

National Health Laboratory Service,
 Academic Affairs Research and Quality Assurance
 Private Bag X4
 Sandringham,
 2131
 South Africa

Email: bactpts@nhls.ac.za
 Fax number: +2786 225 2460

BACTERIOLOGY PARTICIPANTS RESPONSE
Make copies for all samples received

Survey No.		Sample no	
Laboratory Code		Closing Date	
Laboratory Tel no.		Receipt Date of PT Samples	
Laboratory Contact Email		Submission Date of Response	

MICROSCOPY (GRAM-STAIN)						
Testing not performed on this specimen/isolate						
STAIN REACTION			MORPHOLOGY			
Gram-negative	<input type="checkbox"/>		Cocci	<input type="checkbox"/>	Diplococci	<input type="checkbox"/>
Gram-positive	<input type="checkbox"/>		Bacilli	<input type="checkbox"/>	Yeast	<input type="checkbox"/>
Gram-variable	<input type="checkbox"/>		Cocco-bacilli	<input type="checkbox"/>	Others	<input type="checkbox"/>
Comments:						
IDENTIFICATION						
Testing not performed on this specimen/isolate <input type="checkbox"/>						
BASIC BIOCHEMICAL ID			SPECIFIC BIOCHEMICAL ID			
	Pos/Sensitive	Neg/Resistant		1 st ID	2 nd ID	3 rd ID
Catalase	<input type="checkbox"/>	<input type="checkbox"/>	Conventional biochemical methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oxidase	<input type="checkbox"/>	<input type="checkbox"/>	API	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Optochin	<input type="checkbox"/>	<input type="checkbox"/>	MICROSCAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bacitracin	<input type="checkbox"/>	<input type="checkbox"/>	VITEK 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Novobiocin	<input type="checkbox"/>	<input type="checkbox"/>	MALDI-TOF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DNAse	<input type="checkbox"/>	<input type="checkbox"/>	Other commercial kit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indole	<input type="checkbox"/>	<input type="checkbox"/>	PCR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X Factor <input type="checkbox"/>		V Factor <input type="checkbox"/>		XV Factor <input type="checkbox"/>		
Bacterial antigen detection results			Positive		Negative	
<i>Streptococcus pneumonia</i>			<input type="checkbox"/>		<input type="checkbox"/>	
<i>Haemophilus influenzae</i> type b			<input type="checkbox"/>		<input type="checkbox"/>	
<i>Neisseria meningitidis</i>			<input type="checkbox"/>		<input type="checkbox"/>	
Other (Specify)						
Comments:						
SEROTYPING / SEROGROUPING						
Serotyping / Serogrouping not performed on this specimen/isolate						<input type="checkbox"/>
Isolate referred for serotyping / serogrouping						<input type="checkbox"/>
Serotyping / serogrouping results:						
FINAL ORGANISM IDENTIFICATION						
Please insert organism code as supplied in instruction booklet						
1 st organism ID		2 nd organism ID		3 rd organism ID		
Comments:						

Lab code _____

Sample no. _____

Antimicrobial susceptibility testing:

PLEASE INDICATE WITH IF PROCEDURE IS CARRIED OUT AND INSERT APPLICABLE

Guidelines: CLSI EUCAST

Disk Diffusion Method Kirby Bauer Other (specify) AST not routinely performed on this isolate

No	Antibiotic Code	Zone Diameter mm)	S	I	SDD	R
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MIC method

Guidelines: CLSI EUCAST

Agar Dilution Microdilution in house Etest

Other commercial methods if yes specify

Automated Systems Vitek 2 MicroScan

No	Antibiotic Code	Symbol Code	MIC Range Code	Interpretation Code	Indicate treatment option
1					<input type="checkbox"/>
2					<input type="checkbox"/>
3					<input type="checkbox"/>
4					<input type="checkbox"/>
5					<input type="checkbox"/>
6					<input type="checkbox"/>
7					<input type="checkbox"/>
8					<input type="checkbox"/>
9					<input type="checkbox"/>
10					<input type="checkbox"/>
11					<input type="checkbox"/>

