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**Non-O:1 *Vibrio cholerae* bacteremia in a 60-year-old female: A case report****Therese Angeli A and Marion Priscilla A Kwek**  
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This is a case of a 60-year old female who presented with persistent, non-bloody diarrhea for 3 weeks which started after intake of Amoxicillin-Clavulanic acid for an upper respiratory tract infection. She had undocumented fever a day prior to admission, which prompted her to seek consult at the Emergency Department and she was eventually admitted. She had stable vital signs at the ED, and only complained of vague abdominal discomfort and generalized weakness. She was initially managed as a case of antibiotic-associated diarrhea and was given Metronidazole PO. The blood cultures taken from two peripheral sites yielded growth of *Vibrio cholerae*. Bacteremia due to *Vibrio cholerae* is rarely reported in literature, and most cases that were reported were in the setting of an immune deficiency state. This patient was otherwise healthy and immunocompetent. She was given Ceftriaxone inpatient, and was sent home on Doxycycline after marked clinical improvement.

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