

SUPPORTING INFECTIOUS DISEASE RESEARCH

# **Product Information Sheet for NR-46241**

## Staphylococcus aureus, Strain NY-276

## Catalog No. NR-46241

## For research use only. Not for human use.

#### Contributor:

Centers for Disease Control and Prevention, Atlanta, Georgia, USA

### Manufacturer:

**BEI Resources** 

## **Product Description:**

Bacteria Classification: Staphylococcaceae, Staphylococcus

Species: Staphylococcus aureus

Strain: NY-276

NARSA Catalog Number: NRS712

Original Source: Staphylococcus aureus (S. aureus), strain NY-276 was isolated in 2005 from the bloodstream of a 64-year-old male emergency room patient with septicemia in New York, USA.<sup>1</sup>

Comments: S. aureus, strain NY-276 is a clinically-associated methicillin-resistant S. aureus (MRSA) strain. Strain NY-276 was deposited as positive for mec (subtype II); negative for tst and PVL. S. aureus, strain NY-276 is a USA100 isolate.¹ USA100 isolates have the same MLST profile (ST 5) and SCCmec (subtype II) and are usually resistant to β-lactams, erythromycin and spectinomycin as well as being multiresistant to other commonly used therapeutic agents. USA100 is the most prevalent U.S. health care-associated pulsed-field type and is endemic in many U.S. hospitals.² Note: Methicillin is no longer clinically used; however, the term methicillin-resistant Staphylococcus aureus (MRSA) continues to be used to describe S. aureus strains resistant to all 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 hospital-acquired (HA) MRSA strains have disseminated worldwide. More recently, MRSA strains have been isolated that are not hospital acquired and are referred to as community-associated (CA) MRSA. These CA-MRSA strains differ phenotypically and genotypically from HA-MRSA strains and they are more frequently recovered from skin and soft tissue sources rather than post-operative wounds.<sup>3,4</sup>

## **Material Provided:**

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

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

### Packaging/Storage:

NR-46241 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 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.
- 2. 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 NY-276, NR-46241."

## **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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E-mail: contact@beiresources.org

Tel: 800-359-7370 Fax: 703-365-2898



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#### References:

- 1. NARSA, NRS712
- McDougal, L. K., et al. "Pulsed-Field Gel Electrophoresis Typing of Oxacillin-Resistant Staphylococcus aureus Isolates from the United States: Establishing a National Database." J. Clin. Microbiol. 41 (2003): 5113-5120. PubMed: 14605147.
- 3. Deurenberg, R. H. and E. E. Stobberingh. "The Evolution of *Staphylococcus aureus*." <u>Infect. Genet. Evol.</u> 8 (2008): 747-763. PubMed: 18718557.
- 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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E-mail: contact@beiresources.org

Tel: 800-359-7370 Fax: 703-365-2898