



LABORATORY TEST RESULT

Name : MANI
Age : 22 Year(s) 0 Month(s) 0 Day(s)
Sex : Male
Source : Out Patient
Hospital No. : CARE092209486

Referred By : PULMONOLOGY UNIT-01
Order No. : CHOP0001307561
Collected On : 16-02-2019 11:07 am
Ward Name :
Lab no : R313/A05847

MICROBIOLOGY RESULTS - FINAL REPORT

Specimen : SPUTUM
Test Name : CULTURE AND SENSITIVITY REPORT
Gram Stain : >25 pus cells/LPF, <5 epithelial cells/LPF, moderate Gram positive cocci in pairs, chains and occasional Gram negative bacilli seen.
Organism1 : Scanty growth of *KLEBSIELLA PNEUMONIAE*

ANTIMICROBIAL SUSCEPTIBILITY REPORT

ANTIBIOTICS	KLEBSIELLA PNEUMONIAE
Amikacin	Susceptible
Ampicillin	Resistant
Cefazolin	Resistant
Cefepime	Susceptible
Cefotaxime	Susceptible
Cefuroxime	Susceptible ✓
Ciprofloxacin	Susceptible
Cotrimoxazole	Susceptible
Gentamicin	Susceptible
Piperacillin-Tazobactam	Susceptible
Tobramycin	Susceptible

Dr. V. Preethi M.D.
Assistant Professor
Department of Microbiology

Validated By : EMP3991|2/18/2019 10:50:18AM

Authorised signatory

Patient : 0100030980 **Mr. MANI.M**
Age /Sex : **23 Y/ M**
Lab.No. : **01011372** Branch : Mylapore - H.O.
Referrer : **Dr. NAGESWARAN.S**

Sample Dt : 21/02/2019
Report Dt : 21/02/2019
Time : 19:25:58
Page No : 1

INVESTIGATION REPORT

DEPT OF RADIOLOGY

CHEST PA VIEW

- * Features of Bilateral pleural effusion noted.
- * Cardiac is within normal limits.
- * Bilateral Hilar prominence noted (? nodul enlargement)
- * Bony cage are normal.
- * For Clinical Correlation.

IMPRESSION : Features of Bilateral lower zone Pneumonitis noted.



DR.AMUDHAN RAMACHANDRAN
MD,DMRD,DNB(RD)
(CONSULTANT RADIOLOGIST)

*** End Of Report ***

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Laboratory report should not be interpreted in isolation. They should always be correlated with clinical findings and other medical reports by medical professionals only

PATIENT NAME:MR:MANI

AGE: 22YRS/MALE

REF.BY:SELF

Reported On: 05.03.2019

X-RAY CHEST PA

Tracheal air column normal

Mediastinal position is within normal limits

Cardiac contour and cardiothoracic ratio are normal

Both lungs appear hyper inflated.

Both lung lower zone shows patchy opacities.

The cardiophrenic and costophrenic angles are free

Domes of the diaphragm are normal in position

Bony cage and chest wall show no significant abnormality

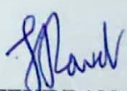
Impression:

BOTH LUNGS APPEAR HYPER INFLATED.

BOTH LUNG LOWER ZONE SHOWS PATCHY OPACITIES.

NO PLEURAL EFFUSION

(SUGGESTED CT-CHEST FOR FURTHER EVALUATION)


Dr.J.RAVEENDRAN.,MDRD.,
Consultant Radiologist

No. 74, Church Road, Perungudi, Chennai-96,
Branch : Sakthi Complex, Next to Apollo Pharmacy, PTC Bus Stop, OMR, Thuraipakkam, Chennai - 600 097.
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NAME	MR. MANI	AGE	23
CR. NO	D-9092	SEX	MALE
REF. CONSULTANT	DR. S. NAGESWARAN	STUDY DATE	22.02.2019
		REPORTING DATE	22.02.2019

128 SLICE HRCT SCAN OF CHEST

Clinical history: Cough with sputum one week, fever.

Thanks for the referral of this patient for CT study.

Technique:

AP scanogram and serial axial sections of the chest are studied without IV contrast and the following observations are made:

Report :

There is evidence of extensive consolidation with air bronchogram in both the lower lobes involving all the segments.

Ground glass pattern of consolidation noted in anterior segment of right upper lobe and anterior segment of left upper lobe.

Tiny peribronchial nodules noted in right middle lobe.

Rest of the lungs are well aerated.

The tracheo-bronchial tree is patent.

No pleural fluid or thickening.

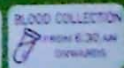
Heart size is normal. No pericardial effusion is seen. Evaluation of solid viscera and vascular structures are suboptimal as this is a non contrast study.

Esophagus appears normal.

No significant hilar / cardiophrenic / axillary lymphadenopathy noted.

Osseous structures appear normal. No aggressive lytic or blastic lesions.

Soft tissues of the thorax appears normal.



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NAME	MR. MANI	AGE	23
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IMPRESSION:

CT features reveal

- ❖ Extensive consolidation with air bronchogram in both the lower lobes involving all the segments.
- ❖ Ground glass pattern of consolidation in anterior segment of right upper lobe and anterior segment of left upper lobe.
- ❖ Tiny peribronchial nodules in right middle lobe.

--- Above features are suggestive of infective etiology.

DR. S. AARTHY
Consultant Radiologist

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Patient : 0200013771 **Mr. MANI.M**
Age /Sex : **23 Y/ M**
Lab.No. : **02008497** Branch : Kamaraj Avenue
Referrer : **Dr. NAGESWARAN.S**

Sample Dt : 31/03/2019
Report Dt : 31/03/2019
Time : 10:27:30
Page No : 1

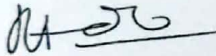
INVESTIGATION REPORT

DEPT OF RADIOLOGY

CHEST PA VIEW

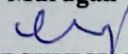
- * Trachea in midline.
- * Bilateral lung fields are clear.
- * Cardio-thoracic ratio in normal limits.
- * Both apices, Hilum, CP angles are normal.
- * Bony cage and soft tissues are normal.

IMPRESSION : NORMAL STUDY.



DR. AMUDHAN RAMACHANDRAN
MD, DMRD, DNB(RD)
(CONSULTANT RADIOLOGIST)

Murugan



TECHNICIAN

*** End Of Report ***

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