TREK Diagnostic Systems

TREK TIMES

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INSIDE THIS ISSUE:

MYCOBACTERIAL CULTURE AND SUSCEPTIBILITY TESTING AT ST. VINCENT'S HOSPITAL

By Dr. Vincent LaBombardi, St. Vincent's Medical Center, New York City

The laboratory at St. Vincent's Hospital in Manhattan, New York City, NY has a long history using the ESP®/VersaTREK® system for mycobacterial culture and susceptibility testing. This laboratory took part in the initial clinical trial of the ESP Culture System for mycobacterial culture. What became evident immediately was the increase in isolation rates. Besides *M. tuberculosis*, we were able to recover many more of the non-tuberculous mycobacteria than we could in the past. This was extremely important to us considering our patient population.

St. Vincent's went live with this system for mycobacteria in September of 1995. This laboratory also validated the use of nucleic acid probes and later, HPLC, to directly identify mycobacteria from positive Myco bottles. This had a tremendous impact on decreasing our turn around times. St. Vincent's also participated in trials involving the first line anti-tubercular agents and PZA.

The data was submitted to New York State which granted us the right to use this test on our patient samples for the first line agents even before the test was cleared by the FDA. **In all the years I have been using ESP/VT to do NYS proficiencies I have never gotten a single susceptibility result wrong! That says something for the Myco system!**

More importantly is what this system has done for us clinically. By identifying isolates directly from positive Myco bottles and using the growth from the bottle as the inoculum source for the susceptibility test, we now average 21 days for reporting the identification and susceptibility results on a smear positive specimen containing *M. tuberculosis*. The average of a smear negative specimen with *M. tuberculosis* is 28 days. We can therefore generate results within clinically relevant time frames and have a significant impact on patient care. We have also adapted this system to perform susceptibility tests on clinically relevant species of non-tuberculosis mycobacteria.

The VersaTREK Myco system continues to perform reliably and it is an integral part of our laboratory.

TREK DIAGNOSTIC SYSTEMS

"We are the first diagnostic manufacturer to offer Tigecycline on custom dry format microbroth dilution trays."

TIGACIL™ (TIGECYCLINE*) NOW AVAILABLE FOR CUSTOM MIC PLATES!

By Jenny Lorbach, Sensititre Product Manager, TREK Diagnostic Systems

We are pleased to announce the availability of Tigecycline on custom Sensititre® susceptibility plates. ***We are the first diagnostic manufacturer to offer Tigecycline on custom dry format microbroth dilution trays.*** Plates can be designed up to a concentration of 128 ug/ml for gram positive or negative formats.

Wyeth Ayerst recently received FDA clearance for Tigecycline in the U.S. for the following indications:

Complicated skin and skin structure infections caused by *Escherichia coli, Enterococcus faecalis* (vancomycin-susceptible isolates only), *Staphylococcus aureus* (methicillin-susceptible and -resistant isolates), *Streptococcus agalactiae, Streptococcus anginosus* grp. (includes *S. anginosus, S. intermedius*, and *S. constellatus*), *Streptococcus pyogenes*, and *Bacteroides fragilis*.

Complicated intra-abdominal infections caused by *Citrobacter freundii, Enterobacter cloacae, Escherichia coli, Klebsiella oxytoca, Klebsiella pneumoniae, Enterococcus faecalis* (vancomycin-susceptible isolates only), *Staphylococcus aureus* (methicillin-susceptible isolates only), *Streptococcus anginosus* grp. (includes *S. anginosus, S. intermedius*, and *S. constellatus*), *Bacteroides fragilis, Bacteroides thetaiotaomicron, Bacteroides uniformis, Bacteroides vulgatus, Clostridium perfringens*, and *Peptostreptococcus micros*.

We are in the process of submitting our data to the FDA to receive 510K clearance within the next few months**. We will add Tigecycline to our Gram-positive and Gram-negative standard MIC formats in the fall of 2005 for automated and manual read methods.** In the meantime, you can place your custom plates orders containing Tigecycline now!

* For Research Use Only. Not for use in diagnostic procedures.

FDA Approved Interpretive Criteria for Tigecycline (referenced from Tygacil Pack Insert)

Susceptibility Test Result Interpretive Criteria for Tigecycline Minimum Inhibitory Concentrations (µg/mL) using microbroth dilution methods

