

## TEST RESULT REPORT

Patient Name : Mrs. SHRUTI KRISHNAN  
Age/Gender : 22 Y / Female  
Sample Collected : At Lab  
Ref By Clinic :  
Ref By Doctor :  
DOB : 11/03/1999

Accession No : 010846392  
Patient UID : MHRL1100083  
Collection Date : 03-01-2022 10:35  
Exit Date : 03-01-2022 15:43  
Ext.Ref.Num :

## MOLECULAR BIOLOGY

## SARS-CoV-2 (COVID 19) Detection by Real Time PCR (RT-PCR) - Qualitative

TEST	RESULT
<b>SARS-COV-2</b>	<b>NEGATIVE</b>
<b>Specimen</b>	Nasopharyngeal / Oropharyngeal swab

ICMR (Indian Council of Medical Research) Registration No. : MICHEALLTHKK

SRF ID: 719/KZD/2022013035

## INTERPRETATION GUIDELINES

<b>POSITIVE</b>	1) POSITIVE result indicates presence of SARS-CoV-2
<b>NEGATIVE</b>	1) "NEGATIVE" result indicates absence of SARS-CoV-2 in the given specimen. However, it does not rule out the infection completely and should not be used as the sole basis for making decisions related to treatment and other patient management decisions. 2) "NEGATIVE" result may be seen due to – a. RT PCR done on Nasopharyngeal swab having 44% false negativity. b. Test done too early or too late where the virus load is below detection limit. c. Improperly collected and stored specimen. d. Viral mutations
<b>INCONCLUSIVE</b>	This could be due to low viral load in the sample. A repeat sample is recommended for confirmation after 48 to 72 hours

## Patient

## Instructions:

- Kindly consult referring Physician/ Authorized Govt. hospital for appropriate follow up.
- Details of all the positive patients will be communicated to Epidemiology Cell whom you are requested to support.
- "Positive/Inconclusive" status needs to be notified to the appropriate authorities as per the existing rules/regulations.
- All "Positive/Inconclusive" reports will be released after reporting to regional health authorities.

## Disclaimers:

1. RNA viruses like SARS-CoV-2 (COVID 19) have a lot of genetic variability and it's possible that certain virus detection kits test cannot detect some strains of the viruses. Although efforts were made by manufacturers of the diagnostic kits to design the test assays that target the parts of viral genome which are shared by all the different circulating viral strains, there still might be some mismatch between the primers and the probes used in the test and the target regions within the viruses.



**Disclaimer:** All test results reported by us is performed using the internationally accredited testing equipment and standard procedures. All data and test results presented in the reported documents is the characteristics of the sample we have received and were analyzed and/or calculated at the specific point of time. Please correlate clinically before reaching to final conclusion. Report may vary depend on the technology. Value of two technologies are not comparable.

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2. Sensitivity of this test results depends upon the quality of the sample submitted for testing, stage of infection, type of the specimen collected for testing, medical history and clinical presentation.
3. All approved kits being used also may have different positive and negative predictive values leading to mismatch of results.
4. A careful consideration to combination of epidemiological factors, stage of infection, clinical history, examination, other relevant investigation findings and treatment history should be done when interpreting test results.
5. Current knowledge about novel coronaviruses is evolving and more studies may be required for further evaluation and review of facts indicated in this report.

Test Processed in Location 2 :

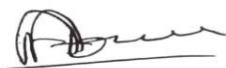
**Micro Health Laboratories**, ZEN Building, R.S No 21, Building No 29/2554-A,A1,A2, Kavu Stop Thondayad, Kozhikode - 673017

----- End of Report -----

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Consultant Microbiologist

(Micro Health Laboratories)

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