SPECIAL AND CLINICAL MICROBIOLOGY

Laboratory workbook

Student name _	 	 	
Faculty	 	 	

Group _		
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Minsk BSMU 2023

МИНИСТЕРСТВО ЗДРАВООХРАНЕНИЯ РЕСПУБЛИКИ БЕЛАРУСЬ БЕЛОРУССКИЙ ГОСУДАРСТВЕННЫЙ МЕДИЦИНСКИЙ УНИВЕРСИТЕТ КАФЕДРА МИКРОБИОЛОГИИ, ВИРУСОЛОГИИ, ИММУНОЛОГИИ

ЧАСТНАЯ И КЛИНИЧЕСКАЯ МИКРОБИОЛОГИЯ SPECIAL AND CLINICAL MICROBIOLOGY

Лабораторный практикум

8-е издание



Минск БГМУ 2023

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Авторы: доц. Д. А. Черношей; доц. В. В. Слизень; доц. Т. А. Канашкова; ассист. И. А. Гаврилова

Рецензенты: канд. мед. наук, доц. В. Э. Бутвиловский; канд. мед. наук, доц. Е. И. Гудкова

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Содержит информацию для подготовки к практическим занятиям по разделам частной и клинической микробиологии. Приведены схемы, алгоритмы, справочные сведения, методики выполнения лабораторных работ. Первое издание вышло в 2015 году.

Предназначен для студентов 2-го курса медицинского факультета иностранных учащихся, обучающихся на английском языке.

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<u>Class № 1.</u> Microbiological diagnostics of diseases caused by staphylococci, streptococci, neisseria

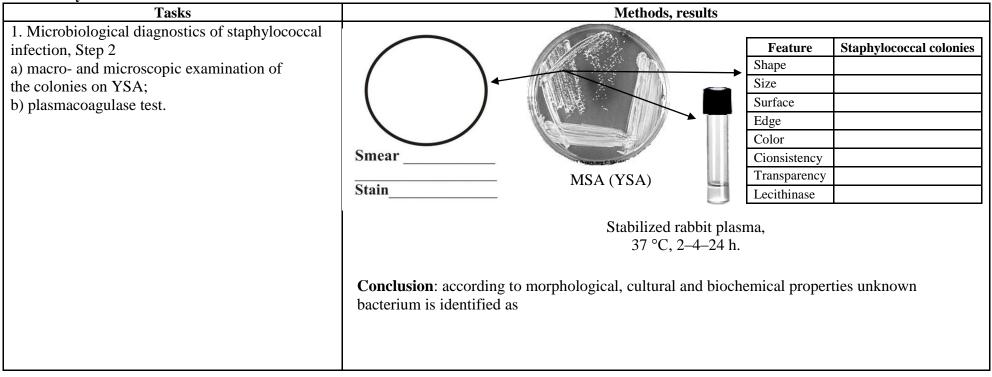
The subject to study:

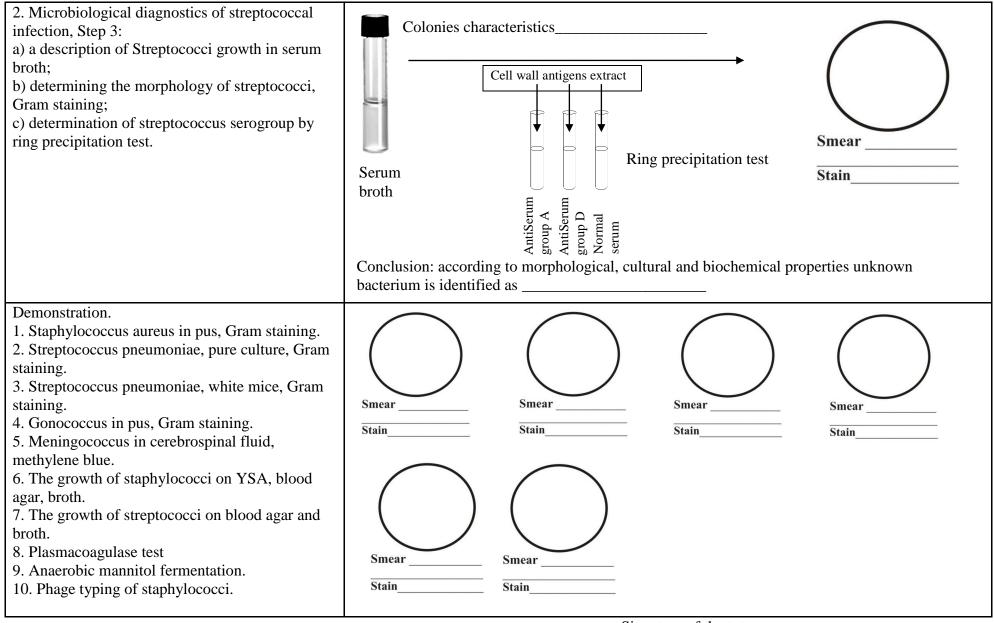
Staphylococci, systematics, general characteristics. Methods of microbiological diagnostics of staphylococcal infections. The material for the research depending on the form of the infection. Scheme of pure culture isolation (from pus, mucus, blood, etc.). Identification methods, phage typing. Specific prevention and treatment of staphylococcal infections.

Streptococci. Systematics. Pyogenic streptococci. Pneumococci. General characteristics. Antigenic structure. Acute and chronic diseases, pathogenesis, immunity. Specific antibodies to streptococcal antigens, diagnostic value. Methods for streptococcal infections diagnosis. Bacteriological method, study design. Material for studies depending on the form of the infection, the rules and methods for taking material. Principles of therapy and prevention pro-streptococcal infections.

Neisseria. Systematics, general characteristics.

Characteristics of the causative agent, mechanisms of pathogenesis, immunity, methods of microbiological diagnosis of acute and chronic gonorrhea. Characteristics of the causative agent, mechanisms of pathogenesis, immunity, diagnosis and prevention of meningococcal infection-howl. sources:





Signature of the tutor_____

Complementary materials to class 5.

Staphylococcus genus	characteristics	Bacteriological dia	agnostics of staphylo	coccal infection			
Main pathogenic species		Materia	al for investigation]	Staphyloc infectio	
Morphology (size, shape, relative positions of cells) Spores development							
Capsule Flagella (motility) Gram staining		Media for	pure culture isolatio	n C			
Catalase activity				- Maga	Cart		
Main pathogenicity							
factors					1. antill		
		Medium for p	ure culture accumula	ation			
					.)		
Methods for staphylococcal	infection diagnostics		Staphyl	ococcus indentifica	tion		
Method	Usage (+/-)	Species	Plasmacoagulation	Anaerobic mannitol	DNA-se	Lecithinase	Protein-A
Microscopic		species	test	fermentation	DIA-50	Lecitimase	TOUT
Cultural		S. aureus			1		
Biological		s. aureus					
Serological		S. epidermidis					
Allergic Molecular-genetic		S. saprophyticus					
morecular genetic							I

Sucprococe	us genus charac		Bacteriological d	-				S. pyo	<i>genes</i> infe	ctions
Main pathogenic species	S. pyogenes	S. pneumoniae		for investig	ation					
Morphology Spores development Capsule Flagella (motility)			Media for pu	ire culture	isolation			S. pneu	<i>umoniae</i> in	fection
Gram staining Group antigen Type-specific antigen			Medium for pur	e culture a	ccumulatio					
(M-protein) Capsule polysaccharide Catalase activity							*	Other im	portant St	r. species
			Str	eptococci	identificat	tion				
Methods for strep			Str. species	Growth in nutrition broth	Hemolysis (α, β, γ)	Precipitati on nest	Capsule swelling test	Inulin fermentatio n	Optochin test	Bile test
Methods - Microscopic	Usag S. pyogenes	e (+/-) S. pneumoniae	S. pyogenes	L L	H	HO	S st	I f		H
Cultural Biological			S. pneumoniae							
Serological Allergic Molecular-genetic			E. faecalis							

Neisseri	a genus character	istics	Bacteriological m	ethod for th	e <i>Neisseri</i>	a infection	s diagnosti	cs	
Features	N. meningitidis	N. gonorrhoeae	Material for	the investigat	tion	_	N	. meningitidis	infections
Morphology (size, shape, relative positions of cells)									
Spores development						, Y	/		
Capsule			Media for the pu	re culture iso	lation				
Flagella (motility)									
Gram staining						\Rightarrow	N.	gonorrhoeae	² infections
Oxidase activity							/		
Pathogenicity factors									
			Mediym for the	uro culturo o	coumulati	on			
			Meanym for the						
	eisserial infections Usage	diagnostics							
Methods	N. meningitidis	N. gonorrhoeae			Neisseria	differentia	tion		
Microscopic				Growth on				Fermentation)
Cultural			Species	nutrition	Growth	Colonies			1
Biological				agar	at 20 °C	color	Glucose	Maltose	
Serological			N. meningitidis	U					
Allergic									
Molecular-genetic			N. gonorrhoeae						
			Opportunistic species						
					•			•	

<u>Class № 2.</u> Microbiological diagnostics of acute enteric infections caused by enterobacteria

Date

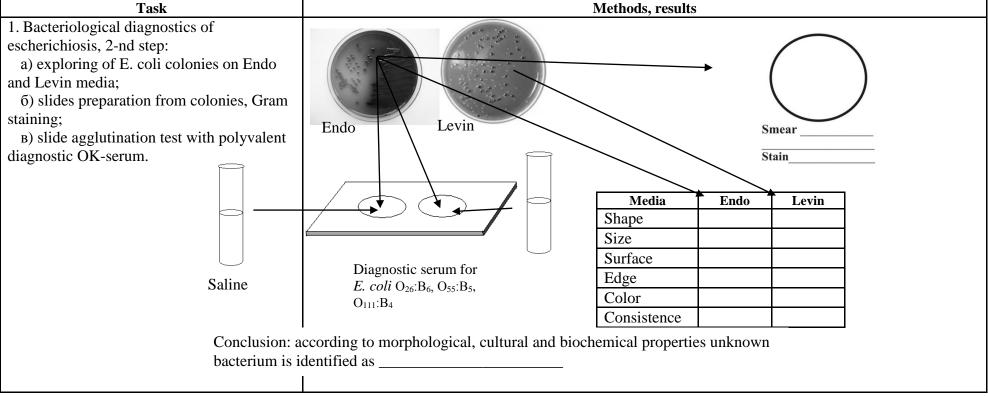
Questions to study: General characteristics of Enterobacteriaceae family. Differences between genera. General principles of diagnostics of acute enteric infections caused by pathogenic enterobacteria. Differential diagnostic media, composition, plinciple of work.

Escherichia, systematic position, general characteristics. The biological role of Escherichia coli. Molecular mechanisms of escherihiosis pathogenesis. Enteropathogenic, enterotoxigenic, enteroinvasive and enterohaemorrhagic Escherichia coli. Escherihisis diagnostics. Antibiotic treatment.

Salmonella, classification and general characteristics. Serological classification of Salmonella. Identification of Salmonella. Molecular biological typing.

Causative agents of typhoid and paratyphoid. The pathogenesis of typhoid. Microbiological diagnostics of typhoid fever, depending on the stage of pathogenesis.

Laboratory work
Task



 2.Bacteriological diagnostics of typhoid: 2-nd step of coproculture isolation: a) describe colonies on Levin medium; b) prepare slide from colonies, Gram staining; c) inoculate Kligler medium. 	Levin medium TSI (Kligler) medium Feature Levin medium Shape Size Size Stain
	Edge Color Consistence
 Demonstration. 1. Clean media: Endo, Levin Ploskirev, bismuth sulfite agar, Rapoport, magnesium, Kliglera. 2. The same media with the growth of E. coli, Salmonella, Shigella. 3. Biochemical Activity of E. coli and Salmonella. 4. Dendrograms of Salmonella molecular typing. 5. Tube agglutination test with killed E. coli culture. 6. The morphology of E. coli, Salmonella, Shigella (Gram staining). 	Smear Smear Smear Smear Smear Stain Stain Stain Stain Stain

Teacher signature_____

Complementary materials to class 2.

