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FINAL REPORT

Bill No.	: MGMWPR240088410	Bill Date	:	03-10-2024 14:38	
Patient Name	: **MRS. LALITA RAVINDRA LOKHANDE**	UHID	:	**MGM16035596**	
Age / Gender	: 68 Yrs 2 Mth / FEMALE	Patient Type	:	IPD	If PHC :
Ref. Consultant	: DR.K. RAJMOHAN	Ward	:	Single A/C Unit- 8th Floor	
Sample ID	: **MGM24147589**	Current Bed	:	806	
IP Number	: MGMIP2406662	Reporting Date & Time	:	06-10-2024 13:25	
	:	Receiving Date & Time	:	03/10/2024 15:13	

Microbiology Report

BLOOD - C/S - 2 - BAC ALERT

Specimen : Blood
Site : Peripheral site I & II

Organism : **Escherichia coli**

ANTIBIOTICS	INTERPRETATION	MIC
Amikacin	SENSITIVE	2
Amoxicillin/Clavulanic acid	RESISTANT	>=32
Cefotaxime	RESISTANT	Disc diffusion
Ceftriaxone	RESISTANT	>=64
Cefuroxime	RESISTANT	>=64
Cefoperazone	RESISTANT	Disc diffusion
Ceftazidime	INTERMEDIATE	Disc diffusion
Gentamicin	SENSITIVE	<=1
Netilmicin	SENSITIVE	Disc diffusion
Ciprofloxacin	INTERMEDIATE	Disc diffusion
Ofloxacin	INTERMEDIATE	Disc diffusion
Levofloxacin	INTERMEDIATE	Disc diffusion
Trimethoprim/Sulphamethoxazole	RESISTANT	Disc diffusion
Piperacillin/Tazobactam	SENSITIVE	<=4
Cefepime	SENSITIVE	1
Cefaperazone/Sulbactam	SENSITIVE	Disc diffusion
Ticarcillin/Clavulanic acid	SENSITIVE	Disc diffusion
Nitrofurantoin	SENSITIVE	Disc diffusion
Cefuroxime Axetil	RESISTANT	>=64
Fosfomycin	SENSITIVE	<=16

Method :- Culture- Aerobic by Automated BACT/ ALERT 3D. Identification done by Biochemical reactions / Automated Vitek-2 . Antimicrobial sensitivity by automated Vitek -2 / conventional methods/estrips.

Note :-

1. Result of culture and antimicrobial susceptibility test need to be correlated clinically.
2. Previous history of antibiotic usage may influence the growth of microorganisms in vitro.
3. Antibiotic susceptibility done as per revised CLSI Guidelines.

Clinical Reference :

1. CLSI: Performance standards for Antimicrobial Susceptibility Testing.

*****End of the Report*****