

# **KOS Diagnostic Lab**

(A Unit of KOS Healthcare)



Dr. Vinay Chopra MD (Pathology & Microbiology) Chairman & Consultant Pathologist

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: 04/Aug/2024 05:13PM

**NAME** : Miss. MUSKAN

AGE/ GENDER : 17 YRS/FEMALE **PATIENT ID** : 1568465

**COLLECTED BY** : 012408020037 REG. NO./LAB NO.

REFERRED BY : DHAMIJA HOSPITAL (AMBALA CANTT) **REGISTRATION DATE** : 02/Aug/2024 01:57 PM BARCODE NO. **COLLECTION DATE** : 02/Aug/2024 01:58PM : 01514310

: KOS DIAGNOSTIC LAB **CLIENT ADDRESS** : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit **Biological Reference interval** 

## MICROBIOLOGY

REPORTING DATE

## **CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: URINE**

# **CULTURE AND SUSCEPTIBILITY: URINE**

DATE OF SAMPLE 04-08-2024 SPECIMEN SOURCE **URINE INCUBATION PERIOD** 48 HOURS

by AUTOMATED BROTH CULTURE

**CULTURE STERILE** 

by AUTOMATED BROTH CULTURE

**ORGANISM** NO AEROBIC PYOGENIC ORGANISM GROWN AFTER 48 HOURS OF INCUBATION AT

# by AUTOMATED BROTH CULTURE **AEROBIC SUSCEPTIBILITY: URINE**

CLIENT CODE.

1. In urine culture and sensitivity, presence of more than 100,000 organism per mL in midstream sample of urine is considered clinically significant. However in symptomatic patients, a smaller number of bacteria (100 to 10000/mL) may signify infection.

2. Colony could be 100 to 10000/ mL indicate infection, if isolate from specimen obtained by suprapubic aspiration or "in-and-out"

catheterization or from patients with indwelling catheters.

1. A test interpreted as SENSTITIVE implies that infection due to isolate may be appropriately treated with the dosage of an antimicrobial agent recommended for that type of infection and infecting species, unless otherwise indicated..

2. A test interpreted as **INTERMEDIATE** implies that the" Infection due to the isolate may be appropriately treated in body sites where the drugs are

physiologically concentrated or when a high dosage of drug can be used".

3.A test interpreted as **RESISTANT** implies that the "isolates are not inhibited by the usually achievable concentration of the agents with normal

dosage, schedule and/or fall in the range where specific microbial resistance mechanism are likely (e.g. beta-lactamases), and clinical efficacy has not been reliable in treatment studies

## **CAUTION:**

- Conditions which can cause a false Negative culture:

  1. Patient is on antibiotics. Please repeat culture post therapy.
- 2. Anaerobic bacterial infection.
- 3. Fastidious aerobic bacteria which are not able to grow on routine culture media.
- 4. Besides all these factors, at least in 25-40 % of cases there is no direct correlation between in vivo clinical picture.

5. Renal tuberculosis to be confirmed by AFB studies.

\*\*\* End Of Report \*\*\*



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