

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

Dr. Yugam Chopra
MD (Pathology)
CEO & Consultant Pathologist

NAME : Mr. ASHOK KUMAR
AGE/ GENDER : 61 YRS/MALE
COLLECTED BY :
REFERRED BY :
BARCODE NO. : 01514689
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1574327
REG. NO./LAB NO. : 012408080015
REGISTRATION DATE : 08/Aug/2024 09:07 AM
COLLECTION DATE : 08/Aug/2024 09:20AM
REPORTING DATE : 10/Aug/2024 11:13AM

Test Name	Value	Unit	Biological Reference interval
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MICROBIOLOGY

CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: SWABS

CULTURE AND SUSCEPTIBILITY: SWABS

DATE OF SAMPLE 08-08-2024
SPECIMEN SOURCE SWAB
INCUBATION PERIOD 48 HOURS
GRAM STAIN GRAM NEGATIVE (-ve)
by MICROSCOPY
CULTURE POSITIVE (+ve)
by AUTOMATED BROTH CULTURE
ORGANISM Staph sp.
by AUTOMATED BROTH CULTURE

AEROBIC SUSCEPTIBILITY: SWABS

AMOXICILLIN+CLAVULANIC ACID SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI
Concentration: 8/4 µg/mL

AMPICILLIN INTERMEDIATE
by AUTOMATED BROTH MICRოდILUTION, CLSI
Concentration: 8 µg/mL

AMPICILLIN+SULBACTAM SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI
Concentration: 8/4 µg/mL

CHLORAMPHENICOL SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI
Concentration: 8 µg/mL

CIPROFLOXACIN INTERMEDIATE
by AUTOMATED BROTH MICRოდILUTION, CLSI
Concentration: 1 µg/mL

DOXYCYCLINE SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI



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Test Name	Value	Unit	Biological Reference interval
Concentration: 4 µg/mL			
GENTAMICIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 16 µg/mL	SENSITIVE		
NORFLOXACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	INTERMEDIATE		
MINOCYCLINE <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	SENSITIVE		
TOBRAMYCIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	SENSITIVE		
AMIKACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 16 µg/mL	SENSITIVE		
AZETREONAM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	RESISTANT		
CEFAZOLIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 16 µg/mL	SENSITIVE		
CEFIXIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
CEFOXITIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 8 µg/mL	SENSITIVE		
CEFTAZIDIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		




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Concentration: 4 µg/mL			
CEFTRIAXONE <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
FOSFOMYCIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 64 µg/mL			
LEVOFLOXACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	INTERMEDIATE		
Concentration: 2 µg/mL			
NETLIMICIN SULPHATE <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 8 µg/mL			
PIPERACILLIN+TAZOBACTAM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 16/4 µg/mL			
TICARCILLIN+CLAVULANIC ACID <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 16/2 µg/mL			
TRIMETHOPRIM+SULPHAMETHAZOLE <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 2/38 µg/mL			
CEFIPIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 2 µg/mL			
DORIPENEM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 1 µg/mL			
IMIPINEM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		




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Concentration: 1 µg/mL

MEROPENEM
 by AUTOMATED BROTH MICRODILUTION, CLSI
 Concentration: 1 µg/mL

SENSITIVE

COLISTIN
 by AUTOMATED BROTH MICRODILUTION, CLSI
 Concentration: 0.06 µg/mL

INTERMEDIATE

INTERPRETATION
SUSCEPTIBILITY:

1. A test interpreted as **SENSITIVE** 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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