Setting the **Global** Standard for Quality in Laboratory Testing

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To: Recipients of M62, 1st ed.

From: Jennifer K. Adams, MT(ASCP), MSHA

Vice President, Standards and Quality

Subject: Correction

This notification is to inform you of a correction made to CLSI document M62, Performance Standards for Susceptibility Testing of Mycobacteria, Nocardia spp., and Other Aerobic Actinomycetes, 1st ed. The correction is described below and shown as highlighted and/or stricken text in the table excerpt.

Table 7. Antimycobacterial Agents and Breakpoints for Testing Nocardia spp. and Other Aerobic Actinomycetes:

The first sentence in general comment (2) incorrectly states, "For Rhodococcus equi, the vancomycin and rifampin breakpoints should be used as indicated in CLSI document M100 for E. faecalis." General comment (2) has been corrected to replace "E. faecalis" with "S. aureus."

In addition, comment (6) has been deleted because it is redundant with the corrected general comment (2). Finally, the routine and supplemental QC strains in the QC recommendations section have been corrected.

Table 7. Antimycobacterial Agents and Breakpoints for Testing Nocardia spp. and Other **Aerobic Actinomycetes**

QC recommendations (see Table 14 for acceptable QC ranges):

Routine QC strains:

- Nocardia nova ATCC®* BAA-2227™
- Enterococcus faecalis ATCC® 29212 Staphylococcus aureus ATCC® 29213 (Rhodococcus only)

Supplemental QC strains:

- Staphylococcus aureus ATCC® 29213 (all other organisms except Rhodococcus)
- Escherichia coli ATCC® 35218 (for amoxicillin-clavulanate)

General Comments

- (1) Breakpoints in this table apply to *Nocardia* spp. and can tentatively be used for other aerobic actinomycetes. Breakpoints for other aerobic actinomycetes are based on organism population distributions, clinical data, breakpoints used for other organisms, and the experience of experts in the field. These breakpoints are considered tentative and should be reported as such pending the accumulation of additional information.
- (2) For *Rhodococcus equi*, the vancomycin and rifampin breakpoints should be used as indicated in CLSI document M100 for *E. faecalisS. aureus*. The interpretive categories should be considered and reported as tentative pending accumulation of additional information.

Antimicrobial	MIC, μg/mL			
Agent	S	ı	R	Comments
Rifampin	≤ 1	2	≥4	See general comment (2).
				(5) Report for <i>R. equi</i> only.
				(6) Breakpoints listed are for <i>S. aureus</i> from CLSI document M100.
Trimethoprim- sulfamethoxazole	≤2/38	-	≥4/76	
Tobramycin	≤4	8	≥ 16	
Vancomycin	≤ 2	4-8	≥ 16	See general comment (2).
				See comment (5).
				See comment (6).

If you require any additional clarification regarding these corrections, please contact CLSI Customer Service (customerservice@clsi.org).

We appreciate your commitment to CLSI and regret any inconvenience.