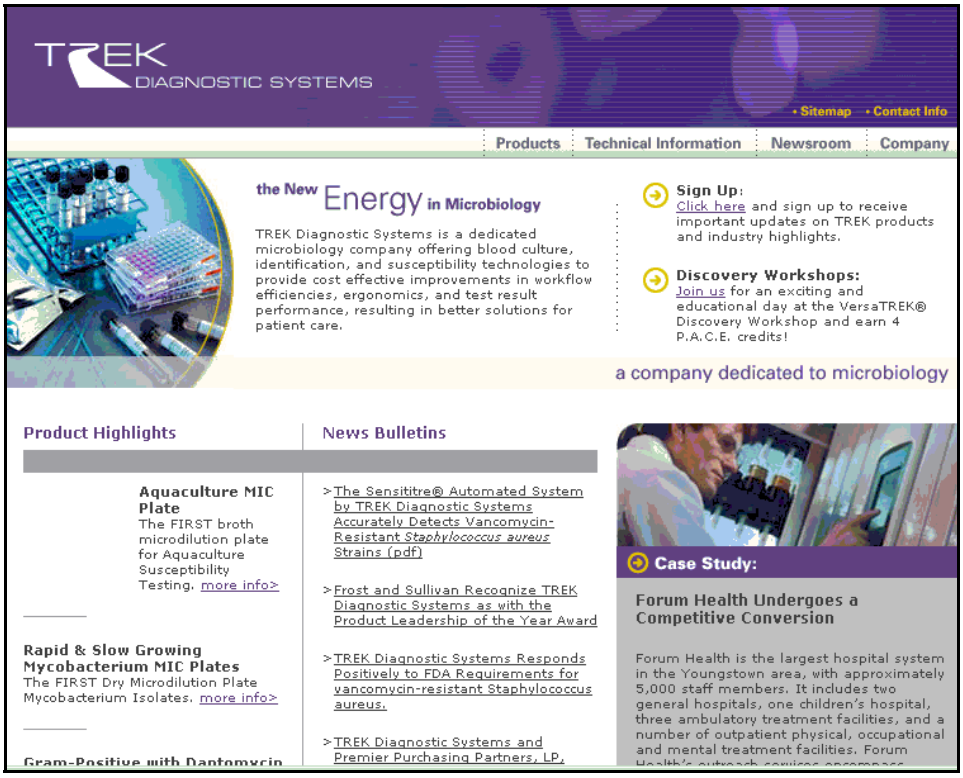
Pathogen	S	I	R
Staphylococcus aureus (including methicillin-resistant isolates)	≤0.5[a]	-	-
Streptococcus spp. other than *S. pneumoniae*	≤0.25[a]	-	-
Enterococcus faecalis (vancomycin-susceptible isolates only)	≤0.25[a]	-	-
Enterobacteriaceae[b]	≤2	4	≥8

[a] The current absence of resistant isolates precludes defining any results other than "Susceptible". Isolates yielding MIC results suggestive of "Nonsusceptible" category should be submitted to reference laboratory for further testing.
[b] Tigecycline has decreased in vitro activity against *Morganella* spp, *Proteus* spp. and *Providencia* spp.

TREK DIAGNOSTIC SYSTEMS

BRAND NEW TREK WEBSITE!

By Liz Lloyd, Global Marketing Communications Manager, TREK Diagnostic Systems



We are pleased to announce that our website (www.trekds.com) has undergone a "makeover". The redesigned site is now live! Please take a moment of your time to familiarize yourself with the new website.

I hope that you will find that the homepage is less "cluttered" than the previous site. We have added a Product Highlights to the homepage and streamlined the content and organization for News Bulletins and Recent Papers. We also now showcase a Case Study on the Homepage, which will be rotated with other case studies. (If you would like to submit a case study for our website, please forward your information to me at elloyd@trekds.com.)

The Products and Technical Information sections are much better organized and easier to follow than our previous website. For example, the Technical Information is broken into categories, such as FDA Clearances, Technical Papers, White Papers, Poster/Abstracts, MSDS, Product Specifications, and Tutorials.

In addition, we have a Newsroom tab that will allow the user to link to any of the following categories -- Tradeshows, Press Releases, Newsletters, Awards.

A Company Tab will allow the user to link to our company Overview, Mission and Vision, Values, Awards, ISO Certification, and Employment.

If you have any questions, or suggestions for improvements, please feel free to contact me at 216-351-8735 ext. 109 or via e-mail at elloyd@trekds.com.

TREK DIAGNOSTIC SYSTEMS

THE VERSATREK® SYSTEM IS DECLARED THE WINNER IN THE DUKE FASTIDIOUS ORGANISM STUDY

By DeAna Paustian, VersaTREK Product Manager, TREK Diagnostic Systems

This year at the 2005 ASM meeting, TREK presented a poster performed at Duke University Medical Center in Durham, N.C.—"*Comparison of the VersaTREK and the BacT/ALERT Blood Culture Systems for the Growth of Fastidious Microorganisms".* The objective of the study was to determine the performance of the VersaTREK Automated Microbial Detection System versus BioMeriéux's BacT/ALERT in regards to the isolation of fastidious microorganisms.

The seeded study was performed by utilizing 37 bacterial strains from 16 species. Aerobic and anaerobic bottles from both systems were tested with and without blood as a supplementation. In addition, three isolates each of fastidious bacteria that were previously isolated from patients was used.

