BAYSHORE LIFE SCIENCES

URINE PCR MOLECULAR REQUISITION

Bayshore Pathology | 18338 Murdoch Circle, Port Charlotte, FL 33948
P: (941)313-9009 | F: (941) 623-9532 | CLIA #: 10D2072632 | CAP #: 9441362

PATIENT INFORMATION

NAME, LAST (OR CODE NAME) Please Print | FIRST | AGE | M/F

STREET | PHONE NO ( ) | DATE OF BIRTH MM / DD / YYYY

CITY | STATE | ZIP

SPECIMEN TYPE ☐ Swab | COLLECTED DATE:_____ TIME_____ ☐ AM ☐ PM | PATIENT ALLERGIES

PROVIDER / ACCOUNT INFORMATION

BILLING / INSURANCE INFORMATION - *Please attach demographic information*

BILL TO ☐ MEDICARE ☐ MEDICAID ☐ INSURANCE ☐ PATIENT ☐ CLIENT

ALL INSURANCES RELATIONSHIP TO SUBSCRIBER ☐ CHILD ☐ SELF ☐ SPOUSE ☐ OTHER_____

INSURANCE CARRIER

INS. ID# | GROUP# | SUBSCRIBER NAME | DATE OF BIRTH

INSURANCE ADDRESS | CITY | STATE | ZIP

SECONDARY INSURANCE CARRIER | INS. ID# | GROUP # | SUBSCRIBER'S NAME | DATE OF BIRTH

SECONDARY INSURANCE ADDRESS | CITY | STATE | ZIP

REASON FOR TESTING

MEDICAL NECESSITY / NOTES / PATIENT HISTORY

PROVIDER SIGNATURE ATTESTATION

Medicare patients must follow CMS rules regarding medical necessity and FDA approval guidelines. Tests orders must include symptoms, diseases, and reasons for testing as indicated in the patient's medical record. "Routine" diagnosis codes do not indicate medical necessity. Please include comorbidities which are currently affecting the patient. Refer to NCD/LCD for further details.

PROVIDER NAME (PRINT): _____ **PROVIDER SIGNATURE (REQUIRED):** _____ **DATE:** _____

☐ URINE PCR PATHOGEN PANEL

☐ Acinetobacter baumannii	☐ Enterococcus faecalis	☐ Klebsiella oxytoca, pneumoniae	☐ Providencia stuartii	☐ Staphylococcus aureus	☐ Ureaplasma urealyticum	☐ Candida krusei
☐ Citrobacter freundii	☐ Enterococcus faecium	☐ Morganella morganii	☐ Pseudomonas aeruginosa	☐ Staphylococcus saprophyticus	☐ Candida albicans	☐ Candida parapsilosis
☐ Enterobacter aerogenes, cloacae	☐ Escherichia coli	☐ Proteus mirabilis, vulgaris	☐ Serratia marcescens	☐ Streptococcus agalactiae (Group B)	☐ Candida glabrata	☐ Candida tropicalis

☐ URINE PCR W REFLEX TO STI PCR PATHOGEN PANEL

☐ Chlamydia trachomatis	☐ Mycoplasma genitalium	☐ Neisseria gonorrhoeae	☐ Ureaplasma parvum	☐ Human papillomavirus 16	☐ Human papillomavirus 6	☐ Herpes simplex virus 1
☐ Gardnerella vaginalis	☐ Mycoplasma hominis	☐ Treponema pallidum	☐ Trichomonas vaginalis	☐ Human papillomavirus 18	☐ Human papillomavirus 11	☐ Herpes simplex virus 2

