

## Chapter 1 : Linda M. Marler (Author of Direct Smear Atlas)

*This atlas is a full-color, spiralbound manual of Gram-stained direct smears for medical technologist and medical laboratory technician students and practitioners, microbiologists, pathologists, infectious disease specialists, and anyone who interprets Gram-stained specimens.*

Jaw abscess aspirate, smear, Gram stain, light microscopy, LPV. Suspicious for Actinomyces see Fig 2. Jaw abscess aspirate, smear, Gram stain, light microscopy, HPV. Gram-positive bacilli, filamentous, beaded, branched, partial acid-fast stain negative. Morphology consistent with Actinomyces spp. Cutaneous sinus tract aspirate, smear, Gram stain, light microscopy, HPV. Cutaneous sinus tract aspirate, colonies on anaerobic blood agar plate. Morphology consistent with Actinomyces israelii. Expecterated sputum, smear, Gram stain, light microscopy, HPV. Gram-positive bacilli, filamentous, beaded, branched. Suspicious for Nocardia or Actinomyces see Fig 6. Morphology consistent with Nocardia, Nocardiosis, or Streptomyces spp Fig 7. Sinus-tract granule, crush-pull smear, Gram stain, light microscopy, HPV. Gram-positive bacilli, filamentous, beaded, branched, partial acid-fast negative. Morphology suggests mixed anaerobic infection with actinomycetes. Culture isolation of Actinomyces naeslundii. Surgical biopsy of abnormal area in jawbone, smear, Gram stain, light microscopy, HPV. Aerobic and anaerobic cultures negative. This is a part of the book: If you want to view the full content of the book and support author. Please buy it here:

## Chapter 2 : Direct Smear Atlas | Medical Books

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Direct examination in selected Gram-negative bacillary infections, P. Cerebrospinal fluid, drop smear, Gram stain, light microscopy, HPV. Morphotype suggests *Bacteroides* spp. Amniotic fluid, cytocentrifuge preparation, Gram stain, light microscopy, HPV. Gram-negative bacilli, filamentous, medium, fusiform. Morphology suggests gram-negative bacillary anaerobic infection. Bronchoalveolar lavage, cytocentrifuge preparation, Gram stain, light microscopy, HPV. Gram-negative bacilli, small, intracellular within phagocytic vacuoles see Fig 4. Bronchoalveolar lavage, cytocentrifuge preparation, direct fluorescent antibody DFA. *Legionella pneumophila*, polyvalent antisera, fluorescent microscopy, HPV. Expectorated sputum, smear, Gram stain, light microscopy, MPV. Urine, direct drop smear, Gram stain, light microscopy, MPV. Urine culture grew *Escherichia coli* and *Enterococcus faecalis*. The smear is consistent with a bacterial density of colony-forming units CFU per milliliter of urine. Decubitus skin ulcer, smear, Gram stain, light microscopy, HPV. Gram-negative bacilli, medium, encapsulated. Morphology suggests *Klebsiella pneumoniae*. Expectorated sputum, smear, Gram stain, light microscopy, HPV. Gram-negative bacilli, aberrant, encapsulated. Morphology suggests antibiotic-affected *Klebsiella pneumoniae*. Bacilli, medium, bipolar staining see Fig Peripheral blood, smear, Gram stain, light microscopy, HPV. Gram-negative bacillus, medium, with prominent bipolar staining. Suspicious for *Yersinia pestis*. Gram-negative bacilli, regular, chains. Morphotype suggests *Pseudomonas aeruginosa*. Gram-negative bacilli, regular, enveloped in prominent slime layer. Morphotype suggests mucoid P. Gram-negative bacilli, medium and long forms. Colonies on blood agar medium, subculture from blood culture, smear, Gram stain, light microscopy, HPV. Gram-negative bacilli with spirals, gull wings. Amniotic fluid, drop smear, Gram stain, light microscopy, HPV. This is a part of the book: If you want to view the full content of the book and support author. Please buy it here:

## Chapter 3 : Papanicolaou Society of Cytopathology Online Atlas Portal

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*DIRECT SMEAR: Direct fecal smears are most useful for the diagnosis of protozoal parasites which have motile trophozoite stages that are passed in the feces.*

## Chapter 7 : Reading and Reporting Gram Stained Direct Smears

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