

1. Staphylococci aureus:

→ Sketchy: Ancient Egypt

→ G⁺ cocci + cluster + non-motile

→ Catalase +ve + Coagulase +ve

→ Nasal carriage flora - 20-50% + people in hospitals ↑ + eczema + on fomites

Sphynx nose

→ Golden yellow colonies

→ Can undergo variable hemolysis

→ Teichoic acid & peptidoglycan - antigenic. Activate immune response. Endotoxin-like

→ MSCRAMM protein attachment

→ Protein A

Moses wand A

→ Clumping factor A (+ coagulase) note: strep. has kinase which does opposite of staph aureus

Moses wand A

→ Penicillin Binding protein - antibiotic resistance

→ β -lactamase - antibiotic resistance

→ Skin infection! Skin infection! Skin infections! - 1st staph aureus. 2nd Strep. ^{Bakers sketchy} ↓ pyogens

→ Skin infection - Abscess & Pus. (pimple).

→ Skin infection - Impetigo + Folliculitis + Furuncle/Boils + Carbuncle

→ Osteoarticular infections - Bone & joint infections

Bandage on camel

→ Infective / Acute endocarditis - Acute = Staph. aureus. Subacute = Strep. mitis

Camel running fast with ♡. Fast acute endocarditis

→ Bacteremia - shock

→ Pleuropulmonary

Man coughing

→ Scalded skin syndrome - Toxin. Children

Burnt bald man

→ Toxic shock syndrome - Superantigen exotoxin, Hypotension. + Streptococci pyogenes

Superman cape - SPE

→ cook rotten meat? STILL TOXIC!

→ Food poisoning - Heat stable enterotoxin, vomiting + diarrhea... etc + ACUTE short incubation period 1 - 8 hours until onset + Fast recovery / convalescence

Poisoned women

→ Penicillin ⇒ PRSA ⇒ Methicillin ⇒ MRSA ⇒ Vancomycin ⇒ VRSA !!



