

OMEGA BIOLOGICAL LABORATORY, INC.

(FDA REG.)

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Report

M-0002

CLIENT: JLL		DATE SENT: 2025-09-29
TYPE OF TEST: fasfd	SAMPLE TYPE: fadf	FORMULA #: dsf
DESCRIPTION: fsf		
LOT #: dsf		MANUFACTURE DATE: 2025-09-29
TEST SOP #:		DATE TESTED:
PRELIMINARY RESULTS:	PRELIMINARY RESULTS DATE:	
DATE COMPLETED:		

TBC / TFC RESULTS:

TYPE OF TEST	DILUTION	GRAM STAIN	RESULT	SPECIFICATION
Total Bacterial Count:	x 10^0		CFU/ml	fsfds
Total Mold & Yeast Count:	x 10^0		CFU/ml	sfsd

PATHOGEN SCREENING (Please check the organism to be tested)

ORGANISM	RESULT	SPECIFICATION
<input checked="" type="checkbox"/> E.coli	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	Absent
<input checked="" type="checkbox"/> P.aeruginosa	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	Present
<input type="checkbox"/> S.aureus	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	
<input type="checkbox"/> Salmonella	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	
<input type="checkbox"/> Clostridia species	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	
<input type="checkbox"/> C.albicans	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	
<input type="checkbox"/> B.cepacia	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	
<input type="checkbox"/> Other	<input type="checkbox"/> Absent <input type="checkbox"/> Present in 11g of sample	

DENOTES: NA (Not Applicable) / N.G. (No Growth) / GM.(+)B Gram (+) Bacilli / GM.(+)C Gram (+) Cocci / GM.NEG Gram Negative / NT (Not Tested) / TNTC (Too Numerous To Count).

Comments: _____

TESTED BY: _____	REVIEWED BY: _____
DATE: _____	DATE: _____

Report ID
cmg5d2trb000q129ozgu3hrz8
Report # M-0002
Scan to open in LIMS

