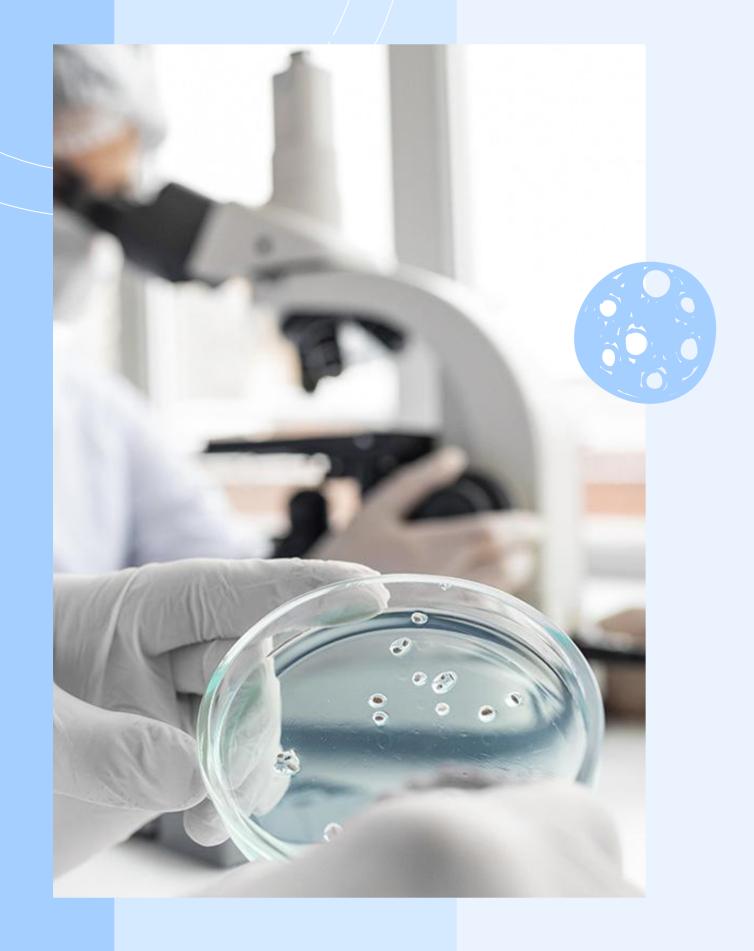


Lecture 5 - Part-2

Bacterial taxonomy, Classification, and laboratory diagnosis







Urine culture technique

Blood culture









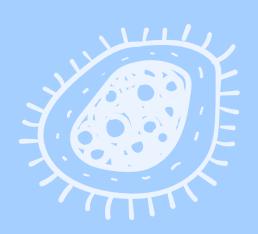


An automated

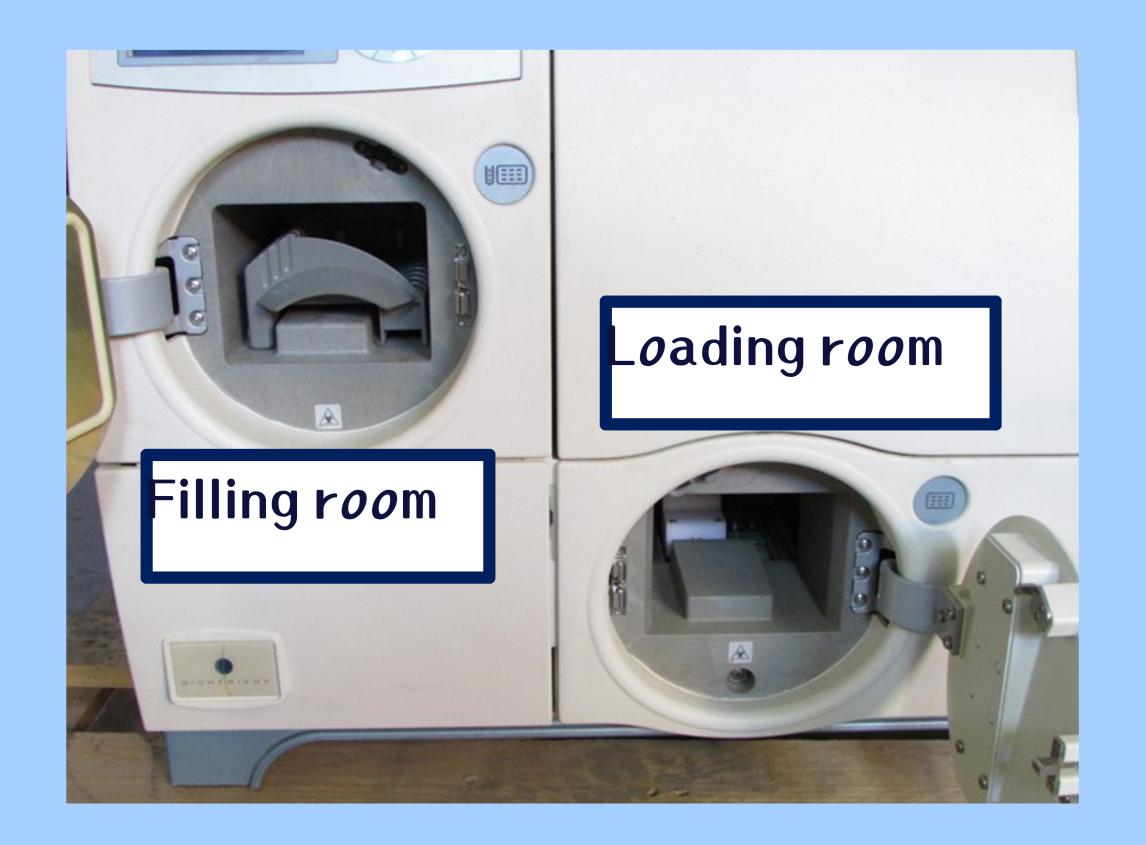
Identification

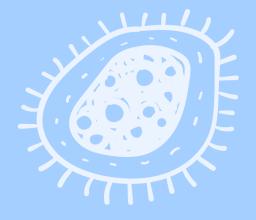
Antibiogram

Antifungals









** Two cards

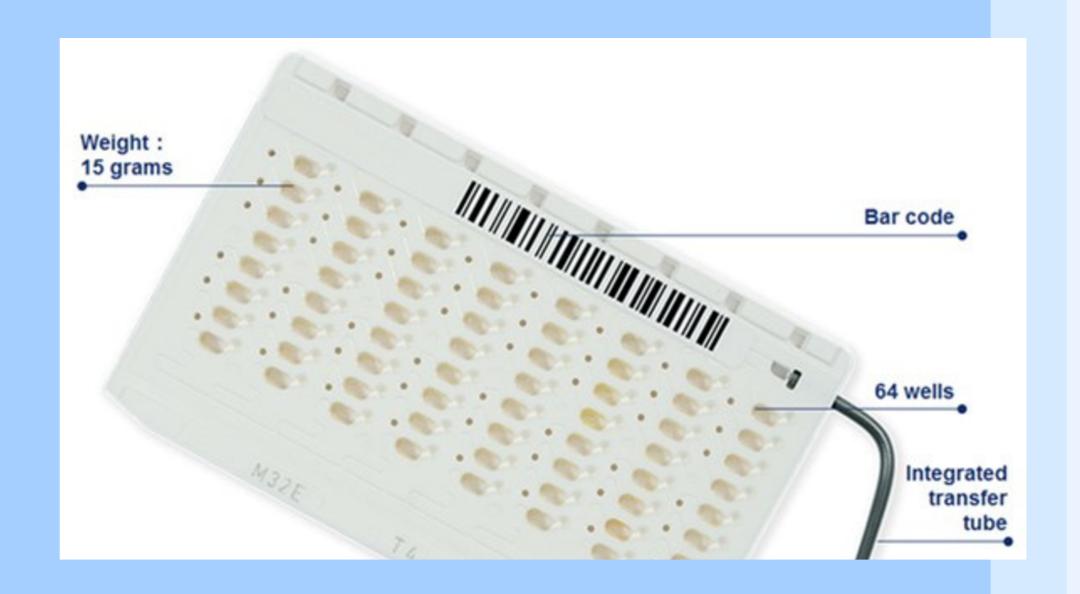
I) Identification card (ID card)