Enterobact	<i>teriaceae</i> genera of me	dical importance	 Methods for diagno	stics of escherichio	sis and salmonellosis
				Usa	ge (+/-)
			Methods	Escherichiosis	Typhoidand paratyphoid
			 Microscopic		
			Cultural		
General cha	racteristics of <i>Enterol</i>	pacteriaceae family	 Biological		
Characteristi	cs	Enterobacteriaceae	Serological		
Morphology			Allergic		
Spores development			Molecular-genetic		
Capsule			Bacteriological diag	nostics of escherich	iosis
Flagella (motility)			Material for th	e investigation	1 ┌───── ┣┫
Gram staining					
Antigens					*
Exotoxins					1.2
Endotoxins			Media for pure of	ulture isolation	
	Escherichia coli charac				
Characteristics		Escherichia coli			
Morphology					
Spores development			Medium for the pure	aulture economilation	1
Capsule			Medium for the pure		
Flagella (motility)					
Gram staining			Bio	logical properties E.	coli,
Antigens				al microflora repres	
Number of serovars			Positive		Negative
E. coli classification	1.				
according to	2. 3.				
pathogenicity factors	4.				
Diseases caused by E. coli					

Fermentation Indel II S Cotalogo Antigenic										
Species	Glucose	Lactose	Mannitol	Maltose	Saccharose	Indol production	H ₂ S production	Catalase activity	formula (O, H, K)	
E. coli										
S. typhi										
S. paratyphi A										
S. schottmuelleri										
S. typhimurium										

Methods of microbiological typhoid diagnostics depending on the pathogenesis phase

	Pathogenesis phase		Bacteriologi	cal method	Serolog	gical method	
	Famogenesis phase	Hemoculture	Urinoculture	Coproculture	Bileculture	Vidal test	BPAT with Vi-Ag
Incubation	n period						
Prodroma	l period						
unidad of	Bacteremia and intoxication						
midst of illness	Parenchymal diffusion						
lilless	Allergic-secretory						
Reconvale	escence						
Bacteria c	arrier state						

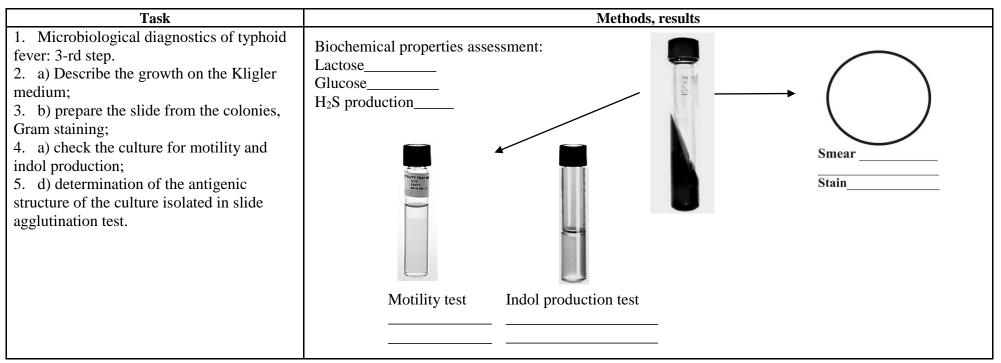
<u>Class № 3.</u> Microbiological diagnostics of acute enteric diseases caused by enterobacteria

Date____

The list of questions to study: Characteristics of immunity in typhoid and paratyphoid fever. Serological diagnosis of typhoid and paratyphoid fever. Formulation and analysis of Vidal reaction. Methods for distinguishing infection, anamnestic and postvaccinal titer. Diagnosis of bacteria carrier state in typhoid fever.

Salmonella - causative agents of acute gastroenteritis. Salmonella phage typing and indication.

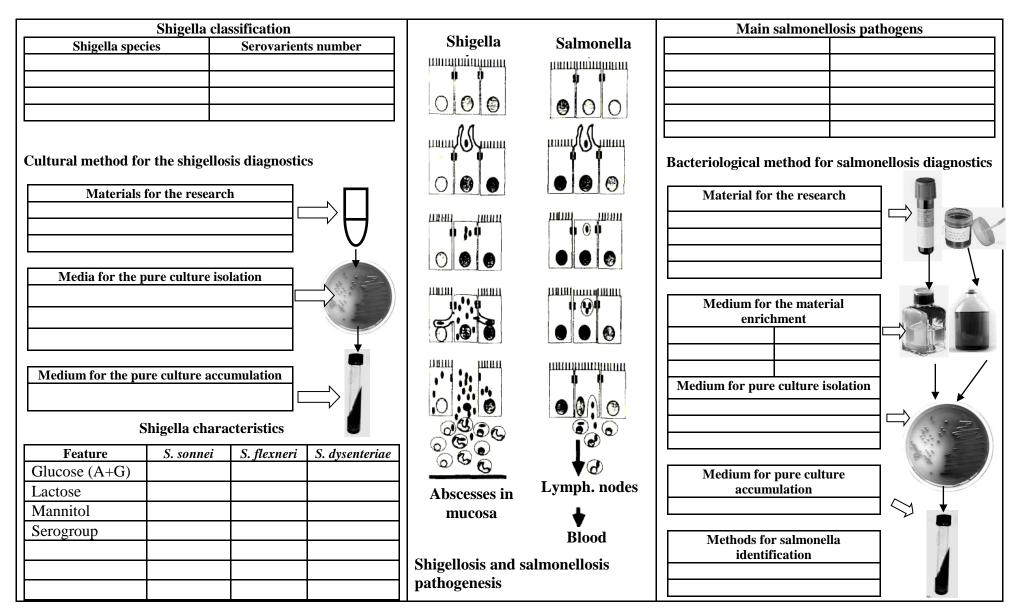
Shigella. Causative agents of dysentery, classification, general characteristics. Molecular mechanisms of pathogenesis, immunity, methods of laboratory diagnosis of acute and chronic dysentery. Approaches to the prevention of dysentery. Antibiotic treatment.



2. Assessment of Vidal test		V	idal a	gglut	inati	on test	t (A7	Γ)			Imn	nunog	globulin	es dyna	amics ir	n typho	id fev	er
	Diagnosticum	1:50	1:100	1:200	1:400	1:800	AC	SC			Incubational prodromal perio	, ods ¹	week 2 w				week 7	week 8 week
												В	acteremia w		athogenesi	is phase		
	O9										Lymphadeniti		intexication		diffusion Allergic-s	secretory	r	Disease outcome: cconvalescene, carrier state
	Hd																	
	A (OH)											A						
	B (OH)																	
	Conclusion: (Diagnostic tite	er).	·								
Demonstration										Pass	ive <i>Vi –</i> hema	ggluti	nation t	est				
1. Shigella grow		1-		1	/10	1/2	0	1/40	1/80	1/1	60 1/320	1/640	0	SC		AC		
diagnostic me		.1																
2. Shigella and S Kligler mediu	ım.				\bigcirc			\bigcirc	\bigcirc) (\bigcirc		
3. Biochemical a4. Salmonella ph		bacte	eria.		\smile			\bigcirc	\bigcirc			\bigcirc				\bigcirc		
5. Vi-passive here6. Preparations f	magglutination t	rophy	laxis		onclusi viagno	ion: ostic tit											·).

Signature of the tutor_____

Supporting materials to class 3.



<u>Class № 4.</u> Microbiological diagnostics of diseases caused by Klebsiella, Iersinia, Campylobacter and pseudomonada. Methods for food poisoning diagnostics

Data_____

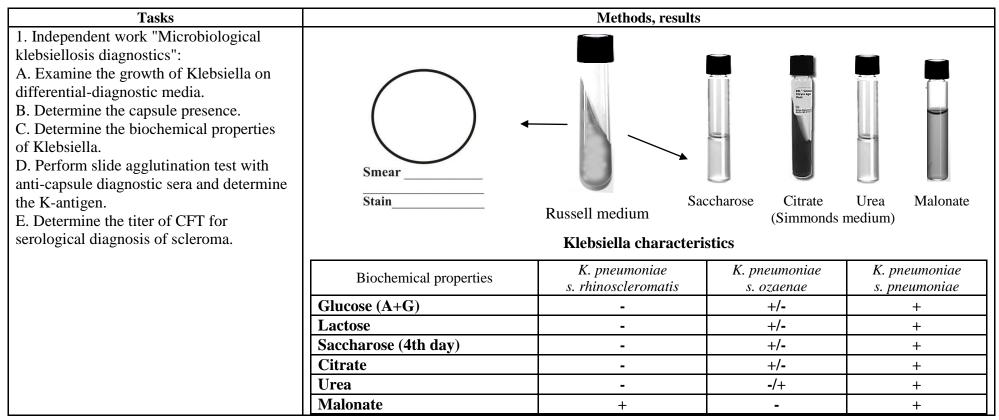
List of questions to study: Klebsiella, classification and general characteristics, main diseases caused. Pathogenesis, immunity, methods of microbiological diagnosis of acute and chronic klebsiellosis.

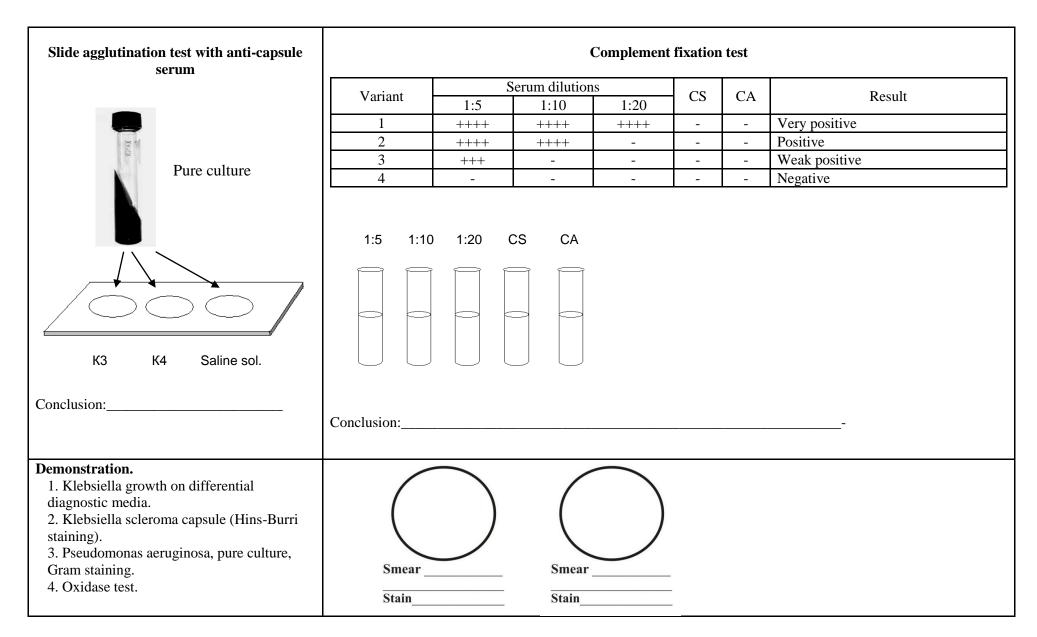
The causative agent of intestinal yersiniosis, general characteristics. Pathogenesis, immunity, methods of microbiological diagnostics.

Campylobacter, general characteristics, role in human pathology. Mechanisms of pathogenesis. Diagnosis of campylobacteriosis. Helicobacter.

Pseudomonas aeruginosa, general characteristics, pathogenicity factors, role in human pathology. Methods of microbiological diagnostics Pseudomonas infection.

Classification, etiology of food poisoning. Principles of microbiological diagnostics.





