

Staphylococcus aureus, Strain NY-315

Catalog No. NR-46244

Product Description: *Staphylococcus aureus* (*S. aureus*), strain NY-315 was isolated in 2006 from the blood of an 81-year-old female ER patient with cellulitis and bacteremia in New York, USA. *S. aureus*, strain NY-315 is a hospital-acquired methicillin-resistant *S. aureus* (HA-MRSA) strain.

Lot¹: 62436162

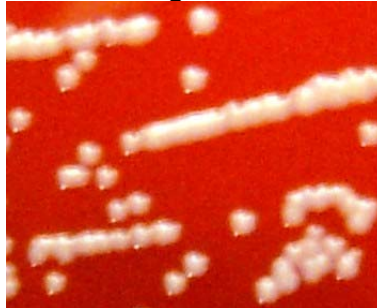
Manufacturing Date: 13MAR2014

TEST	SPECIFICATIONS	RESULTS
Phenotypic Analysis Cellular morphology Colony morphology ² Motility (wet mount) Hemolysis ² Biochemical characterization: Catalase Coagulase ³ VITEK [®] 2 Compact (GP card) VITEK [®] MS (MALDI-TOF)	Gram-positive cocci Report results Report results Report results Positive Report results Consistent with <i>S. aureus</i> Consistent with <i>S. aureus</i>	Gram-positive cocci Circular, low convex, entire, smooth and gray (Figure 1) Non-motile β-hemolytic Positive Positive Consistent with <i>S. aureus</i> Consistent with <i>S. aureus</i>
Antibiotic Susceptibility Profile VITEK [®] (AST-GP71 card): ⁴ Beta-lactamase ⁵ Cefoxitin screen Benzylpenicillin Oxacillin Gentamicin Ciprofloxacin Levofloxacin Moxifloxacin Clindamycin (inducible resistance) Erythromycin Clindamycin Quinupristin/dalfopristin Linezolid Daptomycin Vancomycin Minocycline Tetracycline Tigecycline Nitrofurantoin Rifampicin Trimethoprim/sulfamethoxazole Etest [®] antibiotic test strips: ⁶ Chloramphenicol ⁷ Teicoplanin ⁷	Report results Report results Report results Resistant Sensitive Report results Resistant Report results Report results Resistant Resistant Sensitive Sensitive Sensitive Sensitive Sensitive Sensitive Sensitive Sensitive Report results Report results Sensitive Sensitive Intermediate Report results	Positive Positive Resistant (≥ 0.5 µg/mL) Resistant (≥ 4 µg/mL) Sensitive (≤ 0.5 µg/mL) Resistant (≥ 8 µg/mL) Resistant (≥ 8 µg/mL) Resistant (= 4 µg/mL) Negative Resistant (≥ 8 µg/mL) Resistant (≥ 8 µg/mL) Sensitive (= 0.5 µg/mL) Sensitive (= 2 µg/mL) Sensitive (= 0.5 µg/mL) Sensitive (≤ 0.5 µg/mL) Sensitive (≤ 0.5 µg/mL) Sensitive (≤ 1 µg/mL) Sensitive (≤ 0.12 µg/mL) Sensitive (≤ 16 µg/mL) Sensitive (≤ 0.5 µg/mL) Sensitive (≤ 10 µg/mL) Sensitive (= 3.0 µg/mL) ⁸ Sensitive (= 1.0 µg/mL)
Genotypic Analysis Sequencing of 16S ribosomal RNA gene (~ 1490 base pairs)	Consistent with <i>S. aureus</i>	Consistent with <i>S. aureus</i>
Viability (post-freeze)²	Growth	Growth

¹*S. aureus*, strain NY-315 was deposited to BEI Resources as part of the NARSA collection. NR-46244 was produced by inoculation of the deposited material into Tryptic Soy broth and grown 30 hours at 37°C in an aerobic atmosphere. Broth inoculum was added to Tryptic Soy agar

- with 5% defibrinated sheep blood kolles which were grown 21 hours at 37°C in an aerobic atmosphere to produce this lot. Purity of this lot was assessed for 7 days under propagation conditions.
- ²20 hours at 37°C in an aerobic atmosphere on Tryptic Soy agar with 5% defibrinated sheep blood
- ³4 hours at 37°C in rabbit serum with 0.15% EDTA (Coagulase Plasma BBL™ 240827)
- ⁴Minimum Inhibitory Concentration (MIC); MIC Interpretation Guideline: CLSI M100-S22 (2012)
- ⁵The production of beta-lactamase was detected using a Cefinase™ paper disc (BBL™ 231650).
- ⁶24 hours at 37°C in an aerobic atmosphere on Mueller Hinton agar
- ⁷For both chloramphenicol (bioMérieux Etest® 412308) and teicoplanin (bioMérieux Etest® 412459), a MIC ≤ 8 µg/mL is sensitive, a MIC = 16 µg/mL is intermediate and a MIC ≥ 32 µg/mL is resistant.
- ⁸*S. aureus*, strain NY-315 was deposited as having an intermediate susceptibility to chloramphenicol. ATCC® quality control determined that NR-46244 is sensitive to chloramphenicol. Repeat testing confirmed ATCC®'s initial results.

Figure 1



Date: 09 JUL 2014

Signature:

Title:

Technical Manager, BEI Authentication or designee

ATCC®, on behalf of BEI Resources, hereby represents and warrants that the material provided under this certificate has been subjected to the tests and procedures specified and that the results described, along with any other data provided in this certificate, are true and accurate to the best of ATCC®'s knowledge.

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