47 biochemical tests

Specific Card for GN

Specific Card for GP

Specific Card for Yeast

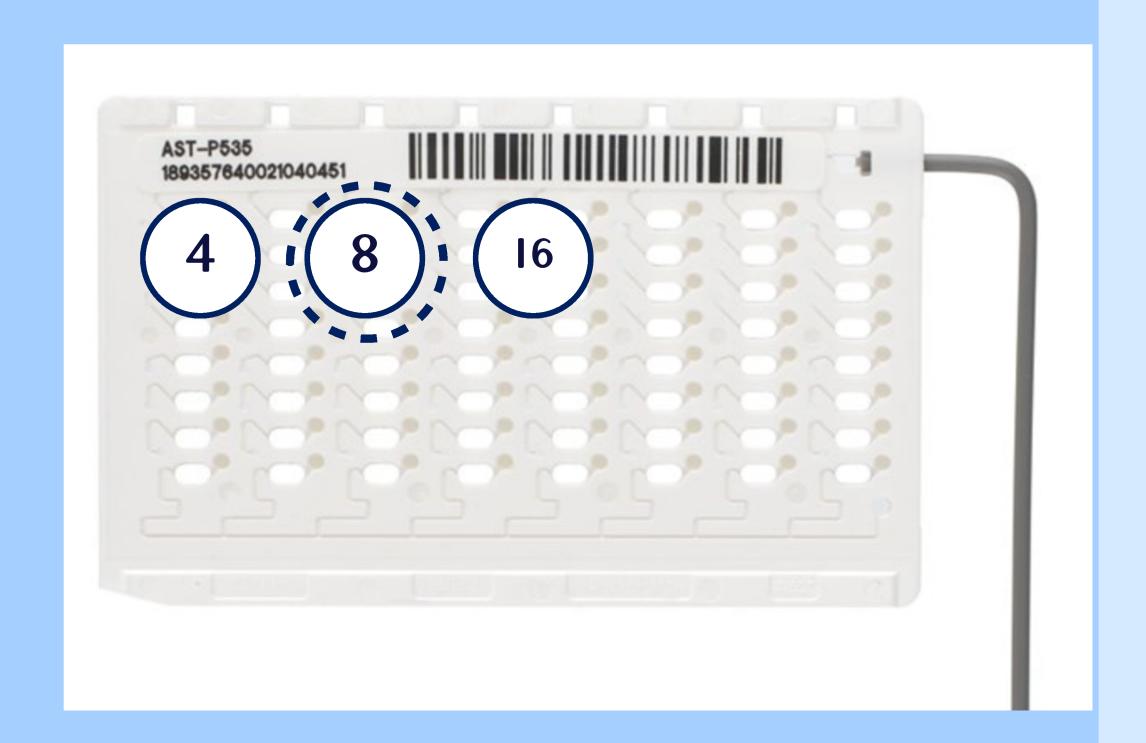


2) Antimicrobial susceptibility test card

(AST card)

22 antibiotics

MIC



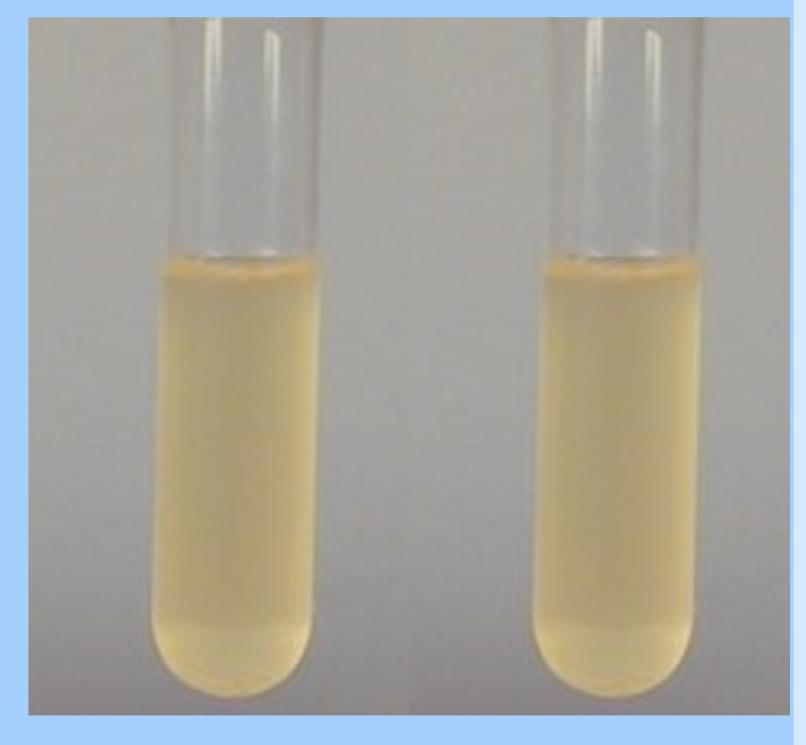


Organism isolation
(Pure)



2

Bacterial suspension
(2 tubes)



