



PREMIER MEDICAL LABORATORY, INC
 35-37 Progress St., Suite B6
 Edison, NJ 08820
 Ph# (908) 754-4300
 Fx# (908) 754-4301

COMPLETE

Doctor:	Premier Medical Laboratory	Patient:	TEST, ADULT M	Acc #:	781041
Address:	35-37 Progress St., ste A2	Birth:	08/05/1951	Home Phone:	(732)776-3919
CSZ:	Edison, NJ 08820	Age:	71	Collection Date:	06/22/2022 03:17 PM
Location:		Gender:	Male	Received Date:	06/22/2022 03:17 PM

Result Comment:

Test Name	In Range	Outside Range	Reference Range	Units
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UTI by rtPCR

This test was developed and its analytical performance characteristics have been determined by Premier Medical Laboratory. It has not been cleared or approved by FDA, but FDA clearance or approval are not currently required for clinical use. The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions. Methodology: semi-quantitative determination of pathogen specific nucleic acid sequences by rt-PCR after RNA/DNA isolation from clean catch urine sample.
 Reported: 06/22/2022 03:07 PM

Acinetobacter baumannii	Negative		Negative
Actinobaculum schaalii	Negative		Negative
Aerococcus urinae	Negative		Negative
Alloscardovia omnicolens	Negative		Negative
Candida albicans	Negative		Negative
Candida glabrata		Low - Positive	Negative
Citrobacter freundii	Negative		Negative
Citrobacter koseri	Negative		Negative
Coagulase Negative Staph	Negative		Negative
Corynebacterium riegelii	Negative		Negative
Enterobacter aerogenes	Negative		Negative
Enterobacter cloacae	Negative		Negative
Enterococcus faecalis	Negative		Negative
Enterococcus faecium	Negative		Negative
Escherichia coli		High - Positive	Negative
Klebsiella oxytoca	Negative		Negative
Klebsiella pneumoniae	Negative		Negative
Morganella morganii	Negative		Negative
Mycoplasma hominis	Negative		Negative
Proteus mirabilis	Negative		Negative
Proteus vulgaris	Negative		Negative
Providencia stuartii	Negative		Negative
Pseudomonas aeruginosa	Negative		Negative
Serratia marcescens	Negative		Negative
Staphylococcus aureus	Negative		Negative
Streptococcus agalactiae	Negative		Negative
Viridans Group Strep		Medium - Positive	Negative

Negative: < 7,500 DNA copies/mL
 Low - Positive: 7500 - 150,000 DNA copies/mL
 Medium - Positive: 150,000 - 1,500,000 DNA copies/mL
 High - Positive: >1,500,000 DNA copies/mL

ABR (Antibiotic Resistance) by rtPCR

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means for clinical diagnosis or patient management decisions. Methodology: qualitative determination of mutations specific to antibiotic resistances by rt-PCR after RNA/DNA isolation from clean catch urine sample. Reported: 06/22/2022 03:08 PM

ampC	Negative		Negative	
class C beta-lactamase CMY-103	Negative		Negative	
CTX-M Group 1,2,9 and 8/25	Negative		Negative	
dfrA5, dfrA1	Negative		Negative	
DHA	Negative		Negative	
FOX	Negative		Negative	
IMP-1 group, IMP-16, IMP-7	Negative		Negative	
mecA	Negative		Negative	
nfsA		Positive	Negative	
OXA-1, GES	Negative		Negative	
OXA-23, OXA-72, OXA-40, blaOXA-48		Positive	Negative	
QnrA, QnrS, QnrB	Negative		Negative	
SHV	Negative		Negative	
Sul1, Sul2	Negative		Negative	
TEM	Negative		Negative	
vanA1, vanA2, vanB		Positive	Negative	

Interpretation for nfsA

A positive result for this gene or gene variant may be associated with resistance to NITROFURANS (ex. Nitrofurantoin)
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Interpretation for OXA-23,OXA-72,OXA-40,blaOXA-48

A positive result for these genes or gene variants may be associated with resistance to CARBAPENEMS, PENAMS and CEPHALOSPORINS (ex. PCN, CEPHALEXIN, CEFEPIME, CEFTRIAXONE, IMIPENEM, AZTREONAM)
 Reported: 06/22/2022 03:21 PM

Interpretation for vanA1, vanA2, vanB

A positive result for these genes or gene variants may be associated with resistance to GLYCOPEPTIDES (ex. VANCOMYCIN)
 Reported: 06/22/2022 03:21 PM

Test Name	Result	Flag	Reference Range
Candida glabrata	Low - Positive	ABNORMAL	Negative
Escherichia coli	High - Positive	ABNORMAL	Negative
Viridans Group Strep	Medium - Positive	ABNORMAL	Negative
nfsA	Positive	ABNORMAL	Negative
OXA-23, OXA-72, OXA-40, blaOXA-48	Positive	ABNORMAL	Negative
vanA1, vanA2, vanB	Positive	ABNORMAL	Negative

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Donald L. Warkentin, PhD

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