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AVIGNA Diagnostics
Be Sure, Be Healthy

INDIAN COUNCIL OF MEDICAL RESEARCH
Serving the nation since 1911
Reg no:AVLABHYT

ISO 9001 : 2015 Certified

Laboratory Report

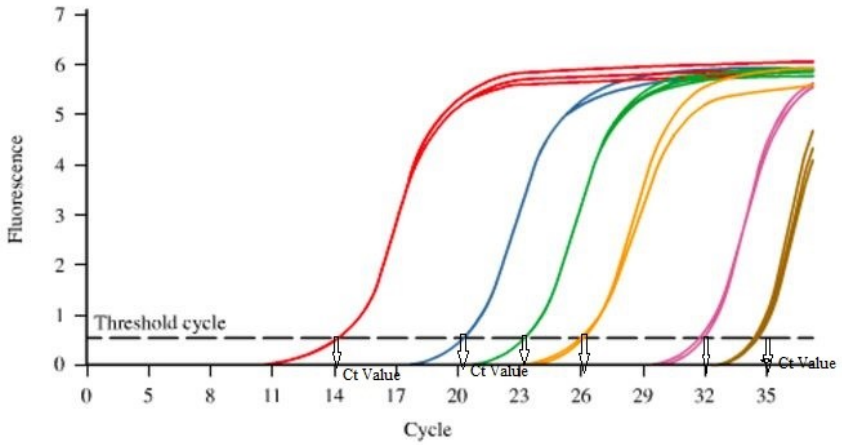
Nationality : Mobile No : 9297755244

Patient Name	: Mr. KESHAV MARODIA	Reg. No	: 0012109180061
Age/Gender	: 19 Years/Male	UID. No	: 57488
Referred by	: Dr. SELF	Client Code	: AVG-W0001
Ref. Customer	: Walk-In	Registered	: 13-Nov-2021 11:43 AM
Sample Tested In	: Nasal/Oral Swab	Collected	: 13-Nov-2021 11:43 AM
Sample ID	: 10058243	Reported	: 13-Nov-2021 04:38 PM

DEPARTMENT OF MOLECULAR BIOLOGY

Test Name	Results	Units	Bio. Ref. Range	Method
SARS-COV-2 (COVID-19) RT PCR				
SARs-COV-2(covid-19) RT PCR	NOT DETECTED(Negative)	NA	-	Method : Real time PCR

- **ICMR Registration number for Covid -19 is: AVLABHYT**
- **What is the threshold cycle or Ct value?**
- In a real time PCR assay a positive reaction is detected by accumulation of a fluorescent signal. The Ct (cycle threshold) is defined as the number of cycles required for the fluorescent signal to cross the threshold (ie exceeds background level). Ct levels are inversely proportional to the amount of target nucleic acid in the sample (ie the lower the Ct level the greater the amount of target nucleic acid in the sample).



Ct Values differ from kit to kit, lab to lab, Collection Process and transportaion conditions and other factors.

Notes:

1) A positive result should be clinically correlated with patient history and other diagnostic markers to determine the patient infection status.
2) A negative result does not exclude the possibility of infection. It may be due to improper collection or potential mutations of target regions of covid – 19 genome. A negative result in a single upper respiratory tract sample does not rule out SARS-CoV-2 infection. Hence in such cases a repeat sample should be sent.
3) Lower Respiratory samples like BAL, ET and Sputum are more representative especially in severe and progressive lung disease.

Limitations of the Test: Performance of 2019-nCoV Real-Time RT-PCR Diagnostic Panel has only been established in upper and lower respiratory specimens (nasopharyngeal or oropharyngeal swabs, sputum, lower respiratory tract aspirates, bronchoalveolar lavage, and nasopharyngeal wash/aspirate or nasal aspirate).

Comment : The results relate only to the specimens tested and should be correlated with clinical findings

*** End Of Report ***

NABL
CERTIFICATE NO:MC-2412

Checked By : M. Kalpana

Dr. Nageshwar Rao
MD(PATHOLOGY)
Consultant pathologist