

Method Category	Sub-Methods	Clinical Application
<b>Qualitative (Diffusion)</b>	Kirby-Bauer, Stokes Method	Healthy patients with normal immunity; mild infections (e.g., uncomplicated UTIs). <a href="#">↗</a>
<b>Quantitative (Dilution)</b>	Tube Dilution, Agar Dilution	Severe infections (endocarditis, osteomyelitis); high-risk/immunocompromised or critically ill patients. <a href="#">↗</a>
<b>Combined</b>	<b>E-Test</b> (Epsilometer Test)	Combines diffusion and dilution principles. <a href="#">↗</a>

#### 4. Standardized Procedure (Kirby-Bauer)

1. **Bacterial Suspension:** Select 3-5 isolated colonies and suspend them in saline/broth.
  2. **Turbidity Standard:** Adjust to **0.5 McFarland standard** (approx.  $1.5 \times 10^8$  CFU/mL).
  3. **Inoculation:** Use a sterile cotton swab to streak the MHA plate in three directions to create a "uniform bacterial lawn".
  4. **Disk Application:** Place antibiotic-impregnated disks using sterile forceps, a template, or a dispenser.
  5. **Incubation:** Incubate at  $35 - 37^\circ C$  for 16-18 hours.
  6. **Measurement:** Measure the zone diameter in millimeters (mm).
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#### 5. Interpretation of Results

Results are interpreted using standardized charts and categorized as **Susceptible (S)**, **Intermediate (I)**, or **Resistant (R)**.

- **Using a Template:**
  - **Susceptible:** Zone edge is *outside* the black circle.
  - **Intermediate:** Zone edge lies *on* the black circle.
  - **Resistant:** No zone, or it lies *within* the white circle.

#### Common Antibiotic Interpretative Diameters (mm):

- **Tetracycline:** Susceptible if  $> 19$ ; Resistant if  $< 14$ .
- **Erythromycin:** Susceptible if  $> 23$ ; Resistant if  $< 13$ .
- **Gentamycin:** Susceptible if  $> 15$ ; Resistant if  $< 12$ .

## 6. Quantitative Methods and The E-Test

**Quantitative methods** (like broth microdilution) determine the **Minimum Inhibitory Concentration (MIC)**. [↗](#)

- **Broth Microdilution:** Involves testing the microbe against increasing dilutions of an antimicrobial agent to find the lowest concentration that inhibits growth. [↗](#)

### The Epsilometer Test (E-Test):

- Uses a plastic strip with a pre-defined **continuous gradient** of antibiotic. [↗](#)
  - When placed on inoculated agar, it forms an **elliptical zone** of inhibition. [↗](#)
  - The **MIC** is read directly from the scale where the ellipse intersects the strip. [↗](#)
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## 7. Factors Influencing Zone Size

Errors in **Inoculum Density** can lead to false results: [↗](#)

- **Too Light Inoculum:** Zones appear larger; resistant strains may be falsely reported as **Susceptible**. [↗](#)
  - **Too Heavy Inoculum:** Zones appear smaller; susceptible strains may be falsely reported as **Resistant**. [↗](#)
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## Summary Overview

This lab document focuses on identifying the correct antimicrobial treatment through **Qualitative** (Kirby-Bauer) and **Quantitative** (E-test, Dilution) methods. The **Kirby-Bauer** test is the primary low-cost tool for healthy patients, while **MIC** determinations (Quantitative) are reserved for severe or high-risk cases. Success depends on strict adherence to the **0.5 McFarland standard** and the use of **Mueller-Hinton agar**.