip into a barb
<b>Vulva</b>	Posterior half of the body	Anterior half of the body
<b>Cervical Curvature</b>	C-shaped	S-shaped

<b>Remarks</b>	“ _____ ” <ul style="list-style-type: none"> <li>• Percutaneous &amp; fecal oral route with <b>transmammary transmission</b></li> </ul>	“ _____ ” <ul style="list-style-type: none"> <li>• Purely percutaneous</li> <li>• Predominant in Philippines</li> </ul>
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**Animal Hookworms**

- *A. braziliense* & *A. caninum* – causes “creeping eruption” or cutaneous larva migrans (CLM)
- *A. ceylanicum* – first case was recorded in Ilocus Norte in 1968

**Diagnosis**

- Harada-Mori culture method
- PCR based
- ELISA

**TREATMENT**

- Albendazole
- Iron supplement & adequate diet

**Strongyloides stercoralis**

- Threadworm
- Free-living
- Capable of parthenogenesis
  - INFECTIVE STAGE – **FILARIFORM LARVAE**
  - MODE OF TRANSMISSION – **SKIN / MUCOSAL PENETRATION**

**PATHOLOGY & CLINICAL MANIFESTATION**

- Cochín-china diarrhea / Vietnamese diarrhea
- Autoinfection → hyperinfection



### DIAGNOSIS

- Baermann funnel gauze method
- Harada-Mori Culture
- Beale's String test
- Duodenal aspiration

### TREATMENT

- Ivermectin

### **Enterobius vermicularis**

- Pinworm; seatworm; society/social worm
- Adult worm: anterior end with lateral wings or **cephalic alae**
- Egg: flattened on one side: **D-shaped; Italian bread egg**;  
embryonated after **6 hrs.**
  - INFECTIVE STAGE – **EMBRYONATED EGG**
  - MODE OF TRANSMISSION – **INGESTION/INHALATION**

### PATHOLOGY & CLINICAL MANIFESTATION

- Pruritus ani
- Oxyuriasis
- Insomnia
- Extraintestinal enterobiasis
- External autoinfection

### DIAGNOSIS

- Graham's scotch adhesive tape swab (perianal cellulose tape swab)

### TREATMENT

- Mebendazole
- Albendazole
- Pyrantel Pamoate

### **Capillaria philippinensis**

- Pudoc worm
- Mystery worm

- Capable of \_\_\_\_\_ and \_\_\_\_\_

### CHARACTERISTICS

- NATURAL HOST – \_\_\_\_\_
- PEANUT – SHAPED w/ striated shells and flattened bipolar plugs
  - INFECTIVE STAGE – **INFECTIVE LARVAE**
  - MODE OF TRANSMISSION – **INGESTION OF INFECTED FISH WITH LARVAE**
  - INTERMEDIATE HOST – **FRESHWATER FISH / BRACKISH WATER FISH: BAGSIT**

### PATHOLOGY & CLINICAL MANIFESTATION

- Malabsorption syndrome
- Borborygmus and abdominal pain

### DIAGNOSIS

- Direct smear/ wet mount / stool concentration technique
- ELISA (coproantigens)
- Duodenal Aspiration

## **Blood & Tissue Nematodes**

### SUBCUTANEOUS

- **Loa loa**
- **Mansonella streptocerca**
- **Onchocerca volvulus**

### SEROUS CAVITY

- **Mansonella spp.**

### LYMPHATIC

- **Wuchereria bancrofti**
- **Brugia malayi**
- **Brugia timori**

	<b>W. bancrofti</b>	<b>B. malayi</b>
<b>Mean length (um)</b>	290	222

<b>Cephalic space: breadth</b>	1:1	2:1
<b>Sheath in giemsa</b>	Unstained	Pink
<b>Nuclei</b>	Regularly spaced; separate	Irregularly spaced; overlapping
<b>Tail</b>	Single row of nuclei; does not reach tail end	Single row of nuclei reaches the tail
<b>Terminal nuclei</b>	NONE	2 nuclei; bulge at cuticle
<b>Appearance in blood film</b>	Smoothly curved	Kinky

