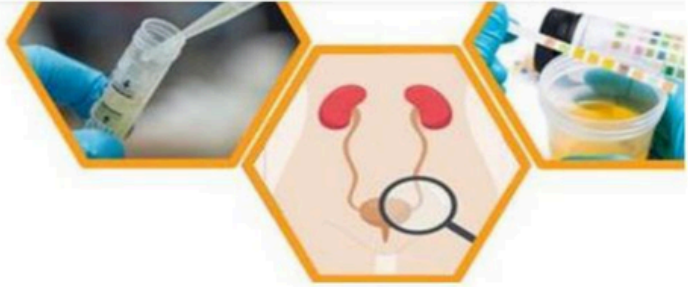
ENCOMPASS DIAGNOSTICS



Urinary Tract Infection (UTI)

Reduce unnecessary testing, and improve patient outcomes with our molecular PCR UTI panel.



Tomorrow's Results.

Today's Peace of Mind.

NEXT DAY RESULTS FOR ALL COMMON INFECTIONS



Urinary Tract Infection Panel

Bacterial

Acinetobacter baumannii
Citrobacter freundii
Citrobacter koseri
Enterobacter cloacae complex
Enterococcus faecalis
Enterococcus faecium
Escherichia coli
Klebsiella oxytoca
Klebsiella pneumoniae
Morganella morganii
Proteus mirabilis
Providencia stuartii
Pseudomonas aeruginosa
Serratia marcescens
Staphylococcus aureus
Staphylococcus saprophyticus
Streptococcus agalactiae GBS
Ureaplasma urealyticum

Fungal

Candida albicans
Candida glabrata
Candida parapsilosis
Candida tropicalis

Resistance Genes

Ampicillin (ACT / MIR, FOX, ACC)
Class A beta-lactamase (blaSHV, blaKPC)
Class A beta-lactamase (CTX-M1, CTX-M2, CTX-M8/25, CTX-M9)
Class B beta-lactamase (blaNDM, blaIMP, blaVIM)
Extended spectrum beta-lactamases (blaTEM)
Fluoroquinolone (qnrA, qnrB, qnrS)
Methicillin (mecA)
Trimethoprim and Sulfonamide (dfrA1, dfrA5, sul1, sul2)
Vancomycin (vanA, vanB)

ENCOMPASS DIAGNOSTICS

Accession Number: xxxx
Test Number: xxxxxxxxx
Date Test Performed: xx-xx-xxxx
Date Test Released: xx-xx-xxxx
Lab Director: xxxxxxxxx xxxxxxxxx

Molecular Pathology Report

UTI

Patient Information	Specimen Information	Facility Information
Patient Record No: xxxx **Name:** xxxx xxxx **DOB:** xx-xx-xxxx **Gender:** xxxxxx **Address:** xxxxxxxxx, xxxx **Phone** (xxx) xxx-xxxx	**Reference ID:** xxxx **Collection Date:** xx-xx-xxxx **Received Date :** xx-xx-xxxx **Accession Date:** xx-xx-xxxx **Specimen Type:** xxxx **Specimen Location:**	**Facility:** xxxxxxxx **Address:** xxxxxxxxx, xxxx **Phone:** (xxx) xxx-xxxx **Physician Name:** xxxxxxxxx xxxxxxxx **Physician NPI:** xxxxxxxxx

Pathogens Detected

Gram Positive Bacteria

Target Name	Result	Microbial Load	CFU/mL Equivalence
Enterococcus faecalis	Detected	HIGH	>100,000 [5.0000 - 16.9999 Ct]
Escherichia coli	Detected	MED	10,000 - 100,000 [17.0001 - 24.9999 Ct]

Gram Negative Bacteria

Target Name	Result	Microbial Load	CFU/mL Equivalence
Klebsiella pneumoniae	Detected	HIGH	>100,000 [5.0000 - 16.9999 Ct]
Morganella morganii	Detected	HIGH	>100,000 [5.0000 - 16.9999 Ct]
Klebsiella oxytoca	Detected	HIGH	>100,000 [5.0000 - 16.9999 Ct]
Citrobacter koseri	Detected	HIGH	>100,000 [5.0000 - 16.9999 Ct]

Fungal

No microbes detected

Viral

No microbes detected

Protozoal

No microbes detected

Resistances Detected

Target Name	Result
Class A beta-lactamase (blaSHV, blaKPC) resistance	Detected

ENCOMPASS DIAGNOSTICS

Therapeutic Guidance
UTI

RxMDx TREATMENT NAVIGATOR

Patient: XXXX XXXXXX	Accession: XXXX	Physician: XXXXX XXXXXX	Provider: XXXX XXXXXXXX

This report is provided for informational purposes only and does not constitute a medical diagnosis or prescription. The Lab results and recommendations are based on and are limited to the specimen source, organisms, resistance, allergies, and ICD-10 codes. These suggestions do not take into account the patient's full medical history, physical examination findings, or other diagnostic information. All diagnostic evaluations, clinical interpretations, and treatment decisions must be made by the treating physician. The treatment options listed in this report are generated by the RxMDx Treatment Navigator software, which synthesizes data from microbiological results and recognized clinical guidelines. These options are drawn from reputable sources such as: WHO, IDSA, NLM, NIAID, CDC, NIH, ATS, FDA

Primary Oral Option(s)