This study demonstrated that the VersaTREK REDOX 1® bottle is the MOST productive SINGLE bottle with or without blood supplementation. When no blood was added, the VersaTREK system yielded a faster time to detection (TTD) for 15/16 organisms (Table 1). In addition, the BacT/ALERT did not recover *N. gonorrhoeae*, *C. hominis, Eikenella sp., Kingella sp. or C. jejuni* in the aerobic bottle! This substantiates the fact that the REDOX highly enriched media does not rely on blood for supplementation to recover some fastidious organisms.

When blood supplementation was used, the VersaTREK system yielded a faster TTD versus BacT/ALERT in 100% of the isolates tested (16/16) (Table 2). The BacT/ALERT did not recover *N. gonorrhoeae. hominis, nor C. jejuni* in the aerobic bottle. It is worth noting that BacT/ALERT totally missed isolating *N. meningitidis* in both the aerobic and anaerobic bottles.

In summary, the REDOX 1 bottle was the MOST productive SINGLE bottle with or without blood supplementation in this study. In low volume situations which occur in neonates, pediatrics, and some geriatric patients, only one bottle is generally inoculated. That bottle is more often than not the aerobic bottle. This study demonstrates that the BacT/ALERT system would have missed several of the fastidious organisms if only the aerobic bottle was utilized. It also demonstrates the need for the systems to utilize both bottles for optimal recovery.

THE VERSATREK® SYSTEM IS DECLARED THE WINNER IN THE DUKE FASTIDIOUS ORGANISM STUDY

(continued from page 4)

Table 1

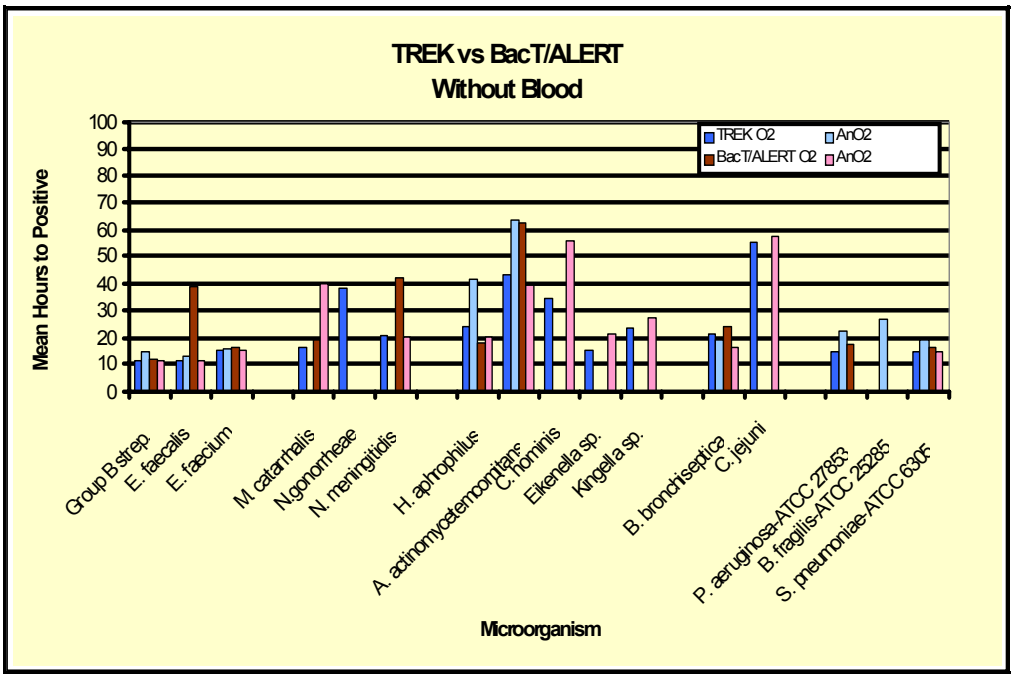
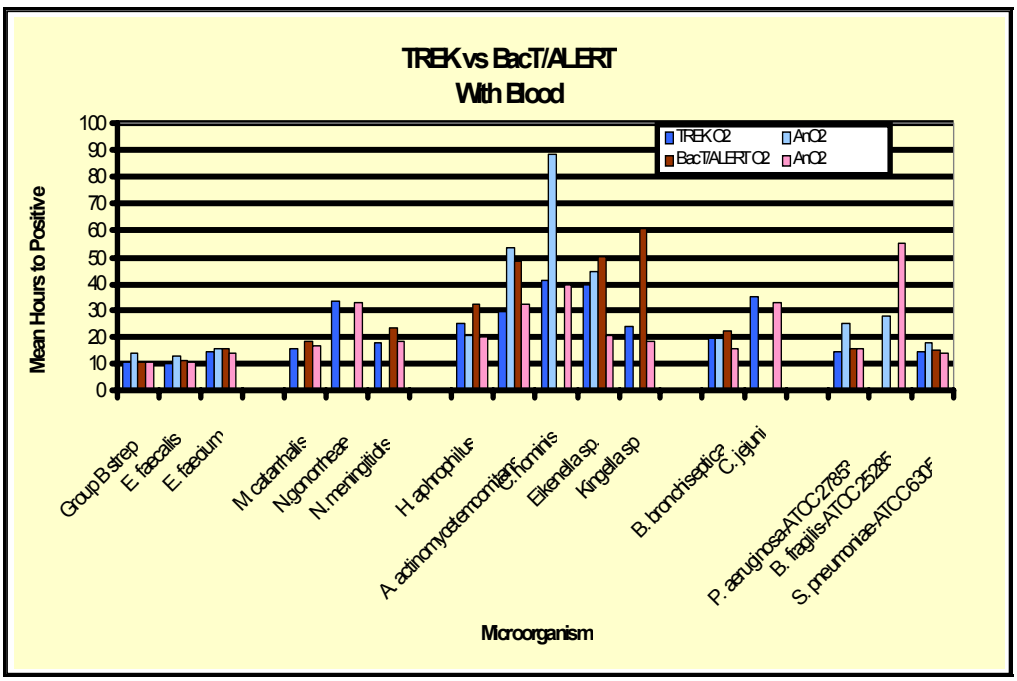