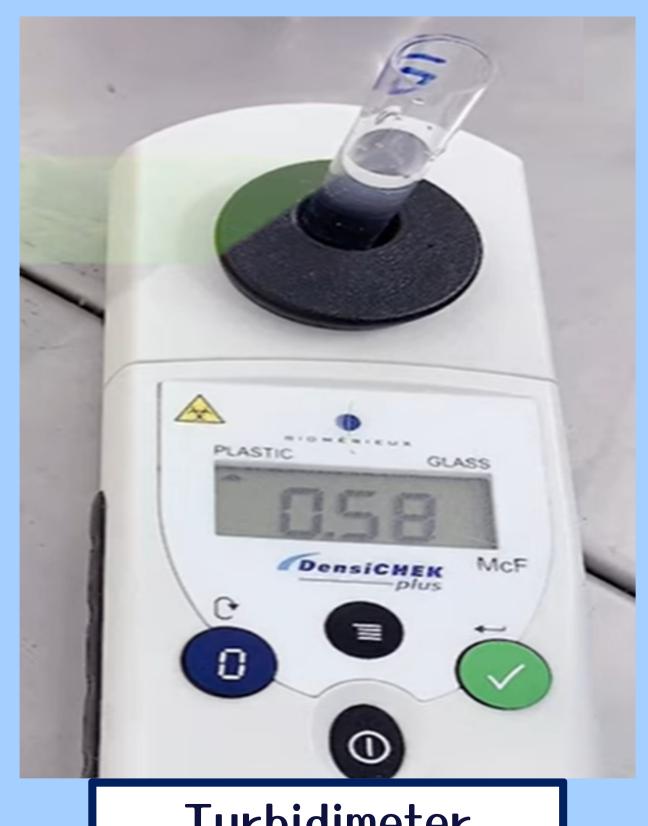
ID

AST



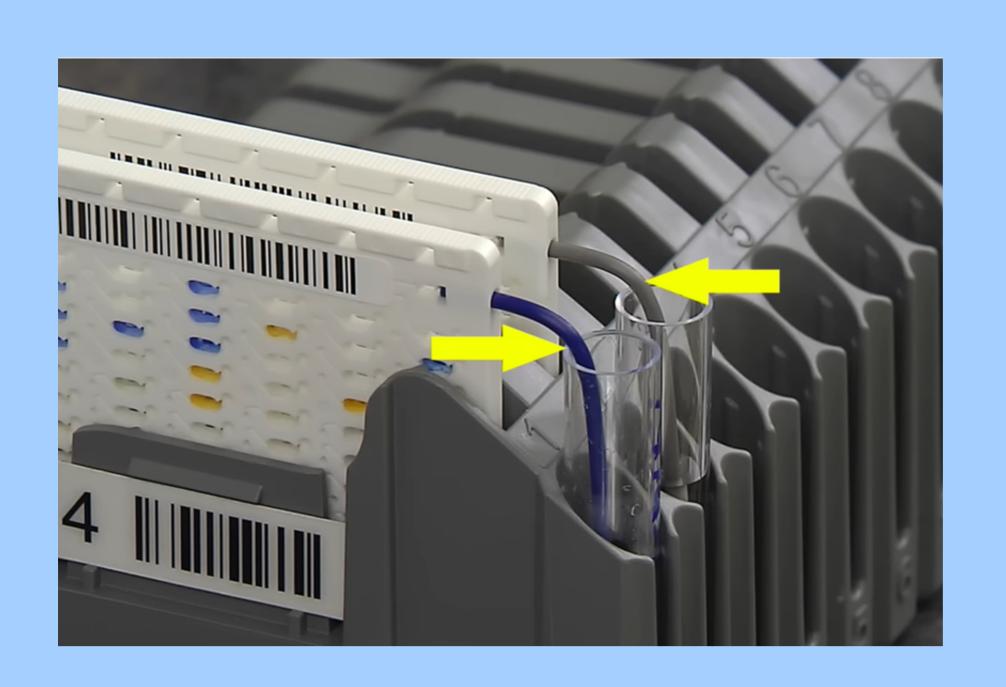
Measure turbidity

(0.5 - 0.63)



Turbidimeter

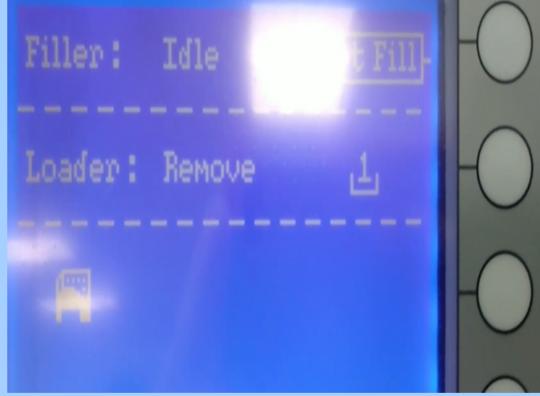
Insert cards in bacterial
Suspension tubes



Into the filling room

(Transfer the bacterial suspension into the wells





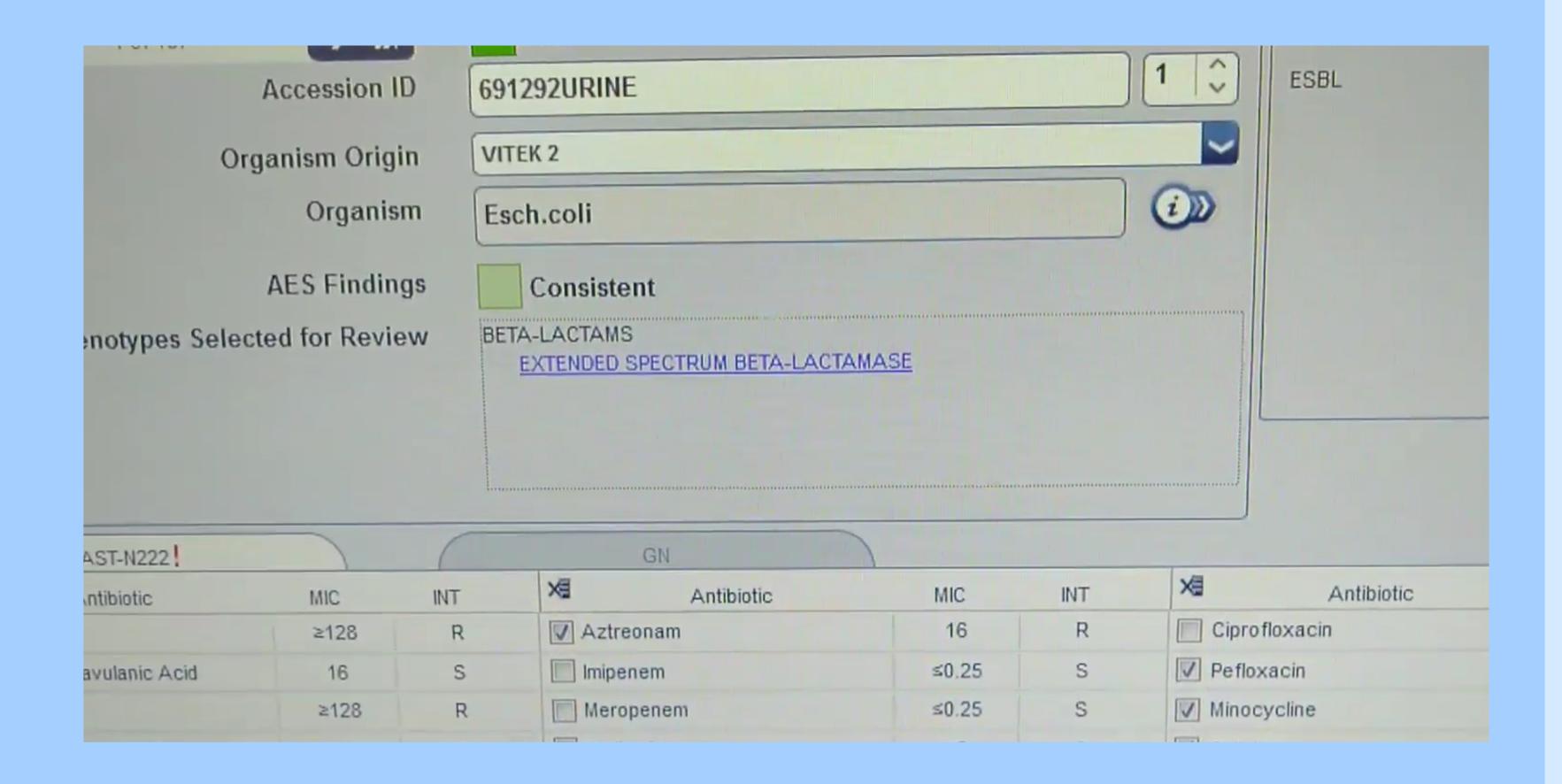
Transfer the cassette into the

loading room
(Diagnostic) 5-10hrs



7 Colorimetric (Barcode)







Urine culture technique

Specimen

Method

Interpretation



Purpose

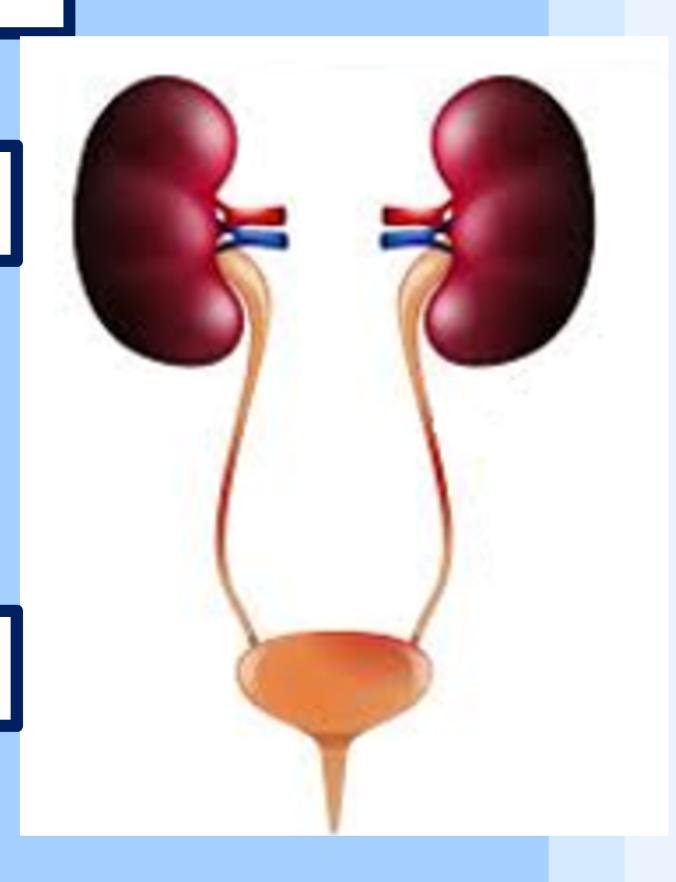
To diagnose

Urinary tract infection (UTI)

