



Indications for Use/Intended Use

The MTSTM (MIC Test Strip) Vancomycin 0.016-256 μ g/mL is a quantitative method intended for the *in vitro* determination of antimicrobial susceptibility of bacteria. MTSTM consists of specialized paper impregnated with a pre-defined concentration gradient of an antimicrobial agent, which is used to determine the minimum inhibitory concentration (MIC) in μ g/mL of antimicrobial agents against bacteria as tested on agar media using overnight incubation and manual reading procedures. The MTSTM Vancomycin at concentrations of 0.016 – 256 μ g/mL should be interpreted at 24 hours of incubation.

Vancomycin has been shown to be active both clinically and *in vitro* against these bacterial species according to the FDA drug approved label:

Gram-positive bacteria

Staphylococcus aureus and Staphylococcus epidermidis (including methicillin resistant strains) Enterococcus faecalis Enterococcus faecium

Specifications

Antibiotic code: VA MIC range: 0.016-256 µg/mL Antibiotic group: glycopeptide

Directions for Use

Follow the MTS[™] package insert instructions.

Procedures specific to MTS[™] Vancomycin:

Storage	Temperature between -20°C and +8°C
Organism	Staphylococcus spp., Enterococcus spp.
Medium	Mueller Hinton Agar
Inoculum	Suspension in saline (0.85% NaCl) to 0.5 McFarland standard
Incubation	Agar plates in inverted position at $35 \pm 2^{\circ}$ C for 24 hours in ambient atmosphere
Reading	Interpret the MIC as 100% inhibition

FDA vancomycin interpretive criteria (µg/mL)

Use the following breakpoints to categorize the result according to the interpretive criteria (i.e. susceptible or resistant). An MTSTM MIC value which falls between standard two-fold dilutions must be rounded up to the next standard upper two-fold value before categorization. For example a *S. aureus* vancomycin MIC of 1.5 μ g/mL is reported as 2 μ g/mL (see reading guide section for example pictures).

Bacterial Species	Susceptible	Intermediate	Resistant
Staphylococcus aureus	≤2	4-8	≥16
Staphylococcus epidermidis	≤4	8-16	≥32
Enterococcus spp.	≤4	8-16	≥32

US FDA Susceptibility Interpretive Criteria (STIC) Ref: https://www.fda.gov/STIC

Quality Control range (µg/mL) (CLSI M100S Performance Standards for Antimicrobial Susceptibility Testing, 29th Edition)

To check the performance of the MTS[™] Vancomycin, media and procedure, test *S. aureus* ATCC 29213 and *E. faecalis* ATCC 29212 according to the method as outlined in the MTS[™] package insert. Results are considered satisfactory if they fall within the following ranges:

Quality Control Strain	Acceptable MIC Range (µg/mL)		
Staphylococcus aureus, ATCC [®] 29213	0.5 – 2		
Enterococcus faecalis, ATCC [®] 29212	1 – 4		

Performance Characteristics

Correlation to Reference Method '				
	Ν	% Essential Agreement	% Category Agreement	
S. aureus ^{2,3}	353	99.7	98.6	
S. epidermidis	65	100	98.5	
E. faecalis	389	100	99.7	
E. faecium	81	100	97.5	
All Organisms	888	99.9	99.0	

¹ For the plate inoculation procedure, one testing site utilized a rotatory plate inoculator (Retro C80) and there was no difference in correlation to the reference broth microdilution results for this site as compared to the other two site.

² Methicillin susceptible S. aureus (158 MSSA) and methicillin resistant S. aureus (195 MRSA).

³ The MTSTM vancomycin MIC values tended to be one doubling dilution lower when testing MRSA compared to the reference broth microdilution (out of 195 MRSA isolates tested, 0.5% were 2 dilutions lower, 21.02% were 1 dilution lower, 73.3% were equivalent and 5.12% were 1 dilution higher compared to the CLSI broth microdilution results).

Reproducibility

98.1% of MTSTM Vancomycin results (5 staphylococci and 5 enterococci tested in triplicate at 3 sites on 3 days) were within a doubling dilution of reference broth microdilution results.

Limitations

The ability of the MTSTM to detect vancomycin resistant *S. aureus* strains is unknown due to the limited number of resistant strains available at the time of comparative testing.

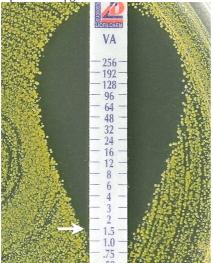
The ability of the MTSTM to detect vancomycin intermediate *S. aureus* is unknown due to the limited number of vancomycin intermediate strains tested. Any *Staphylococcus* isolate for which the vancomycin MIC is 4 or 8 μ g/mL should be submitted to a reference laboratory for further testing.