Table 2



"This study demonstrated that the VersaTREK REDOX 1® bottle is the MOST productive SINGLE bottle with or without blood supplementation."

TREK DIAGNOSTIC SYSTEMS

THE VERSATREK® SYSTEM PREVAILS IN SEEDED STUDIES

By DeAna Paustian, VersaTREK Product Manager, TREK Diagnostic Systems

Since 2004 our friends at Bio-Nuclear in San Juan Puerto Rico have placed three VersaTREK instruments into this beautiful Caribbean island. Bio-Nuclear is a company that relies on great customer service and is committed to introducing the best quality products to the clinical market. **At TREK Diagnostic Systems we offer just that – the best quality product for the clinical market.**

The first VersaTREK instrument was placed at the Metropolitan Hospital, located near San Juan on November 2, 2004. This site is a 200 bed facility which makes it quite a large hospital for this region. Prior to utilizing the VersaTREK system, Lizaida Cruz, Microbiology Supervisor performed a seeded evaluation with the VersaTREK system against their previous blood culture system, the BACTEC 9240. The validation data demonstrated that VersaTREK was able to detect 18 out of 32 organisms faster than BACTEC. In fact, Ms. Cruz noted that the VersaTREK instrument was able to detect organisms from 1 to 11 hours faster than BACTEC!

In the parallel study there was 100% agreement between the two systems with the VersaTREK system detecting the positive bottle faster than BACTEC by more than 5 hours!

A second VersaTREK instrument was placed at the Dr. Cayetano Coll y Toste Hospital on March 12, 2005. This site tested 23 organisms in parallel. The seeded study data (opposite page) which demonstrates that VTI detected 17 out of 23 organisms faster than BACTEC in the seeded study and excellent times to detection were seen especially with *Staphylococcus aureus* (10.7 hours VTI vs. 25.2 Bactec) and *Candida albicans* (17 hours VTI vs. 26.11 hours BACTEC).

The most current VersaTREK instrument placement occurred this past May at the Dr. Susoni Hospital. This site is a 100 bed hospital and has a glorious view of the Atlantic Ocean in Arecibo. Unlike the other two Puerto Rico placements, which were BACTEC competitive conversions, this was a conversion from BioMerieux's BacT/ALERT. In this case the validation data showed that the VersaTREK system had detected all 26 organisms faster than BacT/ALERT.

With faster time to detection of aerobic organisms, unique and unparalleled detection technology, superior simple two bottle media system, and better recovery of fastidious organisms (see Duke Study on page 3), the VersaTREK instrument is clearly the system of choice for your laboratory!

TREK Discovery Workshop

We have taken our products to the road in a series called TREK's Discovery Workshop.

TREK's Discovery Workshops are a unique opportunity for 20-30 accounts to have an entire day learning about the VersaTREK® Automated Microbial System and the Sensititre® ID/AST Microbiology System, including new SWIN™ Software, with no outside interruptions.

Attendees to the workshops will learn the scientific principles behind TREK products from the experts, hear testimonials from actual users, and participate in hands-on product demonstrations. Attendees to the workshop receive 4 P.A.C.E. credits.

For more information, including when we may be holding a Discovery Workshop in your area, please contact us at info@trekds.com.

