

SUPPORTING INFECTIOUS DISEASE RESEARCH

Product Information Sheet for NR-46047

Staphylococcus aureus, Strain HT 20020365

Catalog No. NR-46047

For research use only. Not for human use.

Contributor:

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Manufacturer:

BEI Resources

Product Description:

Bacteria Classification: Staphylococcaceae, Staphylococcus

Species: Staphylococcus aureus

Strain: HT 20020365

NARSA Catalog Number: NRS254

Original Source: Staphylococcus aureus (S. aureus), strain HT 20020365 was isolated in 2002 from a wound of an 8-year-old female with impetigo and scarlet fever in France.¹

Comments: S. aureus, strain HT 20020365 is a methicillin-resistant S. aureus (MRSA) strain. S. aureus, strain HT 20020365 was deposited as positive for mec (subtype IV); the staphylococcal enterotoxin gene sed, the hemolysin genes hlb and hlgv and the leukocidin genes lukE and lukD; MLST sequencing type (ST) 8; eGenomic spa type 363, eGenomic spa repeats YGFMBQBLO; Ridom spa type t024; agr group I.¹ Note: Methicillin is no longer clinically used, however, the terms methicillin-resistant S. aureus (MRSA) and methicillin-sensitive S. aureus (MSSA) continue to be used to describe the susceptibility of S. aureus strains to the penicillins.

S. aureus is a Gram-positive, cluster-forming coccus that normally inhabits human nasal passages, skin and mucus membranes. It is also a human pathogen and causes a variety of pus-forming infections as well as food-poisoning and toxic shock syndrome. In 1961, two years after the introduction of methicillin, a penicillinase-resistant penicillin, S. aureus developed methicillin-resistance due to acquisition of the mecA gene. For the last forty-five years hospitalacquired (HA) MRSA strains have disseminated worldwide. More recently, MRSA strains have been isolated that are not hospital acquired and are referred to as community-(CA) MRSA. CA-MRSA strains phenotypically and genotypically from HA-MRSA strains and they are more frequently recovered from skin and soft tissue sources rather than post-operative wounds.2

Material Provided:

Each vial contains approximately 0.5 mL of bacterial culture in Tryptic Soy broth supplemented with 10% glycerol.

<u>Note</u>: If homogeneity is required for your intended use, please purify prior to initiating work.

Packaging/Storage:

NR-46047 was packaged aseptically in cryovials. The product is provided frozen and should be stored at -60°C or colder immediately upon arrival. For long-term storage, the vapor phase of a liquid nitrogen freezer is recommended. Freeze-thaw cycles should be avoided.

Growth Conditions:

Media:

Brain Heart Infusion broth or Tryptic Soy broth or equivalent Brain Heart Infusion agar or Tryptic Soy agar with 5% defibrinated sheep blood or equivalent

Incubation:

Temperature: 37°C Atmosphere: Aerobic

Propagation:

- 1. Keep vial frozen until ready for use, then thaw.
- Transfer the entire thawed aliquot into a single tube of broth.
- Use several drops of the suspension to inoculate an agar slant and/or plate.
- Incubate the tube, slant and/or plate at 37°C for 18 to 24 hours.

Citation:

Acknowledgment for publications should read "The following reagent was provided by the Network on Antimicrobial Resistance in *Staphylococcus aureus* (NARSA) for distribution by BEI Resources, NIAID, NIH: *Staphylococcus aureus*, Strain HT 20020365, NR-46047."

Biosafety Level: 2

Appropriate safety procedures should always be used with this material. Laboratory safety is discussed in the following publication: U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, and National Institutes of Health. Biosafety in Microbiological and Biomedical Laboratories. 5th ed. Washington, DC: U.S. Government Printing Office, 2009; see www.cdc.gov/biosafety/publications/bmbl5/index.htm.

Disclaimers:

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References:

- 1. NARSA, NRS254
- Deurenberg, R. H. and E. E. Stobberingh. "The Evolution of Staphylococcus aureus." <u>Infect. Genet. Evol.</u> 8 (2008): 747-763. PubMed: 18718557.
- 3. Davis, S. L., et al. "Epidemiology and Outcomes of Community-Associated Methicillin-Resistant Staphylococcus aureus Infection." J. Clin. Microbiol. 45 (2007): 1705-1711. PubMed: 17392441.

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