

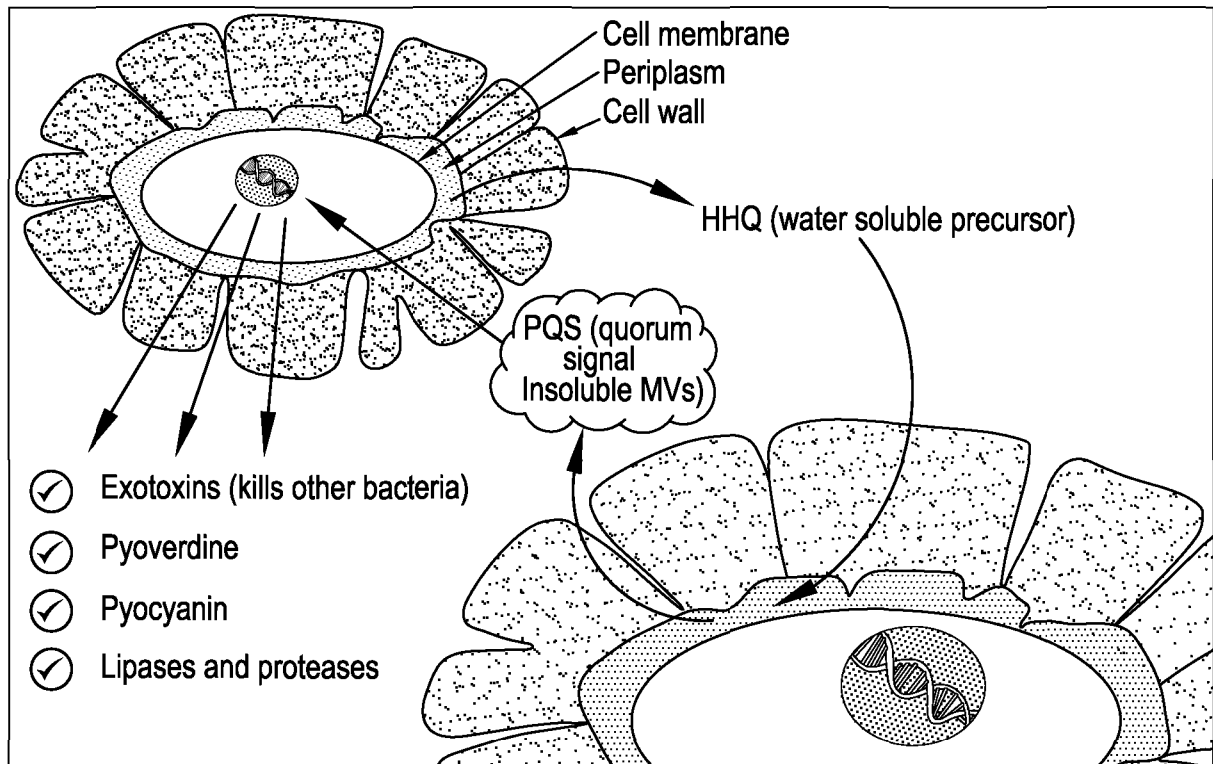


Figure 1

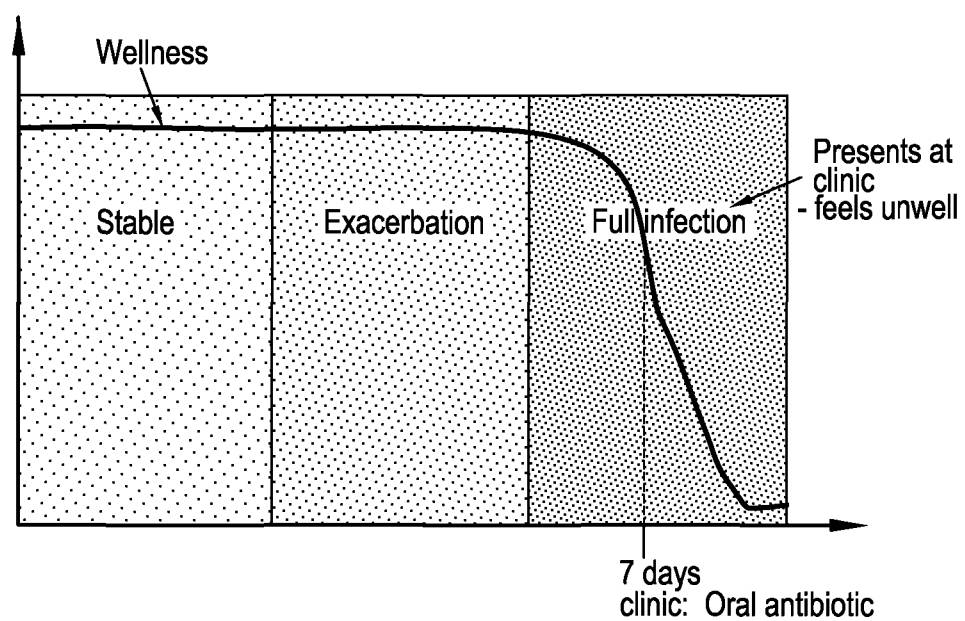


Figure 2

2/10

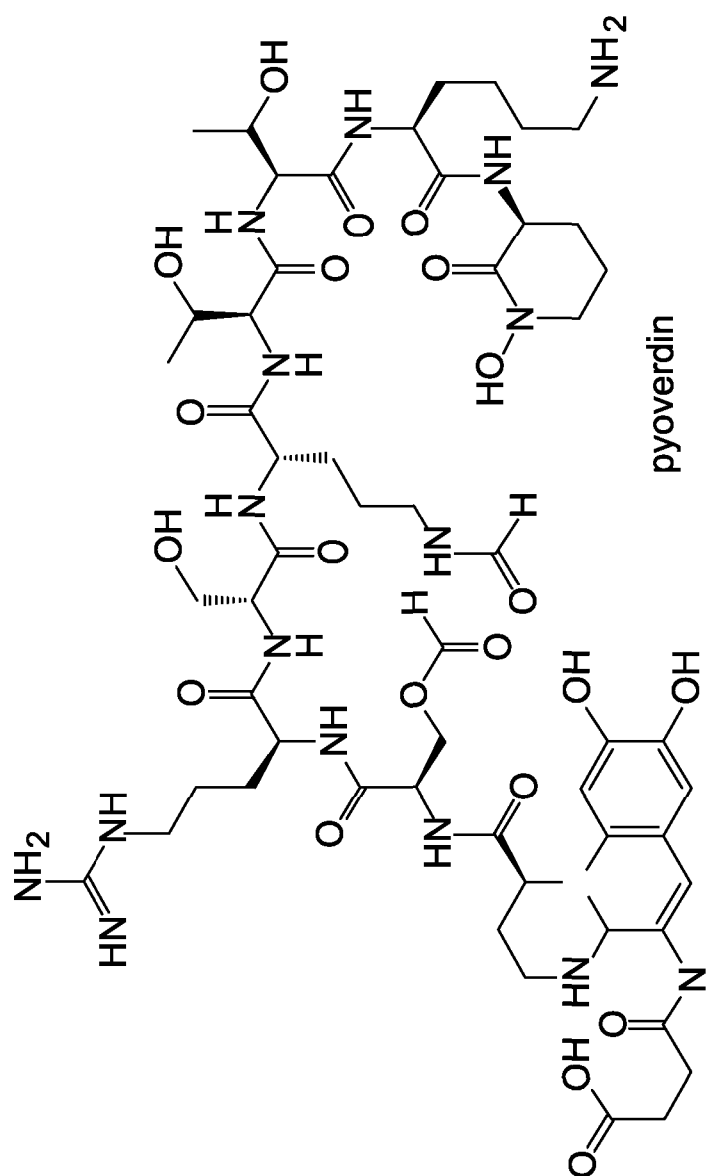