S. aureus colonizes near here

osteoarticular infection

Acute endocarditis

Rapid

scalded skin syndrome

Super cape
super antigen exotoxin
shock hypotension

food poisoning
toxin

catalase +ve

protein A + Clumping Factor A

β -hemolytic

Coagulase +ve

2. Staphylococci epidermis:

→ Sketchy: Plumber

→ Gr +ve cocci + cluster + not motile

→ Catalase +ve + Coagulase -ve

→ Novobiocin sensitive

Belly button showing

→ Normal flora - skin + respiratory + GI tract

Dirt on plumber

→ Greyish white colonies

→ Biofilms, sticks to objects

Gunk on valves

→ Infections due to ^{+ enterococci!} Catheter, Shunt, Prosthetics

Gunk. Biofilm. Sticky

↓ VTI ↓ Chronic inflammation ↓ endocarditis in artificial valve

Plumbers tubing

orthopedic prosthetics

Hardware box

3. Staphylococci saprophyticus:

→ Sketchy: Female

→ G⁺ cocci + cluster + not motile

→ Catalase +ve + Coagulase -ve

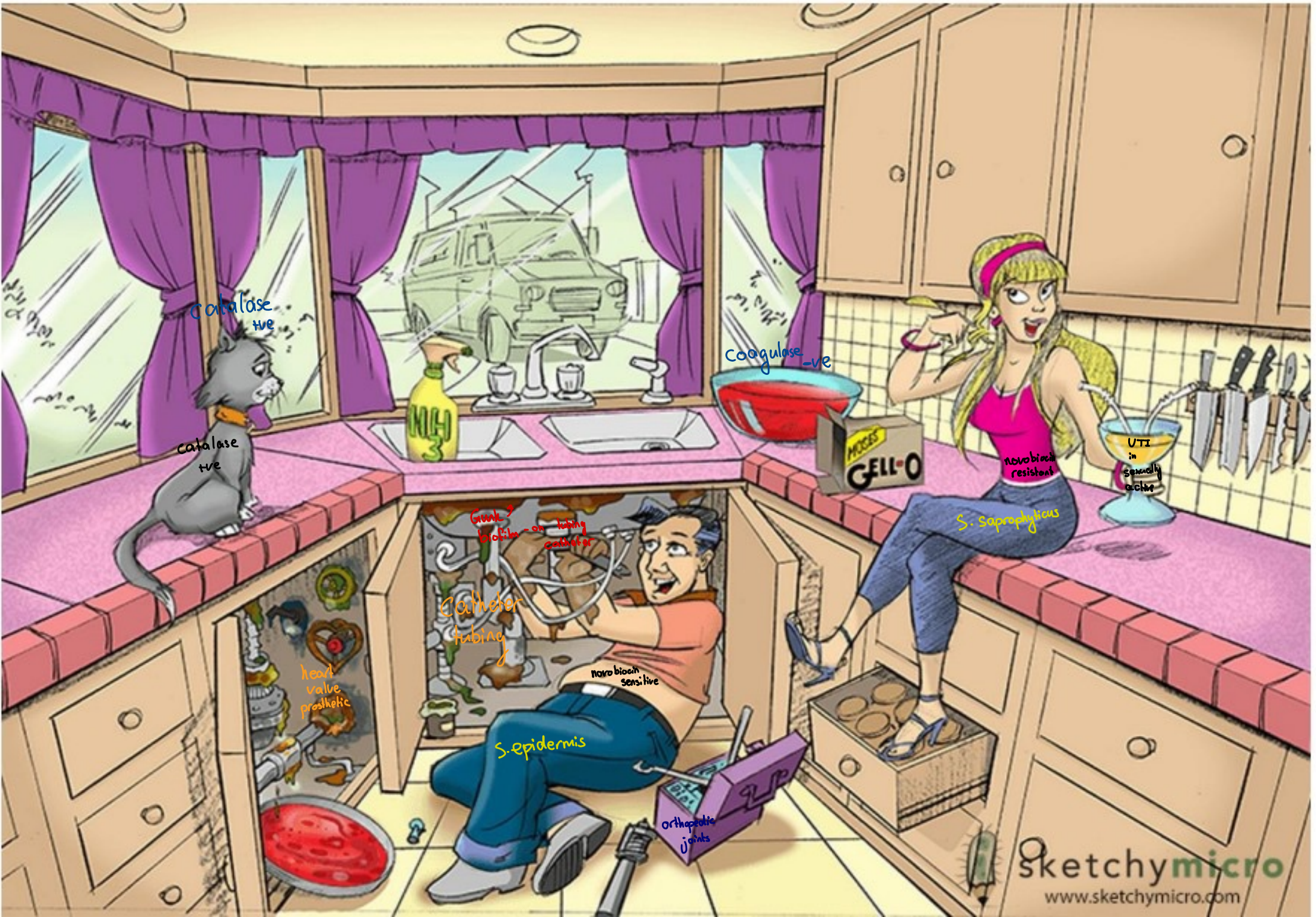
→ Novobiocin resistant

Belly button covered

→ Normal flora - skin + respiratory + GI tract

→ UTI in sexually active females

Bladder shaped cup



catalase +ve

catalase +ve

coagulase -ve

novobiocin resistant

S. saprophyticus

UTI in sexually active

Green biofilm on tubing catheter

Catheter tubing

Novobiocin sensitive

S. epidermis

heart valve prosthetic

Orthopedic Joints

4. Streptococci pyogens:

→ Sketchy: Pyogens = Pie = Bakers

→ G⁺ve cocci + chain

→ Catalase -ve. complete β -hemolysis

→ Respiratory microbiota + common in urinary tract flora

→ Lancefield group A antigen

Hot Apple Pie

→ bacitracin sensitive

Dog. Basset hound EXPOSED. Sensitive

→ Has capsule. Made of hyaluronic acid. Prevents phagocytosis

Hot Apple Pie covered → capsule

→ M Protein - antiphagocytosis, blocks C3b + adhesion + invasion

Master chef. Swat away hand, antiphagocytosis

→ F Protein - invasion

→ C5a peptidase - serine protease that breaks down C5a

→ SPE - superantigen exotoxin + Hypotension & shock

Baker wearing cape

→ Streptolysin S - non immunogenic + oxygen stable + Hemolysin that lyses blood cells

→ Streptolysin O - ^{except cutaneous infection} immunogenic (ASO antibodies) + oxygen labile + Hemolysin that lyses blood cells

Donuts + Lady with Δ tongs. ASO

→ Streptokinase - anti-coagulant, breaks blood clots

Pi cupcakes

→ DNAase - depolymerize DNA in pus, NETs

Cinnamon twists

→ **Bacterial Pharyngitis** - Bacterial tonsillitis with white pus. (no pus = viral)