Signature of the tutor_____

Additional materials for class 4

-					Diagnosis of bacterial food	l poisoning						
				Materials for	Food poisoning - acute systemic diseases resulting	g from ingestion of food, massively						
Causative	e agents	Dise	ease b	acteriological	contaminated with microorganisms or microbial exotoxins. Food poisoning is divided into							
				diagnostics	bacterial foodborne diseases and food poisoning (toxicosis), as well as poisoning of mixed							
K. pneumoniae					etiology.							
rhinoscleroma	tis				Foodborne diseases (FBD): FBDs result from	Microbial food toxicosis						
K. pneumoniae	e s. ozaenae	2			ingestion of products massively colonized by	(intoxication): acute illness arising						
K. pneumoniae	? S.				certain bacteria. Pathogens: opportunistic members	from eating food, which containes						
pneumoniae					of the family Enterobacteriaceae - E. coli, Proteus	a large amount of exotoxin (as a						
Y. enterocolitie	ca				(P. vulgaris, P. mirabilis), Morganella morganii, Citrobacter, Enterobacter, Hafnia, Klebsiella	result of massive reproduction of microbes). These include botulism,						
					pneumoniae; Sem. Vibrionaceae -	toxicosis caused by staphylococcal						
C. jejuni					V. parahaemolyticus; Sem. Bacillaceae - B. cereus,	enterotoxin, toxins from						
TT 1 .					C. perfringens serovar A; Sem. Streptococcaceae -	microscopic fungi and others.						
H. pylori					S. faecalis; Sem. Pseudomonadaceae -							
P geruginosa					P. aeruginosa, and others.							
P. aeruginosa					Pathogenesis. Pathogen replicates in the intestine,	Pathogenesis is based on the						
					penetrates into lymphoid tissue, where it is killed with	microbial exotoxin, which is not						
Me	ethods of la	boratory d	liagnostic	S	the release of endotoxin, which causes damage to the							
	1				intramural bowel NS, CNS and blood vessels. Bacteria	<i>c i</i>						
			ge (+/-)		cause inflammation of the intestinal wall.	contents.						
Method	Klebsiella	Campylo-	Iersinia	Pseudomonas	Materials for the research : vomit, stomach washing (in the case of death), the remains of the suspected food, ra							
Mianagaania		bacter		aeruginosa	samples of food, swabs and scrapings from kitchen utensils							
Microscopic					Lab. diagnosis: isolation of obligate pathogenic or							
Cultural					staphylococci and their toxins, streptococci, bacillus, as w							
Biological					and toxins.	······································						
Serological					To evaluate the etiologic role of opportunistic bacteria	(OB) certain criteria are used.						
Allergic					Main criterion is quantitative: Etiologically significant	number of OM is 10 ⁵ -10 ⁶ or more CFU						
Molecular-					per 1g of material. The diagnosis is more reliable while							
genetic					toxins in suspected food. Other criteria are: repeated isola							
					the patient, the identity of the pathogen strains (serovars							
					patients in group food poisoning, as well as the increase disease.	in antibody filter in the dynamics of the						

<u>Class № 5.</u> Microbiological diagnostics of diseases caused by Corynebacteria, bordetella, haemophilus, legionella, listeria Date_____

List of questions to study:

Corynebacterium diphtheria. Systematics, general characteristics of the pathogen. Types of Corynebacterium diphtheria, their distinctive features. Diphtheria toxin and antitoxic serum. The pathogenesis of diphtheria. Methods of microbiological and molecular biological diagnosis of diphtheria. Principles of therapy and prevention of diphtheria. Determination of the effectiveness of post-vaccinal immunity.

Bordetella pertussis. Characteristics of the pathogen, pathogenicity factors. Differentiation with parapertussis agent. The pathogenesis of pertussis, immunity, diagnostics. Principles of therapy and prevention of pertussis.

Haemophilus, general characteristics, role in human pathology.

Legionella, general characteristics, role in human pathology.

Listeria, general characteristics, role in human pathology.

Laboratory work

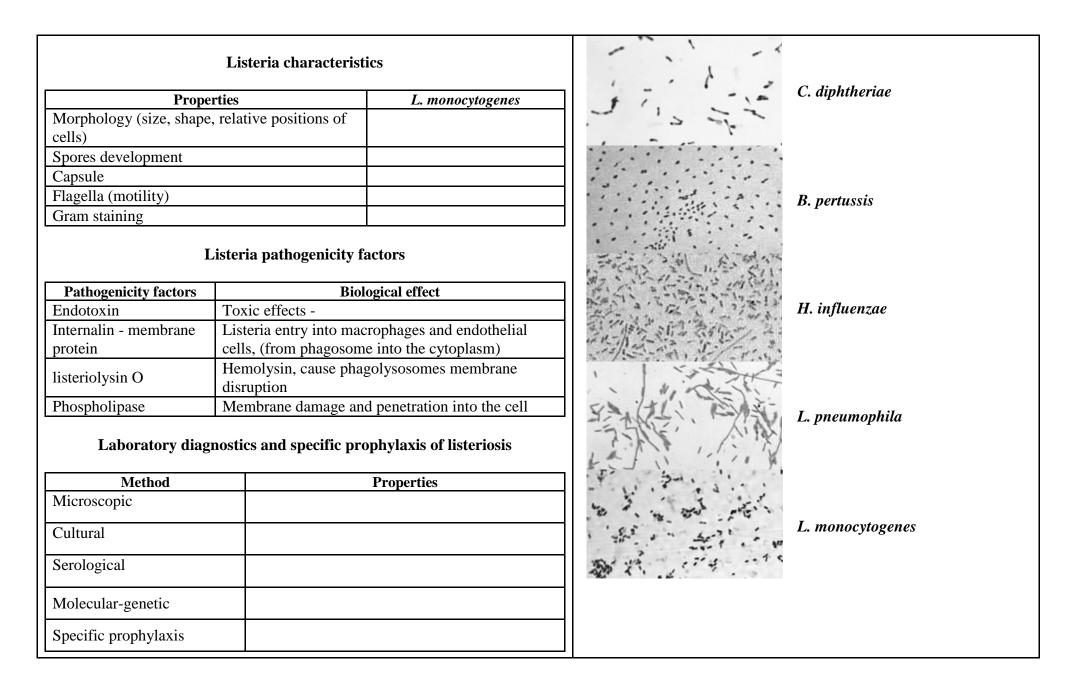
Tasks		Method	s. results	
 Bacteriological diagnosis of diphtheria, 2nd step: a) Describe the colonies Corynebacterium on potassium tellurite serum agar b) Seed bacteria from typical colonies onto Hiss media (glucose, sucrose, starch). 	Smear	Tinsdale medium	Glucose Sucrose Starch	Smear
Demonstration.			Glucose Sucrose Starch	
1. Corynebacterium diphtheriastained by:				
a) Neisser; b) Leffler.	Feature	Colonies on serum tellurite aga	ur 🔨	\frown
2. Test for Corynebacterium diphtheria toxigenicity.	Shape		= ()	()
3. Preparations for specific prevention and	Size		\neg ()	()
treatment of diphtheria and pertussis.	Surface			
4. Growth of Bordetella pertussis and parapertussis	Edge		Smear	
on CCA, NA with tyrosine, urease test.	Color		Sillear	Smear
5. Bordetella pertussis, Gram staining	Consistency		Stain	Stain
6. Assessment of antidiphtheria immunity intensity		~		

Signature of the tutor_____

Additional materials and independent work for Class № 5.

Coryneb	oacterium	characteristics		Bor	detella pertussis character	istics	
Properties	3	C. diphtheriae		Prop	erties	B. pertussis	
Morphology (size, shape, r	elative		Morphology (size, s	shape, rel	lative positions of cells)		
positions of cells)			Spores developmen	t			
Spores development			Capsule				
Capsule			Flagella (motility)				
Flagella (motility)			Gram staining				
Gram staining							
Pathogenicity factors					Bordetella differentiation	1	
			Feature		B. pertussis	B. parapertussis	
			┚┃╞━━━━━				
	importan	t corynebacteria					
Species		Diseases					
C. diphtheriae		Diphtheria		R	pertussis pathogenicity fac	tors	
<i>C. ulcerans, C. minutissimu</i> <i>C. xerosis, C. pseudodiphth</i>		Opportunistic infections	Pathogenicity factors		Biological effect		
C. diphtheriae pathogenicit	v factors		Filamentous	Binds c	ell membrane glycolipid of cil	iated airway epithelium, binds	
Pathogenicity factors		Biological effect	hemagglutinin	surface	R3 - glycoprotein receptor and	l initiates phagocytosis	
Protein exotoxin (includes	Protein	synthesis arrest, specific damage				orane protein Gi; toxin inhibits	
A and B subunits)		yocardium, adrenal glands and	Pertussis toxin			yte migration. S2 - subunit binds	
	nerve ga	inglia	(Pertussin)		spiratory tract cell surface gly tes surface gangliosides	colipid; S3 - subunit binds to	
Glycolipid (6-6'-diester-	Dhagoor	tosis impairment	Pili		on to the ciliated epithelium of	the respiratory tract	
trehalose)	rnagocy	tosis impariment	Pertactin		on to the ciliated epithelium of		
Hyaluronidase	Dermeal	bility of tissues violation	Adenylate cyclase		<u> </u>	ytes and monocytes migration	
Neuraminidase	1 criticat	Shity of tissues violation	Dermatonekrotoksin		es the skin and is lethal to labo		
<u>_</u>	s and spec	ific prophylaxis of diphtheria	Tracheal toxin		glycan fragment - destroys cili mulates interleukin-1 secretio		
Method		Properties	Endotoxin (LPS)		es complement and stimulate t		
Microscopic			Laborat		nostics and specific proph		
Cultural			Metho			Properties	
Molecular-genetic			Bacteriological			•	
Specific prophylaxis			Serological				
			Specific prophylaxi				

Haemophilus ger	nus representatives and respective diseases	_ Legio	onella characteristics
Species	Diseases	Properties	Legionella pneumophila
H. influenzae		Morphology (size, shape, r	relative
H. ducreyi		positions of cells)	
H. aphrophilus, H. parainf	luenzae,	Spores development	
H. haemolyticus,		Capsule	
H. parahaemolyticus u dp.		Flagella (motility)	
Haa	mophilus genus characteristics	Gram staining	
Properties	H. influenzae	ך └	
Morphology	11. пристам	- Lacionalla nua	www.on/ila.noth.onenicity.fo.ctore
Spores development		Pathogenicity factors	<i>eumophila</i> pathogenicity factors Biological effect
Capsule		1. Optional intracellular parasiti	8
Flagella (motility)		Toxin (peptide)	inhibiting the "oxidative burst" durin
Gram staining			phagocytosis inactivation of toxic metabolites
Antigens		Catalase	during macrophage activation
		Factors of unknown nature	inhibit fusion of phagosomes and lysosomes, electron transport
H. i	nfluenzae pathogenicity factors	2. Production of toxins, enzyme	^
Pathogenicity factors	Biological effect	Labile exotoxin (Cytotoxin and	dysfunction or cell lysis
Polysaccharide capsule	Inhibition of phagocytosis	hemolysin)	
Pili and other adhesins	Attaching to epithelial cells	Endotoxin	dysfunction or cell lysis
Lipopolysaccharide and	Epithelium surface and cilia damage	Proteolytic enzymes: phosphata lipase, nuclease	degradation of nost cells
glycopeptide			n of MHC class II molecules on macrophages,
Ig A protease	Suppression of local immunity	violation of Ag-presenting funct response	tions - the suppression of cellular immune
Laboratory diagnostics	s and specific prophylaxis of infections caused by <i>Haemophilus</i>		and specific prophylaxis of legionellosis
Method	Properties	Method	Properties
Microscopic		Microscopic	
Cultural		Cultural	
Serological		Serological	
Specific prophylaxis		Molecular-genetic	
		Specific prophylaxis	



<u>Class № 6.</u> Methods of microbiological diagnosis of diseases caused by mycobacteria and actinomycetes. Methods of microbiological diagnostics anaerobic infections

Data

The list of questions to study: Actinomycetes, systematic position, general characteristics, role in human pathology. Mycobacteria classification. TB germs, general characteristics. Pathogenesis, immunity, methods of microbiological diagnostics, principles of treatment and prevention of tuberculosis. Mantoux test. The causative agent of leprosy, general characteristics, role in human pathology. Mycobacteriosis. Nocardia. Anaerobes, classification, general characteristics. Causative agents of gas gangrene, tetanus, botulism. Systematics and general characteristics. Exotoxins.properties Principles of therapy and prevention of anaerobic infections. Clostridial gastroenteritis. Clostridium difitsile role in human pathology. Nonspore anaerobes. Bacteroides. Peptococci. General characteristics, pathogenicity factors, role in human pathology.