☐ URINE PCR COMPREHENSIVE PATHOGEN PANEL

☐ Acinetobacter baumannii	☐ Candida krusei	☐ Enterococcus faecalis	☐ HPV 11	☐ Morganella morganii	☐ Providencia stuartii	☐ Treponema pallidum
☐ Atopium vaginae	☐ Candida lusitaniae	☐ Enterococcus faecium	☐ HPV 16	☐ Mycoplasma genitalium	☐ Pseudomonas aeruginosa	☐ Trichomonas vaginalis
☐ Bacteroides fragilis	☐ Candida parapsilosis	☐ Escherichia coli	☐ HPV 18	☐ Mycoplasma hominis	☐ Serratia marcescens	☐ Ureaplasma parvum
☐ BVAB2	☐ Candida tropicalis	☐ Gardnerella vaginalis	☐ HPV 6	☐ Neisseria gonorrhoeae	☐ Staphylococcus aureus	☐ Ureaplasma urealyticum
☐ Candida albicans	☐ Chlamydia trachomatis	☐ Haemophilus ducreyi	☐ Klebsiella aerogenes	☐ Prevotella bivia	☐ Staphylococcus epidermidis	
☐ Candida auris	☐ Citrobacter freundii	☐ Herpes simplex virus 1	☐ Klebsiella oxytoca	☐ Proteus mirabilis	☐ Staphylococcus saprophyticus	
☐ Candida glabrata	☐ Enterobacter cloacae	☐ Herpes simplex virus 2	☐ Klebsiella pneumoniae	☐ Proteus vulgaris	☐ Streptococcus agalactiae	

URINE ICD-10 CODES - *MUST document all that apply*

☐ B20 - Human immunodeficiency virus [HIV] disease	☐ Z51.0 - Encounter for antineoplastic radiation therapy	☐ Z99.2 - Dependence on renal dialysis
☐ D84.821 - Immunodeficiency due to drugs	☐ Z79.52 - Long-term (current) use of systemic steroids	☐ Z93.6 - Other artificial openings of urinary tract
☐ D84.89 - Other immunodeficiencies	☐ Z79.899 - Other long-term (current) drug therapy	☐ Z96.0 - Presence of urogenital implants
☐ D70.9 - Neutropenia, unspecified	☐ E10.9 - Type 1 diabetes mellitus without complications	☐ N31.9 - Neuromuscular dysfunction of bladder, unspecified (neurogenic bladder)
☐ D71 - Functional disorders of polymorphonuclear neutrophils	☐ E11.9 - Type 2 diabetes mellitus without complications	☐ N13.8 - Other obstructive and reflux uropathy
☐ Z94.0 - Kidney transplant status	☐ E10.65 - Type 1 diabetes mellitus with hyperglycemia	☐ Q64.0 - Epispadias
☐ Z94.1 - Heart transplant status	☐ E11.65 - Type 2 diabetes mellitus with hyperglycemia	☐ C79.82 - Secondary malignant neoplasm of genital organs

OTHER URINE CODES: _____

STI ICD-10 CODES - *MUST document all that apply*

☐ N89.8 - Other spec. non-inflammatory disorders of vagina	☐ R30.0 - Dysuria	☐ A51.31 - Condyloma laturn
☐ N34.2 - Other urethritis	☐ R36.9 - Urethral discharge, inspec.	☐ A56.2 - Chlamydial infection genitourinary tract, unpsec.
☐ N76.89 - Other spec. inflammation of vagina/vulva	☐ N76.81 - Mucositis (ulcer of vagina/vulva	☐ A60.00 - Herpesviral infection of urogenital system, unspec.
☐ B37.49 - Other urogenital candidiasis	☐ N76.5 - Ulcer of vagina	☐ A64 - Unspec. STD
☐ R10.2 - Pelvic and perineal pain	☐ A59.09 - Other urogenital trichomoniasis	☐ Z11.3 0 Encounter of scr. for infections w/ sexual transmission

OTHER STI CODES: _____

ICD-10 CODES FOR COMORBIDITIES

☐ B20 - Human immunodeficiency virus [HIV] disease	☐ Z51.0 - Encounter for antineoplastic radiation therapy	☐ Z99.2 - Dependence on renal dialysis
☐ D84.821 - Immunodeficiency due to drugs	☐ Z79.52 - Long-term (current) use of systemic steroids	☐ Z93.6 - Other artificial openings of urinary tract
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☐ Z94.1 - Heart transplant status	☐ E11.65 - Type 2 diabetes mellitus with hyperglycemia	☐ C79.82 - Secondary malignant neoplasm of genital organs
☐ Z94.2 - Lung transplant status	☐ N18.3 - Chronic kidney disease, stage 3 (moderate)	☐ D49.2 - Neoplasm of uncertain behavior of bone, soft tissue and skin
☐ Z94.3 - Heart and lungs transplant status	☐ N18.4 - Chronic kidney disease, stage 4 (severe)	☐ Z87.440 - Personal history of urinary tract infections
☐ Z94.4 - Liver transplant status	☐ N18.5 - Chronic kidney disease, stage 5	☐ N20.0 - Calculus of kidney
☐ Z51.11 - Encounter for antineoplastic chemotherapy	☐ N18.6 - End stage renal disease	☐ O09.90 - Supervision of high-risk pregnancy, unspecified