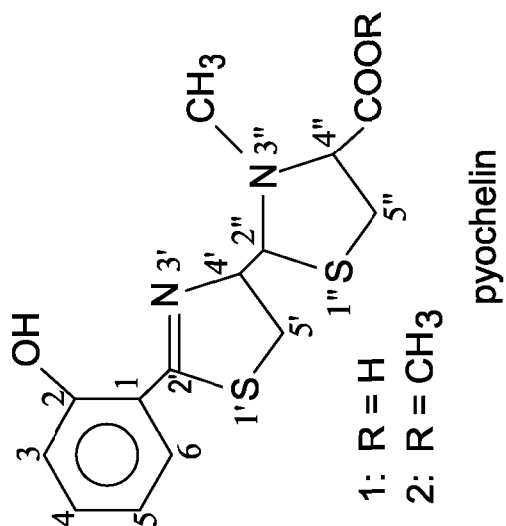
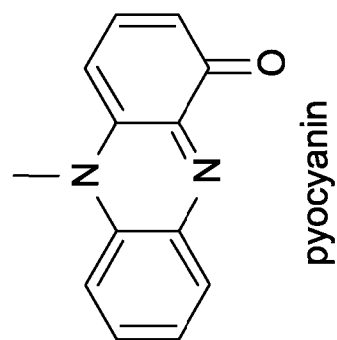
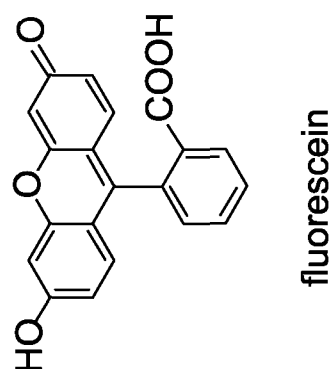