TREK DIAGNOSTIC SYSTEMS

THE VERSATREK® SYSTEM PREVAILS IN SEEDED STUDIES

(continued from page 6)

Metropolitan Hospital Seeded Validation Data		
Organism	VTI TTD	BACTEC TTD
S. aureus	12.2	17.55
S. epidermidis	20.2	28.49
E. coli	10.5	10.27
P. aeruginosa	15.3	17.55
E. cloacae	11.4	11.1
K. pneumoniae	11.1	10.43
A. lwoffii	26.7	16.48
S. pneumoniae	13.7	17.55
S. agalactiae	13.6	12.94
H. influenzae	18.8	17.56
C. albicans	15.2	18.18
H. parainfluenzae	15.8	15.24
N. meningitides	17.4	22.35
N. gonorrhoeae	28.2	17.24
L. monocytogenes	21.2	17.55
B. bronchiseptica	17.43	17.55
M. catarrhalis	18.6	17.24
S. aureus (MRSA)	16	18.36
E. coli (ESBL)	12.9	13.23
Salmonella sp.	11.5	18.18
S. pneumoniae	15.1	14.23
S. maltophilia	12	13.4
A. baumanii	11.4	13.07
S. haemolyticus	13	13.74
E. faecalis (VRE)	9.6	10.56
E. faecalis (non VRE)	10.9	10.77
E. faecium	11.6	14.78
B. cepacia	16.9	18.36
S. pyogenes	13.9	17.55
H. paraphrophilus	25.9	36.18
C. tropicalis	14.6	14.24
C. krusei	12.1	13.27

Dr. Cayentano Coll y Toste Hospital Seeded Validation Data		
Organism	VTI TTD	BACTEC TTD
S. aureus	10.7	25.2
E. faecalis	8.5	9.75
K. pneumoniae	9.5	10.58
S. pneumoniae	13.6	14.61
S. epidermidis	13.6	29.11
C. krusei	27.2	25.07
C. sordelli	26.7	36.99
S. aureus 29213	7.3	8.25
H. influenzae	14.1	20.05
E. faecium	9.3	10.25
A. baumanii	10.1	12.59
B. cepacia	16.4	19.03
S. pyogenes	11.7	11.25
E. cloacae	7.8	7.57
E. coli	7.6	8.24
C. albicans	17	26.11
C. tropicalis	17.8	16.28
F. magna	38.8	11.92
M. catarrhalis	13.6	15.78
S. sonnei	9.2	9.91
C. alidus	18.7	22.73
S. maltophilia	16.1	21.69
S. enteritidis	8.4	9.09

Dr. Susoni Hospital Seeded Validation Data		
Organism	VTI TTD	BacT/ALERT TTD
S. epidermidis	13	15
H. influenzae (ATCC 49144)	13	14.5
H. influenzae (ATCC 49247)	12	16
E. faecium	9	12.2
S. sonnei	10	13.7
B. cepacia	13	15.3
E. faecalis	10	13.2
N. lactamica	12	14.8
B. fragilis	12	14.2
C. sordelli	12	14.2
S. enteriditis	10	13
S. pneumoniae	13	15
A. baumanii	12	14.5
C. albidus	11	14.5
C. glabrata	11	14
B. catarrhalis	12	14.8
C. albicans	13	15
S. aureus (ATCC 29213)	9	11.8
S. aureus (ATCC 33571)	11	15.5
K. pneumoniae	8	10
S. maltophilia	12	15.3
S. pyogenes	13	15
P. aeruginosa	10	12.5
N. gonorrhoeae	14	15.3
C. tropicalis	12	14.2
E. coli	7	9.5

"With faster time to detection of aerobic organisms, unique and unparalleled detection technology, superior simplistic two bottle media system, and better recovery of fastidious organisms, the VersaTREK instrument is clearly the system of choice for your laboratory!"

TREK DIAGNOSTIC SYSTEMS

REGIONAL WEST MEDICAL CENTER WINS TREK'S NATIONAL MEDICAL LABORATORY WEEK CONTEST!

Regional West Medical Center was the lucky winner of TREK Diagnostic Systems' website contest during National Medical Laboratory Week (NMLW) April 24-30, 2005.

Visitors to TREK's website (www.trekds.com) during the entire month of April were invited to click on the NMLW link to fill in their contact information and complete a brief qualifying form. At the end of NMLW, one entry was randomly selected to win a special commendation for their microbiology laboratory.

That winner was Susan Weber from Regional West Medical Center in Scottsbluff, Nebraska. As the winner of the contest, all of the microbiology laboratory personnel at Regional West Medical Center received $10 Target gift cards, TREK pens, mugs, and notepads.

Susan Weber, Senior Technologist in the Microbiology Department at Regional West Medical Center, entered Regional West Medical Center into the contest. She has worked in the microbiology laboratory at Regional West since February 1978. According to Susan, "We process specimens for our inpatients as well as specimens from smaller area hospitals and clinics. We receive specimens for culture from the very eastern part of our state to the northwestern part of Wyoming. We process specimens for bacteriology, mycology, and parasitology. We do limited viral antigen testing in house, most of which is processed by our evening and night staff, as the specimens arrive via couriers throughout the night. Our evening and night staff do most of the antigen testing, gram stains, specimens for parasitology and set up the cultures on specimens received on the routes. Day shift works up the cultures, then shifts to reading all the parasitology slides and working up any positive fungal cultures and reading AFB slides. In our spare time, day shift also sets up cultures as they are received and performs and STAT gram stains."

