

Patient: **SAMPLE  
PATIENT**

DOB:

Sex:

MRN:

## 2304 Comprehensive Parasitology Profile - Stool

### Gastrointestinal Microbiome

Human microflora is influenced by environmental factors and the competitive ecosystem of the organisms in the GI tract. Pathogenic significance should be based upon clinical symptoms.

Microbiology Legend			
<b>NG</b> No Growth	<b>NP</b> Non-Pathogen	<b>PP</b> Potential Pathogen	<b>P</b> Pathogen

#### Additional Bacteria

**Non-Pathogen:** Organisms that fall under this category are those that constitute normal, commensal flora, or have not been recognized as etiological agents of disease.

**Potential Pathogen:** Organisms that fall under this category are considered potential or opportunistic pathogens when present in heavy growth.

**Pathogen:** The organisms that fall under this category have a well-recognized mechanism of pathogenicity in clinical literature and are considered significant regardless of the quantity that appears in the culture.

#### Bacteriology (Culture)

*Lactobacillus spp.*

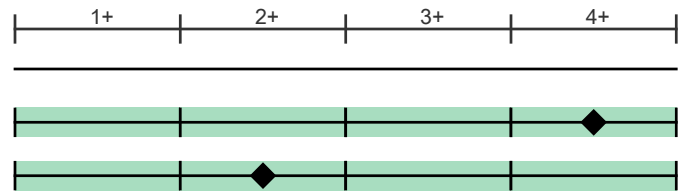
NG

*Escherichia coli*

4+ NP

*Bifidobacterium*

2+ NP



#### Additional Bacteria

*Kluyvera ascorbata*

4+ NP

*Klebsiella pneumoniae*

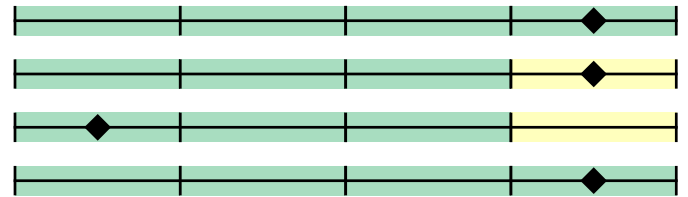
4+ PP

*Bacillus species*

1+ NP

*Enterococcus faecium*

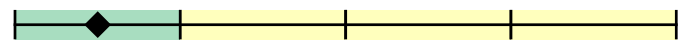
4+ NP



#### Mycology (Culture)

*Candida albicans*

1+ NP





## Parasitology

### Microscopic O&P Results

Microscopic O&P is capable of detecting all described gastrointestinal parasites. The organisms listed in the box represent those commonly found in microscopic stool analysis. Should an organism be detected that is not included in the list below, it will be reported in the Additional Results section. For an extensive reference of all potentially detectable organisms, please visit [www.gdx.net/product/gi-effects-comprehensive-stool-test](http://www.gdx.net/product/gi-effects-comprehensive-stool-test)

Genus/species	Result
<b>Nematodes - roundworms</b>	
<i>Ancylostoma/Necator</i> (Hookworm)	Not Detected
<i>Ascaris lumbricoides</i>	Not Detected
<i>Capillaria philippinensis</i>	Not Detected
<i>Enterobius vermicularis</i>	Not Detected
<i>Strongyloides stercoralis</i>	Not Detected
<i>Trichuris trichiura</i>	Not Detected
<b>Cestodes - tapeworms</b>	
<i>Diphyllobothrium latum</i>	Not Detected
<i>Dipylidium caninum</i>	Not Detected
<i>Hymenolepis diminuta</i>	Not Detected
<i>Hymenolepis nana</i>	Not Detected
<i>Taenia</i> spp.	Not Detected
<b>Trematodes - flukes</b>	
<i>Clonorchis/Opisthorchis</i> spp.	Not Detected
<i>Fasciola</i> spp./ <i>Fasciolopsis buski</i>	Not Detected
<i>Heterophyes/Metagonimus</i>	Not Detected
<i>Paragonimus</i> spp.	Not Detected
<i>Schistosoma</i> spp.	Not Detected
<b>Protozoa</b>	
<i>Balantidium coli</i>	Not Detected
<i>Blastocystis</i> spp.	Not Detected
<i>Chilomastix mesnili</i>	Not Detected
<i>Cryptosporidium</i> spp.	Not Detected
<i>Cyclospora cayetanensis</i>	Not Detected
<i>Dientamoeba fragilis</i>	Not Detected
<i>Entamoeba coli</i>	Not Detected
<i>Entamoeba histolytica/dispar</i>	Not Detected
<i>Entamoeba hartmanii</i>	Not Detected
<i>Entamoeba polecki</i>	Not Detected
<i>Endolimax nana</i>	Not Detected
<i>Giardia</i>	Not Detected
<i>Iodamoeba buetschlii</i>	Not Detected
<i>Cystoisospora</i> spp.	Not Detected
<i>Trichomonads</i> (e.g. <i>Pentatrichomonas</i> )	Not Detected
<b>Additional Findings</b>	
White Blood Cells	Not Detected
Charcot-Leyden Crystals	Not Detected
<b>Other Infectious Findings</b>	

One negative specimen does not rule out the possibility of a parasitic infection.



