

## **NATIONAL COVID-19 LABORATORY** DEPARTMENT OF MICROBIOLOGY, R.G.M.C. C.S.M.H.

## COVID 19 TESTING FACILITY: C. R. Wadia Dispensary, Thane 400601

## **Test Report**

Date & Time of receipt of specimen (dd/mm/yyyy)	24/06/2020 17:30 pm
Date and time of reporting (dd/mm/yyyy)	25/06/2020 19:43 pm
SPECIMEN DETAILS	Nasopharyngeal Swab
NAME OF QUARANTINE CENTER / HOSPITAL	KASARVADAVALI

Sample ID	Patient Name	Age (Yrs)	Gender	Date of sample testing	SARS- CoV 2	Remarks
C10490	DR. ABHIJIT MAGAN MORE	36	М	25.06.2020		OBSERVED CT VALUE IS 33.55. A RECENT STUDY SHOES THAT, A CT VALUE OF MORE THAN 24 CYCLES IN A FOLLOW UP PATIENT IS NON-INFECTIOUS, INDICATINING SHEDDING OF DEAD VIRUS. A RECENT STUDY PUBLISHING EMERGING INFECTIOUS DISEASE STATES THAT IN FEW PATIENTS PCR CAN BE POSITIVE UPTO TWO MNTHS FROM THE ONSET OF SYMPTOMS.

Note: The results relate only to the specimens tested and should be correlated with clinical findings. Interpretation guidance:-

- Testing of referred clinical specimens was considered on the basis of request / referral received from / through State Surveillance Officer (SSO) of concerned State Integrated Disease Surveillance Programme (IDSP)/any other health care facility affirming requirements of the case definition/s.
- A positive test result is only tentative, and will be reconfirmed by retesting.
- Repeat sampling and testing of lower respiratory specimen is strongly recommended in severe or progressive disease.
- The repeat specimens may be considered after a a gap of 2 4 days after the collection of the first specimen foradditional testing if required.\*
- A positive alternate pathogen does not necessarily ruleout either, as little is yet known about the role ofcoinfections.
- · Please note that these results are not to be used for any thesis or presentations or for Publication in any Journal without the prior permission of the Director General,ICMR

Verified by

Shaws

**Checked and Approved by** Dr. Milind Ubale M.D. (Microbiology)

Dr. Shalmali Dharma Ph. D