

## Correspondence

### **Authors' response**

Sir,

We thank the author to point out certain queries on our article<sup>1</sup> and would like to present the following clarifications:

- (i) MRSA were isolated and confirmed by both phenotypic and genotypic methods as per CLSI guidelines. Since, MRSA is not the main topic of our paper, we did not mention MRSA screening in detail. Oxacillin and methicillin have not been tested together.

- (ii) The PCR work was done at Bio-serve Biotechnologies, Hyderabad. They have isolated DNA by using standard kit methods.
- (iii) The primers used by us were of Biswajit *et al*<sup>2</sup>. They have validated the primers.
- (iv) True, but we have tested the antibiogram of the isolates using different antibiotics and reported the same.
- (v) True, no new methods were followed for inducible clindamycin test for Ery resistance isolates.
- (vi) *mecA* has been detected by PCR.
- (vii) True, but we have not concentrated on the treatment aspects. We agree, suggestions could have been made.
- (viii) We have not carried out MIC<sub>90</sub> and MIC<sub>50</sub>.
- (ix) True, we have not mentioned MIC<sub>50</sub> and <sub>90</sub>.
- (x) This is another aspect.

(xi) One VISA strain was isolated; however, it was not used for PCR. The same has been mentioned in the paper.

(xii) The clinical source of VRSA isolates has been mentioned in the Table.

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### References

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2. Biswajit S, Anil KS, Abhrajyoti G, Manjusri B. Identification & characterization of a vancomycin-resistant *Staphylococcus aureus* isolated from Kolkata (South Asia). *J Med Microbiol* 2008; 57 : 72-9.