

I.D./Reg.No : <b>131114-001</b>	Date of Received : 13/11/14	Date of Report : 13/11/14
Patient Name: 1	Age :	Sex : MALE
Doctor Name: DR MD NUR HOSSAIN BHUIYAN (SHAHEEN) MBBS, FCPS, MCRPSI (COLORECTAL SURGERY)		

### **BLOOD C/S**

**1.**

**2. Colony Count :  $> 10^5$  /ML**

**3. Sensitivity Test : APPLICABLE**

Amoxicillin	<input type="checkbox"/>	Gentamicin	<input type="checkbox"/>
Cloxacillin	<input type="checkbox"/>	Netilmicin	<input type="checkbox"/>
Cephadrine	<input type="checkbox"/>	Nalidixic Acid	<input type="checkbox"/>
Ceftriaxone	<input type="checkbox"/>	Ciprofloxacin	<input type="checkbox"/>
Cefixime	<input type="checkbox"/>	Levofloxacin	<input type="checkbox"/>
Ceftazidime	<input type="checkbox"/>	Doxycycline	<input type="checkbox"/>
Cefepime	<input type="checkbox"/>	Tetracycline	<input type="checkbox"/>
Imipenem	<input type="checkbox"/>	Nitrofurantoin	<input type="checkbox"/>
Meropenem	<input type="checkbox"/>	Amikacin	<input type="checkbox"/>
Erythromycin	<input type="checkbox"/>	Chloramphenicol	<input type="checkbox"/>
Azithromycin	<input type="checkbox"/>	Azactam	<input type="checkbox"/>
Co-trimoxazole	<input type="checkbox"/>	Penicillin	<input type="checkbox"/>

S=Sensitive, M=Moderately Sensitive, R=Resistant

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