The theme for this year's NMLW was "*Laboratory Professionals – The Heart of the Medical Investigation Team*".

About Regional West Medical Center

As western Nebraska's largest hospital, Regional West Medical Center offers a full continuum of comprehensive health care services-from emergency care through outpatient rehabilitation. Since 1924, Regional West has grown from a small community hospital to a progressive-and impressive-regional referral center and is one of only three Level II Trauma Centers in Nebraska. An active medical staff of over 85 physicians and consulting specialists represents more than 30 medical specialties. Eight of every ten physicians have earned board certification, a benchmark of the highest professional standing in each medical specialty. The services provided are driven by the needs of the community-trauma care, cancer treatment, acute rehabilitation, neurology and neurosurgery and vascular services, to name just a few.

Regional West is, in the words of many visitors, "an urban hospital in a rural environment." Caring for health and well-being is our mission.

TREK DIAGNOSTIC SYSTEMS

INDIA RIDES A WAVE OF TECHNOLOGY WITH GREAT RESULTS

By Sameer Saral, Trivitron Diagnostics Pvt. Ltd., India

India has the second largest population and ranks first among the countries worldwide with the highest number of tuberculosis cases.

According to the World Health Organization's *Global Tuberculosis Control: WHO Report 2004*, more than one-fifth of all TB cases worldwide were in India. TB remains the leading infectious cause of death in India, killing close to 500,000 people each year. TB mainly affects Indians of lower economic classes, who are unable to afford treatment or susceptibility testing.

In addition, physicians prescribe drugs directly in order to save treatment costs. This has led to a number of outbreaks with multi-drug resistant cases in TB. The problems of HIV and multi-drug resistance makes the tuberculosis epidemic in India much worse.

India also has a high prevalence of infectious diseases. This scenario requires a culture system with faster time-to-detection (TTD) with low reagent cost, such as the VersaTREK® System.

Until 2004, BD and BMX were the market leaders in the microbiology testing segment in India. In 2004, Trivitron launched TREK products in India. Trivitron, one of the top 5 medical technology companies in India, specializes in handling closed systems. Since launching TREK products in India, Trivitron has set up 11 VersaTREK installations all over the country.

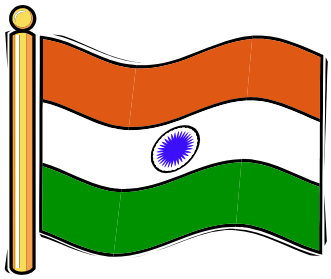
As a promotional activity, Trivitron organized a successful series of scientific symposia on automation in microbiology across the country, with Dr. Vince LaBombardi from New York City as a guest speaker. These were attended by the leading decision makers in the field of microbiology. Thanks to Mr. Paul Daga and Ms. Maureen Mansfield from TREK Diagnostic Systems for their support.

Metropolis Laboratory, Mumbai, who started off with the VersaTREK 96, currently uses two VersaTREK 240 instruments and experiences faster TTD and almost no false positives. Operators are very satisfied with the new detection and VorTrexing™ technology, as well as overall performance. The LIS capability is also highly regarded by the lab staff.

Other VersaTREK customers, such as Gokula Metropolis, Bangalore praise its enhanced sensitivity which has enabled technicians to recover distinct organisms even from neonatal samples.

A new TREK Sensititre® system (AutoReader and SWIN™ software) has been recently installed in Guwahati. According to the end user, "It is a great instrument with good software and hardware features." The only thing which might affect the promotion of this product in India is the hardware and reagent prices, which are high for the Indian market. The reagent plate format does not meet Indian standards. This restricts us from offering complete solutions for automated microbial testing.

Trivitron is working with TREK to customize the ID and Susceptibility systems to suit Indian requirements. We hope customized plates will offer the best solutions to Indian customers and provide TREK with an edge over other manufacturers.