## Parasitology EIA Tests

Methodology: EIA

	Result	Expected Result
Cryptosporidium ♦	Negative	Negative
Giardia lamblia ♦	Negative	Negative
Entamoeba histolytica ♦	Negative	Negative

## Commentary

Methodology: MALDI-TOF MS, Automated and Manual Biochemical Methods, Vitek 2® System Microbial identification and Antibiotic susceptibility, ELISA and EIA.

### Lab Comments

*SENSI'S: All yeast, add'l bacteria*

The performance characteristics of all assays have been verified by Genova Diagnostics, Inc. Unless otherwise noted with ♦, the assay has not been cleared by the U.S. Food and Drug Administration.

Commentary is provided to the practitioner for educational purposes, and should not be interpreted as diagnostic or as treatment recommendations. Diagnosis and treatment decisions are the practitioner's responsibility.

Human microflora is influenced by environmental factors and the competitive ecosystem of the organisms in the GI tract. Pathological significance should be based upon clinical symptoms and reproducibility of bacterial recovery.

Sufficient amounts of E. coli appear to be present in the stool. However, Lactobacilli and Bifidobacteria were found in lower than optimal levels. These bacteria are known to exert positive local and systemic effects in the microbiome. Lower levels of these beneficial bacteria have been associated with disease.

Klebsiella bacteria are considered commensal but act as opportunistic bacteria in the GI tract. They can asymptotically colonize the GI tract. However, depending on host factors, they may cause diarrhea. Ankylosing spondylitis and Crohn's disease have been shown to be triggered by Klebsiella due to cross-reactivity in HLA-B27 genetically susceptible patients.

Most parasites can be detected in a single stool specimen. However, when there is a high clinical suspicion for parasites, a three-day stool sample is recommended. Due to intermittent shedding patterns of certain parasites, increased sensitivity results from the collection of additional specimens on separate days.



## Bacteria Sensitivity

### Prescriptive Agents

<i>Klebsiella pneumoniae</i>	R	I	S-DD	S	NI
Ampicillin	R				
Amox./Clavulanic Acid				S	
Cephalothin				S	
Ciprofloxacin				S	
Tetracycline				S	
Trimethoprim/Sulfa				S	

### Natural Agents

<i>Klebsiella pneumoniae</i>	LOW INHIBITION	HIGH INHIBITION
Berberine		
Oregano		
Plant Tannins		
Uva-Ursi		

**Prescriptive Agents:**

The R (Resistant) category implies isolate is not inhibited by obtainable levels of pharmaceutical agent.

The I (Intermediate) category includes isolates for which the minimum inhibition concentration (MIC) values usually approach obtainable pharmaceutical agent levels and for which response rates may be lower than for susceptible isolates.

The S-DD (Susceptible-Dose Dependent) category implies clinical efficacy when higher than normal dosage of a drug can be used and maximal concentration achieved.

The S (Susceptible) column implies that isolates are inhibited by the usually achievable concentrations of the pharmaceutical agent.

NI (No Interpretive guidelines established) category is used for organisms that currently do not have established guidelines for MIC interpretation.

Refer to published pharmaceutical guidelines for appropriate dosage therapy.

**Natural Agents:**

In this assay, inhibition is defined as the reduction level on organism growth as a direct result of inhibition by a substance. The level of inhibition is an indicator of how effective the substance was at limiting the growth of an organism in an in vitro environment. High inhibition indicates a greater ability by the substance to limit growth, while Low Inhibition a lesser ability to limit growth. The designated natural products should be considered investigational in nature and not be viewed as standard clinical treatment substances.



## Mycology Sensitivity

### Azole Antifungals

<i>Candida albicans</i>	R	I	S-DD	S	NI
Fluconazole				0.5	
Voriconazole				<=0.008	

### Non-absorbed Antifungals

<i>Candida albicans</i>	LOW INHIBITION	HIGH INHIBITION
Nystatin		

### Natural Agents

<i>Candida albicans</i>	LOW INHIBITION	HIGH INHIBITION
Berberine		
Caprylic Acid		
Garlic		
Undecylenic Acid		
Plant tannins		
Uva-Ursi		

**Prescriptive Agents:**

The R (Resistant) category implies isolate is not inhibited by obtainable levels of pharmaceutical agent.

The I (Intermediate) category includes isolates for which the minimum inhibition concentration (MIC) values usually approach obtainable pharmaceutical agent levels and for which response rates may be lower than for susceptible isolates.

The S-DD (Susceptible-Dose Dependent) category implies clinical efficacy when higher than normal dosage of a drug can be used and maximal concentration achieved.

The S (Susceptible) column implies that isolates are inhibited by the usually achievable concentrations of the pharmaceutical agent.

NI (No Interpretive guidelines established) category is used for organisms that currently do not have established guidelines for MIC interpretation.

Refer to published pharmaceutical guidelines for appropriate dosage therapy.

**Nystatin and Natural Agents:**

Results for Nystatin are being reported with natural antifungals in this category in accordance with laboratory guidelines for reporting sensitivities. In this assay, inhibition is defined as the reduction level on organism growth as a direct result of inhibition by a natural substance. The level of inhibition is an indicator of how effective the substance was at limiting the growth of an organism in an in vitro environment. High inhibition indicates a greater ability by the substance to limit growth, while Low Inhibition a lesser ability to limit growth. The designated natural products should be considered investigational in nature and not be viewed as standard clinical treatment substances.