Phenotypic Identification of *Staphylococcus intermedius* May Be Inaccurate

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I read with interest the case report by Hatch et al. (1) describing metastatic complications from *Staphylococcus intermedius* infection in a person. However, it is unlikely that *S. intermedius* was actually isolated from this patient. As has been widely reported since 2007, isolates collected from domestic animals and classified using conventional biochemical means as *S. intermedius* are almost invariably (if not invariably) the related species *S. pseudintermedius* (2–4). While zoonotic infection is assumed, *Staphylococcus intermedius* is extremely rare to nonexistent in domestic animals, being found predominantly in pigeons (4). Accordingly, it has been recommended that strains collected from dogs and identified by biochemical means as *S. intermedius* be reported as *S. pseudintermedius* (2), a recommendation that could be taken more broadly, since domestic animals (mainly dogs) are the presumed source of most *S. intermedius*/*S. pseudintermedius* infections in humans. While limited human data are available, any reports that have used molecular methods to identify human isolates to the species level have reported *S. pseudintermedius*, not *S. intermedius* (3, 5–8).

While having little direct influence on patient management in this case, proper identification to the species level and reporting is nonetheless important for scientific accuracy and when considering possible sources of infection (since dogs would not be a likely source of *S. intermedius*). It is also important for determination of appropriate methods for detection of methicillin resistance, since cefoxitin, the typical indicator drug for methicillin resistance in *S. aureus*, is inadequate for detection of methicillin resistance in *S. pseudintermedius* (9). I encourage Hatch et al. to properly identify the isolate to the species level, if it is available, and encourage that medical diagnostic laboratories reconsider reporting of *S. intermedius* based on phenotype.

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