(Bacteriuria)

Pyelonephritis

Cystitis



UTI

Bacteriuria

Dysuria

Frequency



Purpose Purpose

UTI

Bacteriuria

Significant

≥ 10⁵ CFU/mI

(100,000 CFU/ml)

Colony forming unit
(CFU)

Bacterial count

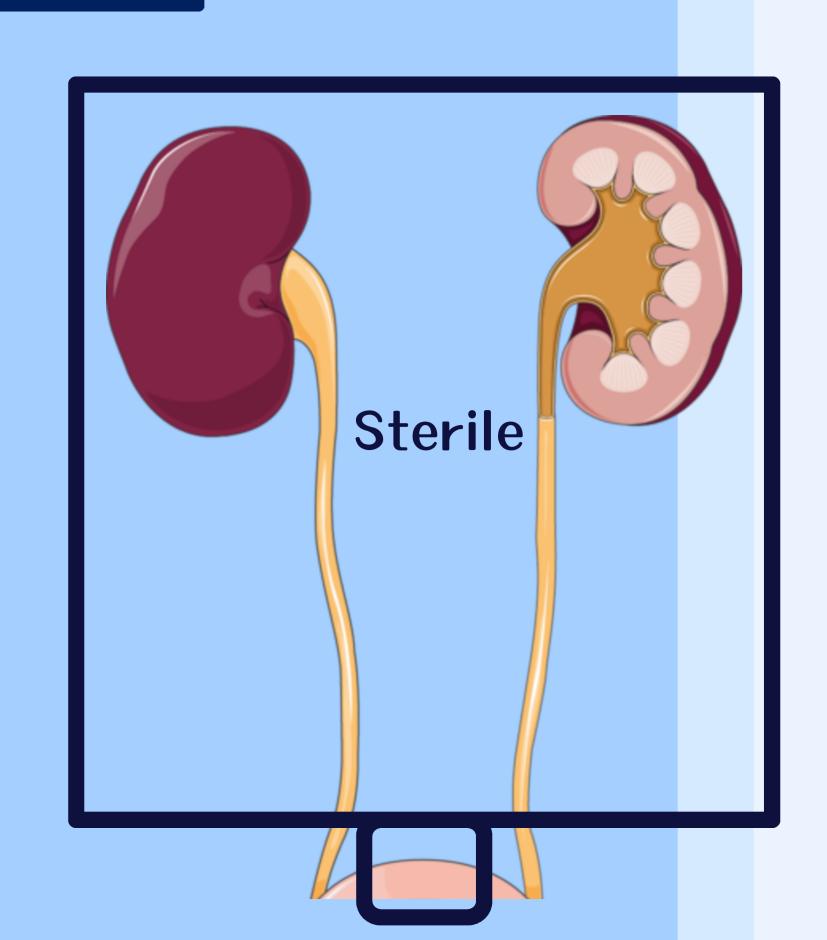
Purpose

Bacterial count

Bacteriuria

≥ 10⁵ CFU/mI

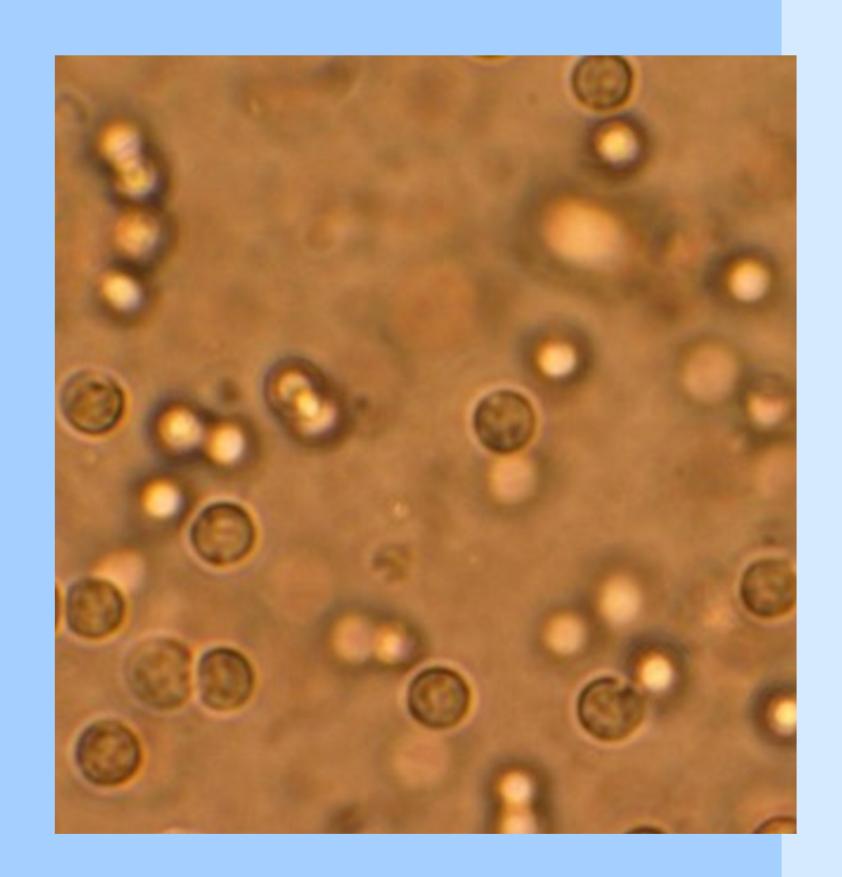
Significant



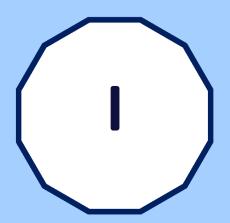
Purpose

Pyuria
(Pus in urine > 10 cells/HPF).

