

DIVISION OF LABORATORY SERVICES

Kara Levinson, PhD, MPH, D(ABMM), Director Nashville Central Laboratory 630 Hart Lane Nashville, TN 37243 615-262-6300 Kara Levinson, PhD, MPH, D(ABMM), Interim Director Knoxville Regional Laboratory 2101 Medical Center Way Knoxville, TN 37920 865-549-5201

Reference Range

Date Reported: 7/23/2024 PRELIMINARY REPORT

Date of Birth: 07/23/2024

Accession #:

Race: County: Ethnicity: Region:

N24E001124-01

Facility: Patient Address:

Tennessee Dept of Health Lab Services - , TN

Nashville 630 Hart Lane Nashville, TN 37247

Ordering Provider: Event ID:

Carbapenem Resistant Organism Culture

Key: S=Susceptible I=Intermediate R=Resistant

Page 1 of 3

RESULT: Carbapenem Resistant Organism Culture Enterobacter cloacae

BMD

Enterobacter cloacae

Patient Name: TEST1, TEST

Abscess

07/23/2024

07/23/2024

Sex: M

Patient ID:

Medical Record No.:

Specimen Type:

Date Collected:

Date Received:

Date of Onset:

Specimen Source:

Drug	Interpretation	Results	Units	s	I	R	Location
Amikacin	Resistant	16	ug/mL	16	32	> 32	NASHVILLE
Ampicillin	Resistant	> 16	ug/mL	8	16	> 16	NASHVILLE
Ampicillin+sulbactam	Resistant	> 16/8	ug/mL	8/4	16/8	>16/8	NASHVILLE
Aztreonam	Resistant	> 16	ug/mL	4	8	16	NASHVILLE
Cefazolin	Resistant	> 16	ug/mL	2	4	8	NASHVILLE
Cefepime	Resistant	> 16	ug/mL	2	4	16	NASHVILLE
Ceftazidime	Resistant	> 16	ug/mL	4	8	16	NASHVILLE
Ceftazidime+avibactam	Resistant	> 16/4	ug/mL	8/4		16/4	NASHVILLE
Ceftolozane+tazobactam	Resistant	> 16/4	ug/mL	2/4	4/4	8/4	NASHVILLE
Ceftriaxone	Resistant	32	ug/mL	1	2	4	NASHVILLE

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PRELIMINARY REPORT

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Accession #:

N24E001124-01

Patient Name: TEST1, TEST

Enterobacter cloacae

Date	of Birth: 07/23/20	24					
Ciprofloxacin	Resistant	> 2	ug/mL	0.25	0.5	1	NASHVILLE
Doripenem	Resistant	> 4	ug/mL	1	2	4	NASHVILLE
Ertapenem	Resistant	> 8	ug/mL	0.5	1	2	NASHVILLE
Gentamicin	Resistant	> 8	ug/mL	4	8	> 8	NASHVILLE
Imipenem	Resistant	> 8	ug/mL	1	2	4	NASHVILLE
Levofloxacin	Resistant	> 8	ug/mL	< 1	1	2	NASHVILLE
Meropenem	Resistant	> 8	ug/mL	1	2	4	NASHVILLE
Minocycline	Resistant	> 8	ug/mL	4	8	>8	NASHVILLE
Nitrofurantoin	Resistant	> 64	ug/mL	32	64	>64	NASHVILLE
Piperacillin+Tazobactam	Resistant	> 64/4	ug/mL	8/4	16/4	32/4	NASHVILLE
Tetracycline	Resistant	> 8	ug/mL	4	8	> 8	NASHVILLE
Tigecycline	Resistant	> 8	ug/mL				NASHVILLE
Tobramycin	Resistant	> 8	ug/mL	4	8	> 8	NASHVILLE
Trimethoprim+Sulfamethox azole	Resistant	> 2/38	ug/mL	< 2/38		> 2/38	NASHVILLE

mCIM

Carbapenemase Production

Positive

NASHVILLE

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Accession #: N24E001124-01

Patient Name: TEST1, TEST Date of Birth: 07/23/2024

	RESULTS	Reference Range	Performing Location	
Streck ARM-D RT-PCR ß-lactamase				
IMP	Not Detected	Not Detected	NASHVILLE	
KPC	Not Detected	Not Detected	NASHVILLE	
OXA-48	Not Detected	Not Detected	NASHVILLE	
VIM	Not Detected	Not Detected	NASHVILLE	
NDM	Detected	Not Detected	NASHVILLE	

Comments:

MALDI-TOF Mass Spectrometry was utilized as part of the identification process of this isolate. Performance characteristics of this test were determined by Tennessee Department of Health Laboratory Services. This test has not been cleared or approved by the U.S. Food and Drug Administration.

Breakpoints when cefazolin is used for therapy of infections other than uncomplicated UTIs due to E. coli, K. pneumoniae, and P. mirabilis. Breakpoints are based on a dosage regimen of 2 g administered every 8 h.

The cefepime breakpoint for SDD is based on dosage regimens that result in higher cefepime exposure, either higher does or more frequent doses, or both, up to approved maximum dosing regimens.

Piperacillin/tazobactam breakpoints for SDD are based on a dosage regimen of 4.5g administered every 6h as a 3-h infusion or 4.5g administered every 8h as a 4-h infusion.

Disclaimer:

The GN7F BMD panel performance characteristics have been determined by the TDH Division of Laboratory Services. It has not been cleared or approved by the U.S. Food and Drug Administration.

FDA interpretive guidelines were used for Tigecycline breakpoints.

The performance characteristics of the Streck ARM-D β -lactamase real-time PCR test were validated by TDH Laboratory Services. This test has not been cleared or approved by the U.S. Food and Drug Administration.

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