Filarial worm	Periodicity	Diagnostic test	Intermediate host	Specimen	Microfilariae
<b>W. bancrofti</b>	Nocturnal (8 pm – 4 am)	Microfilariae	Culex, Aedes, Anopheles	Blood	Sheathed; absent nuclei at tail
<b>B. malayi</b>	Nocturnal	Microfilariae	Anopheles, Mansonia	Blood	Sheathed, 2 separate nuclei at tail
<b>Loa loa</b>		Microfilariae	Chrysops fly, tabanid or mango fly	Blood	Sheathed, nuclei continuous up to the tip of the tail.
<b>O. volvulus</b>	None	Adult worm in excised tissue	Simulium (black fly)		NO SHEATH

### **Parastrongylus cantonensis**

- Rat lungworm
- \_\_\_\_\_ – spiral arrangement of uterine tubules

- DEFINITIVE HOST – **RATS**
- INTERMEDIATE HOSTS IN MOLLUSC – **1<sup>ST</sup> LARVA STAGE**
  - INTERMEDIATE HOST – **SLUGS & SNAILS**
  - MODE OF TRANSMISSION – Ingestion or penetration
- INTERMEDIATE HOST IN HUMANS – **3RD STAGE LARVA**
- MODE OF TRANSMISSION (HUMANS)
  - Ingestion of raw mollusk
  - Ingestion of contaminated food
  - Ingestion of paratenic host
  - Drinking contaminated water

### **DIAGNOSIS**

- DOT-BLOT ELISA
- Immuno-PCR detection

### **TREATMENT**

- Surgical removal
- Prednisone

### **Trichinella spiralis**

- INFECTIVE STAGE: **ENCYSTED LARVA IN STRIATED MUSCLE**
- MODE OF TRANSMISSION: **INGESTION OF UNDERCOOKED OR RAW MEAT**

### **PATHOLOGY & CLINICAL MANIFESTATION**

- **Stages**
  - **ENTERIC** – invasion of intestine and incubation
  - **INVASION** – larval migration and intestinal invasion
  - **CONVALESCENT** – encystment and encapsulation

### **DIAGNOSIS**

- Muscle Biopsy
- ELISA
- Latex Agglutination
- Bachmann Intradermal Test

### **TREATMENT**

- Mebendazole

- Albendazole

### PREVENTION AND CONTROL

- Cook meat at minimum of 77°C
- FREEZING
  - -15°C for 20 days
  - – 30°C for 6 days

### **Anisakis**

- Parasite of marine animals
  - INFECTIVE STAGE – **3<sup>RD</sup> STAGE LARVA**
  - MODE OF TRANSMISSION – **INGESTION OF UNDERCOOKED OR RAW SQUID OR FISH**

### DIAGNOSIS

- Gastroscopic / endoscopic exam
- ELISA
- RAST

### TREATMENT

- Mechanically remove larva using endoscopic forceps

### CONTROL & PREVENTION

- Freezing

### **Dracunculus medinensis**

- Longest nematode of man
- “guinea worm”, “\_\_\_\_\_”
  - INFECTIVE STAGE – **INFECTIVE LARVAE**
  - MODE OF TRANSMISSION – **INGESTION OF CONTAMINATED CRUSTACEANS**
  - INTERMEDIATE HOST – **AQUATIC CRUSTACEANS (COPEPODS / CYCLOPS)**

### **Toxocara canis & Toxocara cati**

- Clinical forms of Toxocariasis
  - **Visceral Larva Migrans (VLM)** -
  - **Ocular Larva Migrans**

- **Covert Toxocariasis**

### DIAGNOSIS

- Tissue biopsy
- IgG ELISA
- Western blot
- PCR

### TREATMENT

- Albendazole
- Mebendazole w/ anti-inflammatory drugs

## CESTODES

- Tapeworm; flat and ribbon-like
- Hermaphrodite; lack digestive organs

### Body

- Scolex (head)
- Neck (region of growth)
- Proglottids (strobila)

### **Taenia spp.**

	<b><i>Taenia solium</i></b>	<b><i>Taenia saginata</i></b>
<b>Common name</b>	Pork Tapeworm	Beef tapeworm
<b>Intermediate host</b>	Pig; man	Cattle
<b>Scolex</b>	w/ rostellum armed with 2 rows of large & small hooklets	No rostellar hooks 4 prominent acetabula
<b>Length</b>		<25 meters
<b>No. of proglottids</b>	8000-10,000	1000-4000
<b>Gravid proglottids</b>	Finger-like (dendritic) 7-13 lateral branches (less active)	Tree-like (dichotomous)  Genitals: irregularly alternate

	w/ accessory ovarian lobe; w/o vaginal sphincter	
Infective stage	Infected meat: "measly pork"	
Eggs	Indistinguishable: spherical, striated inside with oncosphere and 6 hooklets	

