



Bill No.	MGMWPR240091628	Bill Date	11-10-2024 23:44
Patient Name	MR. KIRAN BHAGWAN TAWARE	UHID	MGM240017131
Age / Gender	56 Yrs 2 Mth / MALE	Patient Type	IPD
Ref. Consultant	DR.PRASHANT ATHALE	Ward	SICU
Sample ID	MGM24152711	Current Bed	SICU-010
IP Number	MGMIP2406720	Reporting Date & Time	12-10-2024 16:45
		Receiving Date & Time	12/10/2024 08:46

Microbiology Report

AFB XPERT PANEL BY GENE XPERT MTB DETECTION & RIFAMPICIN RESISTANCE

Specimen : CSF

Report : Mycobacterium Tuberculosis not detected.

Method- GeneXpert(Cepheid)

Interpretation :-

- The Xpert MTB/RIF Assay is not indicated for use with sputum samples from patients being treated with antituberculosis drugs either to determine bacteriologic cure or to monitor response to therapy.
- A negative test does not exclude the possibility of isolating MTB-complex from the sputum sample. The Xpert MTB/RIF Assay must be used in conjunction with mycobacterial culture to address the risk of false negative results and to recover the organism for further characterization and susceptibility testing.
- A positive test does not necessarily indicate the presence of viable organisms.
- The Xpert MTB/RIF Assay does not differentiate between the species of the MTB-complex (i.e., *M. tuberculosis*, *M. bovis*, *M. africanum* etc.). In addition, culture must also be performed to determine if mycobacteria other than tuberculosis complex (MOTT) is present in addition to MTB-complex.
- Lower sensitivity may be observed in pediatric patients due to the diffuse nature of MTB infection in the lungs of this patient group, and difficulties encountered in obtaining adequate specimens.
- Because the detection of MTB-complex is dependent on the number of organisms present in the sample, accurate results are dependent on proper specimen collection, handling, and storage.
- A trained health care professional should interpret assay results in conjunction with the patient's medical history, clinical signs and symptoms, and the results of other diagnostic tests.

End of the Report

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