General principles and methods for anaerobic infections diagnosis. Molecular biological diagnostics - PCR.

Tasks		Methods,	results					
1. The assessment of enzymatic activity of corynobacteria, identification		Bioche	emical pr	operties	of sert:	ain coryno	bacteria	1
identification		Corynobacteria		Enz	ymatic ad	ctivity		Nitrate
		spp.	Glucose	Sucrose	Starch	Cysteinase	Urease	reduction
		C. diphtheriae						
		gravis	+	-	+			+
		mitis	+	-	-			+
		C. pseudodiphtheriae (hofmani)	-+	-+	-	-	+ +	+ +
		C. xerosis C. ulcerans	+	-	+	+	+	-
	Conclusion: according to morp bacterium is identified as	hological, cultural	and bioc	hemical _j	properti	es unknowi	1	

2. Microscopy of ready smear of tuberculosis patient sputum, Ziehl-Neelsen staining.	\bigcirc	\bigcirc	
Demonstration.	()	()	
 Mycobacteria growth on nutrient media. Flotation method 			
3. Determination of M. tuberculosis drug resistance	Smear	Smear	Smear
4. Cord factor of M.tuberculosis, Ziehl-Neelsen	Stain	Stain	Stain
staining. 5. Actinomycetes, pure culture, Gram staining.	\frown		
6. M. leprae, Ziehl-Neelsen staining.	$\langle \rangle$	$\langle \rangle$	$\langle \rangle$
7. M.tuberculosis in sputum, Ziehl-Neelsen staining.		()	()
 8. Anaerobes growth on nutrient media. 9. Clostridium, Gram staining. 			
10. Bacteroides, Gram staining.	Smaan		
	Smear	Smear	Smear
	Stain	Stain	Stain
		Signature of the tutor	

Materials for independent work for class N_{2} 6

Actinomy	ces characteristics	Microbiological dia	agnostics and specific prophylaxis of
Characteristics	Actinomyces israelii		actinomycosis
Morphology (size,		Method	Description
shape, relative positions		Microscopic	
of cells)			
Spores development		Cultural	
Capsule			
Flagella (motility)		Specific	
Gram staining		prophylaxis	
Pathogenicity factors			

Classifica	tion of medically	important cu	lturable mycol	bacteria
	Slowly growing		Fast gr	owing
Tuberculosis agents	Non chromogenic	Chromogenic	Non chromogenic	Chromogenic
M. tuberculosis	M. avium complex	M. kansasii	M. fortuitum	M. phlei
M. bovis	M. xenopi	M. marinum	M. chelonae	M. vaccae
M. africanum	M. haemophilum	M. simae	M. smegmatis	
	et al.	et al.	et al.	

Myvobacteria characteristics

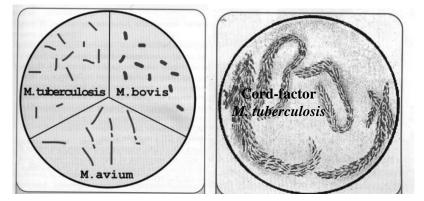
Characteristics	M. tuberculosis	M. leprae
Morphology (size,		
shape, relative positions		
of cells)		
Spores development		
Capsule		
Flagella (motility)		
Gram staining		
Pathogenicity factors		

M. tuberculosis pathogenicity factors

Pathogenicity factors	Biological effects
Cord-factor (trehalose-6,6- dimycolate)	
Sulphatides (sulfur-containing glycolipids)	
Antigens	

Microbiological diagnostics and specific prophylaxis of tuberculosis

Methods	Remarks
Microscopic	
Cultural	
Serological	
Biological	
Molecular-genetic	
Allergic	
Specific prophylaxis	



Microbiological diagnostics and specific prophylaxis of leprosy

Methods	Renarks
Microscopic	
Allergic	
Biological	
Specific prophylaxis	

	Ecologia	al group of anaerob	ic hacteria				Clost	ridia character	istics	
Grar	n-negative			₩Ē		Characterist		C. perfringens	C. tetani	C. botulinum
	oreing rods	Di	seases induced	١ſ	Mo	orphology (size	, shape,			
Bacteroide				₶	rela	ative positions	of cells)			
	rium species			Ħ	Spo	ores developme	ent			
Leptotrich	^			Τt	Ca	psule				
Prevotella				Τt	_	gella (motility))			
	ionas species			T		am staining				
	vadsworthia			T	Pat	hogenicity fact	ors			
Gramposi	tive spore forn	ning rods		П						
^	Clostridium te		Tetanus (Lockjaw)	Τt						
l .	Clostridium pe	erfringens, C. novyi,	Cas concrease populizing			Clostri	dium per	fringens pathog	genicity fact	ors
	C. ramosum, C	C. histolyticum,	Gas gangrene, necrotizing enteritis	١ſ	P	athogenicity			ical effects	
Clostridia	A		entertus			factors		5	·	
	Clostridium be	otulinum	Botulism			alpha-toxin		lecithin in cell m	,	
	Clostridium di	ifficile	Pseudomembranous colitis,			(Lecithinase)	vascular permeability destroying erythrocytes;			
		jjiche	antibiotic-associated diarrhe	a		(Leenanase)		ing activity		
Gramnega	ative cocci				us	beta-toxin		ing activity; indu		
Veillonella		Septic infections			oxi			formation of ca		
Gramposi	tive cocci				Main toxins	epsilon toxin		s vascular perme	eability of th	e
Enterococo	cus species				Ma	1	\mathcal{O}	testinal tract		1
Peptococci	us species	Septic infections				Iota toxin	permeat	ing activity and	increased va	scular
Peptostrep	tococcus spp.						1	the permeability	of the mue	and of the amo
	Bacte	roides pathogenicity	factors			enterotoxin	intestine	1 •		Jsa of the sina
Pathog	enicity factors		ological effect	╟		delta-toxin	hemolys			
ŭ	endotoxin	general toxic effect	0			theta toxin	ÿ	sis, cytolysis		
toxins	leukocidin	damages leukocyt	es		Е.	kappa toxin		ase, gelatinase,	necrotizing	activity
	aallaaaraa		gen fibers of the connective		toxi	lambda-toxin	U	U		
	collagenase	tissue (spread of p			lor .	mu-toxin		nidase: increases	the permea	bility of tissue
enzymes	DNAse,	cause intravascula	r blood clotting		Minor toxin	nu-toxin	-	hemolytic, necr	_	-
	heparinase		<u> </u>		, ,			s gangliosides ce		
	fibrinolysin	dissolves blood cl	ots			neuraminidase		osis in capillaries		

	beta-lactamase	destroys the beta-lactar	m antibiotics		
surface cell	pili	adhesion to the substrate		Close	tridium botulinum pathogenicity factors
structure	capsule	protects the bacteria from	n phagocytosis		
Metabolites	fatty acid	inhibit the chemotaxis an leukocyte	nd cytotoxicity of	Pathogenicity factors	Biological effects
		cs of septic infections c		Botulinum	Blocks the transmission of nerve impulses in the peripheral cholinergic synapses, providing
	Iethod	Re	marks	exotoxin	neurotoxic effects (lethal dose for humans is
Microscopi	с				about 0.3 g)
Cultural					
Serological					
Molecular-	genetic				
	<u> </u>	ics and specific prophy	laxis of gas gangrene	Microbiologica	l diagnostics and specific prophylaxis of botulism
Metho		Remarks		Methods	Remarks
Microscopi	c			Serological	
O_{1}					
Cultural				U	
Biological				Biological	
				U	Potulinum toxoids A. P. E. are used according to
Biological	S			Biological	
Biological Specific		<i>n tetani</i> pathogenicity f	actors	Biological Cultural	
Biological Specific prophylaxis	Clostridiun	<i>n tetani</i> pathogenicity f		Biological Cultural Specific	indications. For urgent passive prophylaxis specific
Biological Specific prophylaxis	<i>Clostridium</i> athogenicity factor		actors iological effects	Biological Cultural Specific	indications. For urgent passive prophylaxis specific
Biological Specific prophylaxis P Tetanus tox	Clostridium athogenicity factor kin	ors B	iological effects	Biological Cultural Specific	indications. For urgent passive prophylaxis specific
Biological Specific prophylaxis P Tetanus tox	Clostridium athogenicity facto ain biological diagno		iological effects	Biological Cultural Specific	indications. For urgent passive prophylaxis specific
Biological Specific prophylaxis P Tetanus to Microl	Clostridium athogenicity facto kin piological diagno ls	ors B ostics and specific prop	iological effects	Biological Cultural Specific	indications. For urgent passive prophylaxis specific
Biological Specific prophylaxis P Tetanus to Microk Microk	Clostridium athogenicity facto kin piological diagno ls	ors B ostics and specific prop	iological effects	Biological Cultural Specific	indications. For urgent passive prophylaxis specific
Biological Specific prophylaxis P Tetanus tox Microl Method	Clostridium athogenicity facto kin piological diagno ls	ors B ostics and specific prop	iological effects	Biological Cultural Specific	indications. For urgent passive prophylaxis specific
Biological Specific prophylaxis Tetanus tox Microl Microscopi Biological	Clostridium athogenicity facto kin piological diagno ls	ors B ostics and specific prop	iological effects	Biological Cultural Specific	Botulinum toxoids A, B, E, are used according to indications. For urgent passive prophylaxis specific antitoxic serum is used.

The list of questions to study:

Classification and general characteristics of the especially dangerous infections. Demands to collection and transportation of biological material. Principles of diagnostics.

Vibrio cholerae, the systematic position. Classification and general characteristics, pathogenicity factors. Biovars. Differentiation from noncholera vibrio. Pathogenesis of cholera. Methods of microbiological diagnostics. Rapid methods. Principles of treatment and prevention.

The causative agent of plague, systematic position, characteristics, pathogenicity factors. Differences from other Yersinia. Pathogenesis, principles of treatment and prevention of plague.

The causative agent of tularemia, systematics, general characteristics. Pathogenesis, principles of treatment and prevention.

Causative agents of brucellosis. Systematics and general characteristics, pathogenicity factors, pathogenesis. Microbiological diagnosis of brucellosis. Principles of treatment and prevention.

Anthrax. Systematics and general characteristics, pathogenicity factors. Differences from non-pathogenic bacilli. Pathogenesis. Microbiological diagnosis of anthrax. Principles of treatment and prevention.