**CLINICAL MANIFESTATION (*T. solium*)**

- Intestinal infection
- Cysticercosis
- Neurocysticercosis
  - Parenchymal
  - Extraparenchymal

**DIAGNOSIS**

- CAT
- CSF-ELISA
- Electroimmuno transfer blot
- Western blot
- DOT ELISA

**TREATMENT**

- Praziquantel
- Niclosamide

***Taenia asiatica***

- \_\_\_\_\_
- Misidentified as *T. saginata*
- INFECTIVE STAGE – **CYSTICERCUS VISCEROTROPICA**

***Hyemenolepis***

	<i>H. nana</i>	<i>H. diminuta</i>
Common Name	"dwarf tapeworm"	"rat tapeworm"

Length	25-45 mm	60 cm
Scolex	4 cup-shaped suckers with rostellum & Y-shaped hooklets	Rudimentary unarmed rostellum
Egg	Spherical/subspherical with thin outer layer and thick inner layer  w/ <b>bipolar thinking &amp; 4 hairlike polar filament</b>	w/ bipolar thickening; absent bipolar filaments  Hooklets: fan-like arrangement
Infective stage	Direct: eggs Indirect: Cysticercoid larvae	Cysticercoid larvae
Remarks	ONLY human tapeworm which can complete its entire cycle in 1 host	Requires intermediate host

***Diphyllobothrium latum***

- Fish tapeworm; broad tapeworm
- INFECTIVE STAGE – \_\_\_\_\_
- \_\_\_\_\_
- Scolex – **2 bothria**
- Proglottids – 4000
- Egg – with inspicuous operculum

**CLINICAL MANIFESTATION & PATHOGENESIS**

- \_\_\_\_\_
- w/ thrombocytopenia and leukopenia

**DIAGNOSIS**

- Finding eggs and proglottids in stool

**TREATMENT**

- Praziquantel

### **Echinococcus spp.**

- Scolex – pyriform w/ 4 acetabula; armed
- Proglottids: 3 (immature, short neck, & 1 gravid proglottid)
- INFECTIVE STAGE – egg
- LARVAL STAGE – \_\_\_\_\_ w/ protolices inside

### **CLINICAL MANIFESTATION AND PATHOGENESIS**

- Human cystic echinococcus

### **DIAGNOSIS**

- Radiographic findings / ultrasonography
- Positive serologic tests
  - Indirect hemagglutination
  - Indirect fluorescent antibody (IFA)
  - Enzyme immunoassay
- **GOLD STANDARD** – IgE detection hydatid cyst fluid derived native or recombinant antigen B through ELISA or immunoblot

### **TREATMENT**

- Surgical resection
- Albendazole; mebendazole
- Percutaneous aspiration, injection, re-aspiration

### **Diphylidium caninum**

- Dog tapeworm; double-pored dog tapeworm
- Mature and gravid proglottid “pumpkin seed” shaped
- Infective stage – cysticercoid larvae

## **TREMATODES**

- Known as flukes
- Requires **2 intermediate hosts** exc. Schistosomes

- 1<sup>st</sup> – snail
- 2<sup>nd</sup> :

<b>FISH</b>	H. heterophyes, C. sinensis O. felineus
	P. westermani
<b>PLANT</b>	F. hepatica F. gigantica F. buski
<b>SNAIL</b>	E. ilocanum

### **BLOOD FLUKES**

- *S. japonicum* – \_\_\_\_\_; **oriental blood fluke**;  
\_\_\_\_\_ **swimmer's itch**; **snail fever**
- *S. mansoni* – \_\_\_\_\_; smallest blood fluke
- *S. haematobium* – \_\_\_\_\_; **bladder fluke**; **bilharziasis**; **urinary schistosomiasis**
- *S. mekongi*
- *S. intercalatum*