Bakers wear Red handkerchief around neck

→ **Skin infections** - Pyoderma + Erysipelas + Cellulitis (second common cause after staph. aureus)

Baker wearing red mittens

→ **Necrotizing fasciitis** - flesh eating bacteria

Burnt ginger bread

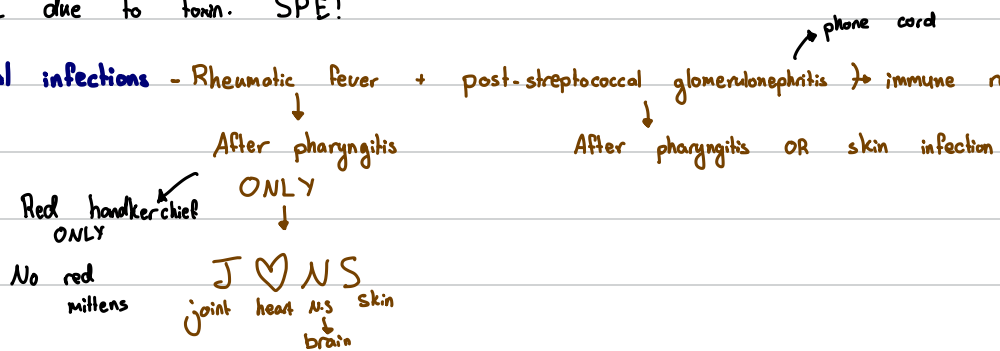
→ **Scarlet fever** - Pharyngitis + Rash + Strawberry tongue

Red handkerchief + ginger bread red + eating strawberry

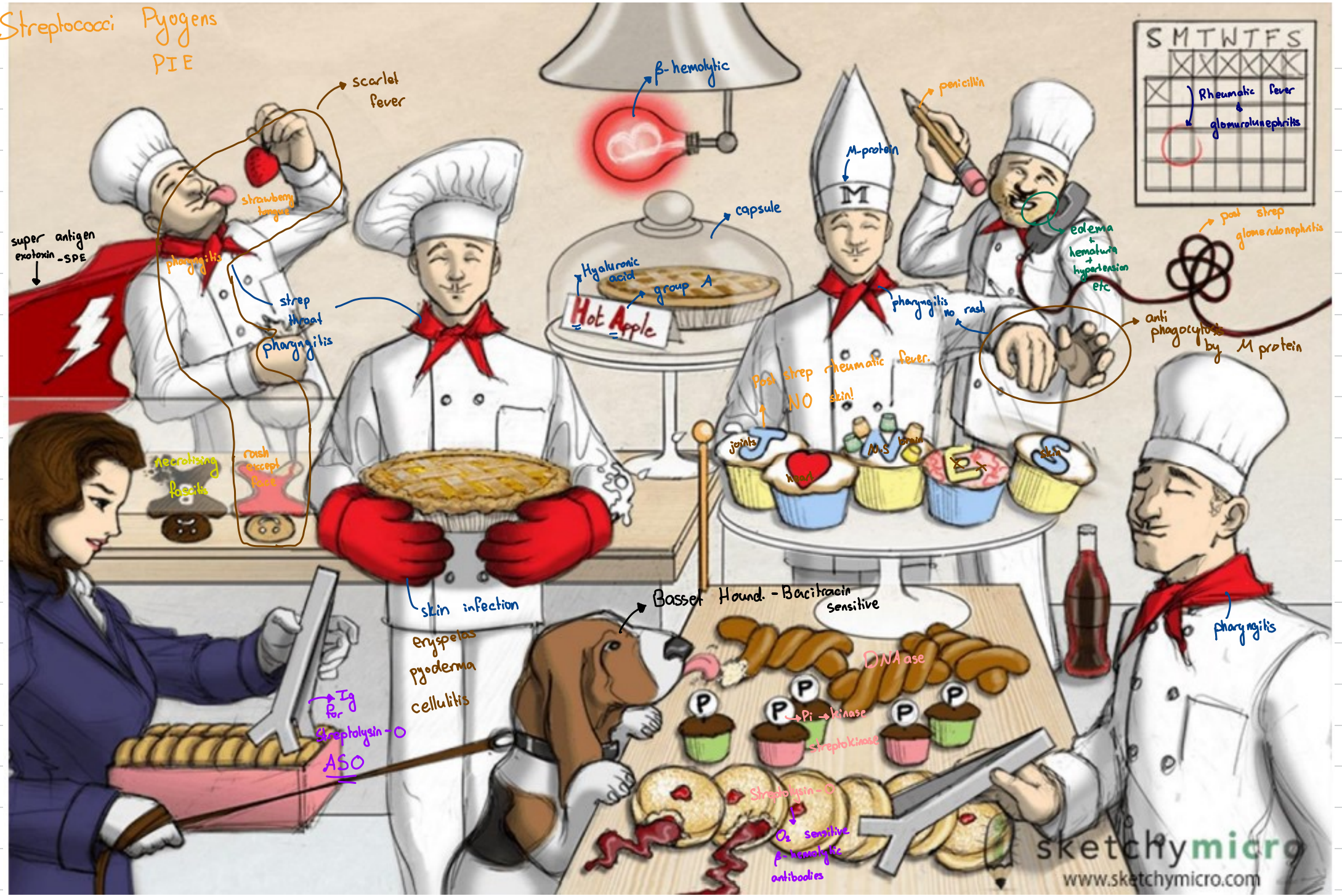
→ **Toxic shock syndrome** - Hypotension due to toxins. SPE