Comments:

ADDITIONAL TESTS

High Level Aminoglycoside Resistance (HLAR) Testing (for enterococci only)						
HLAR gentamicin by disk diffusion	Susceptible ≥10mm	<input type="checkbox"/>	Inconclusive –for confirmation (7-9mm)	<input type="checkbox"/>	Resistant (6mm)	<input type="checkbox"/>
HLAR streptomycin by disk diffusion	Susceptible ≥10mm	<input type="checkbox"/>	Inconclusive –for confirmation (7-9mm)	<input type="checkbox"/>	Resistant (6mm)	<input type="checkbox"/>
D-Test (If applicable)						
Positive	<input type="checkbox"/>					
Negative	<input type="checkbox"/>					
Beta-Lactamase Testing			RESULTS			
			Positive		Negative	
Acidometric method	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Iodometric method	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Chromogenic cephalosporin	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Other	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
-If other (specify)						
Extended Spectrum Beta-Lactamase Testing						
Screening methods						
Disk diffusion	<input type="checkbox"/>		MIC Method	<input type="checkbox"/>		
Micro Scan	<input type="checkbox"/>	Vitek 2	<input type="checkbox"/>	Other (specify):		
Results	Undetermined		<input type="checkbox"/>	Positive	<input type="checkbox"/>	
			ve		Negative	
					<input type="checkbox"/>	
Confirmation method						
Double disk diffusion	<input type="checkbox"/>	Disks with clavulanate	<input type="checkbox"/>	Etest with clavulanate	<input type="checkbox"/>	
MicroScan	<input type="checkbox"/>	Vitek 2	<input type="checkbox"/>	Other (specify)		
Results	Undetermined		<input type="checkbox"/>	Positive	<input type="checkbox"/>	
					Negative	
					<input type="checkbox"/>	

Please provide contact telephone and email where all PT communication pertaining to this scheme can be addressed.

Department: Microbiology

Laboratory Contact Name: _____

Email: _____

Minimum requirements for AST reporting, otherwise please use AST guidelines that you subscribe to in your laboratory.

<u>Streptococcus pneumoniae</u>	<u>Neisseria gonorrhoeae</u>
Penicillin	Penicillin
Erythromycin	Ceftriaxone
Trimethoprim sulfamethoxazole	Tetracycline
Cefotaxime/Ceftriaxone	Ciprofloxacin
Tetracycline	Cefixime
Levofloxacin/moxifloxacin	Spectinomycin

<u>Staphylococcus sp</u>	<u>Pseudomonas and Acinetobacter sp</u>
Penicillin	Ceftazidime
Oxacillin/Cefoxitin	Cefepime
Erythromycin	Ciprofloxacin
Clindamycin	Imipenem
Trimethoprim-sulfamethoxazole	Meropenem
Vancomycin	For MDR add Colistin
Linezolid	Piperacillin-tazobactam

<u>Enterococcus sp</u>	<u>Haemophilus influenzae/parainfluenzae</u>
Ampicillin	Ampicillin
Ceftriaxone	Cefotaxime/Ceftazidime or Ceftriaxone
Cefuroxime	Chloramphenicol
Vancomycin	Augmentin
Linezolid	

<u>Streptococcus sp β-haemolytic group</u>	<u>Enterobacteriaceae sp</u>
Ampicillin	Augmentin
Penicillin	Ampicillin
Clindamycin	Amikacin
Erythromycin	Cefepime
	Cefotaxime/Ceftriaxone
	Cefoxitin
	Cefuroxime
	Ciprofloxacin
	Ertapenem
	Gentamycin
	Imipenem
	Meropenem
	Piperacillin-tazobactam
	Trimethoprim sulfamethoxazole