

LABORATORY - STIMULATED SALIVA EVALUATION

FORM C70

WIHS SUBJECT ID#:

VISIT #:

LAB ID #:

INITIALS:

VERSION DATE: 10/15/96

A1. ARE TEST RESULTS AVAILABLE?

Yes.....1
No, Sample Inadequate2 (END)
No, Other Reason3 (END)

(SPECIFY)

A2. RESEARCH SITE:

USC - Los Angeles.....1
University of Illinois - Chicago.....2
BIMC/Bronx - New York3
UC - San Francisco4

A3. SPECIMEN COLLECTED:

M / D / Y

A4. SPECIMEN PROCESSED:

M / D / Y

SECTION B: CULTURE RESULTS:

CULTURE	MICROBIAL COUNTS (cfu/mL*)
B1. A. actinomycetemcomitans	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>
B2. Porphyromonas gingivalis	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>
B3. Prevotella intermedia	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>
B4. Bacteriodes forsythus	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>
B5. Campylobacter species	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>
B6. Eubacterium species	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>
B7. Fusobacterium species	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>
B8. Peptostreptococcus micros	<input type="text"/> . <input type="text"/> X 10 <input type="text"/>

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B9. Enteric gram negative rods . X 10 —

PROMPT: If B9 = 0, SKIP to B10

	<u>PRESENT</u>	<u>ABSENT</u>
a. Klebsiella oxytoca.....	1	2
b. Klebsiella pneumoniae.....	1	2
c. Enterobacter cloacae	1	2
d. Escherichia coli.....	1	2
e. Pseudomonas aeruginosa	1	2
f. Citrobacter freundii.....	1	2
g. Enterobacter asburiae.....	1	2
h. Enterobacter agglomerans.....	1	2
i. Acinetobacter species.....	1	2
j. Pseudomonas putida.....	1	2
k. Yersinia species	1	2
l. Xanthomonas maltophilia	1	2
m. Other	1	2

i) _____

(SPECIFY)

B10. Beta hemolytic streptococci . X 10 —

B11. Yeast . X 10 —

B12. Eikenella corrodens . X 10 —

B13. Staphylococcus aureus . X 10 —

B14. Staphylococcus epidermidis . X 10 —

B15. TOTAL COUNTS (cfu/mL*) . X 10 —