



Method

Patient Name : Mr.SANJEEV R
Age/Gender : 20 Y 0 M 0 D /M
UHID/MR No : DAPK.0000056597
Visit ID : DHEGOPV3516

Test Name

Ref Doctor : Dr.SELF

IP/OP NO

Collected : 30/Nov/2020 01:25PM Received : 30/Nov/2020 05:20PM Reported : 30/Nov/2020 10:25PM

Status : Final Report

Client Name : PCC HEGDENAGAR BANGALORE
Patient location : HEGDE NAGAR, Bangalore

Bio. Ref. Range

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COVID 19

Unit

Result

| | | - | | | | |
|--------------------------------------------|-----------------------------------------------------|--------------|---------------|--|--|--|
| COVID-19(SARS-CoV 2)-REAL TIME PCR(RT-PCR) | | | | | | |
| SAMPLE TYPE | NASOPHARYNGEAL SWAB AND OROPHARYNGEAL SWAB | | | | | |
| SARS-CoV-2 | NOT DETECTED | NOT DETECTED | REAL TIME PCR | | | |
| RdRp Gene CT VALUE | - | | | | | |

Comment:

Please Note:

N-Gene CT VALUE

Kit used: ARGENE® SARS-COV-2 R-GENE Assay

| Result | Interpretation | | | |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------|--|--|--|
| Detected (Positive) Result | Indicates presence of detectable levels SARS-CoV-2 specific RNA (RdRp gene and/ or N gene) in patient's sample | | | |
| Not Detected (Negative) Result | Indicates absence of detectable levels SARS-CoV-2 specific RNA (RdRp gene and/ or N gene) in patient's sample. | | | |
| Indeterminate Result | Indicates the specimen concentration is too low, or presence of interfering substances leading to PCR inhibition. | | | |

NOTE:

- If either of the genes cannot be determined or will give indeterminate results, further testing maybe required using another kit with a different primer and probe.
- A **Not Detected** (**Negative**) **Result**do not preclude SARS-CoV-2 and should not be used as the sole basis for patient management decisions. Kindly repeat test after 48 to 72 hrs if clinically suspected.

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^{*}Not Detected (Negative) Result indicate CT Value of >40 as per the testing kit used.

^{*}The cut-off of the reported CT value is as per the manufacturer.

^{*}CT values vary with the type of kit used, the types of samples collected and the various pre-analytical factors.

^{*}The published studies are conflicting to definitively prove a direct correlation between disease severity/infectiousness and CT values therefore; relying on CT values for determining infectiousness of COVID-19 patients and deciding management protocols is left to clinical discretion.





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DEPARTMENT OF MOLECULAR BIOLOGY.

COVID 19

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
| | | | | |

- Lower respiratory tract specimens are more representative and are preferred.
- If at a later date, suspicion of COVID-19 is strong, a fresh sample for Real Time PCR after a gap of 2-4 days after collection of first sample maybe considered.
- Please contact your Physician for necessary action to be taken and to limit the spread of infection.
- Clinical Correlation and Correlation with the history of the patient is required before arriving at any conclusion. Presence of Non-Specific interfering substances during this assay to be kept in mind. Please correlate clinically before arriving at any conclusion.
- False positive and false negative results can be due to multiple factors including sampling technique, transport & interference in the assay can affect the result.
- Presence PCR inhibitors in sample may lead to false negative or invalid results.
- Mutation in the target sequence of SARS-CoV-2 or change in the sequence due to virus evolution may lead to false negative results.
- Invalid Result: There is no typical S-shape amplification curve or Ct > 40 or No Ct detected for target genes and internal control, indicating the specimen concentration is too low, or there are interfering substances that inhibit the reaction. If upon retest, the result is invalid again, another fresh sample should be collected and tested.

