

Patient: **SAMPLE**  
**PATIENT**

DOB:

Sex:

MRN:

**2302 Parasitology Profile - Stool**

Methodology: Microscopic Examination, EIA and Macroscopic Evaluation.

**Parasitology**

**Microscopic Exam Results**

Methodologies used for the Ova & Parasites examination are sedimentation concentration of specimens followed by analysis by iodine wet mount and Trichrome stain permanent smear.

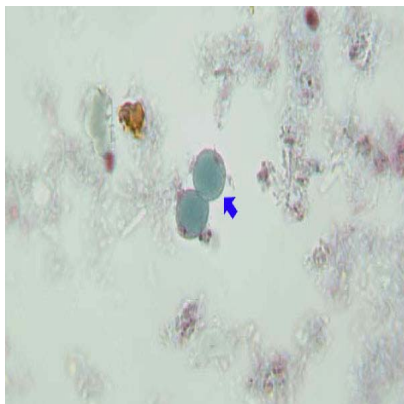
Blastocystis hominis: Many  
Endolimax nana: Few Trophozoites  
Entamoeba hartmanni: Moderate Trophozoites & Cysts

**Parasitology EIA Tests**

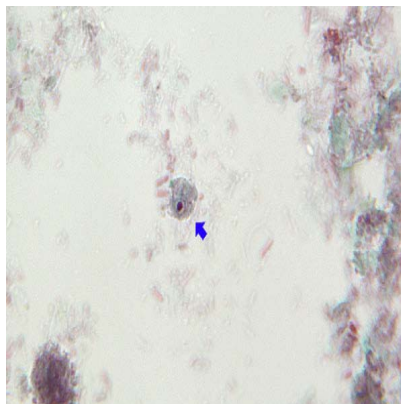
	Inside	Outside	Reference Range
<b>Cryptosporidium ♦</b>	<input type="text" value="Not Ordered"/>	<input type="text"/>	Negative
<b>Giardia lamblia ♦</b>	<input type="text" value="Not Ordered"/>	<input type="text"/>	Negative

Representative photograph of organism(s)

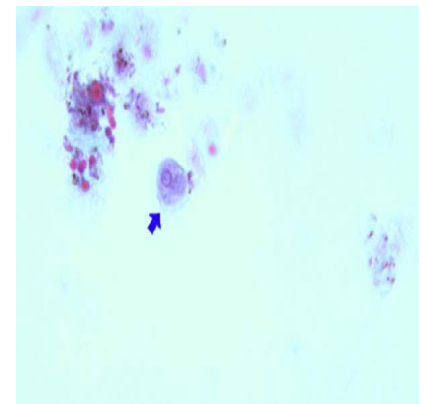
Blastocystis hominis



Endolimax nana trophozoites



Entamoeba hartmanni trophozoites





## Macroscopic/Direct Exam for Parasites (if ordered)

### Commentary

Reported quantitation values were derived from a concentration of the sample(s) submitted and represent an "average" value.

Literature suggests that >90% of enteric parasitic infections may be detected in a sample from a single stool collection. Increased sensitivity results from the collection of additional specimens on separate days.

Commentary is provided to the practitioner for educational purposes, and should not be interpreted as diagnostic or as treatment recommendations. Diagnosis and treatment decisions are the practitioner's responsibility.

*Blastocystis hominis* is considered by most authorities to be a pathogen. Transmission is fecal/oral, usually through contact with contaminated food or water. *Blastocystis* often lodges in the intestinal mucosa, making eradication difficult. Symptoms may include nausea, vomiting, sleeplessness, lassitude, anorexia, pruritis, irritable bowel or fever, although asymptomatic infections can occur. It has also been reported in association with many chronic conditions including chronic fatigue and reactive arthritis. Three forms have been identified, with the vacuolated form being the most frequently seen in fecal specimens.

*Endolimax nana* transmission occurs by ingestion of the cyst stage in contaminated food or water. The organism resides in the lumen of the colon and cecum. Infections may be asymptomatic or present with diarrhea. Infection has also been associated with reactive arthritis and urticaria. Although textbooks traditionally consider this organism a commensal, it may be associated with and play a role in chronic illness.

*Entamoeba hartmanni* transmission occurs via ingestion of the cyst either from person to person or by contaminated food or water. Although textbooks traditionally consider this organism a commensal, it may be associated with and play a role in chronic illness.