

FEMALE ECOLOGIX™ REPORT

REPORT ID: S000636

TEST REPORTED: 29/12/2019
 TEST RECEIVED: 01/12/2019
 PATIENT NAME:
 PATIENT DOB:
 GENDER:

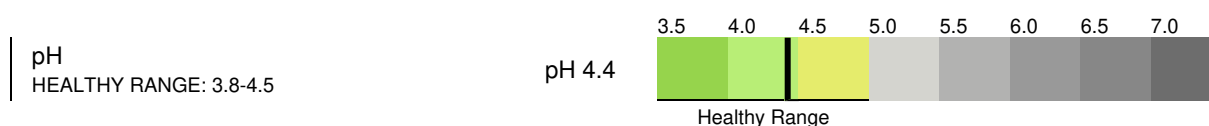
REPORT STATUS: COMPLETED
 CLINICIAN NAME:
 ACCESSION NO: 34567
 SAMPLE TYPE: VAGINAL SWAB

The Phylobioscience Female EcologiX™ profile utilises quantitative real-time PCR (qRT-PCR) for analysis of vaginal microbiota. qRT-PCR results are reported as quantification of microbial gene of interest copies in a community sample relative to endogenous gene control (i.e. gut, vaginal). qRT-PCR reactions are performed using Taqman technology. The results show representative numbers proportional to normalised qRT-PCR value.

Vaginal pH

RESULTS:

PH RANGE:



Vaginal Health Markers (ELISAS)

RESULTS:

RATING:

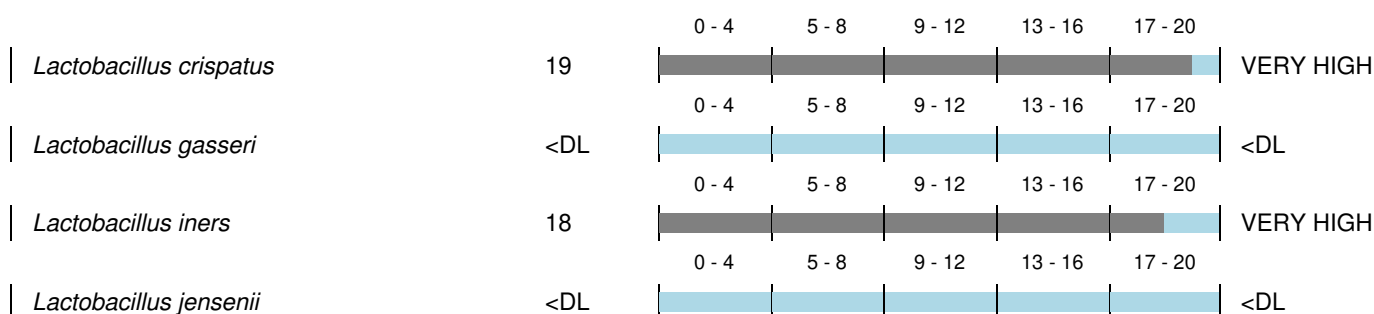


▲ Health immune markers are quantified by using enzyme-linked immunosorbent assay (ELISA) which is based on antigen-antibody reactions. Please refer to the Phylobioscience interpretive guide for more details on health markers.

Lactobacillus

RESULTS:

ABUNDANCE:



▲ Recent work has classified the vaginal microbiota into five core Community State Types (CST). These groups are distinguished on whether communities are dominated by *Lactobacillus* spp., and by the species of *Lactobacillus* present. To learn about associations between CST and clinical conditions, please refer to the Phylobioscience interpretive guide.

Opportunistic Bacteria

RESULTS:

ABUNDANCE:

		0 - 4	5 - 8	9 - 12	13 - 16	17 - 20	
<i>Atopobium vaginae</i>	<DL						<DL
<i>BVAB2</i>	<DL						<DL
<i>Gardnerella vaginalis</i>	<DL						<DL
<i>Megasphaera 1</i>	<DL						<DL
<i>Megasphaera 2</i>	<DL						<DL
<i>Mobiluncus curtisii</i>	<DL						<DL
<i>Mobiluncus mulieris</i>	<DL						<DL
<i>Prevotella bivia</i>	<DL						<DL
<i>Ureaplasma urealyticum</i>	<DL						<DL

▲ Opportunistic Bacteria: Opportunistic bacteria live in symbiosis with the host under normal conditions. To learn more about associations between opportunistic bacteria and clinical conditions, please refer to the Phylobioscience interpretive guide. <DL: Microorganism is not detected/below detection limit.

Pathobionts

RESULTS:

ABUNDANCE:

		0 - 4	5 - 8	9 - 12	13 - 16	17 - 20	
<i>Enterococcus faecalis</i>	<DL						<DL
<i>Escherichia coli</i>	<DL						<DL
<i>Staphylococcus aureus</i>	<DL						<DL
<i>Streptococcus agalactiae</i>	<DL						<DL

▲ Pathobionts: Pathobionts are enteric bacteria that have entered a new environment such as the genital tract. To learn about associations between pathobiont and clinical conditions, please refer to the Phylobioscience interpretive guide. <DL: Microorganism is not detected/below detection limit.

Opportunistic Fungi

RESULTS:

ABUNDANCE:

		0 - 4	5 - 8	9 - 12	13 - 16	17 - 20	
<i>Candida albicans</i>	<DL						<DL
<i>Candida glabrata</i>	<DL						<DL



▲ Opportunistic Fungi: Opportunistic fungi may induce pathogenesis under special conditions in the genital tract. These conditions may promote overgrowth of these species and transition to pathogenic growth mode (hyphae). To learn more about associations between opportunistic fungi and clinical conditions, please refer to the Phylobioscience interpretive guide. <DL: Microorganism is not detected/below detection limit.

Test Information: The Female EcologiX™ profile measures the composition of vaginal microbiota species and host immune markers using modern and culture-independent technologies. Results of this test cannot be used for diagnosis of disease or health conditions. Detection or lack of detection of microorganism or immune markers in this test, does not imply diagnosis of disease or clinical condition. The Female EcologiX™ test should not replace routine examinations with doctors and healthcare professionals i.e. smear tests.

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Disclaimer: This test was developed, and its performance characteristics determined by Phylo Bioscience. This test is not intended for use by consumers or physicians as a means to cure, treat, prevent, diagnose or mitigate any disease or other medical condition. The information contained in this document is in no way to be taken as prescriptive nor to replace the physicians duty of care and personalised care practices.

Lab Director:
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