



PARTICIPANT STATISTICS

Specimen 1 - 11 year old Female, cough, fever, sore throat

Organisms	Extent 1	2	3	4	5
992 Growth of gram-positive organisms			1		
690 Aerobe found, but referred for ID	1	1	1		
430 <i>Neisseria</i> sp., NOS			2		
662 Pos for beta-hemolytic strep screen		2	4		
772 Pos for strep Group A antigen	3	1	2		
892 Organism is gram-positive	4		16		
664 Pos for Grp A strep screen by culture	32	61	7	14	
563 <i>Streptococcus</i> sp., beta-hemolytic, not Gp A				1	
564 <i>Streptococcus</i> sp., beta-hemolytic, not Gp A, B or D					1
562 <i>Streptococcus</i> sp., beta-hemolytic Gp A (<i>S. pyogenes</i>)	6	95	56	1	
554 <i>Streptococcus</i> sp., NOS			1		
782 Pos for strep Group B antigen		1			
663 Neg for Grp A strep screen by culture		1	1		
TOTAL PARTICIPANTS	40	73	128	73	2

Extent 1, 2 and 3 flagging appears for failure to report 554, 562, 662, 664, 690, 772, 892 or 992.
 Extent 4 and 5 flagging appears for failure to report 562 or 664.
 In addition to the required organism, participants in all extents may report 430, 891 or 991 and any of the codes listed in Extent 1, 2 and 3.

This swab had Gp.A *Streptococcus pyogenes* and *Neisseria* sp. Group A strep are common and deadly. This is a **Panic Value, Stat** organism which can have a quick diagnosis with Type A, Direct Antigen Swab in minutes. Positives are treated immediately with penicillin, or erythromycin, if allergic. Do AST Gram Positive Panel, for resistant forms; they do exist.

If a negative swab occurs, redo the DAS; false negatives result from too tentatively taking the initial swab; 30 organisms will yield a positive swab. If a second negative occurs, then do the routine throat culture on blood agar, find and test beta strep. with A-F antisera and report results. Rarely, viruses will cause terrible-looking throats, especially in infectious mononucleosis (IM) so request a Mono Spot Test, - before penicillin or ampicillin is used, or a horrible rash may result. This child is on the borderline age for both strep. and / or the "kissing virus."

The *Neisseria* sp. is normal throat flora.

Specimen 2 - 8 year old Male, sinusitis

Organisms	Extent 1	2	3	4	5
696 No aerobic growth on blood agar		1			
664 Pos for Grp A strep screen by culture		2	2	1	
771 Neg for strep Group A antigen	3	4			
663 Neg for Grp A strep screen by culture	26	42	1		
TOTAL PARTICIPANTS	31	49	2		

Extent 1, 2 and 3 flagging appears for failure to report 540, 543, 544, 661, 663, 665, 690, 771, 892 or 992.
 Extent 4 and 5 flagging appears for failure to report 543 or 544.
 In addition to the required organism, participants in all extents may report 554, 558 and any of the codes listed in Extent 1, 2 and 3.

This swab had *Staphylococcus aureus* and alpha *Streptococcus* sp. *Staphylococcus aureus* is a primary pathogen, a **Panic Value, Stat** organism, which can, and will, invade the lungs and cause a serious, often fatal, pneumonia. The most deadly form, is the methicillin-resistant (MRSA) organism. Test for it using an oxycillin disc on the AST. Vancomycin therapy has been replaced by the latest cephalosporins, which are breeding resistant strains also, as will any other newer drugs over time.

The answer seems to be, make an autogenous vaccine of the patient's own strain and let his body build immunity against it. It cures within days or weeks, and it saves lives. It actually has been used World-wide, and even the U.S. in the early days of penicillin-resistance, when there were no other antibiotics!

Google it for 657 journal references as to the diseases and effectiveness against them, including MRSA, 2010.

Alpha strep are normal oral flora.

