

Pathology Report

Patient ID : 1861802260674 /211730787
Name : Sriraj K.K Sarkar
Age / Sex : 21 years / Male
Ref. By :
Org : DIRECT

Bill Date : 01/0/2022, 12:06 PM
Collection Time : 01/02/2022, 12:19 PM
Completion Time : 01/02/2022, 10:54 PM
Primary Sample : Nasopharyngeal &
Oropharyngeal

Investigations

Result(s)

COVID 19 RT PCR (NUCLEIC ACID AMPLIFICATION, QUALITATIVE)

COVID-19 Screening (Nucleic Acid Amplification, Qualitative)

ICMR Reg No. : ULDCGA

Positive test for SARS-CoV-2 confirms the diagnosis of COVID-19.

POSITIVE

Test Indications :

Individuals with suspected COVID-19 infection (As per WHO 'Case Definition' –

[https://www.who.int/publicationsdetail/global-surveillance-for-human-infection-with-novel-coronavirus-\(2019-nCoV\)](https://www.who.int/publicationsdetail/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-nCoV))).

Clinical Significance :

COVID 19 could be asymptomatic or present with symptoms of fever, cough, shortness of breath. Severe cases could lead to pneumonia, severe acute respiratory syndrome and sometimes death. One should seek medical advice if a symptomatic patient has been in close contact with a person known to have COVID-19 or live in or have recently traveled from an area with ongoing spread of COVID-19. COVID-19 is declared as a pandemic but need to be controlled by early diagnosis and following standard and droplet precautions to prevent transmission.

Limitations of the Assay :

One or more negative results does not rule out the possibility of COVID-19 virus infection. A number of factors could lead to a negative result in an infected individual, including poor quality of the specimen, low sample volume, timing of specimen collection (late or very early in the infection), inappropriate sample handling and shipping, inherent technical reasons like virus mutation or PCR inhibition.

Disclaimer:

1. Incubation period for SARS-CoV-2 infection ranges from 1 to 14 days, and clinical symptoms usually manifest within 5 days.
2. If a negative result is obtained from a patient with a high index of suspicion for COVID-19 virus infection, particularly when only upper respiratory tract specimens were collected, additional specimens, from the lower respiratory tract if possible, should be collected and tested.

Additional Comments

****END OF REPORT****



Dr. Nilutpala Bhuyan Hazarika
Lab Director and Chief Pathologist

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Consultant Pathologist

Dr. Surajit Kr. Roy, MD
Consultant Pathologist

Dr. Mansoomi Mahanta, MD
Consultant Microbiologist

Reports should be correlated clinically. In case reports do not correlate clinically if required and if it is beneficial to the patient clinicians can ask for repeat test free of cost within 48 Hrs.

This report is not for medico-legal purpose.

*Not in NABL Accreditation scope.