Superman cape. Shock due to toxin. SPE!

→ **Post streptococcal infections** - Rheumatic fever + post-streptococcal glomerulonephritis → immune related



Streptococci Pyogens
PIE



S	M	T	W	T	F	S
X	X	X	X	X	X	X
X						

Rheumatic fever & glomerulonephritis

scarlet fever
strawberry tongue
pharyngitis
strep throat
pharyngitis
super antigen - SPE

β -hemolytic
capsule
Hyaluronic acid
group
Hot Apple

penicillin
M-protein
pharyngitis no rash
edema + hematuria hypertension etc
post strep glomerulonephritis
anti phagocytosis by M protein

necrotising fasciitis
rash except face

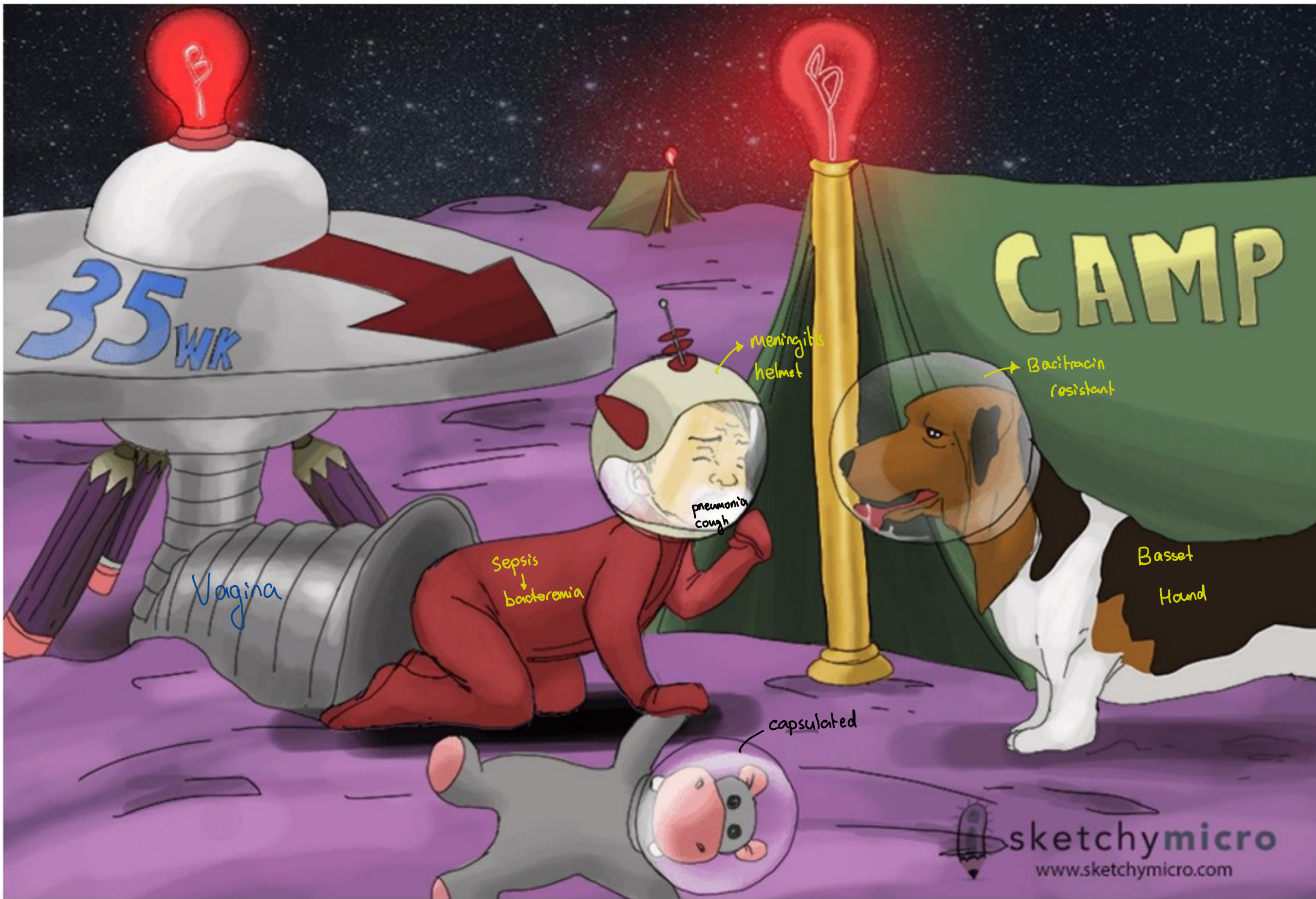
Post strep rheumatic fever: NO skin!
joints
heart
NO S
brain
skin