Figure 3

3/10

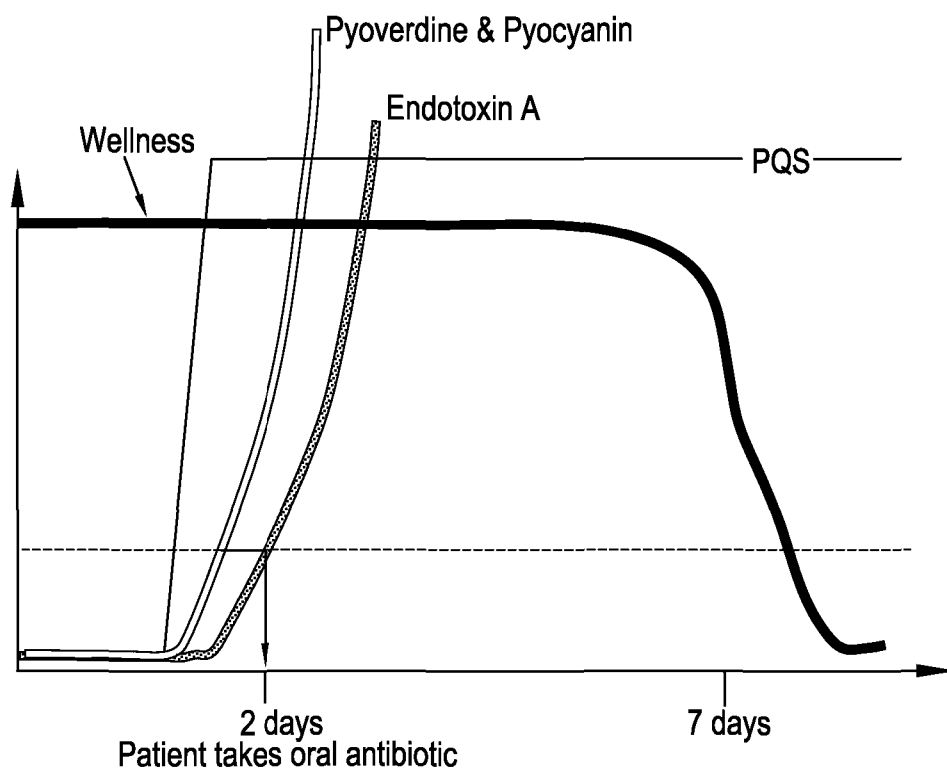


Figure 4

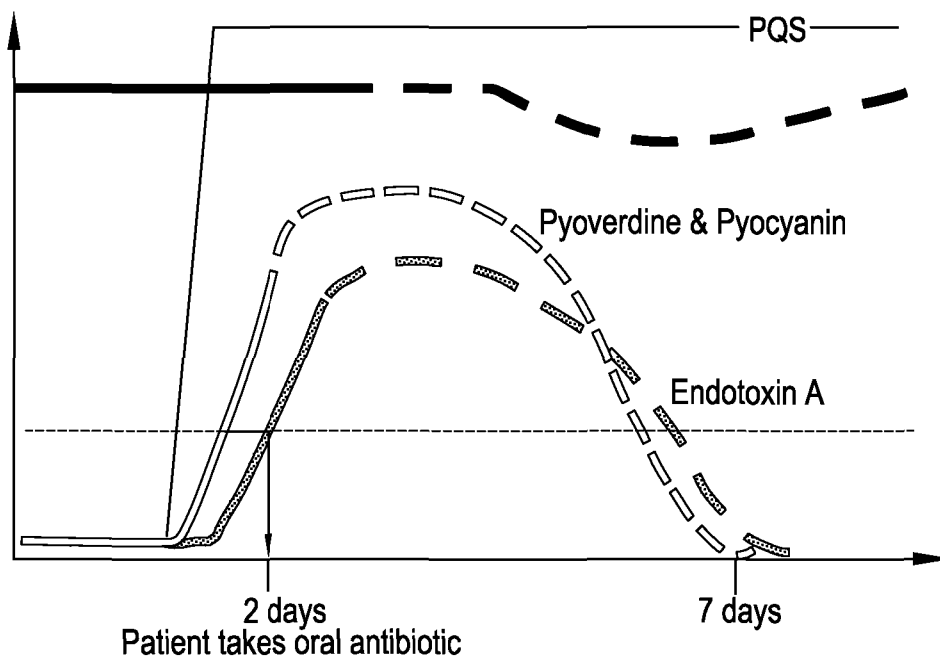


Figure 5

4/10

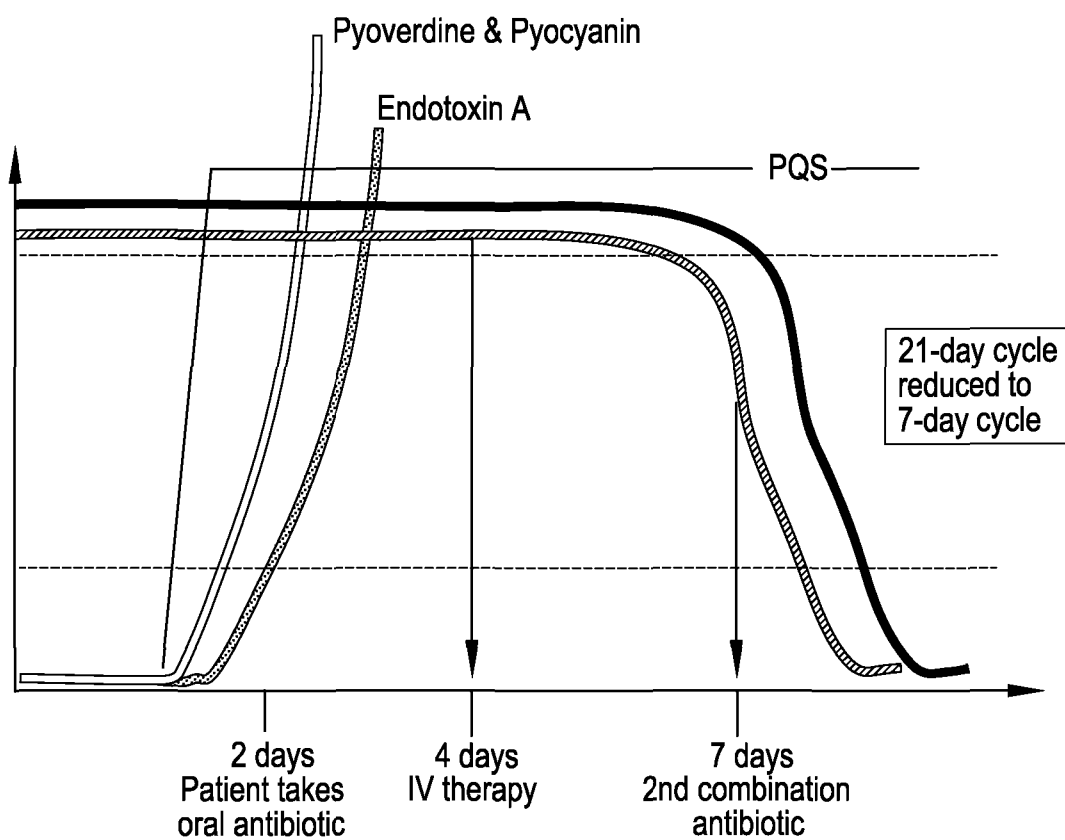
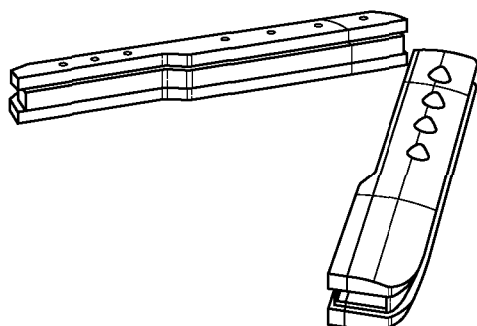
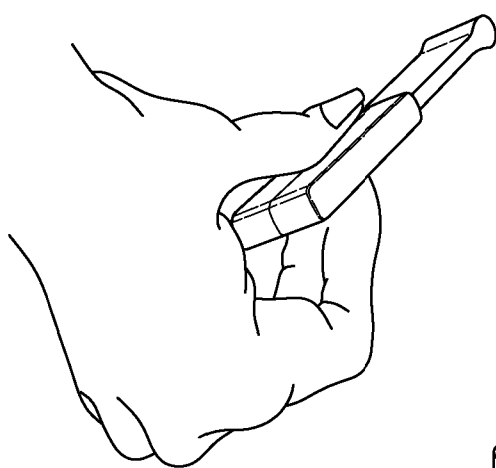