Treatment	Success	Cost	Dosage
Fosfomycin Tromethamine (Monurol, Monuril, Fosfocin),FDA	85%	$	3000 mg, Oral 1x/day, 1 days
Meropenem (Merrem, Meronem),FDA	95%	$$	1000 mg, IV 3x/day, 7 days

Alternative Oral Option(s)

Treatment	Success	Cost	Dosage
Amikacin (Amikin)	75%	$$	1000 mg, IV 1x/day, 7 days,
Imipenem/Cilastatin (Primaxin, Zienam)	95%	$$	500 mg, IV 4x/day, 7 days

IV / Escalation Therapy

Treatment	Success	Cost	Dosage
Meropenem, (Merrem, Meronem)	95%	$$	1000 mg, IV 3x/day, 7 days

Not Recommended (Resistance-Guided Exclusions)

Treatment	Descrption
Ceftriaxone	Not recommended because the detected CTX-M and blaTEM genes indicate Extended-Spectrum Beta-Lactamase (ESBL) production, which confers resistance to third-generation cephalosporins.
Nitrofurantoin	Not recommended because Providencia stuartii, a high-severity pathogen detected in this specimen, is intrinsically resistant to nitrofurantoin.
Ciprofloxacin	Not recommended as ESBL-producing pathogens like the detected E. coli and Providencia stuartii often exhibit high rates of co-resistance to fluoroquinolones.
Ampicillin	Not recommended because ESBL production (CTX-M) and Providencia stuartii naturally confer resistance to aminopenicillins.

[$] - If less than 100 [$$] - 100 to 500 [$$$] - If > 500 Allergies: Not provided

ENCOMPASS DIAGNOSTICS

SPECIMEN COLLECTION METHOD
URINE

MATERIALS PROVIDED

1 90mL Urine Collection Cup
1 specimen bag
1 molecular transport tube
1 UPS/FedEx Lab Pak mailer



COLLECTION DO'S & DON'TS

DO - Clean the genital area with soap and water before collecting the sample

DO - Ship the sample as soon as possible after collection. EDx stability testing shows samples as viable at room temperature for at least 21 days after collection.

DO NOT - Use Lidocaine gel. If collecting urine via catheter, Lidocaine gel can render sample invalid or give false negative test results.

DO NOT - Take antibiotics. Patient must be off all antibiotics for 2 days prior to collection. This is optimal. However, if not possible, the test can still be run.

If ordering UA Biomarkers please ship sample within 48 hours of collection. Sample must arrive at the lab within 5 days.

Patient Information

Step 1: MARK SAMPLE

Use a permanent marker to write patient name, date of birth and sample collection date on 90mL Urine Collection Cup.

Step 2: SIGN LAB REQ

Please have the patient sign the lab requisition form accepting financial responsibility. Be sure the physician has also signed the lab requisition form confirming consent.

Step 3: INSURANCE INFORMATION

Submit patient face sheet and demographics with insurance information or both sides of a patient's insurance card. If this is a prepaid test skip this step.

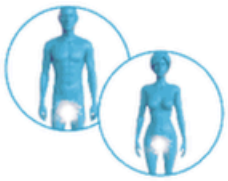




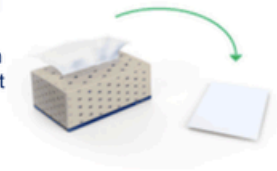


COLLECTING URINE SAMPLE

Step 1: Wash hands thoroughly. Cleanse all areas around the urinary exit with soap and water. With a clean tissue, blot off the urethra without touching any part of genital area with hands.



Step 2: Spread a clean tissue on a surface close to the toilet bowl. Remove the lid from the urine cup and place it top-side down on the tissue. Place the open urine cup next to the tissue, being careful not to touch the rim of the cup or lid with fingers or body surface at any time.



Step 3:

For Women: Before urination, separate the labia, avoid touching the urethra opening.

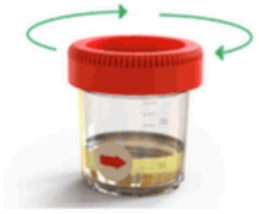
For Men: Before urination, retract the foreskin (if uncircumcised), avoid touching the urethra opening.



Step 4: Hold the empty cup in one hand. Begin urination into toilet, not cup, stop urination partway through then continue urination into cup. Keep urinating into cup until the amount in the cup is level with the red arrow sticker. Do not fill the cup more than 1/2 full. Finish urinating into toilet



Step 5: Secure the lid tightly by placing the lid directly on the cup and turning until you hear two clicks. This indicates the cup is locked.



1.Place the Swab Specimen Tube or 2mL Vial into the center/sealable pocket of Biohazard Lab Bag.
2.Place folded Lab Requisition Form into the short pocket of the Lab Bag.
3.**IMPORTANT:** Place only one Sample and one Lab Requisition in each Lab Bag.
4.Peel strip off Lab Bag to expose adhesive backing and follow instructions printed on Bag to create a continuous, airtight seal.
5.Place the sealed Lab Bag into the EDx Shipping Box (shipping label already attached to bottom of box).
6.Close the EDx Shipping Box and seal with the clear sealing sticker or a piece of tape.
7.You can add multiple completed lab bags into the EDx Shipping Box.

DO NOT DISINFECT THE WOUND PRIOR TO SAMPLING UNLESS OTHERWISE NOTED



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encompassdiagnostics.com

Revision 06.16.2026