Tasks		Metho	ods, results	
Demonstration.		\bigcirc		$\left(\right)$
1. Growth of vibrio cholera on alkaline agar, TCBS, peptone				
water.		()	()	()
2. Phage lysability of vibrio cholera classica and El Tor.				
3. Tube agglutination test.				
4. Biochemical properties of V. cholerae.	Smear	Smear	Smear	Smear
5. Mobility of Vibrio spp.	5mcm	5 mea		
6. V.cholera, pure culture, Gram staining.	Stain	Stain	Stain	Stain
7. I.pestis in the organs, Leffler staining.	\frown	\frown	\frown	\frown
8. The causative agent of tularemia (pure culture), Gram		$\langle \rangle$		
staining.		()		()
9. Preparations for specific prophylaxis of especially				
dangerous infections.				
10. The causative agent of brucellosis, Gram staining.				
11. The growth of Bacillus spp. on nutrient media.	Smear	Smear	Smear	Smear
12. B.anthracis in organs, Gram staining.	Stain	Stain	Stain	Stain
13. B.anthracis, pure culture, Gram staining.				
14. B.anthracis spores, Ozheshko staining.		Signature	of the tutor	

Additional materials for independent study for class №7

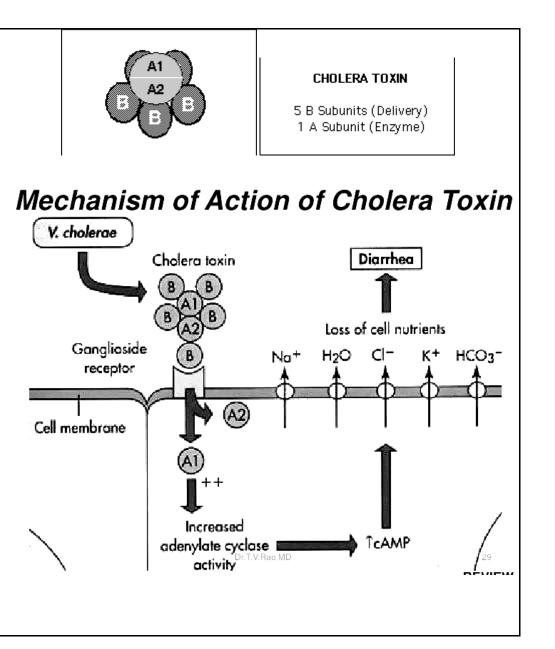
V. cholera characteristics							
Characteristics	Vibrio cholerae						
Morphology (size, shape, relative positions of cells)							
Spores development							
Capsule							
Flagella (motility)							
Gram staining							
Pathogenicity factors							

Vibrio cholerae pathogenicity factors

Pathogenicity factors	Biological effects
Exotoxin (choleragen)	Violation of water-salt metabolism, the cytotoxic effect on the epithelium of the small intestine
Endotoxin	Inhibition of phagocytosis, drop in blood pressure; infectious-toxic shock
Pili	Adhesion to mucosal cells
Fibrinolysin hyaluronidase	Enzymes invasion (aggression)

Microbiological diagnostics and specific prophylaxis of cholera

Remarks	
	Remarks



I. pestis characteristics			F. tularensis characteristics						
Characteristics	s Yersinia pestis		Characteristic	S	Francisella tularensis				
Morphology (size, sha			Morphology (size, shap	be,					
relative positions of co	ells)		relative positions of ce	lls)					
Spores development			Spores development						
Capsule			Capsule						
Flagella (motility)			Flagella (motility)						
Gram staining			Gram staining						
Pathogenicity factors			Pathogenicity factors						
Ү. р	estis pathogenicity factors								
Pathogenicity factors	Biological effects		F.	tularensis	s pathogenicity factors				
Capsular Ag, F1-Ag,	protection against the absorption of		Pathogenicity factors		Biological effects				
fraction 1)	phagocytes, non-toxic, the immunogen		Intracellular parasitism						
Plasminogen	activates lysis of fibrin clots, and inactivates								
activator - protease	C5a		Capsule Prote		otection from phagocytosis				
V/W(Vi)-Ag	Includes protein (V-phase) and LPS (W-phase); exhibits antiphagocytic properties,		L Hndotovin		ctive than other Gram-negative rods oxin (e.g., E. coli)				
Murine toxin	promotes intracellular bacterial growth adrenergic receptor antagonist, proteinaceous substance, localizes intracellularly		Microbiological di Method	and specific prophylaxis of tularemia Remarks					
Bacteriocins	· · ·		Microscopic						
(pestitsiny)	Immunogenic properties		Cultural						
Microbiological dia	gnostics and specific prophylaxis of p	nie	Serological						
8			Molecular-genetic						
Method	Remarks		Allergic						
Microscopic Cultural			Biological						
Cultural Molecular constin			Specific						
Molecular-genetic Biological			prophylaxis						
Specific prophylaxis									
-r -r - proprijuano	L		1						

Brucellosis agents characteristics			Anthracs pathogen characteristics						
Characteristics	Brucella spp.	1	Characteristics			B. anthracis			
Morphology (size, shape,		Mor	rphology (size, sha	ipe,				
relative positions of cells)		relat	tive positi	ons of ce	ells)				
Spores development		Spor	res develo	pment					
Capsule		Cap	sule						
Flagella (motility)		Flag	gella (moti	lity)					
Gram staining		Grai	m staining	7					
Pathogenicity factors		Path	nogenicity	factors					
Brucella path	ogenicity factors			Baci	llus anthrac	is pathogenicity factors			
Pathogenicity factors				Pathogenicity factors Biological effects					
Endotoxin	Systemic toxic effect	Prote		Exotoxi	n contains th	aree factors:			
Hyaluronidase	Breaks down hyaluronic acid	exoto	exotoxin lethal factor - the cytotoxic effect, pulmonary edema,						
Outer Membrane Proteins	Adhesion	(synt	(synthesis is protective Ag - interacts with cell membranes mediat						
Microbiological diagnostics	and prophylaxis of brucellosis		controlled activity of others. components, edematous factor - the in plasmid) in the concentration of cAMP, the development of edem			▲			
Method	Remarks		,						
Microscopic	Kemarks	┥╽┕──┷							
Cultural		41	Microbi	ological	diagnostics	and specific prophylaxis of anthrax			
			Method	l		Remarks			
Serological		Mic	roscopic						
Allergic Molecular-		Cult	tural						
genetic		Serc	ological						
Biological		Alle	ergic						
		Mol	lecular-ge	netic					
Specific		Biol	logical						
prophylaxis		Spec	cific propl	nylaxis					

Class № 8 Microbiological diagmostics0f diseases caused by spirochetes

Date

List of questions to study:

Spirochetes, classification, general characteristics.

Treponema. Systematics and general characteristics. Pathogenesis and immunity in syphilis. Material for the study. Methods of microbiological diagnosis of syphilis. Principles of therapy and prevention of syphilis.

Fusospirochetosis pathogens

Leptospira. Systematics and general characteristics. Pathogenesis, methods of microbiological diagnostics, principles of treatment and prevention of leptospirosis.

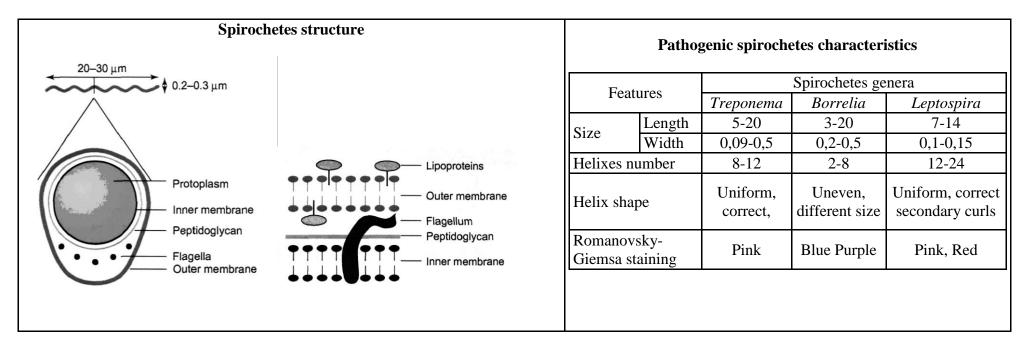
Borrelia. Systematics and general characteristics. Pathogenesis and methods of microbiological diagnosis of relapsing fever. The causative agent of Lyme borreliosis, principles of treatment and prevention.

Tasks	Methods, results
1. Perform the slide microprecipitation reaction (VDRL) for the syphilis	Slide microprecipitation test
serodiagnosis. 2. Assess ELISA (Wasserman test) for the syphilis diagnostics.	1 2 3 1
	Conclusion:

Demonstration. 1. Leptospires, dark field microscopy. 2. Borrelia in blood, Romanovsky-Giemsa staining. 3. Wasserman test (ELISA). 4. Treponema in dental plaque, Gram staining. 5. Treponema pallidum, pure culture, Romanovsky-Giemsa staining. Giemsa staining. Stain	
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Signature of the tutor_

Additional materials for independent study for class № 7.



	caused by	treponema	Pathogenesis of syphilis								
Trepone	ema spp.		Disease		orbidity s, continents)	Disease stage	Period	Main pathogenetic mechanisms			
T. pallidum, subspecie	-					Primary					
T. pallidum, subspecie	es <i>bedjel</i> (ende	micum)									
T. pallidum, subspecie	es pertenue					Secondary					
T. carateum											
Opportunistic or sapro						Tertiary					
T. vincentii, T. refring T. minutum, T. scoliod		ola,									
	Methods for	r spirocheto	sis diagnost	ics		Serological diagnosis of syphilis: CFT (Wasserman) with treponemal and cardiolipin antigens in primary syphilis becomes positive in the 6th week of the disease in 25-50% of patients, in 7-8 weeks - 75-90%. In secondary syphili it is positive in 98-100% cases. In tertiary syphilis CFT is positive in only 60-70% patients. CFT for syphilis diagnostics ha					
		Me	thod usage (+	+/ -)							
Methods	Syphilis	Epidemic relapsing fever	Endemic relapsing fever	Lyme disease	Lepto- spirosis						
Microscopic						•	sitivity and sp	ecificity and is replaced now by			
Cultural						ELISA.					
Serological						ELISA is the common used technics for syphilis diagnostics.					
Allergic						Confirmatory tests					
Molecular-genetic						- treponema immobilization test is rather specific, but					
Biological						labor consuming, subjective, requires treponema culture;					
					 – immunofluorescence (IF) with serum from patients. Screening tests: slide microprecipitation test, ELISA 						

Microscopic method: dark-field microscopy (scrapings of skin lesions, plasma pellet, CSF, urine), microscopy of smears, impregnated with silver, IFT, and electron microscopy.

Cultural method: B. burgdorferi isolation is possible in 80% cases from skin lesions (1stage) on special nutrient media.

Molecular genetic methods: PCR allows the identification of the pathogen's DNA in the samples of the skin, blood, cerebrospinal fluid.

Serological: ELISA, indirect IFT, Western blot. Sometimes there are false-positive results due to cross-reactions among patients with syphilis, mononucleosis, rheumatoid arthritis and others.

<u>Class № 8.</u> Microbiological diagnostics of diseases caused by Rickettsia, Chlamydia and Mycoplasma

Date

List of questions to study:

Rickettsiae, systematic position, classification, general characteristics, role in human pathology. Rickettsia typhii, pathogenesis, immunity and methods of microbiological diagnostics. Other pathogenic rickettsia.

Chlamydia, general characteristics, role in human pathology. Pathogens of psittacosis, trachoma, respiratory and urogenital chlamydiosis. Methods of microbiological diagnosis of chlamydiosis. PCR in chlamydiosis diagnostics.