Significant Bacteriuria



Specimen



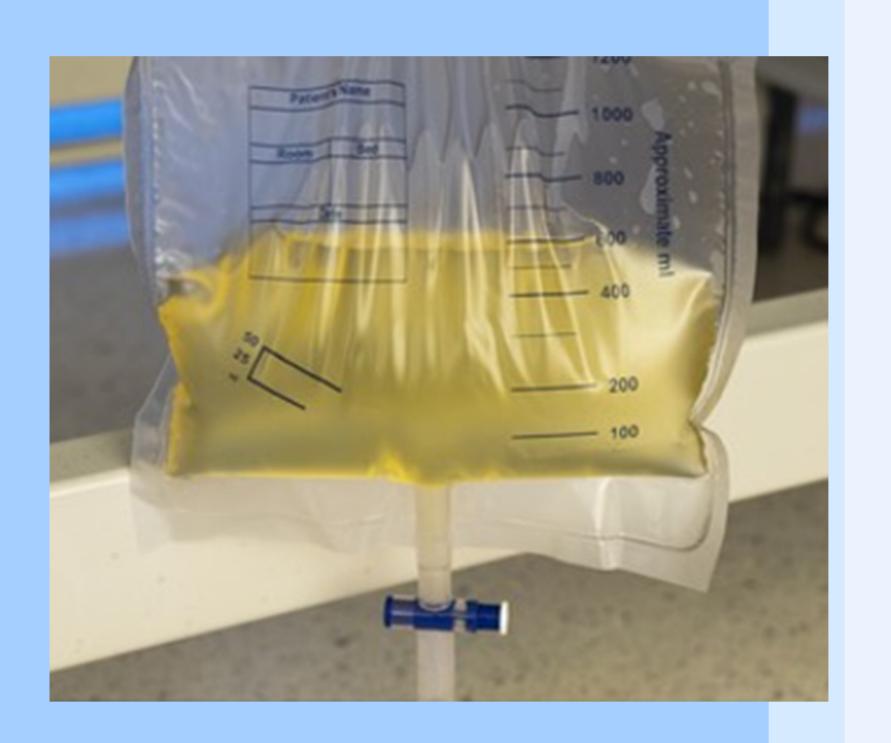
Mid stream urine



Specimen

2

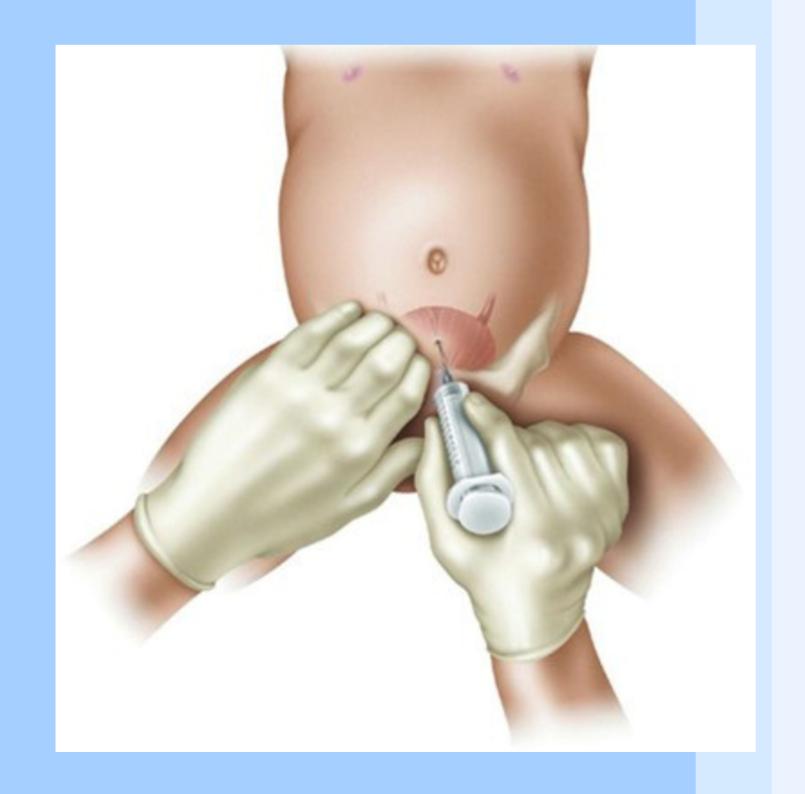
Catheterization



Specimen

3

Suprapubic aspiration



How to collect Mid stream urine

Stop antibiotics (for 3 days)



How to collect Mid stream urine

- Wash and dry your hands.
- 2 Clean genital area

Remove the lid on the container (Sterile)



How to collect Mid stream urine

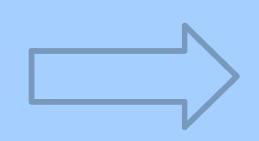
4 Pass a small amount of urine into the toilet.

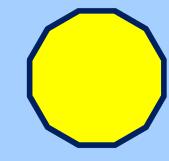
(at morning)

⁵ Mid stream urine

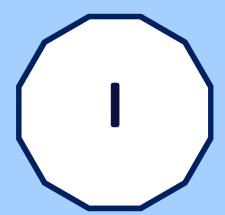
Pass the reimaging urine into the toilet.





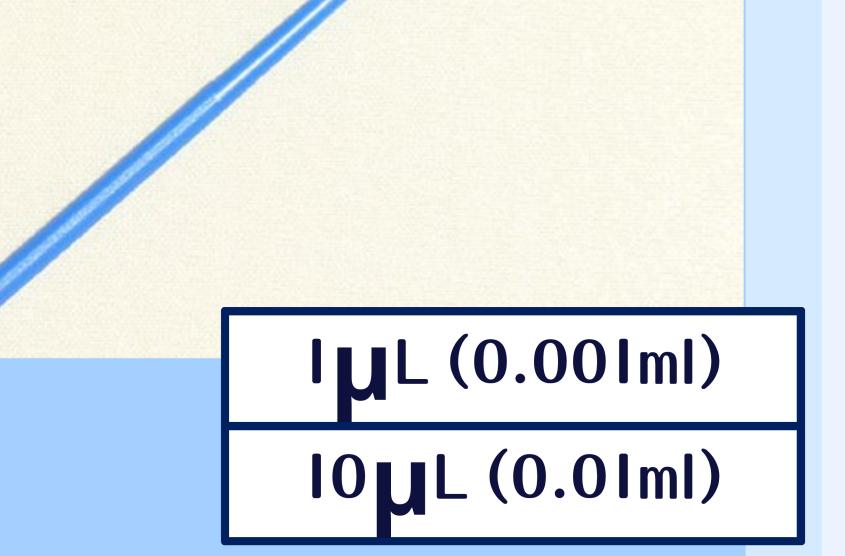


Mid stream urine



Mix urine (uncentrifuged) & by

Calibrated loop

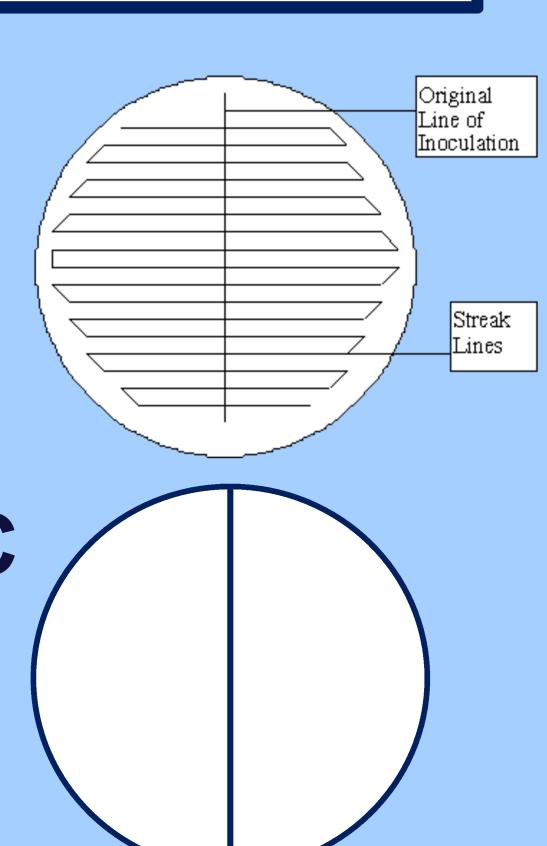


2

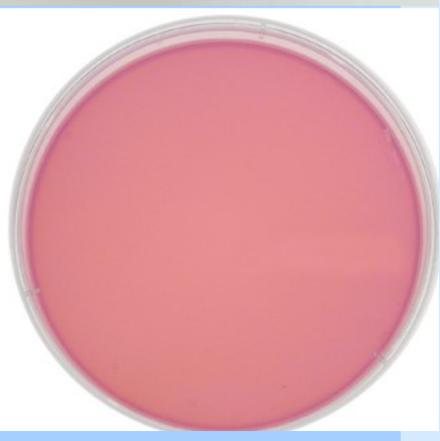
Inoculation on

By streaking & incubate at 37C

For 24hrs.

