



LAB #: F000000-0000-0  
 PATIENT: Sample Patient  
 ID: PATIENT-S-00007  
 SEX: Female  
 AGE: 4

CLIENT #: 12345  
 DOCTOR:  
 Doctors Data, Inc.  
 3755 Illinois Ave.  
 St. Charles, IL 60174 USA

## Comprehensive Stool Analysis / Parasitology x2

### BACTERIOLOGY CULTURE

#### Expected (Beneficial) flora

4+ Bacteroides fragilis group  
 NG Bifidobacterium spp.  
 4+ Escherichia coli  
 1+ Lactobacillus spp.  
 NG Enterococcus spp.

#### Commensal (Imbalanced) flora

4+ Gamma hemolytic strep  
 1+ Beta strep, group B  
 4+ Hemolytic Escherichia coli  
 2+ Mucooid Escherichia coli

#### Dysbiotic flora

NG = No Growth

### CLOSTRIDIUM CULTURE

Clostridium spp. 3+

Clostridia are dominant inhabitants of the human intestine. Although most are not virulent, many species produce potentially harmful products, including toxins, amines, indole, and ammonia. Clostridia in the intestine change the redox status of the colon; they also produce molecules such as short chain fatty acids. These bacteria exert effects on host immunity, which extend well beyond the intestine.

### BACTERIOLOGY INFORMATION

**Expected (Beneficial) bacteria** make up a significant portion of the total microflora in a healthy & balanced GI tract. These beneficial bacteria have many health-protecting effects in the GI tract including manufacturing vitamins, fermenting fibers, digesting proteins and carbohydrates, and propagating anti-tumor and anti-inflammatory factors.

**Commensal (Imbalanced) bacteria** are usually neither pathogenic nor beneficial to the host GI tract. Imbalances can occur when there are insufficient levels of beneficial bacteria and increased levels of commensal bacteria. Certain commensal bacteria are reported as dysbiotic at higher levels.

**Dysbiotic bacteria** consist of known pathogenic bacteria and those that have the potential to cause disease in the GI tract. They can be present due to a number of factors including: consumption of contaminated water or food, exposure to chemicals that are toxic to beneficial bacteria; the use of antibiotics, oral contraceptives or other medications; poor fiber intake and high stress levels.

### YEAST CULTURE

#### Normal flora

1+ Candida albicans  
 1+ Rhodotorula glutinis/mucilaginosa

#### Dysbiotic flora

### MICROSCOPIC YEAST

<b>Result:</b>	<b>Expected:</b>
Many	None - Rare

The microscopic finding of yeast in the stool is helpful in identifying whether there is proliferation of yeast. Rare yeast may be normal; however, yeast observed in higher amounts (few, moderate, or many) is abnormal.

### YEAST INFORMATION

**Yeast** normally can be found in small quantities in the skin, mouth, intestine and mucocutaneous junctions. Overgrowth of yeast can infect virtually every organ system, leading to an extensive array of clinical manifestations. Fungal diarrhea is associated with broad-spectrum antibiotics or alterations of the patient's immune status. Symptoms may include abdominal pain, cramping and irritation. When investigating the presence of yeast, disparity may exist between culturing and microscopic examination. Yeast are not uniformly dispersed throughout the stool, this may lead to undetectable or low levels of yeast identified by microscopy, despite a cultured amount of yeast. Conversely, microscopic examination may reveal a significant amount of yeast present, but no yeast cultured. Yeast does not always survive transit through the intestines rendering it unviable.

### Comments:

Date Collected: 12/13/2009  
 Date Received: 12/17/2009  
 Date Completed: 1/3/2010

\* *Aeromonas, Campylobacter, Plesiomonas, Salmonella, Shigella, Vibrio, Yersinia, & Edwardsiella tarda* have been specifically tested for and found absent unless reported.

v5.09





















