Patient Name : DAUD MARKI
Age / Gender : 44 years / Male
Patient ID : MPL/P104185
Source : APOLLO

Referral : SELF
Collection Time : Feb 10, 2022, 03:44 p.m
Receiving Time : Feb 10, 2022, 03:46 p.m
Reporting Time : Feb 10, 2022, 07:48 p.m
Sample ID :

Test	Result(s)	UOM	Method
***COVID-19 Virus Qualitative Real Time PCR**			
SRF ID/ICMR ID	12526161		
SPECIMEN :	Nasopharyngeal & Oropharyngeal swab		
RESULT	Negative		
Temperature maintenance of Specimen received	In cold chain		
Quality of specimen on arrival	Good		
Note:	Registration number for Covid-19 is MPLRJH. Test conducted with ICMR/CE-IVD/USFDA approved kit.		

Limitations:

*Result of Real Time PCR should be correlated with Clinical symptoms and medical history.
*Negative Result may be associated with insufficient viral RNA in the sample, presence of inhibitors, rare mutations in the conserved regions. In such cases retesting should be conducted with freshly collected repeat sample.

Principle:

The reaction is based on TaqMan probe real-time fluorescent PCR technology. Coronavirus RNA was first transcribed into cDNA by reverse transcriptase, and then cDNA was used as a template for PCR amplification.

Interpretation:

*Positive (according to the CT cut off criteria of the reaction) amplification of target genes shall be considered as positive for SARS nCov-2. *No amplification of both the target genes but positive amplification in internal control shall be considered as negative for nCov-2019.
*No amplification of both the target gene as well as internal control shall be interpreted as invalid or inconclusive result.

Interpretation guidance:

*Please ensure and maintain confidentiality of the test report.
*Testing of referred clinical specimens were considered on the basis of request/referral received from/through the State Surveillance Officer (550) of concerned State IDSP/ any other health facility.
*A single negative test result, particularly if this is from an upper respiratory tract specimen, does not exclude infection.
*Repeat sampling and testing of lower respiratory specimen is strongly recommended for severe or progressive disease. The repeat specimens can be considered after a gap of 2 to 4 days after the collection of first specimen for additional testing ifrequired.
*A positive alternate pathogen doesnt necessarily rule out either, as little is yet known about the role of coinfections. Testing of non- viral agent has not been undertaken.
The test marked with "" is/are not under the scope of NABL.

Scan to Validate

Checked By : pooja.

Dr. Pooja Sahai, MD
Clinical Microbiologist and ID Specialist