

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: 02/15/2026 Received: 02/15/2026 Reported: 02/17/2026	
Specimen Type: Urine		Source: Clean-catch midstream	

TEST	RESULT	FLAG	REFERENCE INTERVAL
Urine Culture	Escherichia coli		No growth
Colony Count	3,000 CFU/mL		Significant: >= 100,000

Antimicrobial Susceptibility

ANTIMICROBIAL AGENT	MIC (mcg/mL)	INTERP.	BREAKPOINTS (S/R)	NOTE
Ampicillin	>= 32	Resistant	<= 8 / >= 32	
Amoxicillin-Clavulanate	<= 8	Sensitive	<= 8 / >= 32	MIC restored from prior intermediate
Nitrofurantoin	<= 32	Sensitive	<= 32 / >= 128	Currently prescribed — see comment
Trimethoprim-Sulfamethoxazole	>= 320	Resistant	<= 2/38 / >= 4/76	
Ciprofloxacin	<= 0.25	Sensitive	<= 0.25 / >= 1	MIC restored to baseline
Levofloxacin	<= 0.5	Sensitive	<= 0.5 / >= 2	
Ceftriaxone	<= 1	Sensitive	<= 1 / >= 4	
Gentamicin	<= 1	Sensitive	<= 4 / >= 16	
Fosfomycin	<= 64	Sensitive	<= 64 / >= 256	

✓ **TREATMENT RESPONSE:** Colony count has decreased from 150,000 → 45,000 → 3,000 CFU/mL across three consecutive weekly specimens. Current count is below the significant bacteriuria threshold. Ciprofloxacin MIC has returned to baseline (<= 0.25 mcg/mL), consistent with relief of selective pressure following regimen change to nitrofurantoin.

Performing Laboratory Comments

Colony count of 3,000 CFU/mL is below the clinically significant bacteriuria threshold (< 100,000 CFU/mL). Escherichia coli organism identity is consistent across all three cultures (02/01, 02/08, 02/15/2026), confirming this represents the same infecting strain throughout treatment. Following the susceptibility shift alert issued on 02/10/2026 and subsequent regimen change to nitrofurantoin, the current specimen demonstrates near-complete resolution of bacteriuria. Ciprofloxacin MIC has returned to baseline (<= 0.25 mcg/mL), suggesting the intermediate result on 02/08/2026 reflected selective in vivo pressure rather than a stable resistant mutation. No resistance markers (ESBL, CRE, MRSA) detected. Clinical correlation with symptom resolution recommended. No further culture follow-up required if patient is asymptomatic.