Disclaimer:

This Test is based on real-time reverse transcriptase PCR technology for the qualitative detection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) specific RNA

- *ICMR ID-AHLS001- HYDERABAD
- *ICMR ID-AHLVDLA- VIJAYAWADA
- *ICMR ID-AHLLKDLKAP- KURNOOL
- *ICMR ID-AHLLKDIALBK-BENGALURU
- *ICMR ID-APHLILKDLCTN- CHENNAI

(For kits determining RdRp gene or ORF1b, sensitivity / specificity of such kits shall be mentioned).



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Patient Name Age/Gender : Mr.SANJEEV R : 20 Y 0 M 0 D /M

UHID/MR No Visit ID : DAPK.0000056597 : DHEGOPV3516

Ref Doctor IP/OP NO : DHEGOPV3

: Dr.SELF

Collected : 30/Nov/2020 01:24PM Received : 30/Nov/2020 03:44PM Reported : 30/Nov/2020 04:29PM

Status : Final Report

Client Name : PCC HEGDENAGAR BANGALORE

Patient location : HEGDE NAGAR, Bangalore

| DEPARTMENT OF BIOCHEMISTRY | | | | | |
|----------------------------------------------------|--------|-------|-----------------|-----------------|--|
| Test Name | Result | Unit | Bio. Ref. Range | Method | |
| GLUCOSE, RANDOM , SODIUM FLUORIDE PLASMA | 86 | mg/dL | 70 - 140 | Glucose oxidase | |





SIN~No:BI05178288 This test has been performed at Apollo Health and Lifestyle ltd-Kasturinagar, Diagnostics Laboratory

Regd. Office: #7-1-617/A, 615 & 616, 7th Floor, Imperial Towers, Opp to: Ameerpet Metro Station, Ameerpet, Hyderabad-500038

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UHID/MR No : DAPK.0000056597

Visit ID : DHEGOPV3516

Ref Doctor : Dr.SELF

IP/OP NO

Collected : 30/Nov/2020 01:24PM Received : 30/Nov/2020 03:44PM Reported : 30/Nov/2020 05:28PM

Status : Final Report

Client Name : PCC HEGDENAGAR BANGALORE

Patient location : HEGDE NAGAR, Bangalore

| DEPARTMENT OF SEROLOGY | | | | | |
|---------------------------------|--------------|--|-----------------|--------|--|
| Test Name | Result Unit | | Bio. Ref. Range | Method | |
| HBS AG SCREENING(RAPID) , SERUM | NON REACTIVE | | NON REACTIVE | ICT | |

Comment:

HBsAg is the initial serological marker of acute infection with Hepatitis B which typically appears 2-3 months after infection and disappears 12-20 weeks after onset of symptoms. Persistence of HBsAg for more than six months indicates development of carrier state or chronic liver disease.

Note: This is only a Screening test. All reactive samples should be confirmed by confirmatory test.

| HCV Tri Dot, SERUM | NEGATIVE | 40 | NEGATIVE | ICT |
|--------------------|----------|----|----------|-----|
| | | | | |

Comment:

The 4th Generation HCV TRI-DOT is a rapid, sensitive and qualitative in vitro diagnostic test for the detection of antibodies to Hepatitis C Virus in test specimen. It utilizes a unique combination of modified HCV antigens from the putative core, NS3, NS4 & NS5 regions of the virus to selectively identify all subtypes of Hepatitis C Virus in human serum/plasma with a high degree of sensitivity and specificity.

This is only a screening test and all reactive samples should be confirmed by HCV RNA PCR. The presence of anti-HCV does not imply a Hepatitis C infection but may be indicative of recent and / or past infection by HCV.

A non-reactive result does not exclude the possibility of exposure to or infection with HCV.

Patients with auto-immune liver diseases, renal disorders may show falsely reactive results.

*** End Of Report ***

Dr. LUCKY SINHA M.B.B.S., M.D.

CONSULTANT PATHOLOGIST

Dr. SANGEETHA M.D. (MICROBIOLOGY)

SIN No. SE00(20107

SIN No:SE00620197

This test has been performed at Apollo Health and Lifestyle ltd-Kasturinagar, Diagnostics Laboratory

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