Figure 6

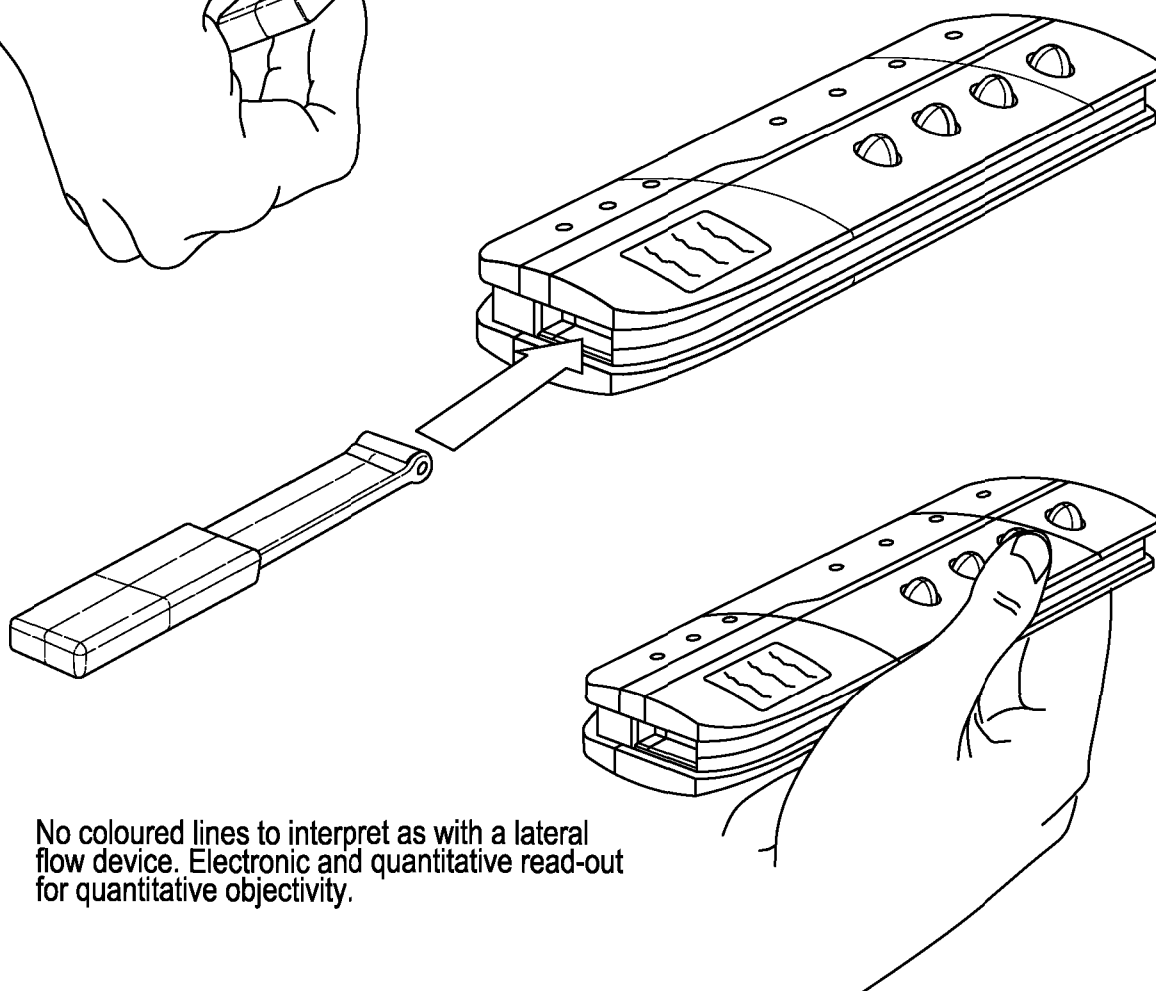
5/10



Low cost electronics connects to single use cartridge, manually activated.