### **GENERAL DIAGNOSIS**

- Presence of ova
- Liver or rectal biopsies
- **Faust and Meleney's Egg hatching technique**
- **Circumoval Precipitin Test (COP) of Oliver & Gonzales**

### **LUNG FLUKES**

### **Paragonimus westermani**

- Oriental lung fluke
- Disease: **LUNG FLUKE DISEASE**; **ENDEMIC HEMOPTYSIS**
- Egg resembles **coffee bean**

- Specimen: **stool or sputum**

**INTESTINAL FLUKES**

**Fasciolopsis buski**

- Giant intestinal fluke
- Largest fluke parasitizing human
- \_\_\_\_\_; resembles eggs of Fasciola

**Echinostoma ilocanum**

- Garrison's fluke
- Intermediate hosts are SNAILS

**Heterophyes heterophyes**

- Von Siebod's fluke
- Smallest fluke but deadliest fluke of man
- With \_\_\_\_\_ genital suckers

**LIVER FLUKES**

**Fasciola hepatica**

- Sheep liver fluke

**Fasciola gigantica**

- Giant Liver Fluke
- Infects cattle in Philippines

**Clonorchis sinensis**

- \_\_\_\_\_
- Most important liver fluke

- Egg resembles \_\_\_\_\_

**PROTOZOANS**

Protozoa	Transmission	Morphology	Clinical Findings	Diagnosis
<b><i>E. histolytica</i></b>	Fecal-oral	<ul style="list-style-type: none"><li>• Oocyst</li><li>• Troph: bullseye shaped nucleus; RBC in cytoplasm</li></ul>	Asymptomatic carrier  Bloody diarrhea  Liver abscess	Fecal smear  Serology  CT Scan
<b><i>G. lamblia</i></b>	Fecal-oral	<ul style="list-style-type: none"><li>• Oocyst</li><li>• Flagellated trophozoite</li></ul>	<b>Foul-smelling, greasy diarrhea</b>	Fecal smear  Immunoassay
<b><i>Isospora</i> spp.</b>	Fecal-oral	Oocyst	Severe diarrhea and malabsorption in AIDS patient	Fecal exam Biopsy Eosinophilia
<b><i>C. cayetanensis</i></b>	Oocyst from stool	Oocyst	Watery diarrhea  Nausea and vomiting	Oocyst fluoresce under UV light
<b><i>Cryptosporidium</i></b>	Fecal-oral	Oocyst	Watery diarrhea	Fecal exam Biopsy in small intestine

			Abdominal pain & vomiting	
<b><i>T. vaginalis</i></b>	Sexually-transmitted	Trophozoite ONLY	Vaginal itching  Burning on urination  Yellow-green, frothy vaginal discharge	Urinalysis Vaginal discharge examination
<b><i>N. fowleri</i></b>	Lives in freshwater lake	Amoeba	Acute meningitis	CSF examination
<b><i>Acanthamoeba</i> spp.</b>	Lives in freshwater lake  Eye infection from dirty contact lenses	Amoeba and cyst stage in brain	Chronic granulomatous brain abscess  Corneal infection	CSF; brain tissue; corneal scraping exam
<b><i>T. gondii</i></b>	Ingestion of oocyst in raw pork  Inhalation of oocyst	Oocyst (infectious)  Trophozoite	Congenital  Dissemination infection	Serology CT Scan

	Congenital			
<b><i>Leishmania</i> spp.</b>	<b>Sandfly bite</b> Blood transfusion Zoonotic	<ul style="list-style-type: none"> <li>Promastigote</li> <li>Amastigote</li> </ul>	Cutaneous leishmaniasis  _____	Blood smear  Biopsy of skin, spleen or liver
African Trypanosomes: <ul style="list-style-type: none"> <li><b><i>T. rhodesiense</i></b></li> <li><b><i>T. gambiense</i></b></li> </ul>	<b>Tsetse fly</b> Blood transfusion	<ul style="list-style-type: none"> <li>Motile trypomastigote</li> <li>Epimastigote</li> </ul>	African sleeping sickness	Trypomastigote in blood, spinal fluid and lymph fluid  Serology
<b><i>T. cruzi</i></b>	<b>Kissing Bug</b> Blood transfusion	<ul style="list-style-type: none"> <li>Trypomastigote</li> <li>Amastigote</li> <li>Epimastigote</li> </ul>		Trypomastigote in blood  _____