



PATIENT INFORMATION

Name: Patient Sample
DOB: 01/01/1975
Sex at Birth: M
Address: 123 Resident Street
City, State, Zip
Phone: 123.456.7890
Race:
Ethnicity:



SPECIMEN INFORMATION

Lab Accession Number: 13044771
Menu: Urinary Tract Infection
Specimen Type: Urine (voided)
Date Collected: 03/15/2026
Date Received by Lab: 03/16/2026
Date Reported: 03/16/2026
Cross Reference #:



FACILITY INFORMATION

Facility Name: Main Street Urgent
Care
Provider Name: Doctor Test, MD
NPI: 10000000
Address: 123 Main Street
City, State, Zip
Phone: 555.555.5555

TEST RESULTS

ORGANISMS	TARGETS	DETECTION STATUS	MICROBIAL LOAD
	Enterococcus spp (faecalis, faecium)	Detected	< 100,000 CFU/mL Equivalent
	Escherichia coli	Detected	>100,000 CFU/mL Equivalent
	Staphylococcus epidermidis, haemolyticus, lugdunensis	Detected	Low
RESISTANCE GENES	TARGETS	DETECTION STATUS	COMMENTS
	CTX-M1 (15), M2 (2), M9 (9), M8/25 Groups	Detected	Possible Class A beta lactamase activity, with potential resistance to cephalosporins, penicillins, aztreonam
	ermB, C; mefA	Detected	Potential resistance to the macrolide, lincosamide, and streptogramin antibiotics
	tet B, tet M	Detected	Potential resistance to tetracycline, doxycycline, minocycline.

CLINICAL NOTES

- **S. epidermidis, haemolyticus, lugdunensis** can be skin normal flora, but can become pathogenic in some clinical settings (immunocompromised patients and various transcutaneous catheter placements (urinary bladder/IV catheters, etc)). Use clinical judgment when interpreting detection of this organism.

CONSIDERATIONS FOR THERAPY

The information below lists agents that may be considered for therapy based on detected organisms and/or resistance genes. This information does not constitute medical advice. Clinical management and treatment decisions remain the sole responsibility of the ordering healthcare provider.



References and guidelines used to develop this table.

(P) Primary therapy consideration (A) Alternative therapy consideration (N/A) Not Applicable

CLASS OF ANTIMICROBIAL AGENTS	ANTIMICROBIAL AGENTS (po/IV)	Enterococcus			E. coli			Staphylococcus spp.		
Folate Pathway inhibitors	Trimethoprim sulfamethoxazole (Bactrim)		N/A			P				P
Nitrofurantoin	Nitrofurantoin		P			P				N/A
Phosphonic acid derivative	Fosfomycin		A			A				N/A
Topoisomerase inhibitor	Gepotidacin		N/A			A				N/A
Fluoroquinolones	Levofloxacin		N/A			A				N/A
	Ciprofloxacin		N/A			A				N/A

TARGETS TESTED

Targets detected are bolded for reference

BACTERIAL

- **Staphylococcus epidermidis**
- **Staphylococcus haemolyticus**
- **Staphylococcus lugdunensis**
- Staphylococcus saprophyticus (including MRSS – Methicillin Resistant)
- Staphylococcus aureus
- Acinetobacter baumannii
- Enterobacter cloacae complex
- Klebsiella aerogenes
- Klebsiella spp. (pneumoniae, oxytoca)
- **Escherichia coli; Proteus spp. (mirabilis, vulgaris)**
- Serratia marcescens
- Streptococcus agalactiae (Group B Strep)
- Streptococcus pyogenes (Group A Strep)
- Morganella morganii; Citrobacter freundii
- Enterococcus spp. (faecalis, faecium)

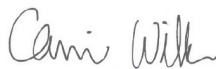
FUNGAL

- Candida albicans, parapsilosis, tropicalis
- Candida krusei (syn. Pichia kudriavzevii)
- Candida glabrata (syn. Nakaseomyces glabratus)

RESISTENCE GENES

- ACT, MIR, FOX, ACC Groups
- **CTX-M1 (15), CTX-M2 (2), CTX-M9 (9)**
- **CTX-M8/25 Groups**
- ermB, ermC, mefA
- tetB, tetM
- dfrA1, dfrA5, sul1, sul2

Analyzed by: Carrie Wilks, PhD



Date: 11/04/2025 13:16

Have questions about this report?

Call our Clinical Expert Line at **866-287-3218**.



Real-Time polymerase chain reaction (TaqMan qPCR) was utilized for detection for all tested organisms and resistance genes. Initiation of antimicrobial therapy prior to testing may affect results and can lead to the detection of non-living microorganisms. Detection of microbes must be correlated with current/recent antibiotic usage and patient signs and symptoms. Microbial sensitivity testing is not performed at this lab. Crt to CFU/mL equivalent thresholds were established based on studies using known CFU/mL urine specimens performed at HealthTrackRx in Denton, TX. Testing performed by HealthTrackRx at LabPort (2425 Universal Way Ste 6, Louisville, KY 40219; CLIA# 18D2319534; Lab Director Jessica Moye, PhD, HCLD(ABB)). Data analysis and report release for all tested samples is referred out to HealthTrackRx Indiana, Inc (1500 I35W, Denton, TX 76207; CLIA# 45D2009077) and performed by their appropriately credentialed staff according to CAP and Texas State Requirements. This test was developed, and its performance characteristics determined by HealthTrackRx. This test was developed, and its performance characteristics determined by HealthTrackRx. It has not been cleared or approved by the FDA. However, such approval/clearance is not required, as the laboratory is regulated and qualified under CLIA to perform high-complexity testing. This test is used for clinical purposes and should not be regarded as investigational or for research.

*Approximate copies of target nucleic acid per μmL (Low: $\leq 2,500$ copies/μmL; Moderate: 2,500-50,000 copies/μmL; High: >50,000 copies/μmL)

HealthTrackRx owns and operates the following laboratories: HEALTHTRACKRX INDIANA, INC. (NPI: 1104631415, CLIA: 18D2319534, Lab Director: Carrie Wilks, PhD, HCLD(ABB)), (NPI: 1689639544, CLIA: 45D2009077, Lab Director: Rhiannon Gonzalez, PhD, HCLD(ABB)), (NPI: 1326743535, CLIA: 15D2267792, Lab Director: Jessica Moye, PhD, HCLD(ABB)), HEALTHTRACKRX OF LOUISIANA, LLC (NPI: 1265206155, CLIA: 15D2294984, Lab Director: Carrie Wilks, PhD, HCLD(ABB)), HEALTHTRACKRX OF MARYLAND, LLC (NPI: 1588498091, CLIA: 15D2311036, Lab Director: Carrie Wilks, PhD, HCLD(ABB)), HEALTHTRACKRX OF CALIFORNIA, LLC (NPI: 1790470763, CLIA: 05D2287227, Lab Director: Joshua Brown, PhD, HCLD(ABB)).