OTHER URINE CODES: _____

URINE ANTIBIOTIC RESISTANCE GENES - *Automatically tested in reflex to positive pathogens*

aac(6')-Ib-cr/aac(6')-Ib-cr4	CTX-M group 1	KPC	ParC	TEM
ampC	CTX-M group 2	mecA	QnrA, QnrB, QnrS	TetB
ant2	ErmA, ErmC (POOL)	mefA	RnaseP	TetM/TetS
blaACT/blaDHA/blaGES	ErmB	NDM	SHV	vanA1, vanA2
blaCMY2	femA	OXA23/OXA-24 (POOL)	Sul1	vanB
blaOXA-1, blaCTX-M-9/8/25	GyrA	OXA-48	Sul2	VIM, IMP-7

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FUNGAL PCR MOLECULAR REQUISITION

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PATIENT INFORMATION

NAME, LAST (OR CODE NAME) Please Print	FIRST	AGE	M/F

STREET	PHONE NO	DATE OF BIRTH
	( )	MM / DD / YYYY

CITY | STATE | ZIP

SPECIMEN TYPE	COLLECTED	PATIENT ALLERGIES
☐ Swab ☐ Tissue	DATE:_____ TIME_____ ☐ AM ☐ PM	

PROVIDER / ACCOUNT INFORMATION

BILLING / INSURANCE INFORMATION - *Please attach demographic information*

BILL TO
☐ MEDICARE ☐ MEDICAID ☐ INSURANCE ☐ PATIENT ☐ CLIENT

ALL INSURANCES RELATIONSHIP TO SUBSCRIBER
☐ CHILD ☐ SELF ☐ SPOUSE ☐ OTHER_____

INSURANCE CARRIER

INS. ID# | GROUP# | SUBSCRIBER NAME | DATE OF BIRTH

INSURANCE ADDRESS | CITY | STATE | ZIP

SECONDARY INSURANCE CARRIER | INS. ID# | GROUP # | SUBSCRIBER'S NAME | DATE OF BIRTH

SECONDARY INSURANCE ADDRESS | CITY | STATE | ZIP

REASON FOR TESTING

MEDICAL NECESSITY / NOTES / PATIENT HISTORY

PROVIDER SIGNATURE ATTESTATION

Medicare patients must follow CMS rules regarding medical necessity and FDA approval guidelines. Tests orders must include symptoms, diseases, and reasons for testing as indicated in the patient's medical record. "Routine" diagnosis codes do not indicate medical necessity. Please include comorbidities which are currently affecting the patient. Refer to NCD/LCD for further details.

PROVIDER NAME (PRINT): _____ **PROVIDER SIGNATURE (REQUIRED):** _____ **DATE:** _____

☐ FUNGAL PCR PATHOGEN PANEL

- ☐ Acremonium strictum
- ☐ Alternaria alternata
- ☐ Aspergillus niger
- ☐ Aspergillus terreus
- ☐ Candida albicans
- ☐ Candida auris
- ☐ Candida glabrata
- ☐ Candida krusei
- ☐ Candida lusitaniae
- ☐ Candida parapsilosis
- ☐ Candida tropicalis
- ☐ Corynebacterium minutissimum
- ☐ Curvularia lunata
- ☐ Epidermophyton flocossum
- ☐ Fusarium solani
- ☐ Fusarium spp
- ☐ Microsporom gypseum
- ☐ Microsporum spp
- ☐ Microsporum nanum
- ☐ Neoscytalidium dimidiatum
- ☐ Pseudomonas aeruginosa
- ☐ Staphylococcus aureus
- ☐ Streptococcus agalactiae
- ☐ Streptococcus pyogenes
- ☐ Trichophyton interdigitale
- ☐ Trichophyton spp
- ☐ Trichophyton tonsurans
- ☐ Trichosporon beigelli
- ☐ Trichosporon mucoides