Large "sponge" swab to collect sputum sample on large surface are to achieve high sensitivity.



No coloured lines to interpret as with a lateral flow device. Electronic and quantitative read-out for quantitative objectivity.

Figure 7

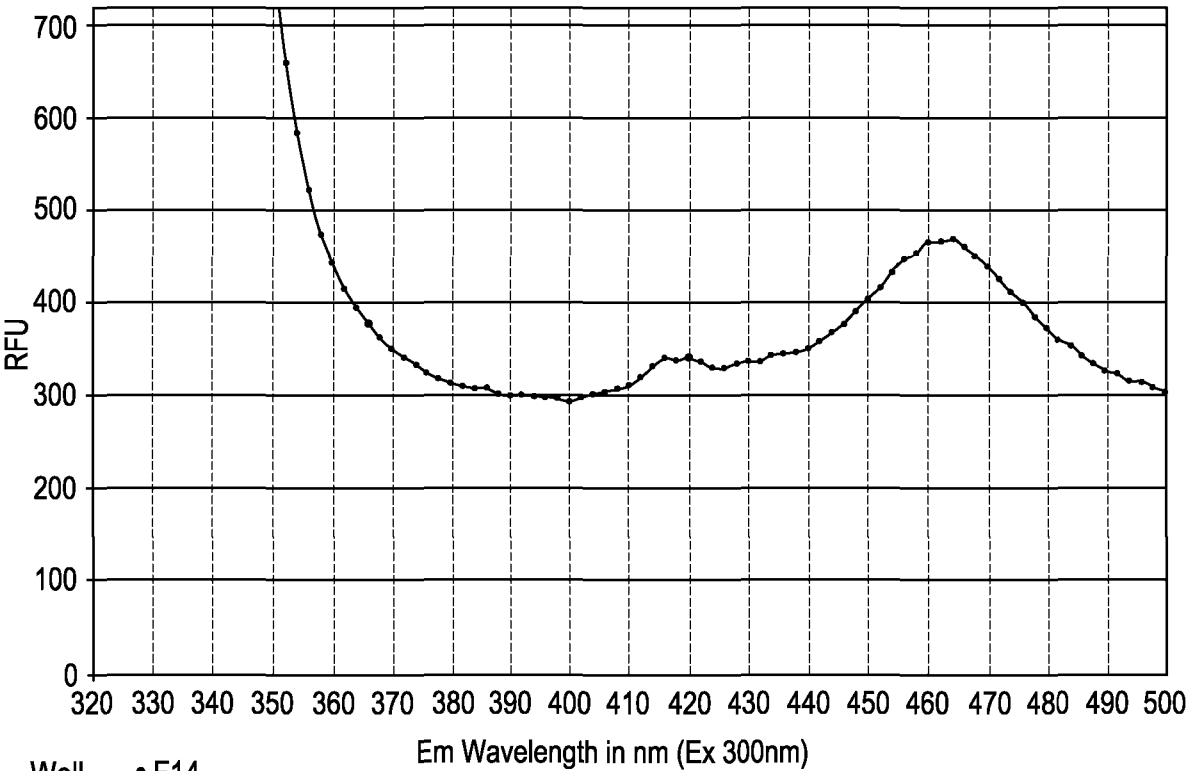


Figure 8

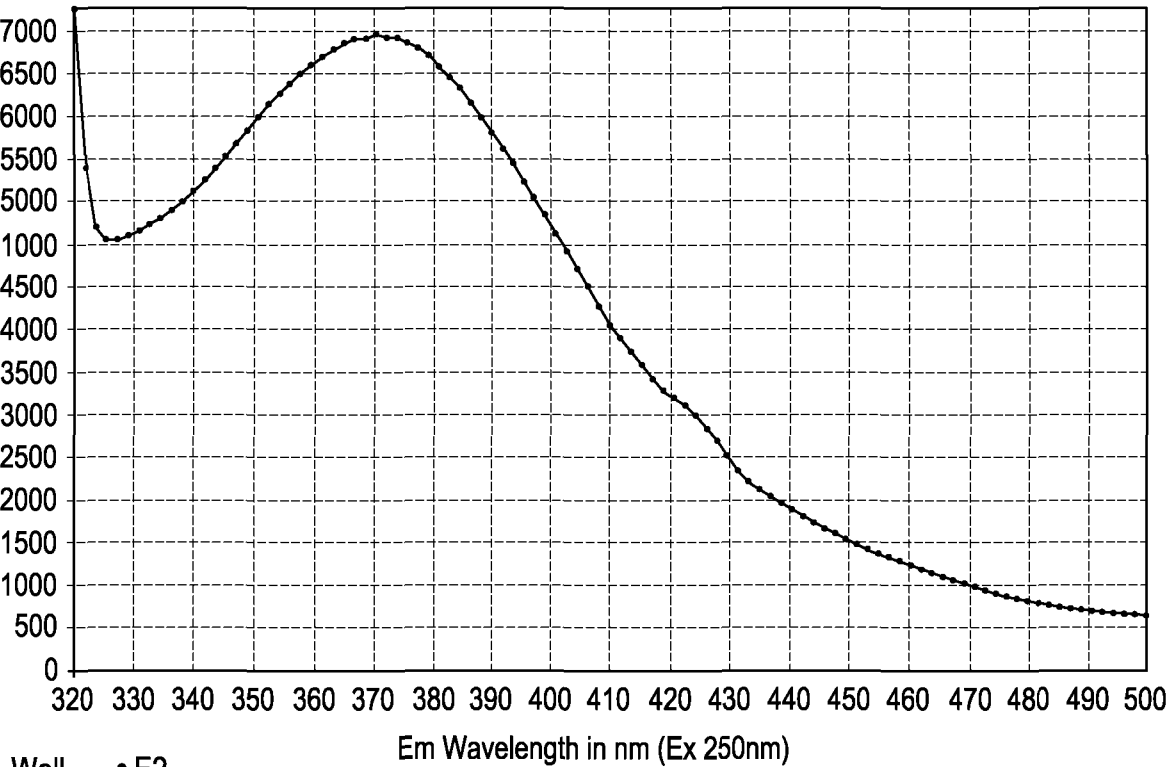


Figure 9

7/10

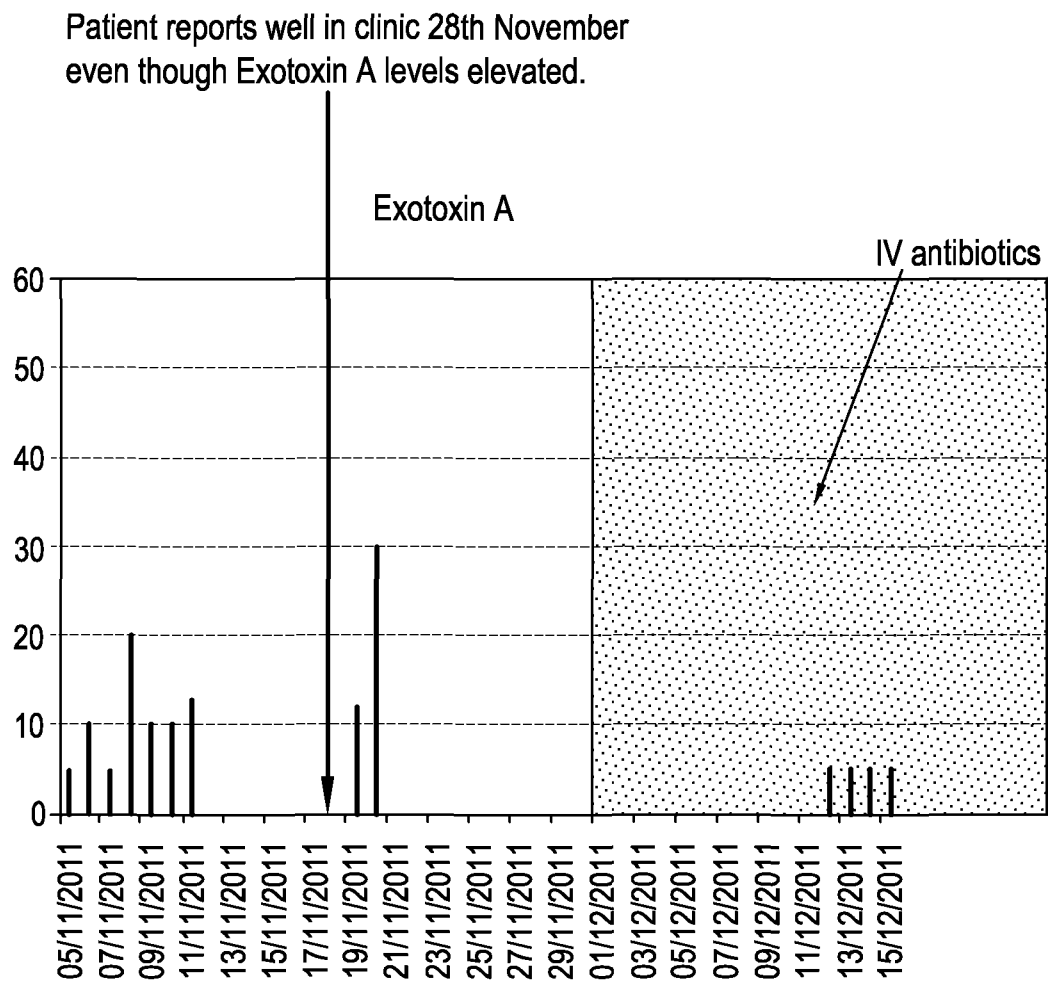


Figure 10

8/10

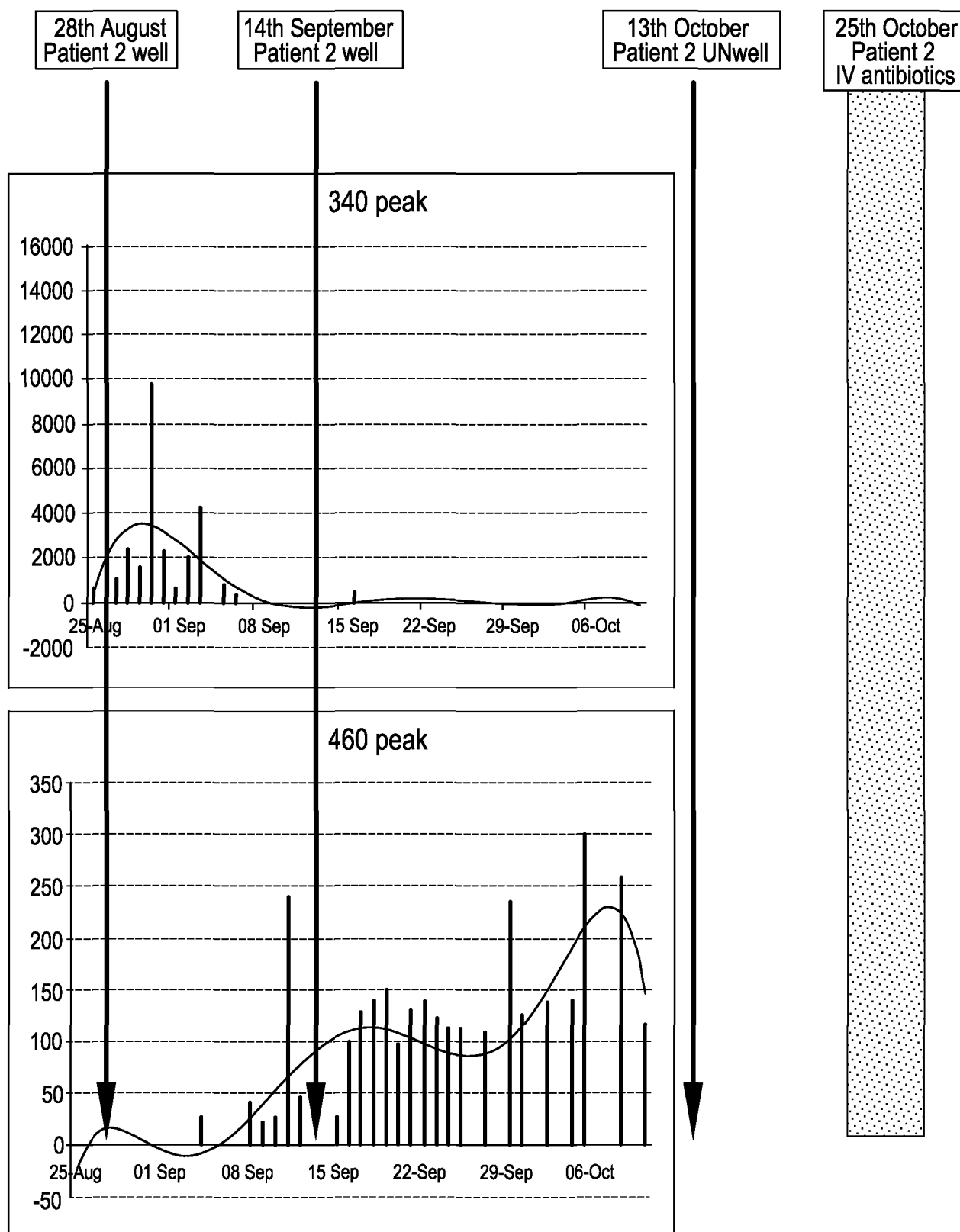


Figure 11

9/10

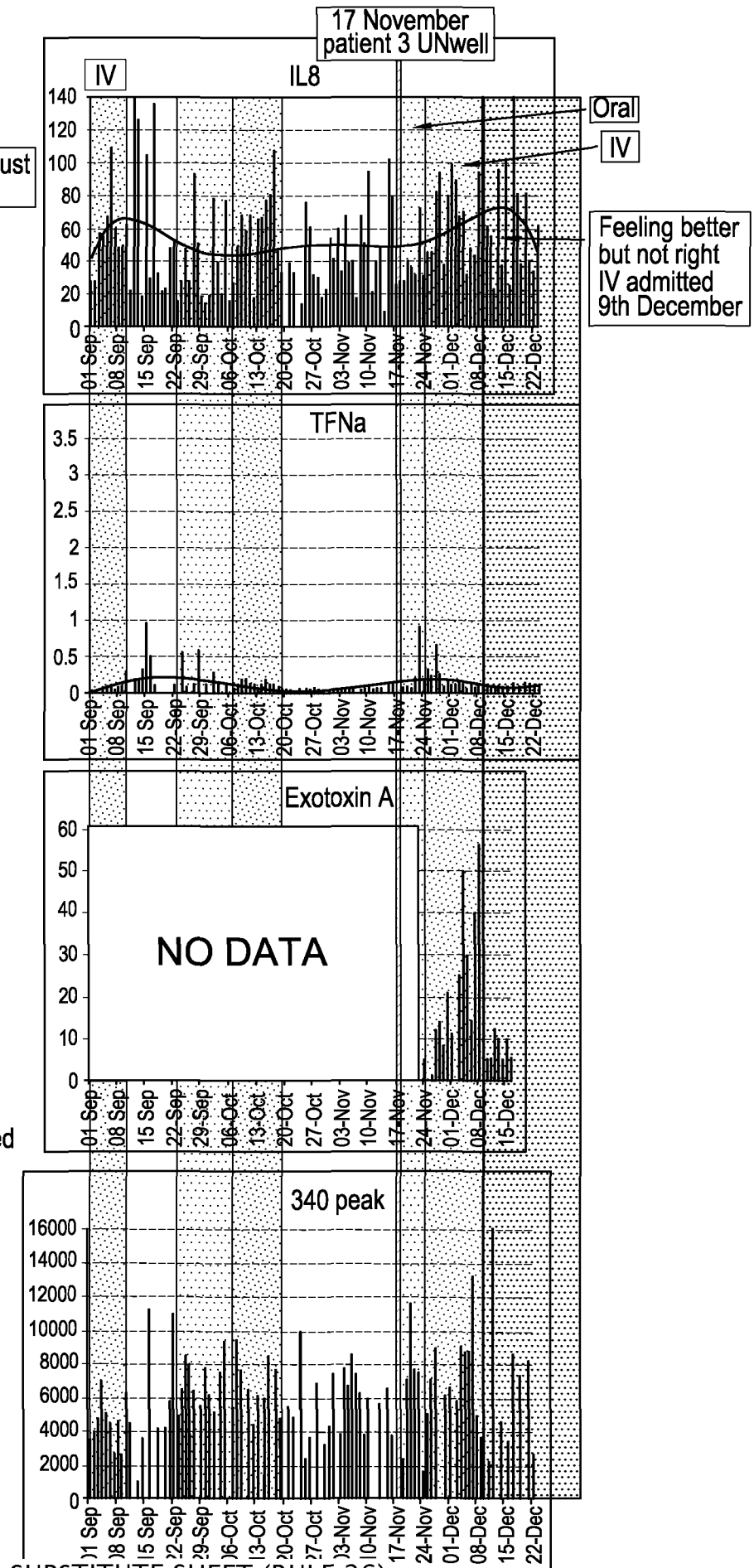
Figure 12