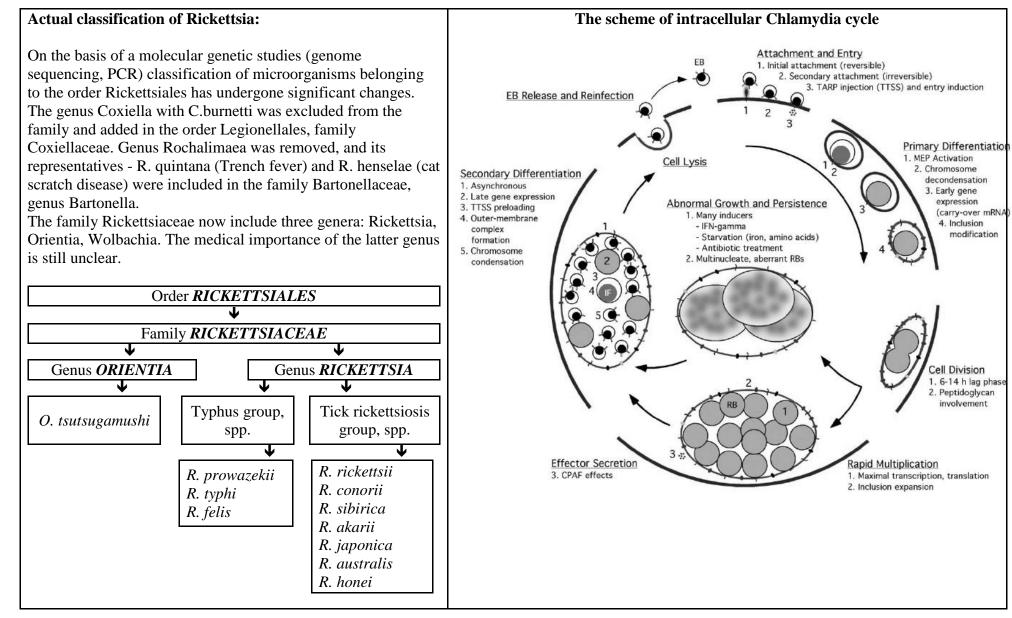
Mycoplasma, general characteristics, role in human pathology. Methods of microbiological diagnostics of mycoplasmoses.

Laboratory work

Tasks					Method	ls, resul	ts		7	0,5	
1. Perform CFT for the typhus diagnostics	Descents	1	2	3	4	5	6	7	SC	DC	Hemolytic
	Reagents	1:5	1:10	1:20	1:40	1:80	1:160	1:320	SC	DC	system
\frown	Saline sol.	-	0,5	0,5	0,5	₹5	25	35	0,5	0,5	4 ml 3%
	Serum of the patient	0,5	0,5	~		-	-	-	0,5	-	erythrocytes
	Diagnosticum	0,5	0,5	0,5	0,5	0,5	0,5	0,5	-	0,5	suspension + 4
	Complement	0,5	0,5	0,5	0,5	0,5	0,5	0,5	0,5	0,5	ml hemolytic
	Incubation 30 minut a	tt 37° C									serum
	Hemolytic system										
Smear	Incubation for 30' at 37 °C										
		\square		\square	\square						
Stain	Assessment	0	0	0	0	0	\sim	0	0	0	
	Conclusion:										
Demonstration.	1/10 1/20 1/40	1/80	1/160 1/	320 1/64	40	SC	DC			$\left(\right)$	
1. Passive blood aggl; utination test for		_	-		_	-	-				
differential diagnostics of epidemic and	$\bigcap \bigcap \bigcap$	\bigcap	() (\bigcap	()		(
residual typhus		\bigvee	\leq		\langle	\bigcirc	\bigcirc				
2. Chlamydia spp. in cell culture,		()									
Romanovsky-Giemsa staining.	\bigcirc \bigcirc \bigcirc \bigcirc	\bigcirc	\bigcirc						C	-	
3. R. prowazeki, pure culture, Zdrodovski	Conclusion:								Smear		
staining.									Stain		

Signature of the tutor_

Additional materials for independent work wor class Nº 8



Laboratory diagnost	tics of diseases ca Mycopla	•	, Chlamydia and	Chlar	nydiosis chara	acteristics	
Method	Method usage		Disease	Pathogen	Source	Transmission	
	rickettsiosis	chlamydiosis	mycoplasmosis	Trachoma			
Microscopic Nutrition media Chicken embryo Cell culture Lab animals Biological Serological Allergic				Urogenital chlamidiosis Veneral lymphogranulomas Psittacosis Pharyngitis, sinusitis, bronchitis, pneumonia			
Molecular-genetic				Mycoplasma ar	nd mycoplasm	osis charac	teristics
Chlamydia + chlamydd Reticulate body	ophila trachomatis	264 - 20 P	Rickettsia spp. Diagnosis	Properties		Mycoplas	ma spp
		infection 🔶 🔶		Size Cell wall, peptidoglican Gram staining Capsule			
Uninfected host cell	Pneumonia	Hepatitis Alternat	1 Lives	Flagella Spore			
		Skin rash — fleas	, lice & mites Mycoplasma	Resistance in environme	ent		
	Sul 4	Sul Sul	Diagnosis	Cultural properties			
Chlamydia spp. C. trac	achomatis G	enital	- Serology	Reproduction			
Diagnosis Cervicitis Infection M. pneumoniae - NAAT		- NAAT Treatment	Parasitism peculiarities				
- Tissue culture Lymphogranuloma Ureaplasma - Macrolide			Source of infection				
– NAAT Treatment – Macrolides		Cilia	– Tetracycline Mycoplasma	Transmission mechanism Immunity	ms		
– Tetracyclines	\square		ycoplasma adherence ciliated epithelium				

<u>Class № 9</u> Concluding test "Special microbiology"

- 1. Staphylococci, general characteristics. Role in human pathology. Pathogenicity factors and mechanisms of pathogenesis of staphylococcal infections. Microbiological diagnosis. Principles of treatment and prevention of staphylococcal infections.
- 2. Streptococci, classification. General characteristics. Pathogenicity factors. Antigenic structure. Pathogenesis, immunity, microbiological diagnosis, principles of treatment and prevention of streptococcal infections.
- 3. Classification of Neisseria. Meningococcus, general characteristics. Meningococcal infections, mechanisms of pathogenesis, immunity, methods of diagnosis, prevention.
- 4. Gonococci, general characteristics. Mechanisms of pathogenesis and immunity. Microbiological diagnosis of acute and chronic gonorrhea.
- 5. General characteristics of the family Enterobacteriaceae.
- 6. General Principles of bacteriological diagnosis of acute intestinal infections (AII). The nutrient medium for enterobacteria. Classification principles of application.
- 7. Materials for researches in AII diagnostics.
- 9. E. coli, common characteristic. The biological role of Escherichia coli. Diseases caused by Escherichia.
- 10. Salmonella. General characteristics. Members of the genus. Serological classification by Kaufmann-White. Molecular biological typing.
- 11. Pathogens of typhoid, paratyphoid A and B, general characteristic. Phage typing. Vi-antigen and its value.
- 12. Pathogenesis and methods of microbiological diagnosis of typhoid and paratyphoid.
- 13. Immunity in typhoid fever. Serological diagnosis of typhoid and paratyphoid. Specific prophylaxis.
- 14. The etiology of food poisoning and intoxication of bacterial origin. Materials and methods of diagnosis.
- 15. Salmonellosis. Characteristics of pathogens and diagnostic methods. Nosocomial salmonellosis.
- 16. Shigella. Classification. Characteristics. Pathogenesis, immunity. Methods of microbiological diagnostics of acute and chronic dysentery.
- 17. Klebsiella. Classification, general characteristics. Pathogenesis, immunity, methods of microbiological diagnostics of klebsiellosis.
- 18. Pseudomonas aeruginosa, general characteristics, pathogenicity factors. Role in human pathology.
- 19. Pathogens of intestinal yersiniosis, general characteristics. Pathogenesis. Methods of diagnosis of yersiniosis.
- 20. C.diphtheria, general characteristics. Differences from non-pathogenic corynebacteria. Mechanisms of pathogenesis and microbiological diagnosis of diphtheria.
- 21. Diphtheria toxin and its properties. Toxoid. Immunity in diphtheria and its character. Determination of antitoxic immunity. Principles of therapy and prevention of diphtheria.
- 22. The causative agent of whooping cough, general characteristics. Differentiation with parapertussis agent. Pathogenesis, immunity. Microbiological diagnosis, principles of treatment and prevention of pertussis.
- 23. General characteristics of the causative agents of tuberculosis. Pathogenesis, immunity, diagnosis and specific prevention of tuberculosis. Mycobacteriosis.
- 24. The causative agent of leprosy. Characteristic, pathogenesis, immunity.

- 25. Particularly dangerous infections. classification mode, Basic rules of sampling, sending and transportation of infectious material General principles of diagnosis TELO.
- 26. V. cholera. Systematics. General characteristics. Differentiation of biovars. Pathogenesis, immunity, principles of treatment and prevention. Methods of microbiological diagnostics.
- 27. The causative agent of plague, a general characteristic. The pathogenesis of plague. Immunity, the principles of therapy and prevention of plague.
- 28. B. anthracis characteristic. Pathogenesis, immunity, principles of treatment and prophylaxis of anthrax.
- 29. The causative agent of tularemia, general characteristic. Pathogenesis, immunity, principles of treatment and prophylaxis of tularemia.
- 30. Pathogens of brucellosis, a general characteristic. Differentiation of Brucella species. Pathogenesis, immunity, principles of treatment and prevention of brucellosis.
- 31 Spirillae family. Campylobacter, characteristics, role in human pathology. Helicobacter.
- 32. Classification and general characteristics of anaerobes. Clostridia. Bacteroides, Peptococci and other nonspore anaerobes. Pathogenicity factors. Role in human pathology.
- 33. The causative agent of tetanus, general characteristics. Pathogenesis, immunity, principles of treatment and prevention of tetanus.
- 34. Gas gangrene pathogens, general characteristics. Pathogenesis, principles of treatment and prevention of gas gangrene.
- 35. The causative agent of botulism, general characteristic. Pathogenesis, principles of botulism prevention and therapy. Clostridial gastroenteritis.
- 36. Methods of diagnosis of anaerobic infections.
- 37. Classification and general characteristics of spirochetes.
- 38. Classification of treponemes and treponemal diseases. Characteristics of syphilis causative agent. Pathogenesis, immunity, diagnostic tests for syphilis.
- 39. Leptospires. General characteristics. The pathogenesis of leptospirosis, immunity, specific prevention. Microbiological diagnosis of leptospirosis.
- 40. Borrelia, general characteristics. Recurrent fever pathogenesis, immunity. Microbiological diagnosis. The causative agent of Lyme borreliosis.
- 41. Systematic position and characterization of Rickettsia. Pathogenesis, immunity, methods of diagnosis of typhus.
- 42. Characteristics of chlamydia. Causative agents of trachoma, psittacosis, respiratory and urogenital chlamydiosis. Pathogenesis and methods of diagnosis of chlamydia.
- 43. General characteristics of mycoplasma, pathogenicity factors, role in human pathology. Methods of mycoplasmosis diagnosis.

Practical skills:

- 1. Determine the morphology of Staphylococcus, pure culture, Gram stain.
- 2. Determine the morphology of streptococcus, pure culture, Gram stain.
- 3. Determine the morphology of gonococci in pus, Gram stain.
- 4. Determine the morphology of enterobacteria, pure culture, Gram stain.
- 5. Determine the morphology of the mixture of S.aureus and Escherichia coli, Gram stain.
- 6. Determine the morphology of B.anthracis, pure culture, Gram stain.

7. Determine the morphology vibrio, pure culture, Gram stain.

8. Determine the morphology of Brucella, a pure culture, Gram stain.

9. Determine the morphology corynebacteria, pure culture, Leffler stain.

10. Determine the morphology of Klebsiella, pure culture, Hins-Burri stain.

11. Determine the morphology of mycobacteria in sputum, Ziehl-Neelsen stain.

12. Determine the biochemical properties of enterobacteria on Kligler iron agar medium.

<u>Class № 10.</u> Clinical microbiology. Microbiological diagnostics of sepsis and purulent infections of the skin

Date____

List of questions to study:

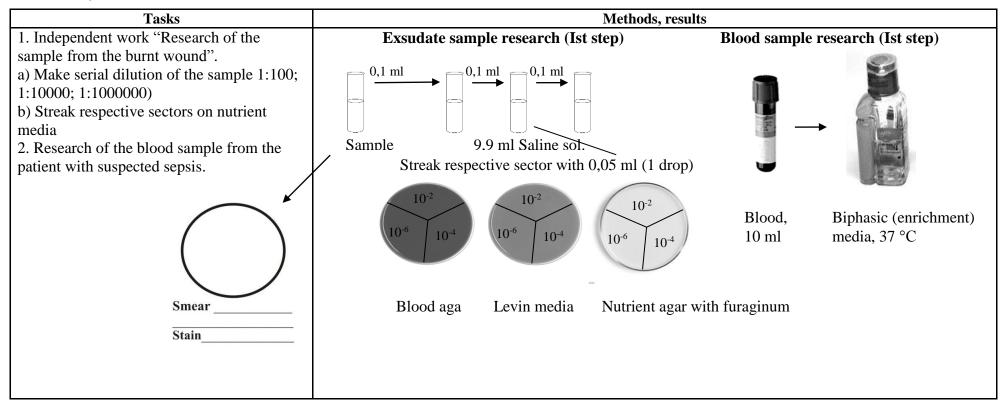
Clinical Microbiology: definition, objectives. Opportunistic microbes (OPM). Epidemiology, pathogenesis, diagnosis of diseases caused by UPM. Criteria of etiological significance.