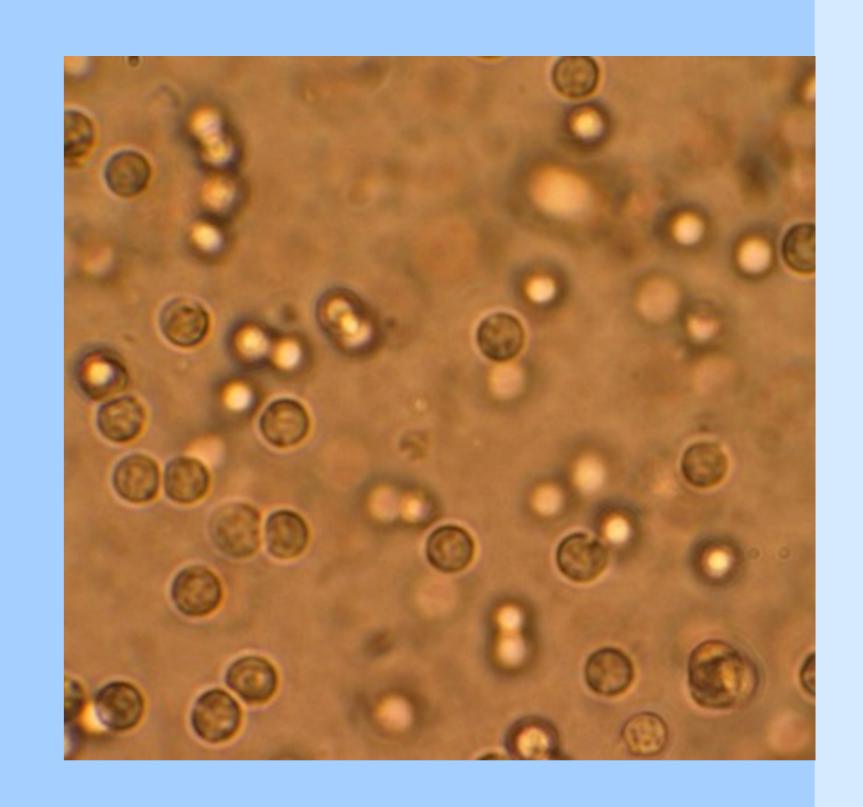






3

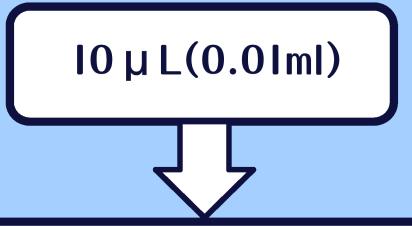
Examine
centrifuged urine
(≥ 10 cells/HPF)
Pyuria



4

Count the growth colonies

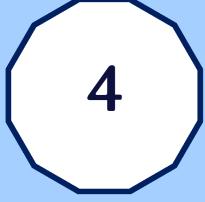




No. of colonies $X100 = 10^5$ CFU/ml

ΙμL (0.001ml)

