

**COLLABORATIVE STUDY (VII, 2002)
ORGANISED BY CRL SALMONELLA**

TEST REPORT

**COLLABORATIVE TYPING STUDY OF
SALMONELLA STRAINS**

**(SEVENTH FOR THE NATIONAL REFERENCE
LABORATORIES AND FOURTH FOR THE
INTERNET LABORATORIES)**

Laboratory code	
Laboratory name	
Address	
Country	
Date of collecting the parcel	..... - ..... - 2002
Starting date typing	..... - ..... - 2002

PLEASE WRITE YOUR REMARKS AND COMMENTS ON PAGE 7 OF THE TEST REPORT!

GENERAL QUESTIONS**Shipment**

Was your parcel damaged at arrival ?	<input type="checkbox"/> NO <input type="checkbox"/> YES
Date of receipt at your laboratory	..... - ..... - 2002
Time of receipt at your laboratory	..... h - min
Did you store the strains before subculturing?	<input type="checkbox"/> NO <input type="checkbox"/> YES, temperature:.....°C

Subculturing

Date the strains were subcultured	..... - ..... - 2002
Medium used for subculturing the strains	Name..... Manufacturer.....
Did you store the strains after subculturing ?	<input type="checkbox"/> NO <input type="checkbox"/> YES, temperature:.....°C

QUESTIONS SEROTYPING

<p>What was the frequency of serotyping of <i>Salmonella</i> at your laboratory in 2001 ?</p>	<ul style="list-style-type: none"> ☐ Daily ☐ Once a week ☐ Twice a week ☐ Thrice a week ☐ Weekly ☐ Monthly
<p>How many <i>Salmonella</i> strains did your laboratory serotype in 2001 ?</p>	<p>Number of strains:.....</p>
<p>What kind of sera do you use ?</p>	<ul style="list-style-type: none"> ☐ Prepared in own laboratory ☐ Commercial sera <p>Manufacturer(s): </p>
<p>Is your laboratory the veterinary or human reference laboratory for typing <i>Salmonella</i> strains in your country ?</p>	<ul style="list-style-type: none"> ☐ YES, Veterinary ☐ YES, Human ☐ NO, the name and address of the reference laboratory is:
<p>The strains in this collaborative study were serotyped by:</p>	<ul style="list-style-type: none"> ☐ Own laboratory, Strain..... ☐ Other laboratory, namely..... Strains:.....

TEST RESULTS OF THE COLLABORATIVE STUDY ON SEROTYPING

LABCODE	.....
Starting date of typing	..... - ..... - 2002
Finishing date of typing	..... - ..... - 2002

Strain no.	O-antigens detected	H-antigens detected	Serovar
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

QUESTIONS PHAGE TYPING

<p>Does your laboratory perform phage typing of the following strains ?</p>	<ul style="list-style-type: none"> ☛ <i>Salmonella</i> Typhimurium ☛ <i>Salmonella</i> Enteritidis ☛ Other(s).....
<p>Which typing system is used for:</p>	<ul style="list-style-type: none"> ☛ <i>Salmonella</i> Typhimurium ☛ <i>Salmonella</i> Enteritidis
<p>How many strains did your laboratory phage type in 2001 ?</p>	<p>Number of strains.....</p>

TEST RESULTS OF THE COLLABORATIVE STUDY ON PHAGETYPING

<p>LABCODE</p>	<p>.....</p>
<p>Starting date of typing</p>	<p>..... - - 2002</p>
<p>Finishing date of typing</p>	<p>..... - - 2002</p>

		Phages reactions at Routine Test Dilution (<i>S. Enteritidis</i>)															
QA number	Phage type	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
E1																	
E2																	
E3																	
E4																	
E5																	
E6																	
E7																	
E8																	
E9																	
E10																	

TEST RESULTS OF THE COLLABORATIVE STUDY ON PHAGETYPING

LABCODE	.....
Starting date of typing	..... - ..... - 2002
Finishing date of typing	..... - ..... - 2002

		Phages at Routine Test Dilution (<i>S.Typhimurium</i>)																	
QA number	Phage type	1	2	3	4	5	6	7	8	10	11	12	13	14	15	16	17	18	19
M11																			
M12																			
M13																			
M14																			
M15																			
M16																			
M17																			
M18																			
M19																			
M20																			

		Phages at Routine Test Dilution (<i>S.Typhimurium</i>)												Additional phages					
QA number	Phage type	20	21	22	23	24	25	26	27	28	29	32	35	O*	1	2	3	10	18
M11																			
M12																			
M13																			
M14																			
M15																			
M16																			
M17																			
M18																			
M19																			
M20																			

O*: O pooled
 (<)CL: clear lysis
 (<)OL: opaque lysis
 SCL: semi confluent lysis
 << : Merging plaques towards semi-confluent lysis

REMARKS AND COMMENTS

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Name of person carrying out the serotyping	
Date and signature	

Name of person in charge	
Date and signature	