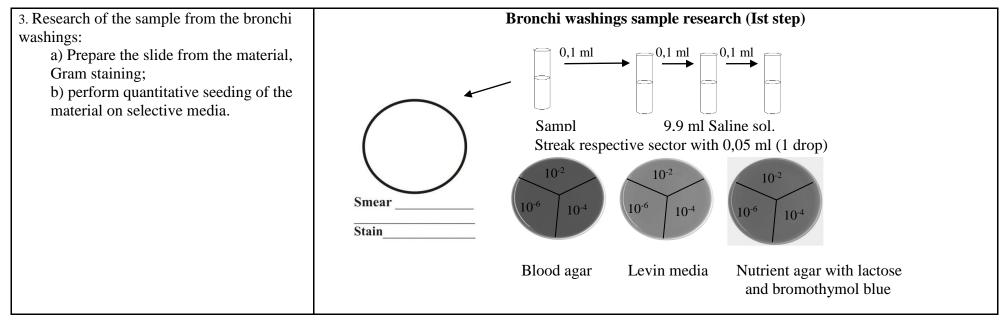
Clinical forms and the etiology of septic infections of the skin and subcutaneous tissue. Methods of microbiological diagnostics.

Bacteriological method. Material for the research (pus, exudate), rules and methods of sampling. Criteria for assessment of the etiological significance of isolated microorganisms. Susceptibility to antibiotics.

Bacteremia. Sepsis. Pyosepticemia. Etiology, definitions. Methods of microbiological diagnosis of sepsis. Bacteriological method. Rules and methods of blood collection for the research, peculiarities of pathogen isolation and results interpretation Susceptibility to antibiotics testing.

Laboratory work

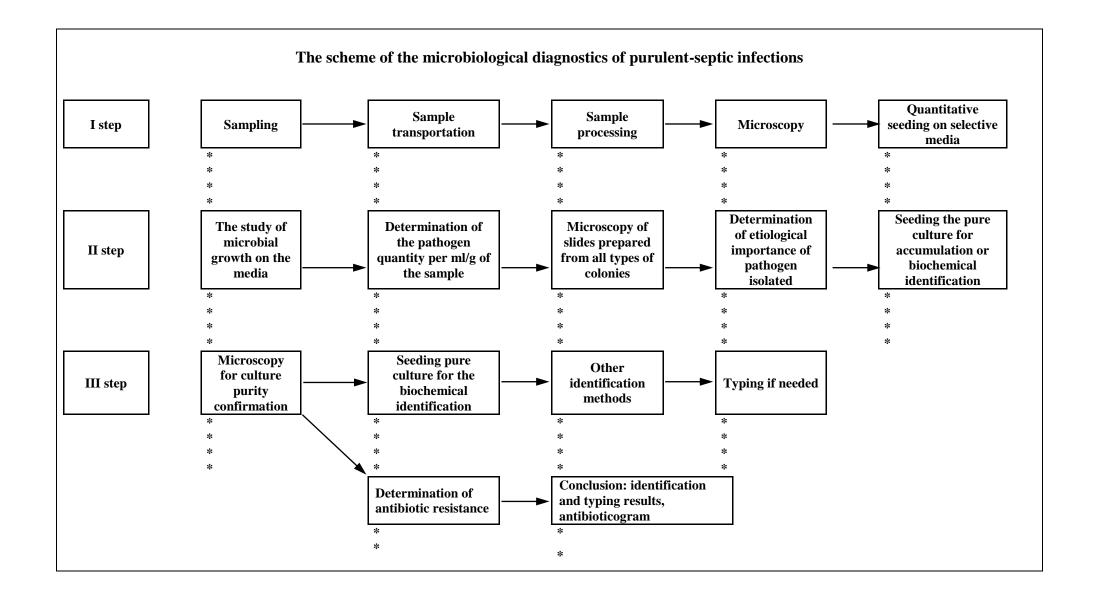




Signature of the tutor_____

Additional materials for independent work for class № 10.

Criteria of etiological importance off opportunistic pathogens	Etiology (main pathogens) of purulent infection of the skin
1.	1.
2.	2.
3.	3.
4.	4.
6.	5.
7.	<u></u>
8.	
9. 10.	



<u>Class № 11.</u> Clinical microbiology. Microbiological diagnostics of purulent infections of urinary tract. Hospital-acquired infection.

Date

The list of questions to study:

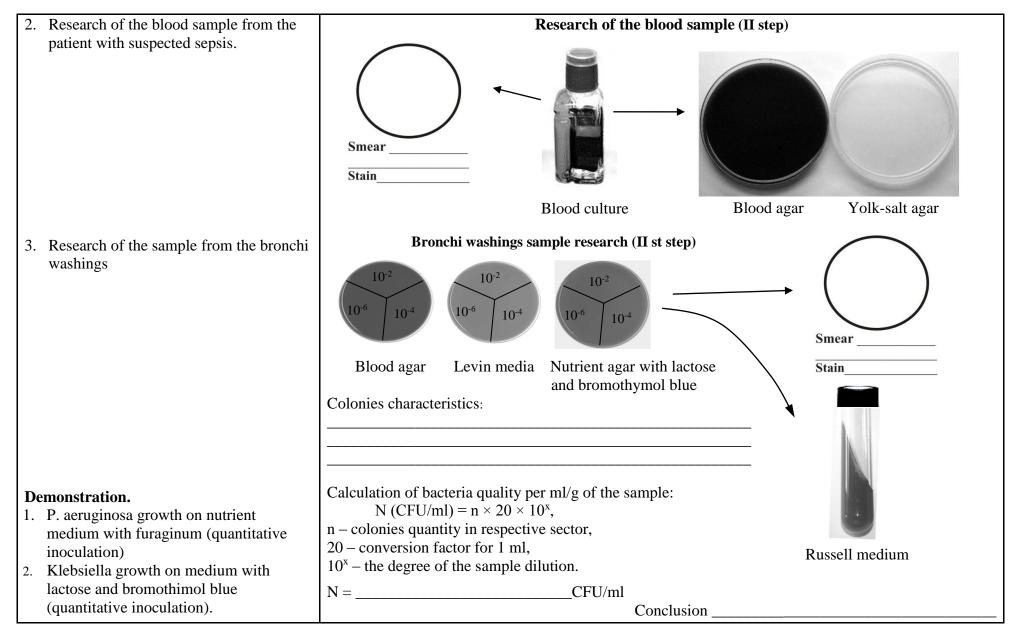
Clinical forms and etiology of septic-purulent (opportunistic) infections of the bronchi and lungs. Methods of microbiological diagnostics. Material for the research, rules and methods of sampling. Bacteriological method. Criteria for assessing the etiological role of isolated bacteria. Susceptibility to antibiotics.

Etiology and clinical forms of septic-purulent (opportunistic) infections of the urogenital tract. Methods of microbiological diagnostics. Material for the study, rules and methods of sampling. Urine culture. Criteria for assessing the etiological role of isolated microbes. Susceptibility to antibiotics. Antibioticogramm.

Nosocomial infections. Pathogens. Principles of microbiological diagnosis. Prevention.

Laboratory work

Tasks	Methods, results
1. Independent work: "Research of the	Exsudate sample research (IIst step)
sample from the burnt wound"	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	Calculation of bacteria quality per ml/g of the sample: N (CFU/ml) = $n \times 20 \times 10^x$, n - colonies quantity in respective sector, 20 - conversion factor for 1 ml, Smear 10^x - the degree of the sample dilution. Stain
	N =CFU/ml
	Conclusion



Signature of the tutor_____

Additional materials for independent work for the class № 10 Etiology (main pathogens) of respiratory septic-purulent diseases

1.		
2.		
3.		
4.		
5.		

Etiology (main pathogens) of urogenital septic-purulent diseases

1.	
2.	
3.	
4.	
5.	

Hospital acquired infections (HAI, nosocomial infections) - any clinically recognizable infection contracted by patient due to residence or receiving various types of inpatient and outpatient medical care, the delivery of emergency medical services both in health care organizations and at home, as well as infectious disease contracted by medical staff as a result of professional activity, regardless of time of symptoms onset.

Nosocomial infections should be distinguished (introduced) from cases of infectious diseases registered in the delivery of health care in inpatient, outpatient medical institutions, or at home. Their main features are: the absence of a causal connection with the performance of therapeutic and diagnostic procedures and manipulations; acquisition of infection within the minimum incubation period before seeking medical help. Etiology (main pathogens) of nosocomial infections

CLASSIFICATION of HAI

HAI etiology includes bacteria; viruses; fungi; protozoa and metazoa.

By source of infection HAI can be exogenous; endogenous and auto-infection.

Depending on the profile of medical care nosocomial infections are divided into: surgical infection, obstetric infections; neonatal infections; other infections.

Depending on the entrance gate and localization of infection nosocomial infections are divided into: surgical wound infections; burn wound infection; infections of skin and soft tissue; primary bloodstream infections; sepsis; cardiovascular system infection; bone and joint infections; eye infection; ear infections; infection of the nose, throat, mouth and upper respiratory tract; lower respiratory tract infections; pneumonia; infections of the central nervous system; urinary tract infections; infections of the reproductive system; infections of the gastrointestinal tract.

Depending on the type of pathogen nosocomial infections are divided into: caused by obligate pathogens and opportunistic pathogens.

Depending on the spread in the organism HAI can be divided into: localized; generalized and systemic infections.

Depending on the course character nosocomial infections are divided into: acute; subacute and chronic.

By severity nosocomial infections are divided into: pathogen caring; mild; moderate and severe form.

Depending on the mechanisms, ways and factors of transmission of nosocomial infections are divided into: aerosol; contact (direct and indirect); parenteral; fecal-oral (food and water).

1. 2. 3. 4. 5.

<u>Class № 12.</u> Microbiological diagnostics of fungal and protozoan imfections

The list of questions to study:

General characteristics and classification of protozoa. Pathogenic representatives. Laboratory diagnosis of malaria, toxoplasmosis, amebiasis, giardiasis, trichomoniasis.

The causative agent of cryptosporidiosis.

