LUPIN DIAGNOSTICS
Good health starts here

Patient Information		Specimen Information		Client / Doctor Information	
Name	: Mr.AVINASH DUBEY	Visit ID	: L822658	Client Code	: PUP2881
Age/Gender	: 32 Y 0 M 0 D /Male	Collected	: 26/Apr/2024 13:49	Client Name	: PUP VIJAYA DIAGNOSTICS 2
MobileNo	: 9630062321	Received	: 26/Apr/2024 15:28	Client Add.	: JABALPUR
UHID	: LDAA01809418	Reported	: 26/Apr/2024 17:29	Client No.	: 7697962596
Address	:	IP/OP/Barcode	:	Ref Doctor	: Dr.Priya Duggal
		Report Status	: Final Report		

Test Name	Result	Bio. Ref. Range	Unit	Method
HIV 1 & 2 Antibodies, Rapid , *SERUM*				
HIV 1 & 2 Antibodies, Rapid	Non Reactive	Non Reactive		Rapid Immunochromatography

Interpretation:
This is a visual and rapid screening immunoassay for the differential detection of Human Immunodeficiency Virus (HIV-1 & HIV-2) antibodies (IgM, IgG & IgA) in human serum or plasma using HIV-1 & HIV-2 antigens immobilized on a membrane and detected via a Lateral flow Immunochromatography technique.

HIV-1 and HIV-2 viruses share many morphological and biological characteristics. It is likely that due to this, their antibodies have a cross reactivity of 30-70%. Reactivity for HIV-1 and HIV-2 antibodies on the test device does not necessarily imply co-infection from HIV-1 & HIV-2.

Antibody Testing may not be reliable in the following situation:

1. Window Period (Not Detectable during this phase).
2. <18 months of age (Babies of HIV positive mothers may have passively acquired maternal antibodies and hence it is difficult to differentiate them from those produced by the infant.

False reactivity could be seen in cases of naturally occurring antibodies, passive immunization, certain infections, renal disorders, hypergammaglobulinemia, neoplasms, rheumatoid arthritis, tetanus vaccination, autoimmune diseases, blood transfusion, hemophilia and lipemic samples.

Samples found to be reactive by the above screening test must be confirmed by standard supplemental assays, like Western Blot.

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

For a definitive diagnosis, the patient's clinical history, symptomatology as well as results of supplemental and confirmatory assays should be considered.

VDRL (RPR), Serum				
Result	Non Reactive	Non Reactive		Slide Flocculation

Interpretation:
Rapid Plasma Reagin (RPR) test is a Macroscopic Slide flocculation test for detection and quantitation of antilipoidal antibodies

SIN No:SE00261031

This test has been performed at Lupin Diagnostics Laboratory, PCL JABALPUR Plot No.23, Madanmahal Extension, Subhadra Kumari Chauhan ward,,JABALPUR,JABALPUR , 482001

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Test Name	Result	Bio. Ref. Range	Unit	Method

for syphilis testing.

Syphilis is a venereal (sexually transmitted) disease caused by Treponema pallidum. After infection the host forms Treponemal antibodies to Treponema pallidum, in addition, the host also forms Non-Treponemal antilipoidal antibodies in response to the lipoidal material released from the damaged host cell. These antibodies (Reagin) are captured in this test.

RPR test cannot be performed on Cerebrospinal fluid.

***** End Of Report *****

Dr. Ashok Methwani
Consultant Pathologist

SIN No:SE00261031

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