Quest Diagnostics

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Accession #: Q2026-1101-001
Report Date: February 03, 2026
Specimen ID: U2026-0201-HR1

PATIENT INFORMATION		ORDERING INFORMATION	
Patient: HARRIS, EMILY R	**DOB:** 07/22/1990	**Physician:** Dr. Priya Nair, MD	**NPI:** 1928374650
Sex: Female	**MRN:** QD-30581924	**Client:** Newton-Wellesley Women's Health	2014 Washington St, Newton MA 02462

Urine Culture — Final Report

Collected: 02/01/2026 Received: 02/01/2026 Reported: 02/03/2026

Specimen Type: **Urine** Source: **Clean-catch midstream**

TEST	RESULT	FLAG	REFERENCE INTERVAL
Urine Culture	**Escherichia coli**	**A**	No growth
Colony Count	**150,000 CFU/mL**	**A**	Significant: >= 100,000

Antimicrobial Susceptibility

ANTIMICROBIAL AGENT	MIC (mcg/mL)	INTERP.	BREAKPOINTS (S/R)	NOTE
Ampicillin	>= 32	**Resistant**	<= 8 / >= 32	Intrinsic resistance
Amoxicillin-Clavulanate	<= 8	Sensitive	<= 8 / >= 32	
Nitrofurantoin	<= 32	Sensitive	<= 32 / >= 128	First-line for uncomplicated UTI
Trimethoprim-Sulfamethoxazole	>= 320	**Resistant**	<= 2/38 / >= 4/76	
Ciprofloxacin	<= 0.25	Sensitive	<= 0.25 / >= 1	Prescribed — see comment
Levofloxacin	<= 0.5	Sensitive	<= 0.5 / >= 2	
Ceftriaxone	<= 1	Sensitive	<= 1 / >= 4	
Gentamicin	<= 1	Sensitive	<= 4 / >= 16	
Fosfomycin	<= 64	Sensitive	<= 64 / >= 256	

Performing Laboratory Comments

Colony count of 150,000 CFU/mL exceeds the significant bacteriuria threshold (>= 100,000 CFU/mL) for symptomatic female patients. Escherichia coli isolated as the sole predominant uropathogen. Organism is susceptible to ciprofloxacin; patient has been initiated on ciprofloxacin 500 mg PO BID per ordering provider notation. Resistance to ampicillin and trimethoprim-sulfamethoxazole noted — these agents are not appropriate for treatment. Follow-up urine culture recommended in 7 days to assess treatment response.