

Dr. Vinay Chopra  
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Chairman & Consultant Pathologist

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

NAME : Mr. JAGDEEP SINGH  
AGE/ GENDER : 29 YRS/MALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01516841  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1611016  
REG. NO./LAB NO. : 012409120051  
REGISTRATION DATE : 12/Sep/2024 03:07 PM  
COLLECTION DATE : 12/Sep/2024 03:10PM  
REPORTING DATE : 12/Sep/2024 04:27PM

Test Name	Value	Unit	Biological Reference interval
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### IMMUNOPATHOLOGY/SEROLOGY

#### ANTI HUMAN IMMUNODEFICIENCY VIRUS (HIV) DUO ULTRA WITH (P-24 ANTIGEN DETECTION)

HIV 1/2 AND P24 ANTIGEN: SERUM 0.06 S/CO  
by CMIA (CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY)  
NEGATIVE: < 1.00  
POSITIVE: > 1.00

HIV 1/2 AND P24 ANTIGEN RESULT NON - REACTIVE  
by CMIA (CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY)

#### INTERPRETATION:-

RESULT (INDEX)	REMARKS
< 1.00	NON - REACTIVE
> = 1.00	PROVISIONALLY REACTIVE

Non-Reactive result implies that antibodies to HIV 1/ 2 have not been detected in the sample . This means that patient has either not been exposed to HIV 1/ 2 infection or the sample has been tested during the "window phase" i.e. before the development of detectable levels of antibodies. Hence a Non Reactive result does not exclude the possibility of exposure or infection with HIV 1/ 2.

#### RECOMMENDATIONS:

1. Results to be clinically correlated
2. Rarely falsenegativity/positivity may occur.



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<b>BARCODE NO.</b>	: 01516841	<b>REPORTING DATE</b>	: 12/Sep/2024 03:44PM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
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Test Name	Value	Unit	Biological Reference interval
VDRL	NON REACTIVE		NON REACTIVE

by IMMUNOCHROMATOGRAPHY

**INTERPRETATION:**

- Does not become positive until 7 - 10 days after appearance of chancre.
- High titer (>1:16) - active disease.**
- Low titer (<1:8) - biological falsepositive test in 90% cases or due to late or late latent syphilis.**
- Treatment of primary syphilis causes progressive decline tonegative VDRL within 2 years.
- Rising titer (4X) indicates relapse, reinfection, or treatment failure and need for retreatment.
- May benonreactive in early primary, late latent, and late syphilis (approx. 25% ofcases).
- Reactive and weakly reactive tests should always be confirmedwith FTA-ABS (fluorescent treponemal antibody absorptiontest).**

**SHORTTERM FALSE POSITIVE TEST RESULTS (<6 MONTHS DURATION) MAY OCCURIN:**

- Acute viral illnesses (e.g., hepatitis, measles, infectious mononucleosis)
- M. pneumoniae; Chlamydia; Malaria infection.
- Some immunizations
- Pregnancy (rare)

**LONGTERM FALSE POSITIVE TEST RESULTS (>6 MONTHS DURATION) MAY OCCUR IN:**

- Serious underlying disease e.g., collagen vascular diseases, leprosy ,malignancy.
- Intravenous drug users.
- Rheumatoid arthritis, thyroiditis, AIDS, Sjogren's syndrome.
- <10 % of patients older thanage 70 years.
- Patients taking some anti-hypertensive drugs.

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





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