DIAGNOSTIC REPORT

CLIENT CODE : C000120636

CLIENT'S NAME AND ADDRESS :
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PATIENT NAME : AMIT BIRLA

PATIENT ID : AMIT170519920A

ACCESSION NO : 0285UI003945 AGE : 29 Years SEX : Male DATE OF BIRTH : 03/11/1992
DRAWN : 25/11/2021 13:18 RECEIVED : 25/11/2021 15:43 REPORTED : 25/11/2021 20:40

REFERRING DOCTOR : SELF CLINICAL INFORMATION :

CLIENT PATIENT ID :

ICMR Registration No: SRLLIPMH

Test Report Status **Final**	Results	Biological Reference Interval	Units

MOLECULAR BIOLOGY

SARS COV -2 REAL TIME PCR

SARS-COV-2 RNA	NEGATIVE		

Comments

Interpretation(s)

SARS COV -2 REAL TIME PCR-SARS-CoV-2, formerly known as 2019-nCoV, is the causative agent of the coronavirus disease 2019 (COVID-19). Main symptoms of the disease include fever, cough and shortness of breath. SARS-CoV-2 transmission occurs primarily via respiratory droplets. SARS-CoV-2 is likely to be at the highest concentrations in the nasopharynx during the first 3 to 5 days of symptomatic illness. Real Time PCR assay targets specific genes and can be used for diagnosis of SARS-CoV-2 virus infection. Positive result indicates that RNA from SARS-CoV-2 was detected in the specimen, and the patient is considered infected with the virus and presumed to be contagious. Negative test result for this test means that SARS-CoV-2 RNA was not detected in the specimen Limitations:

- Negative results do not preclude COVID-19 and must be correlated with clinical observations, patient history, and epidemiological information.
- Positive results do not rule out bacterial infection or co-infection with other viruses.
- The sensitivity of the assay is dependent on the timing of the specimen collection (in relation to symptom onset/stage of infection), quality, and type of the specimen submitted for testing
- Follow-up testing may particularly be important if patient has a clinical picture of viral pneumonia, a potential exposure history, and/or radiographic findings (chest CT or MRI scan) consistent with COVID -19 pneumonia. However repeat testing in the near-term after clearance (within 90 days) should be avoided as prolonged shedding of non-viable virus is not uncommon
- Ct values generated from different assay systems within the same laboratory, or from different laboratories, are not directly comparable and do not necessarily reflect the same viral load due to inter-assay and interlaboratory variability.
- Variation in timing of sample collection, fluctuations in virus shedding, and difference between detection limit of different testing methods within same or different labs could lead to variation in results particularly during initial phase of infection.
- If the virus mutates in the rRT-PCR target region, 2019-nCoV may not be detected or may be detected less predictably. Inhibitors or other types of interference may produce a false negative result.
- The performance of this test has not been established for monitoring treatment of 2019-nCoV infection. Note: Test is performed using ICMR approved Kit targeting any of these genes – E/RDRP/N/ORF1AB References:

1. Euro Surveill 2020 25, 2. Druce et al. JCM. 2011, 3. N. Engl. J. Med. 2020, 382, 929–936

End Of Report

Please visit www.srlworld.com for related Test Information for this accession

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