No. of coloniesX1000=105 CFU/ml



Multiply the count by dilution factor



 $0.01ml(10 \mu L)$

No. of coloniesXIOO= IO⁵ CFU/ml

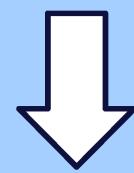
No. of colonies= 10

10X100= 1000 CFU/ml

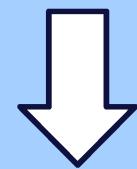
10 3

Urine culture: Interpretation

≥ 10⁵ CFU/mI



Significant bacteriuria



Identification





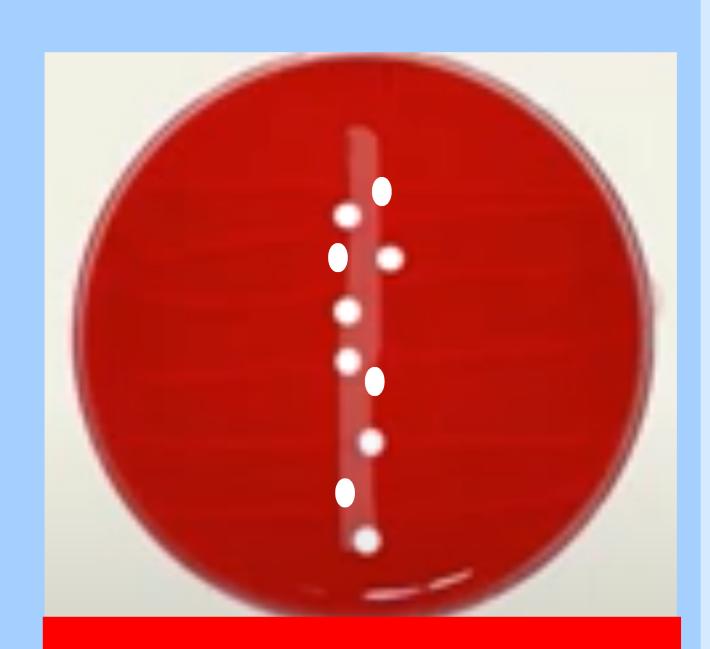
Interpretation

≥ 10⁴ CFU/ml

IOXIO00= I0000 CFU/ml

Significant bacteriuria





S. aureus

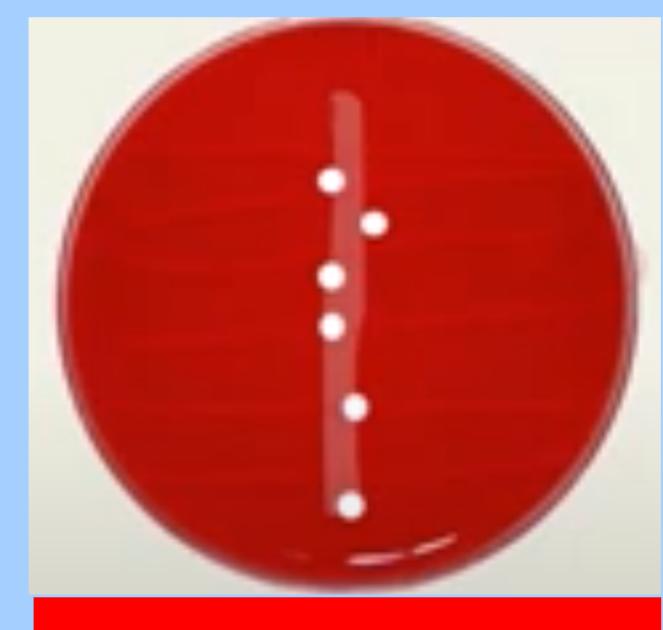
Interpretation

≥ 10³ CFU/ml

6XI000= 6000 CFU/ml

Significant bacteriuria

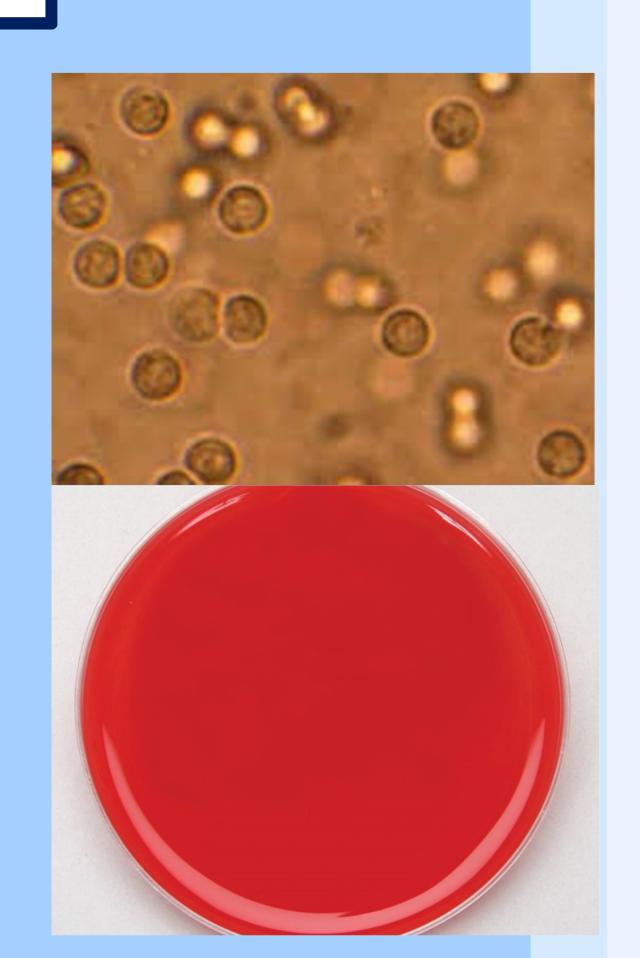
Identification



S. aureus

Sterile pyuria

Pus without any bacterial growth in ordinary media



Taking antibiotics

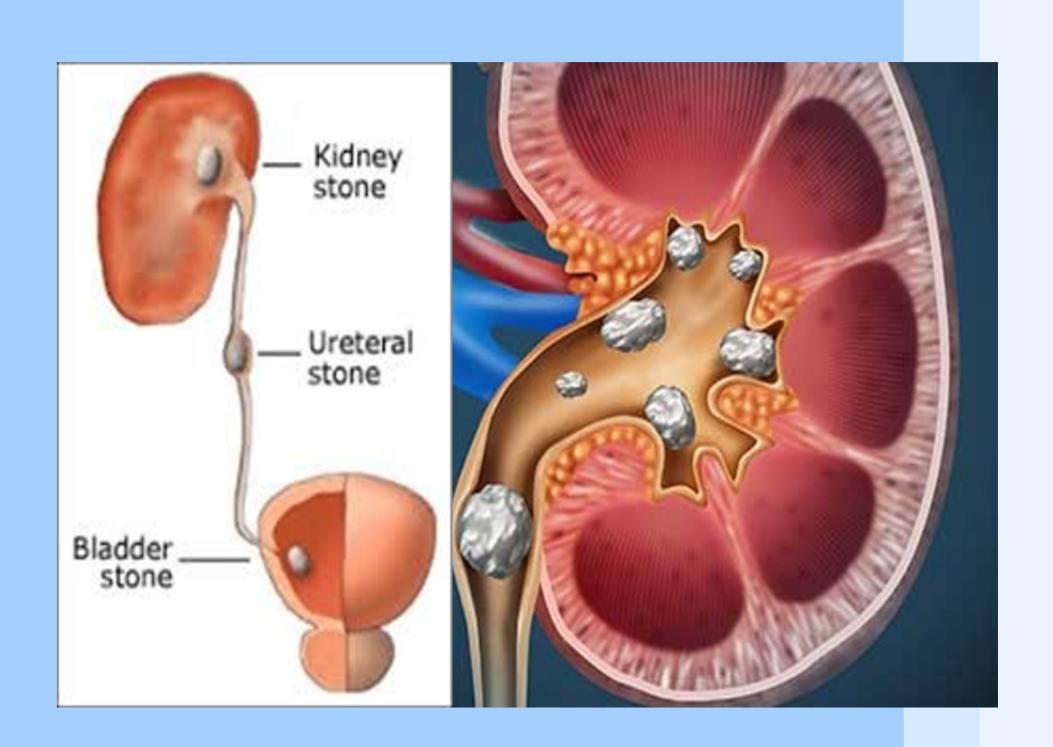


2

Renal tuberculosis



(3) Renal stones



4

Organism not grow on ordinary media

Mycoplasma

L-form bacteria

Anaerobic infection



10³ (No UTI)

Although there is pyuria

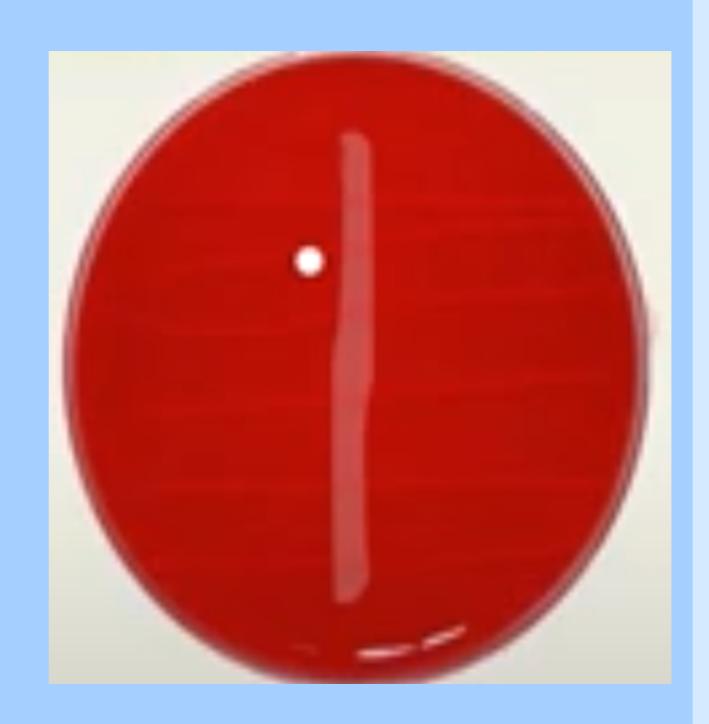
- I) Prostatitis
- 2) Vaginitis
- 3) Cervicitis
- 4) Malignancy
- 5) Renal calculi