skin infection
erysipelas
pyoderma
cellulitis
Ig for Streptolysin-O
ASO

Basset Hound - Bacitracin sensitive
DNAase
Pi → kinase
Streptokinase
Streptolysin-O
O₂ sensitive
 β -hemolytic
antibodies
pharyngitis

sketchy micro
www.sketchymicro.com

Streptolysin - S
↳ O₂ - stable, no antibodies, β -hemolytic



35 WK

Vagina

meningitis helmet

pneumonia cough

Sepsis
↓
bacteremia

Bacitracin resistant

Basset Hound

capsulated

CAMP

sketchymicro
www.sketchymicro.com

6. Streptococci pneumonia

→ Sketchy: pneumonia = knight

→ gram positive cocci + PAIR

Double sword = pairs only

→ Catalase -ve. Partial α -hemolytic - pneumolysis ^{↗ green}

→ polysaccharide capsule (not hyaluronic acid) - used for polyvalent vaccine

Armor. This capsule so important.

→ non-encapsulated are avirulent. Encapsulated = pathogenic

Useless without capsule!

→ Optichin sensitive

Exposed chin

→ MOPS - meningitis + otitis media + pneumonia + sinusitis

Mopping floor

→ Colonize throat + nasopharynx, spread to other tissues causing M.O.P.S

→ IgA protease - prevents IgA from trapping it to mucin with Fc region

Cracked IgA shield

→ Amidase - Increase immune response by releasing teichoic acid & peptidoglycan fragments

→ Phosphorylcholine - Imp. for amidase function. (+ Platelet factors + cell invasion)

→ 91 types due to differ sugar arrangements in capsule. ^{↗ so important}

7. Streptococci viridans

→ Sketchy: Viridans = stupid weaker α -hemolytic = Joker & Donkey

→ gram positive cocci + chain

→ Catalase -ve. Partial α -hemolytic → green

→ No capsule

No armor

→ Optichin resistant

chin protected

→ Colonize oropharynx

→ *S. mutans* - Dental caries → tooth adhesion

Donkey teeth } glycoalyr. Strong adhesion - biofilms

→ *S. mitis* - Subacute endocarditis

Heart on Hat ♡ → heart adhesion

Memo: mits LIKE mitral valve



α KNIGHT TOURNAMENT

ADULT
MEZZANINE
CHILDREN
GROUND

capsule.
Important
for
pathogenicity

double
sword.
Diplococci

Cracked
IgA
shield

Preposed
chin.
Opiotochin
Sensitivity

S. mitis

protected
chin.
Opiotochin
resistant

hemolysin

cavities
S. mutans

MOPS

from
S. pneumoniae

transfer from
nasopharynx
to produce
MOPS

8. Enterococci

→ Sketchy: caucus protest

→ G⁺ +ve cocci + pair or short chain

→ Catalase -ve no γ -hemolytic - variable pattern

→ Entero = gut

→ E. faecalis - GI tract + UG tract

→ E. faecium - UG tract + GI tract

→ Broad temp. + pH range + NaCl & bile salts resistant

Resisting arrest

→ Nosocomial infection - from hospital

Ambulance

→ Biofilm

Many people

→ Antibiotic resistant!