Specimen 3 - 14 year old Male, sore throat

Organisms	Extent 1	2	3	4	5
430 <i>Neisseria</i> sp., NOS			1		
772 Pos for strep Group A antigen	3	4			
664 Pos for Grp A strep screen by culture	3	42	1		
540 <i>Staphylococcus</i> sp., NOS				1	
562 <i>Streptococcus</i> sp., beta-hemolytic Gp A (<i>S. pyogenes</i>)		1		1	
662 Pos for beta-hemolytic strep screen		1			
TOTAL PARTICIPANTS	6	48	1	3	

Extent 1, 2 and 3 flagging appears for failure to report 554, 562, 662, 664, 690, 772, 892 or 992.
 Extent 4 and 5 flagging appears for failure to report 562 or 664.
 In addition to the required organism, participants in all extents may report 430, 554, 558, 891 or 991 and any of the codes listed in Extent 1, 2 and 3.

THROAT CULTURE

THIRD QUADRIMESTER 2011

This swab had beta, Gp. A, *Streptococcus pyogenes*, alpha *Streptococcus* sp and *Neisseria* sp.

The top edge of strep infections is about this age group, as immunity builds up with succeeding exposures. But the lab in Pediatrics, can do the Gp.A Direct Antigen Swab and determine a positive in minutes. If a positive is not seen, do another such, with a heavier inoculum; the main cause of false negatives is "insufficient specimen." If two such negatives occur, do the Blood agar plate in the candle jar, over-night, isolate beta-hemolytic colonies and type with A-F antisera and report.

Penicillin always is the first drug of choice for strep., but do AST in case of a resistant organism, or a penicillin allergy.

Specimen 4 - 3 year old Male, high fever

Organisms	Extent 1	2	3	4	5
698 No aerobic growth		2	1		
663 Neg for Grp A strep screen by culture	27	4	1		
771 Neg for strep Group A antigen	3	4			
696 No aerobic growth on blood agar	3	2			
TOTAL PARTICIPANTS	33	12	2		

Flagging in all extents appears for reporting other than 663, 696, 698 or 771.

This swab presented no detectable organisms.

A child who is clinically ill, yet presents a negative swab would represent one who has been treated with penicillin, the usual antibiotic for this clinical appearance, which would account for the lack of throat organisms. With symptoms persisting in their absence, a viral infection is the probable cause. Report "No organisms found. Repeat specimen if desired."

Antibiotics are more apt to inhibit the growth of organisms on agar even when they don't kill them in the infection, thus the reason for taking the specimen before starting the treatment.

Specimen 5 - 2 year old Female, nasal discharge

Organisms	Extent 1	2	3	4	5
690 Aerobe found, but referred for ID		1			
493 <i>Pseudomonas aeruginosa</i>				1	
430 <i>Neisseria</i> sp., NOS			1		
696 No aerobic growth on blood agar	2	1			
698 No aerobic growth	2				
771 Neg for strep Group A antigen	3	4			
663 Neg for Grp A strep screen by culture	27	41	1		
TOTAL PARTICIPANTS	32	49	1	2	

Extent 1, 2 and 3 flagging appears for failure to report 490, 493, 497, 661, 663, 665, 690, 696, 771, 891, 913 or 991.
 Extent 4 and 5 flagging appears for failure to report 493 or 497.
 In addition to the required organism, participants in all extents may report 430, 891 or 991 and any of the codes listed in Extent 1, 2 and 3.

Found were *Pseudomonas aeruginosa* and *Neisseria* sp.

The historic, iconic paper, "Water-bugs in the Bassinet," (~ 1960) was the first warning that 'nonpathogenic organisms' are always pathogenic to somebody. Ages 15 - 55 were called "the Ages of Immortality," because they are the most disease-resistant ages. Hydrated oxygen tents killed debilitated patients with antibiotic-resistant pseudomonads and other water flora, and the water was turned off in the bassinets of the new-borns.

This child is safe; this not a really virulent organism; it never is. However it is as common as the nearest faucet. But that is not what causes this problem; it's the room humidifier's air that she breathes all day in the house; she is a pre-schooler.

The humidifier tank must be emptied every 48 hours, and refilled with boiling water, to have air safe to breathe. That is usually the cure; with no medication needed.

P. aeruginosa is IDed by its green pigment. However if it has only the chartreuse pigment, DNase positive will confirm its ID.

The neisseriae are normal, nonpathogenic throat and nasal flora.