Suprapubic aspiration

In a some state of the state of

significant bacteriuria



Suprapubic aspiration

IX1000= 1000 CFU/ml

103

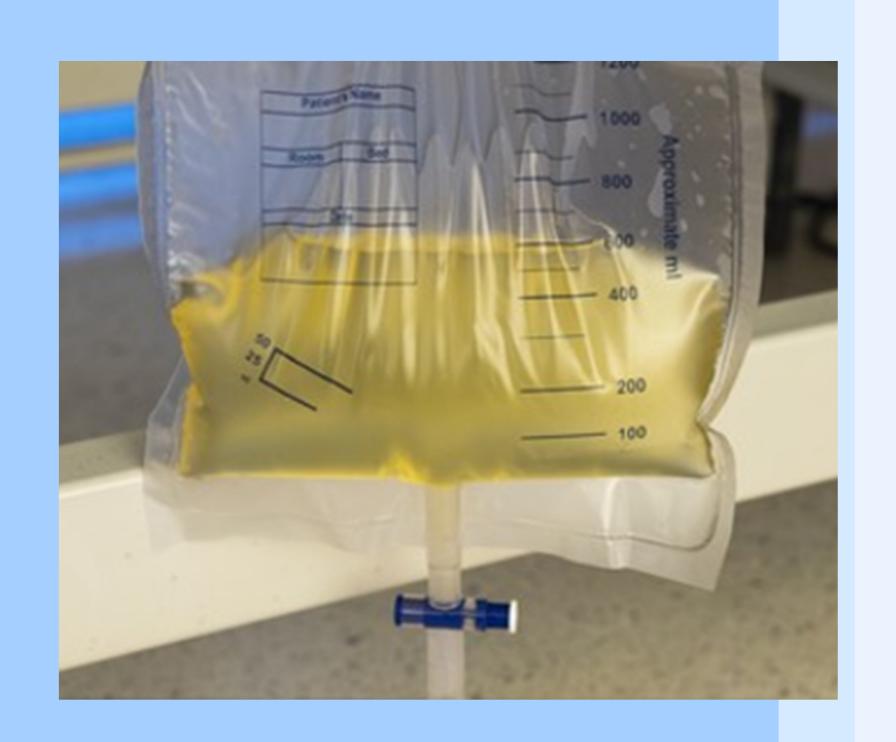
Any growth is significant bacteriuria



Catheterization

10³

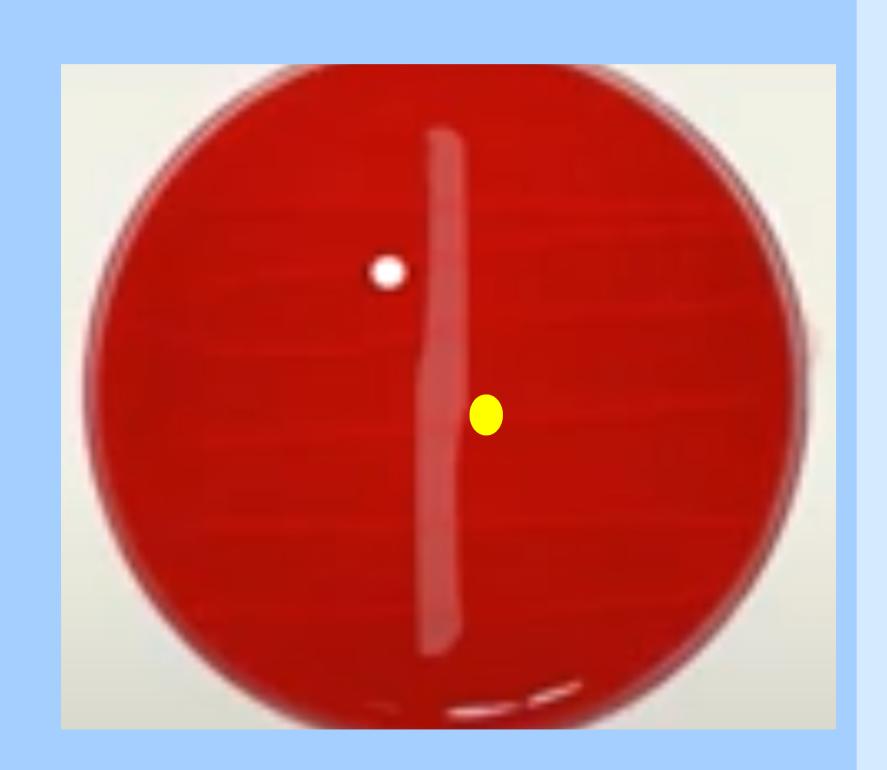
Any growth is significant bacteriuria



Catheterization

IX1000= 1000 CFU/ml 10°

Any growth is significant bacteriuria





Urine culture Interpretation

Two pathogen



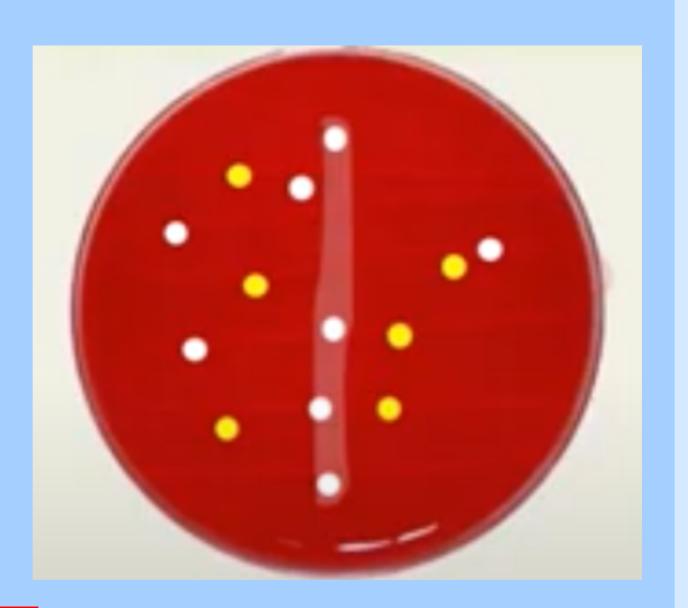


Count I ≤ I0³ CFU/mI

8X1000=8000 CFU/ml

Count 2 ≤ 10³ CFU/mI

6X1000 = 6000 CFU/ml



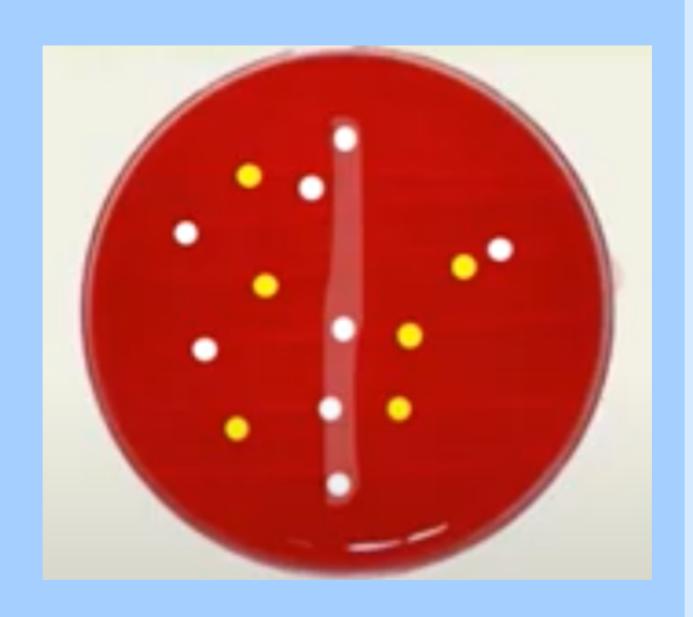
No significant growth

Count I ≥ 10⁴ CFU/mI

13X1000= 13000 CFU/ml

6X1000= 6000 CFU/ml

Continue with higher & ignore the other



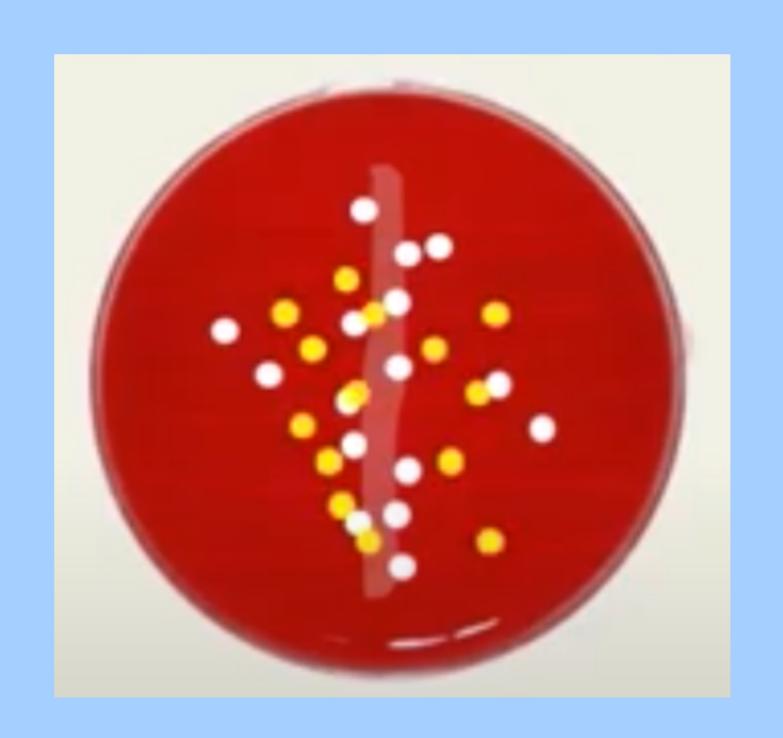
Count I ≥ 10⁴ CFU/mI



Count 2 ≥ 10⁴ CFU/ml



Identification for both



Blood culture

Purpose Specimen

Method

Purpose 1

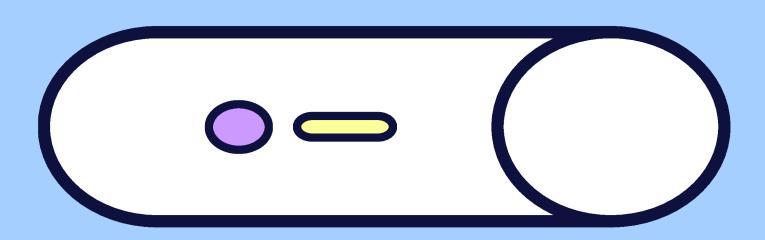
Bacteremic infections

Typhoid fever

Endocarditis

Puerperal sepsis

Brucellosis



3ml blood to 30 ml broth For child



10 ml blood to
30 ml broth for Adult
(aerobic)



10 ml blood to
40 ml broth for Adult
(anerobic)



10 ml blood & 30 ml broth

Dilutes antibacterial

Provides good nutrient (organism present in small number)



Method

Incubation
5 to 21 days



Method

Organism present

Consume nutrients

CO₂ released

CO₂ reacts with sensor

ULight appears



Method

Sub culture & incubate at 37°C for 24h.



Identification



Susceptibility test