Patient 3

- IV 22nd August to 7th September.
- Oral 23rd September to 5th October
- Unwell 17th November.
- Oral 19th November to 25th November.
- IV 25th November to 28th December.
- Admitted 9th December

Exotoxin levels increased while taking oral and IV antimicrobials at home. Fall immediately on admission.

340 peak high throughout but declines on IV in clinic



SUBSTITUTE SHEET (RULE 26)

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10/10

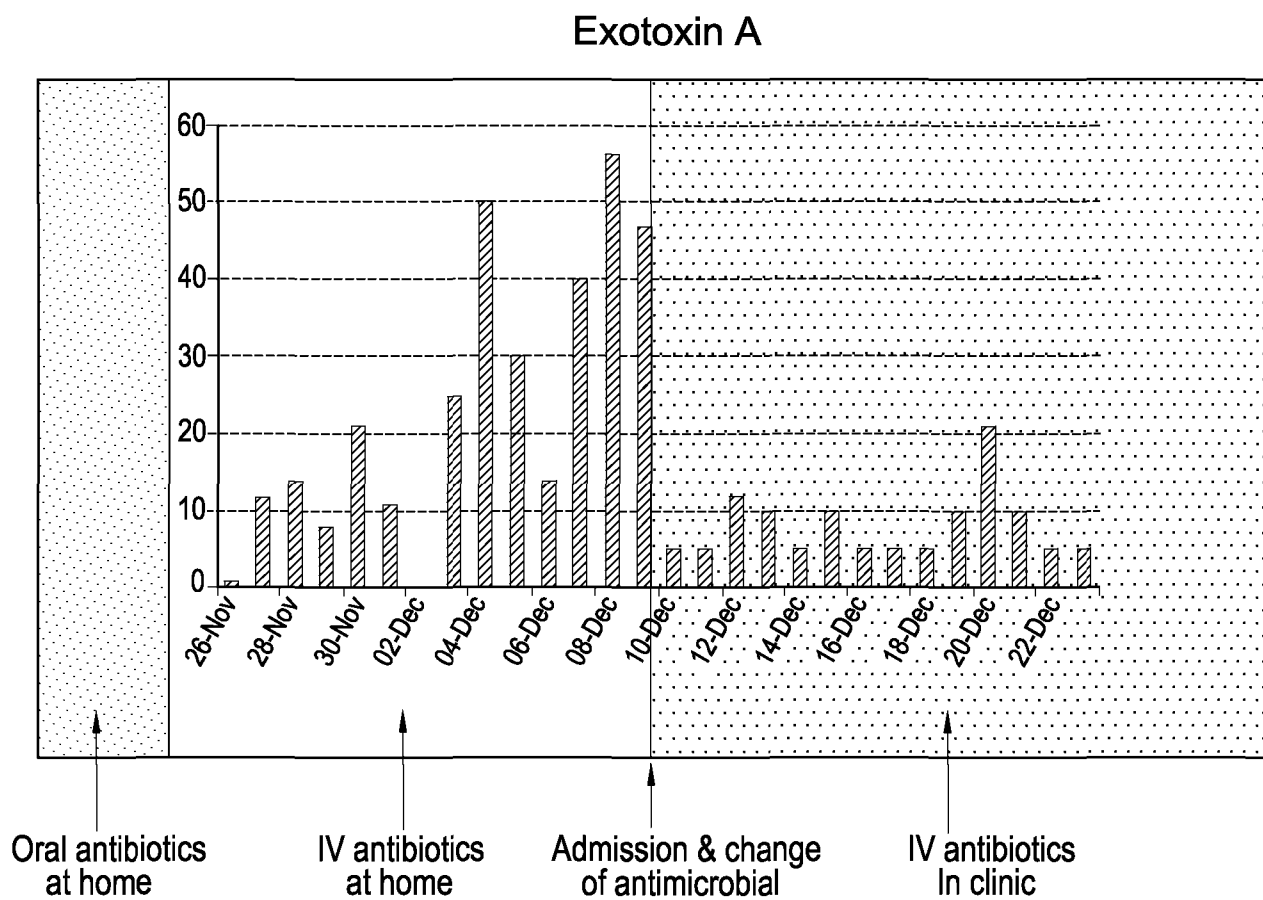


Figure 13