TREK DIAGNOSTIC SYSTEMS

TREK DIAGNOSTICS SPONSORS SUSPCEPTIBILITY WORKSHOPS FOR CONTINUING EDUCATION CREDITS

By Jenny Lorbach, Sensititre Product Manager, TREK Diagnostic Systems

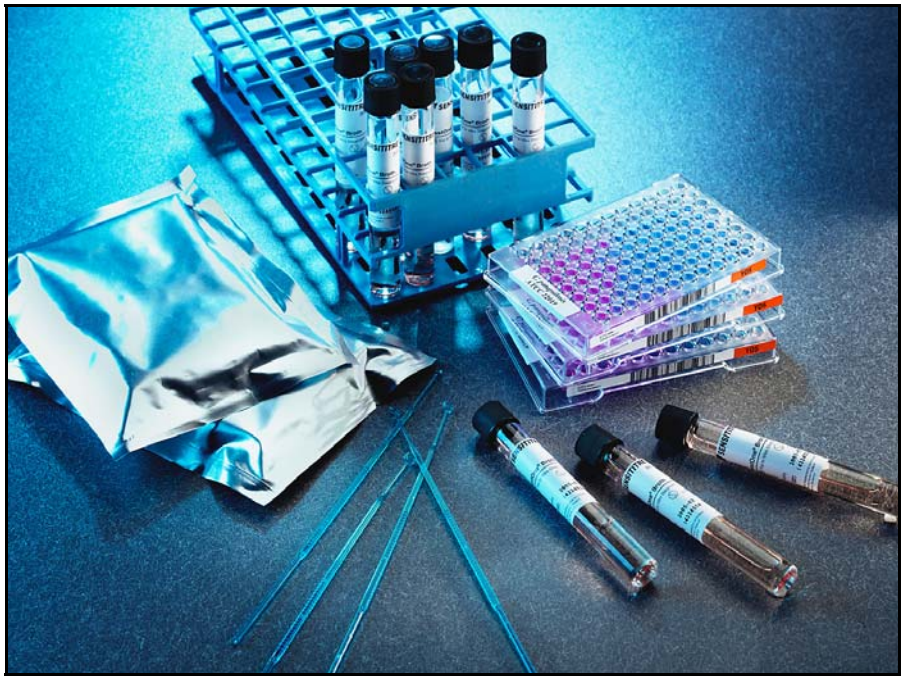
TREK Diagnostics sponsored three susceptibility workshops over the last three months to support education efforts for susceptibility testing of fungal and mycobacterium isolates.

The first antifungal workshop was held on July 15th-16th in St. Louis Missouri, SWACM chapter meeting. Dr. Annette Fothergill Assistant Professor, (Department of Pathology Technical Director, Fungus Testing Laboratory University of Texas Health Science Center at San Antonio) and Deanna Sutton provided a two day overview for identification and susceptibility testing of fungal isolates. The session included hands on learning experiences with these isolates and a comprehensive overview of Sensititre® YeastOne® products. Approximately 45 participants elected to participate in this educational event.

The second antifungal workshop was held on August 3-4th in Costa Rica at the University of Costa Rica Medical Mycology Laboratory. Approximately 50 participants attended this workshop. This is the second International antifungal susceptibility workshop that TREK has sponsored this year, the first being held in Guatemala City. Dr. Annette Fothergill is truly committed to better educate microbiologists regarding fungal isolates and we welcome the opportunity to work closely with her and Deanna Sutton.

TREK sponsored two speakers at the Fall 2005 South Western Association of Clinical Microbiology (SWACM) meeting on September 9th. Dr. Richard Wallace (University of Texas Health Center, Tyler, TX) provided an overview of non-tubercular AFB and Barbara Brown Elliott (University of Texas Health Center, Tyler, TX) discussed Nocardia Testing and Susceptibilities, including Sensititre mycobacterium MIC plates.

If you have additional questions regarding the next antifungal or TREK sponsored workshop that will be offered, please contact Jenny Lorbach at jlorbach@trekds.com.



TREK DIAGNOSTIC SYSTEMS

THE SENSITITRE AUTOMATED SYSTEM ACCURATELY DETECTS VANCOMYCIN-RESISTANT *STAPHYLOCOCCUS AUERUS* STRAINS

By Jenny Lorbach, Sensititre Product Manager, TREK Diagnostic Systems

Late last year, the CDC identified and tested five known strains of VRSA on all automated and manual susceptibility products currently utilized for in vitro diagnostic use in the United States. The Sensititre® system performed the best in comparison to other automated tests systems during the initial study. In fact, the Sensititre automated system accurately detected four Vancomycin-resistant *Staphylococcus aureus* (VRSA) strains at the Centers for Disease Control (CDC).* Sensititre susceptibility plates can be read automatically using the ARIS® 2X or AutoReader instruments.

In regards to strains referenced by the CDC, the Sensititre automated method detected the New York (NY5734), Michigan and Pennsylvania VRSA isolates after 24 hours incubation generating MIC's of 16 - >32 ug/ml. Sensititre manual MIC methods also exhibited MICs of >32 ug/ml for these strains after 24 hours incubation. Reference microbroth dilution plates exhibited MICs for 32-1024 ug/ml for all three strains. Other automated tests systems failed to detect resistance or generated MICs well below the reference microbroth dilution method.

The New York strain (NY595) was detected automatically with Sensititre MIC plates after isolation on BHI-V6 screen plates, or as in the methods, brain heart infusion agar with 6 ug/mL Vancomycin agar, thereby generating an MIC of > 32 ug/ml. Although the Sensititre automated method did not detect resistance in the original New York strain (NY595) on blood agar (MIC $\leq$ 1 ug/ml), no automated method was able to detect Vancomycin-resistance with this challenging isolate. This strain was characterized as having a Vancomycin-resistant phenotype that was unstable while others were stable.