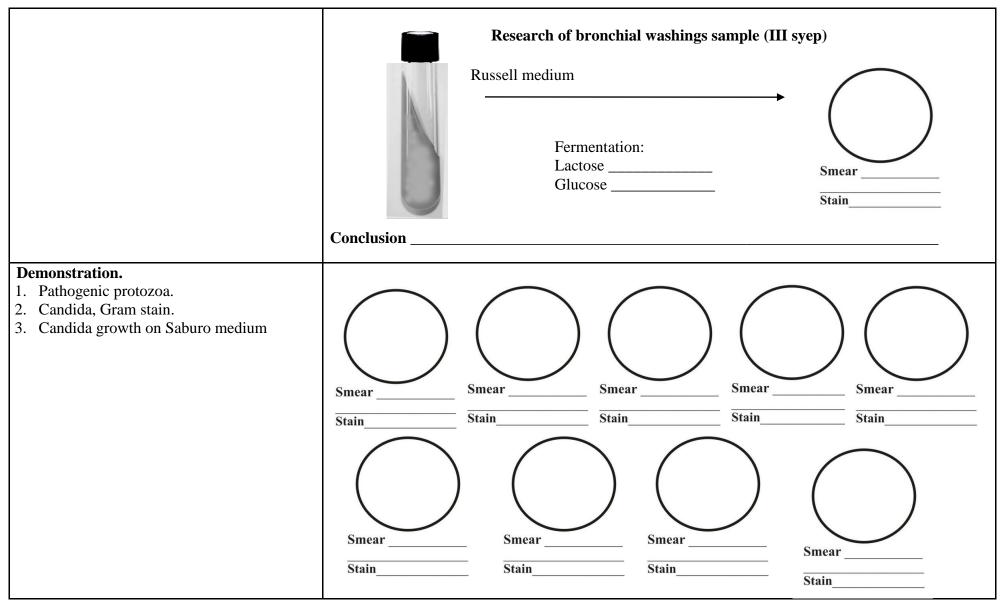
Classification and general characteristics of fungi. Pathogens of ringworm, keratomycosis, deep mycoses. Candidiasis and conditions which promote its development. General principles of fungal infections diagnostics.

Pathogen of pneumocystosis.

Laboratory work

Tasks	Methods, results
1. Research of the blood sample from the patient with suspected sepsis.	Blood sample research (III step)
2. Research of the sample from the bronchi washings	Blood agar YSA Colonies characteristics: Conclusion:

Date



Signature of the tutor_

DIAGNOSTICS OF MYCOSIS

Microscopic method. High diagnostic value of the method caused by significant differences in fungal morphology, simplicity and speed of the research. The result can be obtained within 1-2 hours. Microscopy can be conducted in native preparations without staining. For visualization of the pathogen in the biological material which is poorly transparent (hair, skin, nails, etc.) it should be processed with 10-20% alkaline (KOH), which dissolves keratin and has no effect on the morphology of the fungal cells. Fixed smears may be stained by Gram (fungi are Gram-positive), Romanovsky-Giemsa, special techniques. Dimorphic fungi in biological material are in the form of yeast. Microscopy of histological preparations is also possible.

Serological method:

Immunofluorescence is sensitive, specific and rapid method based on the identification of fungal Ag in biological materials.

PHAT, latex agglutination, PT, CFT, ELISA are used to detect fungal antigens and antibodies in blood, CSF, urine. Serological reactions not always highly specific, but produce results earlier than culture method.

Culture (mycological) method. Most pathogenic fungi are mesophiles (20-45 °C) and not demanding for the nutrient medium. Optimal pH ranges from 4.0 to 6.5. Growing time depends on the kind of fungus and can be from several weeks to 2-3 days. The most frequently used medium is Saburo agar (peptone agar with glucose or maltose). The acidity of the medium and high carbohydrate content inhibits the growth of bacteria. Dimorphic fungi (pathogens caused subcutaneous and deep mycoses) grow in the mycelial form at 20-25 °C. The identification of a pure culture is carried out by morphological and biochemical characteristics.

Allergic method. Skin tests are performed with fungal allergens (eg. Candide). Method is not very specific because of the group antigens presence.

Biological method. Bioassays in laboratory animals allow us to estimate the virulence of the pathogen, get in tissue culture of the fungus (usually in a form of yeast).

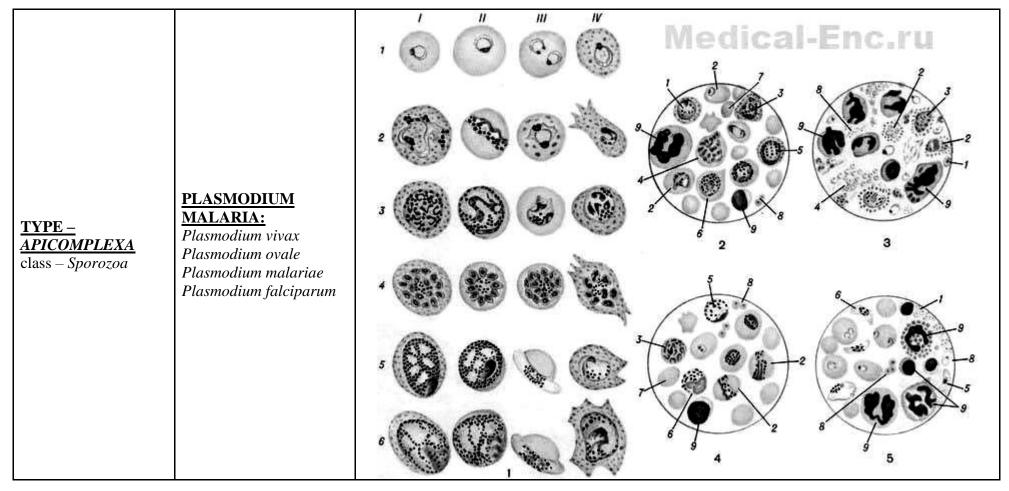
Molecular genetic methods. PCR and molecular hybridization are used. Among advantages - very high sensitivity and specificity, relative safety and short time needed for results.

The comparison of eu- and prokaryotic cell		otic cell	Acanthamoeba / Enterobius	Acanthamoeba Enterobius
Main characteristics	Prokaryotic cell	Eukaryotic cell	Naegleria	
Cell size	Average 0,2-2,0 mkm			100
Nucleus	Does not have a true nucleus. Nucleoid, is not separated from the cytoplasm by a membrane		Vector-Borne Kissing bug Trypanosoma Mosquito Plasmodium Wuchereria	dium
Chromosomes	Ring-like		Sand fly Entamoeba	
Number of chromosomes per cell	Usually one		Leishmania Tsetse fly Trypanosoma	
Mitochondria	No		Taenia	
Endoplasmatic reticulum	No		Toxoplasma	5
Ribosomes location	Dispersed in cytoplasm		Contact and Penetration of Skin	
Sedimentation constant	70S		Necator Schistosoma	
Teichoic asides in cell wall	Gram positive bacteria		Giardia	
Peptidoglycane in cell wall	All bacteria with exception of mycoplasm		Main routs of pathogenic parasites invasion	
Endospores	Some has			
Division of cell	Binary (mitosis)			
Gametes, zygotes	No			

Protozoa belong to the domen – *EUKARYA*, kingdom – *ANIMALIA*, subkingdom – *PROTOZOA*, which includes 7 types, Four types of medical importance are showed in the tableи

Taxons	Representatives	Disease	Morphology
	AMOEBAE Entamoeba histolytica	Amebiasis	
TYPE SARCOMASTIGOPHORA subtype Sarcodina	Naegleria, acanthamoeba, hartmanella	Amoebic meningoencephalitis, keratitis	
subtype Mastigophora	<u>LEISHMANIA</u> Leishmania species	Leishmaniasis	
	TRYPANOSOMES Tripanosoma gambiense, Tripanosoma rodesiense Tripanosoma cruzi	African trypanosomiasis (sleeping disease) Chagas disease (American trypanosomiasis)	3550
	<mark>GIARDIA:</mark> Lamblia intestinalis (Giardia lamblia)	Diarrhea, malabsorption syndrome	

	<u>Trichomonas</u> Trichomonas vaginalis	Trichomonas vaginalis vaginitis, urethritis, prostatitis	
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<u>TOXOPLASMA:</u> Toxoplasma gondii	Toxoplasmosis	
SARCOCYST: Sarcocystis species	Sarcocystosis	Sarcocystis V 20um
ISOSPORA: Isospora species	Diarrhea	
CRYPTOSPORIDIUM: Cryptospodium species	Diarrhea	
<u>CYCLOSPORA:</u> Cyclospora cauetanensis	Diarrhea	10 日 日
BABESIA: Babesia species	Babesiosis	

<u>TYPE –</u> <u>CILIOPHORA</u> class <i>Kinetofragminophorea</i>	BALANTIDIUM: Balantidium coli	Balantidiasis	
<u>TYPE –</u> <u>MICROSPORA</u> class <i>Microsporea</i>	MICROSPORIDIA: Encephalitozoon species Enterocytozoon species	Microsporidiasis	
	BLASTOCYST: Blastocystis hominis	Vacuolar	O O G O MV Granular

MICROBIOLOGICAL DIAGNOSTICS OF PROTOZOAN INVASIONS

AMEBIASIS Microscopic method. Materials: samples of faeces or exudates from abscesses. Smears are stained with iodine solution or hematoxylin. Tissue forms with phagocytized erythrocytes or quad cysts. can be identified. In native specimens characteristic motile vegetative forms can be noted. IF may be used for the identification of pathogen Serological method: PHA test, ELISA, CFT, and other tests may be used. The highest antibody titer can be detected in extraintestinal amebiasis. Some non-pathogenic amoeba are morphologically identical to Entamoeba histolytica. The differentiation is based on the enzymatic, immunological and	LEISHMANIASIS Microscopic method . Materials: skin lesions (bumps, ulcers), bone marrow. Smears are stained by Romanovsky-Giemsa method. The detection of amastigote (nucleus and kinetoplasts are of red-purple color and cytoplasm is bluish) is of importance. IFT is also used. Cultural method . Leishmania can be cultured on blood agar. Biological method . Infection of mice or hamsters is possible. Serological method . Specific antibodies may be detected by CFT, passive hemagglutination or ELISA.
 Instolytical The differentiation is based on the enzymatic, initiality organization and molecular genetic analysis. <u>TRYPANOSOMES</u> Microscopic method. Materials: samples of blood, punctate from cervical lymphatic nodes, cerebrospinal fluid. Smears are stained by Romanovsky-Giemsa method. Cultural method. Trypanosomes can be cultured on a nutrient medium with blood as well as in white mice or rats. Serological method. The determination of specific IgM by ELISA is used. 	Allergic method. Skin test with leishmania Ags may be used. GIARDIASIS Microscopic method. Materials: feces, duodenal secretion. In smears cysts or vegetative forms, can be detected. Iodine staining is usually used. IFT is also applicable. Cultural method. Giardia can be cultured nutrient media. Serological method. Specific antibody titers are higher in symptomatic
TRICHOMONIASISMicroscopic method.Materials: samples from urethral discharge, prostaticsecretions or urine sediment are studied.Smears are stained by Romanovsky-Giemsa(trophozoite nucleus is violet-ruby, cytoplasm - blue and blefaroplast, flagella and aksostil - pink-red), methylene blue. IF is also used.Cultural method.In chronic trichomoniasis pathogen can be cultured on nutrient media with protein.The method gives good results when confirmation of convalescence is needed.	giardiasis. <u>MALARIA</u> <u>Microscopic method</u> . Smears of blood are stained by Romanovsky-Giemsa method. Various forms of pathogen can be identified (red nucleus, blue cytoplasm). Differentiation of species is carried out by morphological features of parasites and parasitized erythrocytes. <u>Serological method</u> . Specific antibodies are detected by ELISA. IFT is applicable for diagnostics. Molecular genetic method . PCR.
 TOXOPLASMOSIS Microscopic method. Materials: biopsy, samples of body fluids (blood, cerebrospinal fluid, lymph node puncture, etc.). Smears are stained by Romanovsky-Giemsa method. Toxoplasma Ags may be detected by IF test. Cultural method. Cultivation of Toxoplasma is possible in cell cultures and chicken embryo. Serological method. Detection of specific IgM indicates the early stages of the disease. IgG peaks at 4-8 week of disease. ELISA is widely used. Biological method. Mice are infected in the abdominal cavity or intracranially. They usually succumb 7-10 days after infection. The pathogen is identified microscopically or by serological method. 	BALANTIDIASIS Microscopic method. Microscopy of smears from feces under low magnification allows to reveal large motile balantidiums. Cultural method. Possible, but rarely used

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