

CLINICIAN BENEFITS

TruUTI utilizes quantitative Real-Time Polymerase Chain Reaction (qPCR) to rapidly analyze your patient's sample in 24 hours. RT-PCR technology precisely detects the correct pathogen(s) and identifies antibiotic drug resistance. This allows providers the ability to prescribe timely and effective treatment.

THE VERODX DIFFERENCE

- Detects polymicrobial infections
- PharmD interpretation
- Easy ordering platform
- Integrates with your EMR/ EHR
- Aids in antibiotic stewardship
- Unaffected by concurrent antibiotic use

WHAT WE TEST FOR

BACTERIUM

- * *Acinetobacter baumannii*
- * *Chlamydia trachomatis*
- * *Citrobacter freundii*
- * *Enterobacter aerogenes*
- * *Enterobacter cloacae*
- * *Enterococcus faecalis*
- * *Enterococcus faecium*
- * *Escherichia coli*
- * *Klebsiella oxytoca*
- * *Klebsiella pneumoniae*
- * *Morganella morganii*
- * *Mycoplasma genitalium*
- * *Mycoplasma hominus*
- * *Neisseria gonorrhoeae*
- * *Proteus mirabilis*
- * *Proteus vulgaris*
- * *Providencia stuartii*
- * *Pseudomonas aeruginosa*
- * *Serratia marcescens*
- * *Staphylococcus aureus*
- * *Staphylococcus saprophyticus*
- * *Streptococcus agalactiae*
- * *Streptococcus pyogenes*
- * *Treponema pallidum (syphilis)*
- * *ureaplasma parvum*
- * *Ureaplasma urealyticum*

FUNGAL

- * *Candida albicans*
- * *Candida auris*
- * *Candida glabrata*
- * *Candida parasilopsis*
- * *Candida tropicalis*

PARASITIC

- * *Trichomonas vaginalis*

ANTIBIOTIC RESISTANCE GENES

- * Class A beta lactamase CTX-M1 (15), M2 (2), M9 (9), M8/25
- * Class A beta lactamase SHV, KPC Groups
- * Class B metallo beta lactamase IMP, NDM, VIM Groups
- * Class D oxacillinase OXA-48, -51
- * Extended Spectrum Betalactamases Resistance Gene TEM G236S
- * Macrolide Lincosamide Streptogramin Resistance *ermB*, *ermC*, *ermA*
- * Methicillin Resistance Gene *mecA*
- * Tetracycline Resistance Gens *tetB*, *tetM*
- Trimethoprim/Sulfamethoxazole
- * Resistance *dfr*(A1,A5), *sul*(1,2)
- * Vancomycin Resistance Genes *VanA*, *VanB*

48h

Accurate diagnosis
as soon as 48 hours


 Vero Diagnostics
 3216 S Alston Ave
 Durham, NC 27713
 Phone: 919-341-1256


 Director: Dr. Manoj Tyagi,
 PhD. NRCC, FAACC/FACB,
 Fax: N/A

Patient Name: Mickey Mouse **Date of Birth:** 10/05/1995 **Gender:** Male **Race:**
Facility Information
Ordering Provider: Dr. Faraz Test
Facility: Test Facility
Facility Phone: 000000000
Facility Fax: 1111111111

Specimen Information
ACC D2210130034
Collection Date: 10/11/2022 **Report Date:** 10/13/2022
Received Date: 10/12/2022 **Sample Type:** Urine
Notes:
PATHOGENS DETECTED

Organism	Estimates Copies/mL	Estimated Mic. Load
Escherichia coli	1 x 10 ⁶	High
Ureaplasma parvum	1 x 10 ³	Low
Ureaplasma urealyticum	1 x 10 ²	Low

RESISTANCE GENES DETECTED

	mecA MRSA: This gene is associated with potential resistance to Methicillin, Ampicillin, Penicillin, Oxacillin, Monobactams, Carbapenems, Cephalosporins, Clavulanate, and Ceftazidime. May use Ceftaroline in staph aureus, staph epi, and staph h
	tetB, tetM These genes are associated with potential resistance to tetracycline antibiotics. Smaller chance of crossover resistance to doxycycline and minocycline.

ATACHOICE™ Therapeutic Guidance

Drug Allergies:

Notes from Ordering Physician:

Notes from Pharmacist:

Medication Review

Category	Medication	Route	Dose	Consideration
First Line	Ceftriaxone	IM/IV	500mg - 1 gram IM/IV q24h x 1 dose up to 3 doses or TBD by physician	No renal adjustment necessary.
First Line	Cephalexin	PO	500mg PO BID x 5-7 days uncomplicated	If CrCl < 30 mL/min, adjust dose 250mg q 8-12h. If CrCl < 15 mL/min, adjust dose 250mg q 24h. If CrCl < 5 mL/min, adjust dose 250mg q 48-60h.

Electronically approved on 10/13/2022 by: superadmin

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