Laboratories typically choose Sensititre susceptibility products based on superior performance for many bug/drug combinations, whether the test is automated or manual. Sensititre Gram-positive MIC plates have the flexibility of allowing automated and manual MIC read methods after overnight incubation; therefore, technologists can examine MIC results for unusual MIC patterns, like VRSA, in conjunction with "SWIN™ expert susceptibility rules". The Sensititre automated system has an increased chance of detecting resistance** on these isolates as it yields a true microbroth dilution result only after 24 hours incubation; other tests systems may rely on faster detection algorithms and extrapolated MIC results, thereby missing important resistance mechanisms. However, along with our system, the CDC recommends the set-up of BHI-V6 screen plates to enhance detection of these challenging VISA/VRSA strains.

If you would like additional details regarding the Sensititre system performance, please contact TREK Diagnostic Systems at info@trekds.com.

* NY 595 strain detected when isolated on 6 ug/mL Vancomycin agar prior to automated read methods; original strain isolated on BAP yielded an automated MIC of <= 1 ug/ml

** Because there are not an adequate number of strains available for testing, the ability of the Sensititre system to detect resistance to Vancomycin is unknown. Additional testing methods should be used. An alternate method as recommended by CDC should be followed.

Table: Results from Poster D-66. Failure of Automated Systems to Detect Vancomycin-Resistant *Staphylococcus aureus*, R.B. Carey, *et. al*. CDC, Atlanta, GA.

	NY 595 BAP	NY 595 VAN	NY 5734 BAP	NY 5734 VAN	PA BAP	MI BAP
Reference BMD	32-64	128	64	128	32	1024
E test	=> 256	=> 256	=> 256	=> 256	=> 256	=> 256
BHI-V6 agar	++	+++	++	+++	+++	+++
Vancomycin Disk	6-11	6	6	6	6	6
Vitek	=<0.5	4-8	=<0.5	8	1- 4	8
Vitek 2	=<1	=>32	=<1	8	2	>16
MicroScan	=<2	2 - 4	2 - 4	4	=<2- 4	>16
MicroScan @ 24 Manual read	4	8	4	4		
Phoenix	=<1	>16	>16	>16	>16	>16
Sensititre	=<1	>32	16 - 32	>32	>32	>32
Sensititre @ 24 Manual read	=<1	>32	>32	>32	>32	>32

TREK DIAGNOSTIC SYSTEMS

ASM CONTEST WINNERS

Congratulations to our lucky customers who won the following prizes during the American Society for Microbiology meeting held in Atlanta, Georgia June 6-8, 2005.

I-Pod (for attending our Brave's game customer event and completing a raffle entry form):

Carol Sandlin
Wesley Medical Center, Wichita, KS

$100 Target Gift Card (for completing the pre-show mailer survey and bringing it to the TREK booth):

Dr. Judith Heelan
Memorial Hospital, Pawtucket, Rhode Island

Gift Baskets (for attending a product demonstration and completing the booth raffle form):

Paul Schreckenberger
Loyola University, Maywood, IL

Angela Butler
USF Center for Biological Defense, Tampa, FL

Sue Dahlberg
Yale New Haven Hospital, New Haven, CT

Joshua Kropp
Marshfield Clinic Laboratories, Ringle, WI

According to Angela Butler, the recipient of one of the gift baskets, "I had a wonderful time at ASM. This was my first year attending and was quite impressed with everything. I am currently a Biologist employed by the CDC working in the same building as the Center for Biological Defense. I had a great time at the Braves game and was excited to be at the game they won against the Angels!! TREK is a great company and all of your employees were very accommodating and knowledgeable. It was also a wonderful surprise returning from a great trip to find my prize that I won from the raffle!! Overall my first ASM experience couldn't have been better."

We love the chance to see our customers at ASM and are already planning some exciting things for ASM 2006 in Orlando, Florida May 21st—26th.

TREK RECEIVES FROST AND SULLIVAN'S PRODUCT LEADERSHIP OF THE YEAR AWARD

TREK Diagnostic Systems received Frost and Sullivan's coveted 2005 Product Leadership of the Year Award in the field of microbial detection, for the development of the VersaTREK® Automated Microbial Detection System.

Frost & Sullivan's Product Leadership of the Year Award is bestowed on the company that has best demonstrated a superior ability to develop and/or advance innovative products versus products from competing vendors. This award recognizes the company's successful adoption or invention of new technology that has become a part of a well-designed product family. This award also recognizes the company's successful product development strategies and the degree the product has met customer stated needs and requirements. Such innovation is expected to significantly contribute to the industry in terms of market acceptance.

"We are pleased to be among so many special people and companies as an awards winner," commented Mike Burke, President and CEO of TREK Diagnostic Systems. "We would like to thank Frost and Sullivan for this honor."

Frost & Sullivan recognizes outstanding industry achievements by presenting Frost & Sullivan Awards to top companies in regional and global markets. Their teams of industry experts recognize the diligence and innovation required to implement a successful business plan and excel in the increasingly competitive global marketplace. These prestigious awards are recognized worldwide by the media, the investment community, and end-user markets.

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