TEST PATIENT

6DPS0H7HVW1DPH

Sex:)

DDWH Collected: 00-00-0000 111 7(67 ROAD TEST SUBURB /AB ,': 00000000 UR#:0000000 TEST PHYSICIAN
DR JOHN DOE
111 CLINIC ST5((7
&/,1,& 68%85% 9,&

P: 1300 688 522

E: info@nutripath.com.au A: PO Box 442 Ashburton VIC 3142

MICROBIOLOGY

MACROSCOPIC DESCRIPTION: Liquid

STOOL, SPOT

FAECES SPECIMEN

STOOL - MICROSCOPY DAY 1

Result Range Units

MICROSCOPY

POLYMORPHS: Nil

RBC.....: Nil

EIA Antigen: Giardia and Cryptosporidium NOT detected.

DETECTED: Blastocystis hominis: +++

STOOL CULTURE DAY 1 NO ENTERIC PATHOGENS ISOLATED.

TEST PATIENT 6D P S0H 7HVW 1D P H

NutriPATH

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TEST PHYSICIAN

DR JOHN DOE 111 CLINIC ST5((7 &/,1,& 68%85% 9,&

Sex:) 111 CLINIC
DDWH Collected: 00-00-0000 &/,1,& 68%
111 7(67 ROAD TEST SUBURB
/AB ,': 00000000 UR#:0000000

Faecal Multiplex PCR

PARASITIC PATHOGENS:

Giardia intestinalis: Not Detected Cryptosporidium species: Not Detected Dientamoeba fragilis: Not Detected Entamoeba histolytica: Not Detected Blastocystis species: DETECTED

BACTERIAL PATHOGENS

Campylobacter species: Not Detected Salmonella species: Not Detected Shigella species: Not Detected Yersinia enterocolitica: Not Detected Aeromonas species: Not Detected Plesiomonas species: Not Detected

Not Detected results indicate the absence of detectable DNA in this sample for the 11 enteropathogens reported.

Blastocystis hominis has been DETECTED by Multiplex PCR.

DNA consistent with the presence of B. hominis has been detected using ultra-sensitive PCR techniques.

It has been observed during this assay that the identification value of this detected organism is reported at: 17.49

This value represents a strong positive detection, which indicates that it is potentially indicative of an active infection with the presence of predominantly live organisms.

Blastocystis hominis may be the cause of persistent, mild diarrhoea. It is endemic in Australia, although it may also be associated with recent overseas travel. Detection suggests the ingestion of contaminated material and continued symptoms may require further specimens for the detection of bacterial, viral and/or parasitic pathogens. A CDSA profile should be considered to rule out any bacterial or viral infections.

If treatment is warranted, metronidazole 400 - 750 mg (child 12-17 mg/kg up to 750 mg) tds for at least 10 days.

Lower dosages are usually associated with treatment failure.