

ICS 11.220
CCS B 41

SN

**INDUSTRY STANDARD OF THE
PEOPLE'S REPUBLIC OF CHINA**

SN/T 1419-2004

Protocol of bacterial diagnosis for furunculosis

疔疮病细菌学诊断操作规程

(English Translation)

Issued on: June 1, 2004

Implemented on: December 1, 2004

**Issued by: General Administration of Quality Supervision, Inspection and
Quarantine of the People Republic of China**

Table of Contents

Foreword
1 Scope
2 Instruments, reagents
2.1 Instruments
2.2 Media and reagents
3 Separation and identification steps
4 Clinical diagnosis
4.1 Clinical classification
4.2 Clinical symptoms and pathological changes
5 Sampling

Foreword

Appendix A and Appendix B of this standard are normative appendices.

This standard is proposed and managed by the National Certification and Accreditation Administration.

This standard was drafted. Zhuhai Entry-Exit Inspection and Quarantine Bureau of the People's Republic of China.

1 Scope

This standard specifies the isolation and identification method of the pathogen of acne infection, *Aeromonas sputum*.

This standard applies to the detection, epidemic monitoring and epidemiological investigation of acne diseases in salmonids.

2.1 Instruments

Microscope (with oil mirror, dark field), constant temperature incubator, inoculating loop, petri dish, etc.

2.2 Media and reagents

PBG medium, 2% agar, peptone soy agar medium (TSA medium), FA medium, glucosinolate, gram the staining solution I, II, III, IV, V-P reagents (see Appendix A for the preparation of the medium and reagents).

3 Separation and identification steps

See Appendix B for the separation and identification process.

4.1 Clinical classification

Acute diseased fish quickly die without any external symptoms. Subacute disease develops slowly and forms typical hemorrhoids on the trunk muscles.

After the death, they died. Chronic diseased fish are in a state of bacterium for a long time, asymptomatic, and do not die.

4.2 Clinical symptoms and pathological changes

The diseased fish appeared to be out of the group, the activity was slow, and the body color was black. In the body of the fish, usually on the muscle tissue on both sides of the base of the dorsal fin There are several small areas of red and swollen abscesses that bulge outward, soft and swollen. The surface of the bulge gradually becomes hemorrhagic, necrotic and ulcerated to form an ulcerated mouth. Ulcer Small, not a film. Intestinal congestion and inflammation, kidney softening, swelling is reddish or dark red. Liver fading, fatty degeneration.

5 Sampling

Sampling for health monitoring. Each fishery should be inspected every six months. In principle, 0.2% of the total number of fish should be collected, at least not less than 150.

Strip fish, aseptically collected samples from organs such as kidney, spleen and liver. If the fishery is tested in the laboratory for two years, no pathogens are found, and there is no suspicious clinical After the symptoms, it is considered to be a fishery without *Aeromonas*. Such fisheries should be tested twice a year, but the number of samples collected per time can be Reduce to 30 fish.

Clinical Diagnostic Sampling. If there is a skin lesion, sample it from the skin lesion and sample it from the kidney, spleen, liver and other organs.

Method. Pierce the skull with an anatomical needle to destroy the cerebellum and make the fish lose its ability to exercise. For the lesion of the skin, cut with a sterile scalpel the affected part (or ulcer) of the acne is aseptically collected for diseased tissue. Inoculate TSA medium and make a smear for Gram staining.

A small sample is used for the kinetic examination of bacteria; for the sampling of internal organs, the ignited alcohol cotton ball is used to clean and disinfect the surface of the fish to be inspected, in front of the anus.

Cut the abdomen with a sterile scissors at a distance of 0.5cm, then gradually turn to the

head from one side to the back and cut into a curved incision to open the abdominal cavity.
The bacteria collect organs.