The ability of the MTSTM to detect vancomycin intermediate or resistant *S. epidermidis* is unknown because intermediate or resistance strains were not encountered at the time of testing. Any *S. epidermidis* isolate for which the vancomycin MIC is \geq 8 µg/mL, should be submitted to a reference laboratory for further testing.

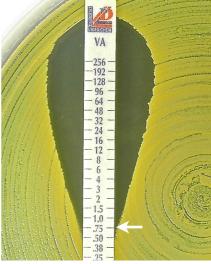
MTSTM Vancomycin Reading Guide

Note: Interpret the MIC as 100% inhibition

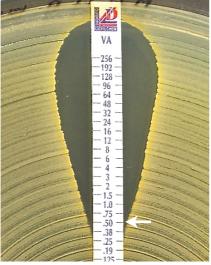
Example 1: *S. aureus*, VA MIC = 1.5 µg/mL, reported as 2 µg/mL



Example 2: *S. aureus,* VA MIC = 0.75 µg/mL, reported as 1 µg/mL



Example 3: *S. aureus,* VA MIC = 0.5 µg/mL



PRESENTAT	ΓΙΟΝ	μg/mL	Code	Packaging	Ref.
				10	920571
MTS™ Vancomycin	Vancomycin	0.016 - 256	VA	30	92057
				100	920570

MTS™ (MIC Test Strip), International Patent

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SUMMARY AND EXPLANATION OF THE TEST

The Liofilchem[®] MTSTM (MIC Test Strip) are gradient tests used to determine the minimum inhibitory concentration (MIC) of select bacteria to indicate appropriate patient treatment and for identifying resistance patterns. The MIC is the minimum inhibitory concentration of an antibiotic that will inhibit the growth of bacteria under standardized *in vitro* conditions. Broth and agar dilution MIC procedures based on two-fold serial dilutions of antibiotics are the reference methodologies; expected reproducibility of which is within ± 1 two-fold dilution (¹).

PRINCIPLE OF THE METHOD

MTSTM are made of special high quality paper impregnated with a predefined concentration gradient of antibiotic, across 15 two-fold dilutions like those of a conventional MIC method. When the MTSTM is applied onto an inoculated agar surface, the preformed exponential gradient of antimicrobial agent diffuses into the agar for over an hour. After incubation, a symmetrical inhibition ellipse centered along the strip is formed. The MIC is read directly from the scale in terms of μ g/mL at the point where the edge of the inhibition ellipse intersects the strip MTSTM.

REAGENTS

MTS[™] is supplied in 3 different packaging options (no additional reagents are included):

- The 10-test box contains 10 strips individually packed in desiccant envelops and an instruction sheet.
- The 30-test box contains 30 strips individually packed in desiccant envelops and an instruction sheet.
- The 100-test box contains 10 desiccant envelops, each containing 10 strips, and an instruction sheet. The 100-test pack also contains a storage tube.

DIRECTIONS FOR USE

Storage

<u>Unopened foil packages</u>: On receipt, store MTSTM at -20° C to $+8^{\circ}$ C until the given expiry date. Some MTSTM (e.g. carbapenems) should be stored frozen at -20° C. Check the drug-specific MTSTM supplement for the specific storage temperature.

<u>Opened foil packages</u>: Leftover MTSTM from an opened foil package (valid for 100 strip pack only, as the 10 and 30 strip packs contain individually packed strips) must be stored at 2-8°C in the airtight tube, containing desiccant, provided in the pack for no more than 7 days. Do not store near sources of heat and do not expose to excessive temperature variations.

Handling

Before using the MTSTM from an unopened package, visually inspect to ensure the package is intact. Do not use the strips if the package has been damaged. When removed from the refrigerator, allow the package or storage container to reach room temperature for about 30 minutes. Moisture condensing on the outer surface must evaporate completely before opening the package.

Precautions

The MTSTM is not classified as being hazardous according to current regulations. The MTSTM is a disposable product. The MTSTM is only for diagnostic *in vitro* use and is intended for professional use. They must be used in the laboratory by properly trained operators using approved aseptic and safety methods for pathogenic agents.

Per the FDA-Recognized Susceptibility Test Interpretive Criteria website, the safety and efficacy of antimicrobial drugs, for which antimicrobial susceptibility is tested by this AST device, may or may not have been established in adequate and well-controlled clinical trials for treating clinical infections due to microorganisms outside of those found in the indications and usage in the drug label. The clinical significance of susceptibility information in those instances is unknown. The approved labeling for specific antimicrobial drugs provides the uses for which the antimicrobial drug is approved.