Resisting arrest

→ UTI !! Worsened with catheter!

U ♡ trees? U ⇒ UTI

→ Bile - Esculin test - E. faecalis +ve & E. coli -ve

↓
Bile resistance

black

colorless

AND
Esculin hydrolysis

CALIFORNIA CAUCUS

RESIST THE
6.5%
N. CA

resist
6.5%
Scott

STOP
THE
FEES!

DO U ♥ 🌲?

UTI

Resisting arrest
Soooo
Resistant.
So!! Sooo
Resistant
to antibiotics

biofilm

biofilm

ambulance
→ Anatomical
infection



Diseases

1. Staphylococci aureus: Ancient Egypt

- Skin infections - Abscess & Pus. (pimple). Impetigo + Folliculitis + Furuncle/Boils + carbuncle
- Osteoarticular infections - Bone & joint infections
- Infective / Acute endocarditis - Acute = Staph. aureus. Subacute = Strep. mitis
- Bacteremia - shock
- Pleuropulmonary
- Scalded skin syndrome - Toxin. Children
- Toxic shock syndrome - Superantigen exotoxin. Hypotension. + Streptococci pyogenes
- Food poisoning - Heat stable enterotoxin, vomiting + diarrhea... etc + ACUTE short incubation period 1-8 hours until onset + Fast recovery / convalescence

2. Staphylococci epidermis: Plumber

- Infections due to Catheter, Shunt, Prosthetics
 - ↓ + enterococci!
UTI
 - ↓
Chronic inflammation
 - ↓
endocarditis in artificial valve
orthopedic prosthetics

3. Staphylococci saprophytics: Women

- UTI in sexually active females

4. Streptococci Pyogens: Bakers

- Pharyngitis
- Scarlet fever
- Skin infections
- Necrotising fasciitis
- Toxic shock Toxin. Super antigen
- Post infection diseases Rheumatic fever / Glomerulonephritis
J & NS

5. Streptococci agalactiae: Space baby

→ Vaginal.. neonatal infection

→ septic shock + pneumonia + meningitis

6. Streptococci pneumoniae: knight vs Joker

→ MOPS

7. Streptococci viridians: knight vs Joker

→ S. mutans - Dental cavities

→ S. mitis - subacute endocarditis

8. Enterococci: Protest

→ UTI

Dr. Alaa ALL + Dr. Anas ALL :

→ Mycoplasma

- * Only bacteria with: No cell wall + sterols in cell membrane
- * Polymorphic

→ Bacillus Anthracis

- * Polypeptide capsule rather than polysaccharide

→ Streptococcus pneumonia

- * 91 types due to different order of sugars in capsule

→ Streptococcus Mutans

- * Glycocalyx that allows it to tightly adhere to surfaces like teeth & heart valves

→ Spirochetes

- * Contain Endoflagella

→ Bacillus Anthracis

- * Oval + central spore

→ Clostridium Perfringens

- * Sub-terminal + oval spore

→ Clostridium Tetani

- * Terminal + spherical spore

→ Bacillus & Clostridium

- * Only species able to produce spores

→ Staphylococci aureus

* Two strains. MRSA & VRSA

→ Proteus

* An enterobacteriaceae G^{-ve} bacilli

* Phenylalanine deaminase +ve

→ Salmonella & Shigella

* G^{-ve} bacilli

* Phenylalanine deaminase -ve

→ Pseudomonas Aeruginosa

* G^{-ve} bacilli

* +ve oxidase test (purple)

→ Enterobacteriaceae

* G^{-ve} bacilli

* -ve oxidase test (colorless)

→ Staphylococci

* G^{+ve} cocci cluster

* Catalase +ve

→ Streptococci

* G^{+ve} cocci chain

* Catalase -ve

→ Staphylococcus aureus

* G^{+ve} cocci cluster

* Only staphylococci with +ve coagulase test.

