

Client: Example Client ABC123  
123 Test Drive  
Salt Lake City, UT 84108  
UNITED STATES

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB** 3/15/1965  
**Gender:** Female  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 00/00/0000 00:00

**Antimicrobial Susceptibility - Nonfermenter**

ARUP test code 0060216

Collected: 00/00/0000 00:00 MT  
Started: 00/00/0000 00:00 MT

Source: **Respiratory**

Body Site: **Sputum**

Free Text Sources: **Not Specified**

**Final Report**

Pseudomonas aeruginosa  
Organism identified by client

**Susceptibility Results**

**Organism: Pseudomonas aeruginosa**

**Interpretive Information** Interpretation: **SEE NOTE**

Antimicrobial susceptibility testing could not be completed due to poor organism growth using the CLSI approved test method.

**S=Susceptible, I=Intermediate, R=Resistant, NonS=Nonsusceptible, IND=Indeterminate, SDD=Susceptibility is dose dependent, None=Interpretive guidelines are not available**

**H=High, L=Low, \*=Abnormal, C=Critical**

**Interpretive Results**

INTERPRETIVE INFORMATION: Nonfermenter Susceptibility

UNITS = micrograms/mL

Susceptibility testing is performed by broth microdilution using custom- made MIC panels and interpreted according to CLSI guidelines.

VERIFIED/REPORTED DATES				
Procedure	Accession	Collected	Received	Verified/Reported
Antimicrobial Susceptibility - Nonfermenter	20-322-402257	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00

END OF CHART

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Unless otherwise indicated, testing performed at: