Clinical bacteriology numeric grading scheme guideline

Grade	Interpretation	Definition and examples
4	**Full value**	Accepted by the committee as the correct answer either in terms of current nomenclature or in terms of appropriate clinical relevancy, including listing pathogen-specific negative results, correct Antimicrobial Profile Reporting and/or descriptive reporting, e.g. MRSA, ESBL producer, VRE, and Notification of Public Health , i.e., *Salmonella* from a stool sample.
3	**Essentially correct or Acceptable**	A nomenclature or susceptibility error, generally at the species level, not technically correct but would have little or no clinical impact. A deviation from what is considered the most clinically relevant result, but one which would pose little difficulty in interpretation of the sample's report. For example: *Staphylococcus hominis* vs. *Staphylococcus epidermidis Enterobacter aerogenes* vs. *Enterobacter cloacae* Susceptible vs. intermediate Excessive over-reporting of susceptibility testing results (calculated as minus-1 from the full value).
2	**Separator**	To augment the difference between the two grading groups.
1	**Incorrect or Unacceptable**	A nomenclature error that would be wrong at the species level, but by reporting may have an impact on clinical interpretation and potentially a treatment error. A major susceptibility error. A clinical relevancy result that could lead to a diagnosis or treatment error. For example: *Corynebacterium jeikeium* vs. diphtheroids; *Staphylococcus aureus* vs. *Staphylococcus epidermidis* Identify VSE as VRE. Reporting the presence of *Neisseria meningitidis* from a throat swab.
0	**Very incorrect or Very unacceptable**	A nomenclature error that would be wrong at either the genus or species level or a very major susceptibility error that could result in a significant interpretation or treatment error. A clinical relevancy result that could lead to a major diagnosis or treatment error. For example: *Salmonella* species vs. *Citrobacter* species *Escherichia coli* vs. *Shigella dysenteriae Burkholderia cepacia* vs. *Pseudomonas aeruginosa* Identify *Neisseria meningitidis* in a blood culture as a contaminant Identify VRE as VSE. Reporting *Staphylococcus aureus* and *Escherichia coli* in a mixed blood culture as 'probable contaminants'.