→ *Mycobacteria tuberculosis*

* Present in unpasteurized milk

→ *Salmonella*

* Present in unpasteurized milk

→ *Coxiella burnetti*

* Present in unpasteurized milk

→ *Brucella abortus*

* Present in unpasteurized milk

→ *Vibrio cholera*

* G^{-ve} bacilli

* 13 minute division time

→ *Mycobacterium tuberculosis*

* 24 hour division time

→ *Staphylococci aureus*

* G^{+ve} cocci + cluster

* Can grow on simple agar plate media

→ *Staphylococci aureus*

* G^{+ve} cocci cluster

* β complete hemolysis on blood agar

→ *Streptococci pyogens*

* G^{+ve} cocci chain

* β complete hemolysis on blood agar

→ *Streptococci viridans*

* G +ve cocci chain

* α partial hemolysis on blood agar

→ *Streptococci pneumoniae*

* G +ve cocci chain

* α partial hemolysis on blood agar

→ *Enterococci*

* G +ve cocci chain

* γ no hemolysis on blood agar

→ *Neisseria*

* G -ve cocci pair

* Grows on chocolate agar

→ *Haemophilus*

* G -ve bacilli

* Grows on chocolate agar

→ *Mycobacterium tuberculosis*

* Only bacteria to grow on Lowenstein - Jensen medium. Malachite green resistant.

→ *C. diphtheria*

* G +ve bacilli + non-spore + aerobic

* Only bacteria to grow on blood tellurite agar. Potassium tellurite resistant.

→ *Enterobacteria*

* Resistant to bile. MacConkey's agar

→ *Staphylococci aureus*

* G⁺ cocci + cluster

* Resistant to salt 7.5%

* Mannitol fermentor. Phenol red → yellow +ve

→ *Staphylococci epidermis*

* G⁺ cocci + cluster

* Resistant to salt 7.5%

* No mannitol fermentation. Phenol red → Red -ve

→ *Pseudomonas aeruginosa*

* G⁻ bacilli

* obligate aerobe. Must O₂. No O₂ die

* Oxidase +ve test

→ *Bacteroid fragilis*

* Obligat anaerobe. Must no O₂. O₂ die

→ *Helicobacter*

* G⁻ bacilli

* micro-aerophilic. Must little O₂

→ *Campylobacter*

* G⁻ bacilli

* micro-aerophilic. Must little O₂

→ *Clostridium perfringens*

* G⁺ bacilli + spore forming + anaerobic

* aero-tolerant anaerobes. Prefer no O₂ but survive a bit in O₂.

→ Brucella

* Capnophilic

→ Neisseria

* G^{-ve} cocci pair

* Capnophilic

→ Vibrio cholera

* G^{-ve} bacilli

* pH 9, intestines

→ Lactobacilli

* G⁺ bacilli + non-spore + anaerobic

* pH 4, produce acid waste product

→ Geobacillus stearothermophilus

* Spore forming

* Biological indicator (culture) used as test after moist heat autoclave.

→ Bacillus anthrax:

* Used by Robert Koch germ theory

→ Staphylococci epidermis:

* Skin microbiota

→ Corynebacterium:

* Skin microbiota

→ Propionibacterium:

* Skin microbiota

→ E. coli:

* Enterobacteriaceae

* G.I microbiota

→ Lactobacilli & Clostridium:

* Anaerobic

* G.I microbiota

→ Staphylococci + Streptococci + Haemophilus + Moraxella:

* Respiratory microbiota

* Common in urinary tract microbiota

→ Aerobic lactobacilli only vaginal flora:

* After birth till several weeks

→ Aerobic + anaerobic lactobacilli vaginal flora:

* After puberty

→ Cocci & Bacilli vaginal flora:

* Several weeks after birth till puberty

→ Actinobacteria:

* Bacterial Vaginosis

* Lactobacilli die & this flourish

→ Bacteroidetes:

* Bacterial Vaginosis

* Lactobacilli die & this flourish

→ *E. coli*:

* Abnormal flora seen in health care workers

→ *Staphylococci aureus*:

* Abnormal flora seen in health care workers

→ *Pseudomonas aeruginosa*:

* Abnormal flora seen in health care workers

→ *Candida*:

* Abnormal flora seen in health care workers

→ *Klebsiella*:

* Abnormal flora seen in health care workers

→ *M. Morganii*:

* Ornithine Decarboxylase +ve. Purple

→ *P. rettgeri*:

* Ornithine Decarboxylase -ve. Yellow

→ *Clostridium*:

* Results in *Clostridium difficile* infection if it increases in number due to less competition

* Treat with fecal transplant (or vancomycin)

→ *Enterococci*:

* Grows in 6.5% salt agar