ICD-10 CODES - *MUST document all that apply*

- ☐ B35.1 - Tinea unguium
- ☐ L60.3 - Nail dystrophy
- ☐ B35.9 - Dermatophytosis, unspec.
- ☐ B35.3 - Tinea pedis
- ☐ L60.9 - Nail disorder, unspecified
- ☐ B35.0 - Tinea barbae and tinea capitis
- ☐ L98.8 - Other specified disorders of the skin & subcu tissue
- ☐ L60.1 - Onycholysis
- ☐ D18.01 - Hemangioma of skin and subcutaneous tissue
- ☐ D48.5 - Neoplasm of uncertain behavior of skin
- ☐ L08.89 - Other spec. local infections of the skin & subcu tissue
- ☐ B48.8 - Other specified mycoses
- ☐ B36.9 - Superficial mycosis, unspec.
- ☐ L60.8 - Other nail disorders
- ☐ L08.9 - Nail disorder, unspecified
- ☐ B99.8 - Other infectious disease
- ☐ D49.2 - Neoplasm of uncertain behavior of bone, soft tissue, and skin
- ☐ B35.4 - Tinea corporis
- ☐ B35.6 - Tinea cruris
- ☐ B36.0 - Pityriasis versicolor
- ☐ B37.89 - Other sites of candidiasis
- ☐ B40.3 - Cutaneous blastomycosis
- ☐ B42.9 - Sporotrichosis, unspecified
- ☐ B43.0 - Cutaneous chromomycosis
- ☐ B44.89 - Other forms of aspergillosis
- ☐ B45.2 - Cutaneous cryptococcosis
- ☐ L97.309 - Non-prsre chrnc ulcer of ankle w/ unspecified severity
- ☐ L97.409 - Non-prsre chrnc ulcer of heel & midfoot w/ unspecified severity
- ☐ L97.509 - Non-prsre chrnc ulcer of other part of foot w/ unspecified severity
- ☐ M70.979 - Unspec soft tissue disorder related to use/overuse/pressure, unspec ankle & foot
- ☐ M86.179 - Other acute osteomyelitis, unspec ankle & foot
- ☐ S90.413A - Abrasion, unspecified great toe, initial encounter
- ☐ S90.416A - Abrasion, unspecified lesser toe, initial encounter
- ☐ E11.628 - Type 2 diabetes mellitus w/ other skin complications
- ☐ L02.91 - Cutaneous abscess, unspecified
- ☐ L02.92 - Furuncle, unspecified
- ☐ L02.93 - Carbuncle, unspecified
- ☐ L02.619 - Cutaneous abscess of unspec. foot
- ☐ L03.039 - Cellulitis of unspec. toe
- ☐ L03.049 - Acute lymphangitis of unspec. toe
- ☐ L03.90 - Cellulitis, unspecified
- ☐ L03.91 - Acute lymphangitis, unspecified
- ☐ L08.0 - Pyoderma
- ☐ L08.1 - Erythrasma
- ☐ L20.84 - Intrinsic (allergic) eczema
- ☐ L20.89 - Other atopic dermatitis
- ☐ L21.0 - Seborrhea capitis
- ☐ L21.8 - Other seborrheic dermatitis
- ☐ L29.9 - Pruritis, unspec.
- ☐ L30.3 - Infective dermatitis
- ☐ L30.4 - Erythema intertrigo
- ☐ L30.9 - Dermatitis, unspecified
- ☐ L72.0 - Epidermal cyst
- ☐ L72.3 - Sebaceous cyst
- ☐ L72.8 - Other follicular cysts of skin & subcu tissue
- ☐ L85.9 - Epidermal thickening, unspec.
- ☐ L90.9 - Atrophic disorder of skin, unspec.
- ☐ L91.9 - Hyprtrphc disorder of the skin, unspec.

