

Phone Number: (949) 491-8080

CLIA: 05D2040304

Patient: TESTING IHD Patient ID: MDT-0007

Patient DOB: 1/1/1992 Patient Age: 31

Patient Sex: Female

Specimen: Swab

Collected: 1/11/23 10:00 AM PST Received: 1/11/23 4:07 PM PST

Reported: 1/11/23 5:39 PM PST

Specimen ID: 1950034

Provider: Shih-Jwo Huang Account: 6518

Facility: Innovative Health Diagnos

Molecular Report

Powered by Eden Software Solutions

POSITIVE SUMMARY

Pathogens

Atopobium vaginae, BVAB2, Candida albicans, Candida glabrata, Candida krusei, Candida parapsilosis, Candida tropicalis, Gardnerella vaginalis, Megasphaera 1, Megasphaera 2, Trichomoniasis vaginalis

LEGEND

SANFORD GUIDE

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- [1] Recommended: Agent is a first line therapy: reliably active in vitro, clinically effective, guideline recommended, recommended as a first-line agent or acceptable alternative agent in the Sanford Guide.
- [2] Active: Agent is a potential alternative agent (active in vitro, possesses class activity comparable to known effective agents or a therapeutically interchangeable agents and hence likely to be clinically effective, but second line due to overly broad spectrum, toxicity, limited clinical experience, or paucity of direct evidence of effectiveness).
- [3] Variable: Variable activity such that the agent, although clinically effective in some settings or types of infections is not reliably effective in others, or should be used in combination with another agent, and/or its efficacy is limited by resistance which has been associated with treatment failure.

Pathogens	Fluconazole	Anidulafungin	Caspofungin	Micafungin	Amphotericin B	Itraconazole	Voriconazole	Posaconazole	Isavuconazole
Candida albicans	1	1	1	1	2	2	2	2	2
Candida glabrata		1	1	1	1				
Candida krusei		1	1	1	1		2	2	2
Candida parapsilosis	1	2	2	2	1	2	2	2	2
Candida tropicalis	1	1	1	1	1	2	2	2	2
Atopobium vaginae									
BVAB2									
Gardnerella vaginalis									
Trichomoniasis vaginalis									
Megasphaera 1									
Megasphaera 2									



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Vaginitis Panel, Basic (AssureSwab)	
Test	Result
Other	
Atopobium Vaginae	✓ Detected
BVAB2	✓ Detected
Candida Albicans	✓ Detected
Candida Glabrata	✓ Detected
Candida Krusei	✓ Detected
Candida Parapsilosis	✓ Detected
Candida Tropicalis	✓ Detected
Gardnerella Vaginalis	✓ Detected
Megasphaera 1	✓ Detected
Megasphaera 2	✓ Detected
Trichomoniasis Vaginalis	✓ Detected

These tests are Lab Developed Tests and were developed, and its performance characteristics determined by Innovative Health Diagnostics. The U.S. Food and Drug Administration has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used solely for clinical diagnosis or patient management decisions.

Comments:

No comments.



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Detected Pathogen - Candida albicans



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Clinical Setting

- Candidemia, disseminated candidiasis: non-neutropenic, neutropenic patients
- Most common cause of mucosal and cutaneous candidaisis
- Normal human flora
- Risk factors: Antibiotic use, GI surgery, immunocompromised state
- · Positive blood culture for yeast, suspected catheter-related bloodstream infection

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Detected Pathogen - Candida glabrata



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Clinical Setting

- Candidemia, disseminated candidiasis: non-neutropenic, neutropenic patients
- Positive blood culture for yeast, suspected catheter-related bloodstream infection
- Often non-susceptible to fluconazole

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Detected Pathogen - Candida krusei



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Clinical Setting

- Candidemia, disseminated candidiasis: non-neutropenic, neutropenic patients
- Positive blood culture for yeast, suspected catheter-related bloodstream infection
- Candida krusei isolates are intrinsically resistant to fluconazole

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Detected Pathogen - Candida parapsilosis



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Clinical Setting

- Candidemia, disseminated candidiasis: non-neutropenic, neutropenic patients
- Positive blood culture for yeast, suspected catheter-related bloodstream infection
- In vitro studies have revealed higher MICs to echinocandins although clinical studies have not shown a difference in outcomes when compared to other candida species when echinocandins were used (Clin Infect Dis, 58:1413, 2014)

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Clinical Setting

- Candidemia, disseminated candidiasis: non-neutropenic, neutropenic patients
- Positive blood culture for yeast, suspected catheter-related bloodstream infection

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Detected Pathogen - Atopobium vaginae



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Clinical Setting

- Causes vaginitis and cervicitis (Amsel's criteria = 3 of 4 of below; Nugent's criteria = vaginal gram stain)
 - o Copious, malodorous, thin, milky vaginal discharge,
 - ∘ pH >4.5.
 - Whiff Test (fishy odor when 10% Potassium Hydroxide added to vaginal discharge;).
 - "Clue" Cell (epithelial cell coated with bacteria).
- May be transmitted sexually but not a STD; no need to treat sexual partners unless balanitis is present.

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Detected Pathogen - BVAB2



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Detected Pathogen - Gardnerella vaginalis



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Clinical Setting

- Sexually active female (typically) with complaints of malodorous vaginal discharge (see bacterial vaginosis).
 - Mild to moderate grayish vaginal discharge with a fishy odor. pH >4.5
 - Absence of vaginal inflammation on exam.
 - Itching and irritation are minimal or absent.
- · Wet mount of vaginal discharge shows "clue" cells, vaginal epithelial cells with numerous adherent coccobacilli; presence of numerous polys suggestive of coexisting infection.

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Detected Pathogen - Trichomoniasis vaginalis



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Clinical Setting

- Copious foamy vaginal discharge, pH >4.5, purulent, malodorous.
- In women: burning, dysuria, pruritus, dyspareunia; post-coital bleeding.
- In men: symptoms of urethritis, epididymitis or prostatitis (low prevalence in MSM) [Clin Infect Dis 73:1119, 2021].
- Most infected people are asymptomatic.
- Associated with poor birth outcomes
- Evaluate and treat sexual partners.
- Trend is to test appropriate specimen by NAAT for 3 pathogens: *Trichomonas, Chlamydia* and *Gonorrhea*. Using NAAT, prevalence of *Trichomonas* in a high risk population was 27% in women and 9.8% in men: Clin Infect Dis 59:834, 2014.
- CDC 2021 STD Treatment Guidelines: MMWR Recomm Rep 70:1, 2021
- Review of evidence for CDC guidelines: Clin Infect Dis 74:S152 2022

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Detected Pathogen - Megasphaera 1

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Detected Pathogen - Megasphaera 2

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