

GI Pathogens; Multiplex PCR



Order: 999999-9999



Client #: 999999

Doctor: Sample Doctor, MD
Doctors Data Inc
123 Main St.
St. Charles, IL 60174 USA

Patient: Sample Patient

Id: 999999

Age: 66 **DOB:**

Sex: Male

Sample Collection

Date Collected

Date Received

Date Reported

Date/Time

08/03/2022

08/13/2022

08/17/2022

Viruses	Result	
Adenovirus F40/41	Negative	☒
Norovirus GI/GII	Negative	☒
Rotavirus A	Positive	☐

Pathogenic Bacteria	Result	
<i>Campylobacter</i> (<i>C. jejuni</i> , <i>C. coli</i> and <i>C. lari</i>)	Negative	☒
<i>Clostridioides difficile</i> (Toxin A/B)	Negative	☒
<i>Escherichia coli</i> O157	Negative	☒
Enterotoxigenic <i>Escherichia coli</i> (ETEC) lt/st	Negative	☒
<i>Salmonella</i> spp.	Negative	☒
Shiga-like toxin-producing <i>Escherichia coli</i> (STEC) stx1/stx2	Negative	☒
<i>Shigella</i> (<i>S. boydii</i> , <i>S. sonnei</i> , <i>S. flexneri</i> & <i>S. dysenteriae</i>)	Negative	☒
<i>Vibrio cholerae</i>	Negative	☒

Parasites	Result	
<i>Cryptosporidium</i> (<i>C. parvum</i> and <i>C. hominis</i>)	Negative	☒
<i>Entamoeba histolytica</i>	Negative	☒
<i>Giardia duodenalis</i> (AKA <i>intestinalis</i> & <i>lamblia</i>)	Negative	☒

Notes:

Methodology: Multiplex PCR



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GI Pathogens

Introduction

The GI Pathogen profile is performed using an FDA-cleared multiplex PCR system. It should be noted that PCR testing is much more sensitive than traditional techniques and allows for the detection of extremely low numbers of pathogens. PCR testing does not differentiate between viable and non-viable pathogens and should not be repeated until 21 days after completion of treatment or resolution to prevent false positives due to lingering traces of DNA. PCR testing can detect multiple pathogens in the patient's stool but does not differentiate the causative pathogen. All decisions regarding the need for treatment should take the patient's complete clinical history and presentation into account.

Rotavirus

Rotaviruses are classified into seven serogroups (A-G); however, only groups A, B, and C are human pathogens. The Group A Rotaviruses are responsible for the majority of infections. Globally, Rotavirus is estimated to cause more than 125 million cases of gastroenteritis in children each year. Rotavirus symptoms can include non-bloody watery diarrhea, loss of appetite, low-grade fever, vomiting and abdominal cramping. Symptoms may be severe in infants, young children and virus may shed after resolution. While Rotavirus predominately infects children, it can also affect adults, and produces a more severe disease in immuno-compromised hosts. Transmission is via direct contact or fecal-oral via contaminated objects, food or water (drinking or recreational). Incubation period is typically two days and virus may shed prior to symptom presentation. Anti-emetics may be considered for children > 6 months old. Studies indicate that zinc may reduce severity of illness. The scientific literature does not currently support any specific herbal or nutritional antiviral therapies for this virus type. *Lactobacillus casei* GG and *Saccharomyces boulardii* may provide moderate clinical benefit in the treatment of watery diarrhea.