OTHER FUNGAL CODES: _____

ICD-10 CODES FOR COMORBIDITIES

- ☐ B20 - Human immunodeficiency virus [HIV] disease
- ☐ D84.821 - Immunodeficiency due to drugs
- ☐ D84.89 - Other immunodeficiencies
- ☐ D70.9 - Neutropenia, unspecified
- ☐ D71 - Functional disorders of polymorphonuclear neutrophils
- ☐ Z94.0 - Kidney transplant status
- ☐ Z94.1 - Heart transplant status
- ☐ Z94.4 - Liver transplant status
- ☐ Z51.11 - Encounter for antineoplastic chemotherapy
- ☐ Z51.0 - Encounter for antineoplastic radiation therapy
- ☐ Z79.52 - Long-term (current) use of systemic steroids
- ☐ Z79.899 - Other long-term (current) drug therapy
- ☐ E10.9 - Type 1 diabetes mellitus without complications
- ☐ E11.9 - Type 2 diabetes mellitus without complications
- ☐ E11.51 - Type 2 diabetes mellitus with peripheral angiopathy without gangrene
- ☐ E11.40 - Type 2 diabetes mellitus with diabetic neuropathy, unspecified
- ☐ I73.9 - Peripheral vascular disease, unspecified
- ☐ I70.209 - Atherosclerosis of native arteries of extremities, unspecified extremity
- ☐ I87.2 - Venous insufficiency (chronic) (peripheral)
- ☐ N18.3 - Chronic kidney disease, stage 3 (moderate)
- ☐ N18.4 - Chronic kidney disease, stage 4 (severe)
- ☐ N18.6 - End-stage renal disease
- ☐ Z99.2 - Dependence on renal dialysis
- ☐ L97.309 - Non-pressure chronic ulcer of ankle with unspecified severity
- ☐ L97.409 - Non-pressure chronic ulcer of heel & midfoot with unspecified severity
- ☐ L97.509 - Non-pressure chronic ulcer of other part of foot with unspecified severity
- ☐ M86.18 - Other acute osteomyelitis, other site
- ☐ E43 - Unspecified severe protein-calorie malnutrition
- ☐ E66.9 - Obesity, unspecified

OTHER CORMOBITITY CODES: _____

FUNGAL ANTIBIOTIC RESISTANCE GENES

Automatically tested in reflex to positive pathogens

mecA
vanA
vanB

BAYSHORE LIFE SCIENCES

RESPIRATORY PCR MOLECULAR REQUISITION

Bayshore Pathology | 18338 Murdoch Circle, Port Charlotte, FL 33948
P: (941)313-9009 | F: (941) 623-9532 | CLIA #: 10D2072632 | CAP #: 9441362

PATIENT INFORMATION

NAME, LAST (OR CODE NAME) Please Print | FIRST | AGE | M/F

STREET | PHONE NO ( ) | DATE OF BIRTH MM / DD / YYYY

CITY | STATE | ZIP

SPECIMEN TYPE
☐ Nasopharyngeal Swab ☐ Sputum
☐ Oropharyngeal Swab

COLLECTED
DATE:_____
TIME_____ ☐ AM ☐ PM

PATIENT ALLERGIES

PROVIDER / ACCOUNT INFORMATION

BILLING / INSURANCE INFORMATION - *Please attach demographic information*

BILL TO
☐ MEDICARE ☐ MEDICAID ☐ INSURANCE ☐ PATIENT ☐ CLIENT

ALL INSURANCES RELATIONSHIP TO SUBSCRIBER
☐ CHILD ☐ SELF ☐ SPOUSE ☐ OTHER_____

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INS. ID# | GROUP# | SUBSCRIBER NAME | DATE OF BIRTH

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SECONDARY INSURANCE CARRIER | INS. ID# | GROUP # | SUBSCRIBER'S NAME | DATE OF BIRTH

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REASON FOR TESTING

MEDICAL NECESSITY / NOTES / PATIENT HISTORY

PROVIDER SIGNATURE ATTESTATION

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PROVIDER NAME (PRINT): _____

PROVIDER SIGNATURE (REQUIRED): _____ **DATE:** _____

☐ RESPIRATORY PCR COMPREHENSIVE PATHOGEN PANEL

☐ Adenovirus 1	☐ Haemophilus influenzae B	☐ Human enterovirus	☐ Influenza A	☐ Mycoplasma pneumoniae	☐ Pseudomonas aeruginosa
☐ Adenovirus 2	☐ Human Coronavirus 229E	☐ Human metapneumovirus A/B	☐ Influenza B	☐ Parainfluenza Virus 1	☐ SARS-CoV-2
☐ Bordatella pertussis	☐ Human Coronavirus HKU1	☐ Human Respiratory Syncytial Virus A	☐ Klebsiella pneumoniae	☐ Parainfluenza Virus 2	☐ Staphylococcus aureus
☐ Chlamydia pneumoniae	☐ Human Coronavirus NL63	☐ Human Respiratory Syncytial Virus B	☐ Legionella longbeache	☐ Parainfluenza Virus 3	☐ Streptococcus pneumoniae
☐ Haemophilus influenzae	☐ Human Coronavirus OC43	☐ Human rhinovirus 1A	☐ Legionella pneumophila	☐ Parainfluenza Virus 4	☐ Streptococcus pyogenes
☐ Candida auris	☐ Citrobacter freundii	☐ Herpes simplex virus 1	☐ Klebsiella oxytoca	☐ Proteus mirabilis	☐ Staphylococcus saprophyticus
☐ Candida glabrata	☐ Enterobacter cloacae	☐ Herpes simplex virus 2	☐ Klebsiella pneumoniae	☐ Proteus vulgaris	☐ Streptococcus agalactiae

