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MARTIN WILLIAMS

IDEXX Reference Laboratory Report: Final

PET OWNER:	**EMILY WILLIAMS**	**All Creatures Great and Small**		LAB ID:	2341345098
PATIENT ID:	12345	Blanická 25		ORDER ID:	2568903455
SPECIES:	Canine	120 00 Praha 2		COLLECTION DATE:	04.05.25
BREED:	Mixed breed	Czechia		DATE OF RECEIPT:	04.05.25
GENDER:	Male Neutered	ACCOUNT #:	2464	DATE OF RESULT:	08.05.25, 13:42 UTC +2
DATE OF BIRTH:	12.03.18	ATTENDING VET:	Dr. James Herriot		
AGE:	7 years 1 month				
MICROCHIP #:	489 279 309 378 236				

IDEXX Services: Culture and antimicrobial susceptibility

Sample Type: Swab (Refrigerated)

Microbiology

Sample type: **Swab (Refrigerated)** Test methodology: **Aerobic culture unless otherwise specified**

Start date: **04.05.25** End date: **08.05.25**

TEST	RESULT
* Clinical history	Wound happened 01.05 and as was licked open by patient for 3 days. Received convenia 01.05 and has been on Orbax.
Direct Gram Stain	1+ Gram positive rods 2+ Gram positive cocci 3+ Gram negative rods Gram negative cocci
Aerobic culture growth	Status: Final Culture complete

Organism	Quantity	Comments
Isolate 1 Pseudomonas aeruginosa	Heavy	Pseudomonas aeruginosa is an opportunistic, environmentally ubiquitous organism and is considered a significant pathogen in ear, skin, wound respiratory, and mucosal infections, particularly otitis externa and media. Pseudomonas aeruginosa is intrinsically resistant to ampicillin, amoxicillin, ampicillin-sulbactam, amoxicillin/ clavulanic acid, cefotaxime, ceftriaxone, ertapenem, tetracyclines, trimethoprim, trimethoprim-sulfamethoxazole, and chloramphenicol. This organism may develop resistance during prolonged antimicrobial treatment. Repeat susceptibility testing may be warranted based on the specific situation and severity of disease.
Isolate 2 Proteus mirabilis	Moderate	
Isolate 3 Actinomyces	Moderate	There are currently no veterinary specific CLSI interpretive guidelines for this organism, therefore susceptibility testing will not be performed. Actinomyces sp. is typically associated with chronic, purulent or granulomatous infections, including mastitis. Infections generally respond to prolonged antimicrobial therapy, with a low risk of resistance developing.

Microbiology (continued)

Antibiotic	Isolate 1 **Pseudomonas aeruginosa** Interpretation | (MIC µg/mL)		Isolate 2 **Proteus mirabilis** Interpretation | (MIC µg/mL)	
Penicillins				
Amoxicillin (D)	R	<=1	R	<=1
Clavulanic Acid (C)	R	<=1	R	<=1
Imipenem (B)	S	<=2	S	<=2
Cephalosporins				
Cefpodoxime (D)	S	<=4	S	<=4
Cefovecin (C)	R	>=0.5	R	>=0.5
Cefotaxime (B)	R	>=0.5	R	>=0.5

INTERPRETATION KEY for Antibiotic Susceptibility Results (when performed)
For all sources and sites, susceptibilities are reported based on MIC breakpoints where available. These standards have been established by the Clinical and Laboratory Standards Institute (CLSI).
S = Susceptible. Organism is inhibited by standard recommended dosage regimen.
I = Intermediate. Organism is inhibited only by a higher than standard recommended dosage regimen.
R = Resistant. Organism is resistant to the maximum recommended dosage regimen.
SDD= Susceptible, Dose Dependent. The interpretive criterion for SDD is based on dosage regimens that result in higher antimicrobial exposure, either higher or more frequent doses, or both.
N/R (not reported) will appear and/or MIC data may be left blank if susceptibility testing is not feasible or clinically appropriate.
EMA Classification:
Category A - "Avoid": These antimicrobials may only be used exceptionally in individual companion animals in compliance with the prescribing “cascade”. Substances in these classes cannot be used for food-producing animals in the absence of established maximum residue limits.
Category B - "Restrict": These antimicrobials should be considered only for the treatment of clinical conditions when there are no alternatives in Categories C or D that could be clinically effective. Especially for this category, use should be based on the results of antimicrobial susceptibility testing, whenever possible.
Category C - "Caution": These antimicrobials should only be used when there is no available substance in Category D that would be clinically effective.
Category D - "Prudence": First-line treatments. These are antimicrobials that should be used as the first option when possible and clinically indicated. Unnecessary use and unnecessarily long treatment periods should be avoided and group treatment restricted to situations where individual treatment is not feasible.

Method: automated resistance determination (MIC), according to guidelines of the Clinical and Laboratory Standards Institute (CLSI). MIC values (if available) expressed in ug/ml. SIR results and / or MIC values are not reported if no CLSI interpretation criteria (so-called breakpoints) are available, the growth conditions of the microorganism do not permit measurement with the method used, or determination for the individual isolate was not possible.

The results are partly obtained by deduction according to international guidelines (information available on request from the laboratory). The antibiogram is compiled according to the microorganism. An absent SIR result in the antibiogram generally indicates an unsuitable combination of microorganism and active substance. Please also note the information regarding guiding substances and cross resistances. Please observe application restrictions and contraindications! The choice of antibiotic is the responsibility of the attending veterinarian. The test method refers to systemic effective levels. Testing locally applicable active substances such as fusidic acid and polymyxin B is not possible.

For more information about the MIC, please visit our website (keyword "MIC").