

KOS Diagnostic Lab (A Unit of KOS Healthcare)



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

NAME : Mrs. LAKHWINDER KAUR

AGE/ GENDER : 47 YRS/FEMALE **PATIENT ID** : 1629152

COLLECTED BY : REG. NO./LAB NO. : 012409290051

 REFERRED BY
 : 29/Sep/2024 02:51 PM

 BARCODE NO.
 : 01517963
 COLLECTION DATE
 : 29/Sep/2024 02:53 PM

 CLIENT CODE.
 : KOS DIAGNOSTIC LAB
 REPORTING DATE
 : 01/Oct/2024 05:38 PM

CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit Biological Reference interval

MICROBIOLOGY

CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: SWABS

CULTURE AND SUSCEPTIBILITY: SWABS

DATE OF SAMPLE 29-09-2024
SPECIMEN SOURCE SWAB
INCUBATION PERIOD 48 HOURS

GRAM STAIN GRAM NEGATIVE (-ve)

by MICROSCOPY

CULTURE POSITIVE (+ve)

by AUTOMATED BROTH CULTURE

ORGANISM Proteus sp. by AUTOMATED BROTH CULTURE

AEROBIC SUSCEPTIBILITY: SWABS

AMOXICILLIN+CLAVULANIC ACID RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 8/4 µg/mL

AMPICILLIN RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 8 µg/mL

AMPICILLIN+SULBACTUM INTERMEDIATE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: $8/4 \mu g/mL$

CHLORAMPHENICOL INTERMEDIATE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 8 µg/mL

CIPROFLOXACIN RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 1 µg/mL

DOXYCYCLINE INTERMEDIATE

by AUTOMATED BROTH MICRODILUTION, CLSI

DR.VINAY CHOPRA
CONSULTANT PATHOLOGIST
MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA
CONSULTANT PATHOLOGIST
MBBS . MD (PATHOLOGY)



KOS Central Lab: 6349/1, Nicholson Road, Ambala Cantt -133 001, Haryana KOS Molecular Lab: IInd Floor, Parry Hotel, Staff Road, Opp. GPO, Ambala Cantt -133 001, Haryana



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Concentration: 4 µg/mL

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RESISTANT NALIDIXIC ACID

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 16 µg/mL

SENSITIVE GENTAMICIN

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 16 µg/mL

NITROFURATOIN RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 16 µg/mL

NORFLOXACIN RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 4 µg/mL

MINOCYCLINE **SENSITIVE** by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 4 µg/mL

SENSITIVE TOBRAMYCIN

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 4 µg/mL

AMIKACIN SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 16 µg/mL

AZETREONAM INTERMEDIATE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 4 µg/mL

RESISTANT CEFAZOLIN

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 16 µg/mL

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: Mrs. LAKHWINDER KAUR **NAME**

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COLLECTED BY REG. NO./LAB NO. :012409290051

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CEFIXIME RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

: KOS DIAGNOSTIC LAB

CEFOXITIN SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 8 µg/mL

CEFTAZIDIME SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 4 µg/mL

CEFTRIAXONE RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

FOSFOMYCIN INTERMEDIATE

by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 64 µg/mL

LEVOFLOXACIN RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 2 µg/mL

SENSITIVE NETLIMICIN SULPHATE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 8 µg/mL

PIPERACILLIN+TAZOBACTUM **SENSITIVE**

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 16/4 µg/mL

TICARCILLIN+CLAVULANIC ACID **SENSITIVE**

by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 16/2 µg/mL

TRIMETHOPRIM+SULPHAMETHAZOLE RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 2/38 µg/mL

CEFIPIME RESISTANT

by AUTOMATED BROTH MICRODILUTION, CLSI

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Concentration: 2 µg/mL

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DORIPENEM SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 1 µg/mL

IMIPINEM SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 1 µg/mL

SENSITIVE MEROPENEM

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 1 µg/mL

COLISTIN INTERMEDIATE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 0.06 µg/mL

INTERPRETATION

- 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 description of the agents with normal content and the description of the agents with the descri
- 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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