☐ RESPIRATORY VIRAL PCR PATHOGEN PANEL

☐ Coronavirus (SARS-CoV-2)
☐ Influenza A/B (Flu)
☐ Human Respiratory
☐ Syncytial Virus A/B (RSV)

☐ **REFLEX TO RESPIRATORY PCR COMPREHENSIVE**

ICD-10 CODES - *MUST document all that apply*

☐ J02.9 - Acute pharyngitis	☐ J01.90 - Acute sinusitis, unspec.	☐ D84.89 - Other immunodefic.
☐ R05.1 - Acute cough	☐ R05.9 - Cough, unspec.	☐ E10.43 - Type 1 diabetes mellitus w/ diabetic autonomic (poly)neuropathy
☐ R50.9 - Fever	☐ J98.8 - Other spec. resp. disorders	☐ E11.43 - Type 2 diabetes mellitus w/ diabetic autonomic (poly)neuropathy
☐ J06.9 - Acute upper respiratory infection, unspec.	☐ D64.89 - Other spec. anemias	☐ J45.991 - Cough variant asthma
☐ R06.02 - Shortness of breath	☐ D70.9 - Neutropenia, unspec.	☐ J84.89 - Other spec. interstitial pulmonary disease
☐ J18.9 - Pneumonia, unspec. org.	☐ D84.821 - Immunodefic. due to drugs	☐ J84.10 - Pulmonary fibrosis, unspec.

OTHER RESPIRATORY CODES: _____

ICD-10 CODES FOR COMORBIDITIES

☐ B20 - Human immunodeficiency virus [HIV] disease	☐ Z79.899 - Other long-term (current) drug therapy	☐ J84.89 - Other specified interstitial pulmonary disease
☐ D84.821 - Immunodeficiency due to drugs	☐ E10.9 - Type 1 diabetes mellitus without complications	☐ I50.9 - Heart failure, unspecified
☐ D84.89 - Other immunodeficiencies	☐ E11.9 - Type 2 diabetes mellitus without complications	☐ N18.3 - Chronic kidney disease, stage 3 (moderate)
☐ D70.9 - Neutropenia, unspecified	☐ E11.65 - Type 2 diabetes mellitus with hyperglycemia	☐ N18.4 - Chronic kidney disease, stage 4 (severe)
☐ Z94.0 - Kidney transplant status	☐ J44.9 - Chronic obstructive pulmonary disease, unspecified	☐ N18.6 - End-stage renal disease
☐ Z94.1 - Heart transplant status	☐ J43.9 - Emphysema, unspecified	☐ Z99.2 - Dependence on renal dialysis
☐ Z94.2 - Lung transplant status	☐ J47.9 - Bronchiectasis, unspecified	☐ E66.9 - Obesity, unspecified
☐ Z51.11 - Encounter for antineoplastic chemotherapy	☐ E84.9 - Cystic fibrosis, unspecified	☐ E43 - Unspecified severe protein-calorie malnutrition
☐ Z79.52 - Long-term (current) use of systemic steroids	☐ J84.10 - Pulmonary fibrosis, unspecified	

OTHER CORMOBITITY CODES: _____

ANTIBIOTIC RESISTANCE GENES - *Automatically tested in reflex to positive pathogens*

aac(6')-Ib-cr/aac(6')-Ib-cr4	CTX-M group 1	KPC	ParC	TEM
ampC	CTX-M group 2	mecA	QnrA, QnrB, QnrS	TetB
ant2	ErmA, ErmC (POOL)	mefA	RnaseP	TetM/TetS
blaACT/blaDHA/blaGES	ErmB	NDM	SHV	vanA1, vanA2
blaCMY2	femA	OXA23/OXA-24 (POOL)	Sul1	vanB
blaOXA-1, blaCTX-M-9/8/25	GyrA	OXA-48	Sul2	VIM, IMP-7