Materials Required but Not Provided:

- Agar plate medium (validated by the media manufacturer for use with antimicrobial susceptibility testing, 90 or 150 mm plates)
- Suspension medium
- McFarland turbidity standard

(The medium to be used as well as the inoculum suspension will depend on the organism under investigation, see the MTS[™] Supplement for more information)

- Sterile loops, swabs (not too tightly spun), test tubes, pipettes and scissors
- Forceps
- Incubator $(35 \pm 2^{\circ}C)$
- Quality control organismsAdditional technical information from
- www.liofilchem.com

Inoculum Preparation

Suspend well-isolated colonies from an overnight agar plate into the suspension medium to achieve the turbidity of the recommended McFarland standard. If the inoculum concentration is correct, a confluent lawn of growth will be obtained after incubation. If insufficient growth occurs, the testing should be repeated. In order to verify that your procedure gives the correct inoculum density in terms of CFU/mL performing regular colony counts is recommended. An acceptable inoculum should give approximately 1-2 x 10⁸ CFU/mL.

Inoculation

Dip a sterile swab in the broth culture or in a diluted form thereof and squeeze it on the wall of the test tube to eliminate excess liquid. Streak the swab over the entire sterile agar surface. Repeat this procedure by streaking 2 more times, rotating the plate approximately 60 degrees each time to ensure an even distribution of inoculum. Allow excess moisture to be absorbed so that the surface is completely dry before applying MTSTM.

Application

Apply the strip to the agar surface with the scale facing upwards and code of the strip to the outside of the plate, pressing it with sterile forceps on the surface of the agar and ensure that whole length of the antibiotic gradient is in complete contact with the agar surface. Once applied, do not move the strip.

Incubation

Incubate the agar plates in an inverted position at the appropriate temperature, atmosphere and time. Refer to the drug-specific MTSTM Supplement for specific incubation instructions.

Eliminating Used Material

After use, MTSTM and the material that comes into contact with the sample must be decontaminated and disposed of in accordance with current laboratory techniques for the decontamination and disposal of potentially infected material.

Reading the MIC

Observe where the relevant inhibition ellipse intersects the strip and read the MIC at complete inhibition (unless otherwise instructed in the drug-specific MTSTM Supplement). Growth along the entire gradient i.e. no inhibition ellipse indicates that the value is greater than or equal to (\geq) the highest value on the scale. An inhibition ellipse that intersects below the lower end of the scale is read as less than (<) the lowest value. Intersection between two scale segments should be rounded up to the higher value. In the case of uneven MIC intersections, read the higher value. Repeat the test if the discrepancy is >1 dilution. An MIC of 0.125 µg/mL is considered the same as 0.12 µg/mL for reporting purposes. See the appropriate MTSTM product supplements for example specific drug/organism photographs. Also consult the MTSTM Photographic Guide.

Result Interpretation

To categorize the result according to the interpretive criteria, refer to the appropriate MTS^{TM} product supplement for the specific antimicrobial agent interpretive criteria. Since MTS^{TM} generates MIC values which fall between two-fold dilutions for interpretation, an MTS^{TM} MIC value which falls between standard two-fold dilutions must be rounded up to the next standard upper two-fold value before categorization. For example a *S. aureus* vancomycin MIC of 1.5 µg/mL is reported as 2 µg/mL.

QUALITY CONTROL

To check the performance of the MTSTM result, test the quality control strain(s) as shown in the appropriate MTSTM product supplement. Patient isolate results are considered satisfactory if the quality control result(s) fall within the expected range(s). Patient isolate results should not be reported if the quality control results are outside of this stated QC range. MIC results for a QC strain that fall a half dilution below the lower QC limit should be rounded up to the next upper two-fold value which would establish QC compliance. MIC results that are a half dilution above the upper limit would be rounded up to the next upper two-fold value which would result in non-QC compliance.

LIMITATIONS

Refer to the drug-specific MTS[™] Supplement.

EXPECTED VALUES

Expected results for susceptibility tests will vary based on location and institution. Organism resistance patterns will be directly related to the population of organisms at each site.

PERFORMANCE CHARACTERISTICS

Refer to the drug specific MTS[™] Supplement.

REFERENCES

1. CLSI. *Methods for Dilution Antimicrobial Susceptibility Tests for Bacteria That Grow Aerobically*. 11th ed. CLSI standard M07. Wayne, PA: Clinical and Laboratory Standards Institute; 2018.

GLOSSARY OF TERMS



MTS™ (MIC Test Strip), International Patent

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