



SAMPLE REPORT

09-May-1990 Female

P: 1300 688 522
E: info@nutripath.com.au

16 HARKER STREET
BURWOOD VIC 3125

Dr.SAMPLE REPORT
TEST HEALTH CENTRE
123 TEST STREET
BURWOOD VIC 3125

LAB ID : 3814138
UR NO. :
Collection Date : 09-May-2022
Received Date:09-May-2022



3814138

Nasopharyngeal Bacterial Culture Screen

Organism	Growth	Range	Classification
Staphylococcus Coagulase Negative	4+ *H	NEG - 3	Possible Pathogen
MARCoNS Classification	POSITIVE		
Klebsiella pneumoniae	3+		Non-Pathogen

COMMENTS:

Commensal bacteria are usually neither pathogenic nor beneficial. MARCoNS is a multiple antibiotic resistant coag negative staph that resides in the deep nasal passages of most people with no significant health concerns. If test results indicate coag neg staph is present with two or more antibiotics showing Resistant or Intermediate susceptibility, these results are classified as MARCoNS whether Methicillin is resistant or not and whether there is a large amount or small amount. Additional comments on isolated bacteria can be found at the end of this report.

ANTIBIOTIC SENSITIVITIES - MARCoNS or MRSA

Staphylococcus
Coagulase
Negative

Antibiotics

Susceptibl

Ciprofloxacin	S
Clindamycin	S
Daptomycin	S
Fusidic Acid	S
Gentamycin.	S
Mupirocin	R
Levofloxacin	S
Linezolid	S
Moxifloxacin	S
Oxacillin (Methicillin)	S
Trimethoprim/Sulpha	S
Erythromycin	R
Penicillin.	S
Quindup/Dalfo	S
Rifampicin	S
Teicoplanin	S
Vancomycin.	S

LEGEND

S = Sensitive	R = Resistant	N/A = Not Tested
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ANTIBIOTIC SENSITIVITIES

**Klebsiella
oxytoca**

Antibiotics

Susceptibl

Ampicillin	R
Ampicillin/Sulbactam	R
Piperacillin/Tazobacta	N/A
Ciprofloxacin	S
Cefazolin	N/A
Ceftazidime	N/A
Ceftriaxone	N/A
Cefepime	N/A
Imipenem	N/A
Gentamycin.	N/A
Levofloxacin	N/A
Trimethoprim/Sulpha	S
Tobramycin	N/A

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Bacterial Organism Comments:

MARCoNS is a multiple antibiotic resistant coag negative staph that resides in the deep nasal passages of most people with no significant health concerns. However, in genetically susceptible patients (identified through HLA DQ-DR testing), these organisms are commonly seen in biotoxin illness, where they lower MSH levels (an anti-inflammatory neuropeptide) and produce biofilms which form a barrier to immune defenses and anti-infection therapy. Biofilm production in bacteria, mould or yeast may account for some cases of chronic nasal and sinus congestion and inflammation. MARCoNS releases exotoxins which lead to increased inflammation (decreased MSH) and hemolysins which disrupt RBCs and endothelial cells.

MARCoNS infections can be minimised using BEG (Bactroban, EDTA, Gentamycin) nasal spray.

If test results indicate coag neg staph is present with two or more antibiotics showing Resistant or Intermediate susceptibility, these results are classified as MARCoNS whether Methicillin is resistant or not and whether there is a large amount or small amount.

(Ref: Dr. Ritchie Shoemaker, 05/09/14)

Treatment Suggestion:

Colloidal Silver with EDTA nasal spray is the suggested treatment for Marcons, all other bacteria, mold and yeast.

Colloidal Silver alone at 25-50 ppm is also effective.

Dosage : 2 sprays each nostril 3x/d for 30-60 days.

If biotoxins exposure is suspected, biotoxin load may be reduced through removal from the source of exposure and the use of compounded Cholestyramine.

FURTHER ASSESSMEMENTS:

In commencing the treatment process, other baseline assessments include Gliadin and Transglutaminase Antibody levels, anti-Cardiolipin Antibodies, and Androgen studies (DHEAS, SHBG, Testosterone).

Thereafter, specific moulds/biotoxins assays may also be of use.

Assays include MSH, ADH, Osmolality, C3a, C4a, TGFb1, MMP-9 and VEGF.

Nasopharyngeal- Yeast Culture Screen

Yeast Organism Comments:

Fungal cultures are held for 14 days. Any yeast or mould isolated within the first 7 days, will be reported.