

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

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

NAME : Mrs. SHAMA SHARMA
AGE/ GENDER : 59 YRS/FEMALE
COLLECTED BY :
REFERRED BY : DR HIMANSHU JAIN HEALING TOUCH
BARCODE NO. : 01515887
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1594693
REG. NO./LAB NO. : 012408280052
REGISTRATION DATE : 28/Aug/2024 06:12 PM
COLLECTION DATE : 28/Aug/2024 06:15PM
REPORTING DATE : 31/Aug/2024 11:36AM

Test Name	Value	Unit	Biological Reference interval
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MICROBIOLOGY

CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: SPUTUM

CULTURE AND SUSCEPTIBILITY - SPUTUM

DATE OF SAMPLE 28-08-2024
SPECIMEN SOURCE SPUTUM
INCUBATION PERIOD 48 HOURS
GRAM STAIN GRAM POSITIVE (+ve)
by MICROSCOPY
CULTURE POSITIVE (+ve)
by AUTOMATED BROTH CULTURE
ORGANISM Streptococci sp.
by AUTOMATED BROTH CULTURE

AEROBIC SUSCEPTIBILITY - SPUTUM

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

AMPICILLIN RESISTANT
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 SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI
Concentration: 1 µg/mL

DOXYCYCLINE RESISTANT
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>	RESISTANT		
Concentration: 16 µg/mL			
NORFLOXACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	RESISTANT		
Concentration: 4 µg/mL			
MINOCYCLINE <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 4 µg/mL			
TOBRAMYCIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 4 µg/mL			
AMIKACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 16 µg/mL			
AZETREONAM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	RESISTANT		
Concentration: 4 µg/mL			
CEFAZOLIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 16 µg/mL			
CEFIXIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	RESISTANT		
CEFOXITIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
Concentration: 8 µg/mL			
CEFTAZIDIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	RESISTANT		




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Test Name	Value	Unit	Biological Reference interval
Concentration: 4 µg/mL			
CEFTRIAXONE <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	RESISTANT		
FOSFOMYCIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	INTERMEDIATE		
Concentration: 64 µg/mL			
LEVOFLOXACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	SENSITIVE		
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>	RESISTANT		
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

SENSITIVE

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.




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GRAMS STAIN

TEST NAME:
GRAMS STAIN

CLINICAL HISTORY (IF ANY):

NATURE OF SPECIMEN:
 SPUTUM

MICROSCOPIC EXAMINATION :
 Gram's stained smear show a few gram +ve cocci.

IMPRESSION:
 Correlate clinically.

Interpretation:-

Gram stain is the most important staining method in bacteriology .It is the most rapid method employed for the presumptive diagnosis of infections agent in clinical specimens. It also servers to assess the quality of clinical specimens.

It distinguishes bacteria into broad categories :

- (a).The gram-positive, which stain dark purple
- (b).Gram-negative ,which stain light red.




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(c).A few species are Gram-variable , and tend to show a mixture of the cells .

(d).Further details of the bacteria as any other special features , including unusual shapes (such as comma shaped Gram negative bacilli) as also observed.

*** End Of Report ***




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