



	Dr. Vinay Che MD (Pathology & Chairman & Cons	Microbiology)		(Pathology)
NAME	: Mrs. SUMAN LATA			
AGE/ GENDER	: 35 YRS/FEMALE		PATIENT ID	: 1629495
COLLECTED BY	:		REG. NO./LAB NO.	: 012409300057
REFERRED BY	: CIVIL HOSPITAL (AMBALA CA	ANTT)	REGISTRATION DATE	: 30/Sep/2024 11:56 AM
BARCODE NO.	: 01518030		COLLECTION DATE	: 30/Sep/2024 11:58AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		REPORTING DATE	: 30/Sep/2024 12:50PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, A	AMBALA CANTT		
Test Name		Value	Unit	Biological Reference interv
		CLINICAL	PATHOLOGY	
	URINE R	OUTINE & MI	CROSCOPIC EXAMINAT	ΓΙΟΝ
PHYSICAL EXAMINA	TION			
QUANTITY RECIEVE	C	10	ml	
	TANCE SPECTROPHOTOMETRY			
COLOUR	TANCE SPECTROPHOTOMETRY	AMBER YE	LLOW	PALE YELLOW
TRANSPARANCY		HAZY		CLEAR
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY				
SPECIFIC GRAVITY	TANCE SPECTROPHOTOMETRY	<=1.005		1.002 - 1.030
CHEMICAL EXAMINA				
REACTION		ACIDIC		
by DIP STICK/REFLEC	TANCE SPECTROPHOTOMETRY	AGIDIO		
PROTEIN		Negative		NEGATIVE (-ve)
by DIP STICK/REFLEC	TANCE SPECTROPHOTOMETRY	Negative		NEGATIVE (-ve)
	TANCE SPECTROPHOTOMETRY	Negative		NEGATIVE (-Ve)
pH		5.5		5.0 - 7.5
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY		Nogativo		
BILIRUBIN by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY		Negative		NEGATIVE (-ve)
NITRITE		Negative		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY.			511/1	
UROBILINOGEN by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY		Normal	EU/dL	0.2 - 1.0
KETONE BODIES		Negative		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY				
BLOOD by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY		Negative		NEGATIVE (-ve)
ASCORBIC ACID	TANGL OF LOT NOT AUTOMETRY	NEGATIVE	(-ve)	NEGATIVE (-ve)
	TANCE SPECTROPHOTOMETRY		- (- 5)	
MICROSCOPIC EXAN	<u>/IINATION</u>			



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

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

 0171-2643898, +91 99910 43898
 care@koshealthcare.com
 www.koshealthcare.com



TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.



NANCE



EXCELLENCE IN HEALTHCARE & DIAGNOSTICS

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

CTINEAN TATA

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

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CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AM	/IBALA CANTT				
Test Name		Value	Unit	Biological Reference interval		
RED BLOOD CELLS (R by MICROSCOPY ON C	BCs) CENTRIFUGED URINARY SEDIMENT	NEGATIVE (-ve)	/HPF	0 - 3		
PUS CELLS	CENTRIFUGED URINARY SEDIMENT	5-7	/HPF	0 - 5		
EPITHELIAL CELLS by MICROSCOPY ON C	CENTRIFUGED URINARY SEDIMENT	4-5	/HPF	ABSENT		
CRYSTALS by MICROSCOPY ON C	CENTRIFUGED URINARY SEDIMENT	NEGATIVE (-ve)		NEGATIVE (-ve)		
CASTS by MICROSCOPY ON C	CENTRIFUGED URINARY SEDIMENT	NEGATIVE (-ve)		NEGATIVE (-ve)		
BACTERIA		NEGATIVE (-ve)		NEGATIVE (-ve)		

NEGATIVE (-ve)

ABSENT

by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT OTHERS

by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT TRICHOMONAS VAGINALIS (PROTOZOA)

by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT





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NEGATIVE (-ve)

ABSENT





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CLIENT CODE.	: KOS DIAGNOSTIC LAB	REI	PORTING DATE	: 02/Oct/2024 12:59PM	
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, A	AMBALA CANTT			
Test Name		Value	Unit	Biological Reference interval	
CULTURE AND SUSC	CULTURE AEROBI EPTIBILITY: URINE	C BACTERIA AND A	ANTIBIOTIC SENSI	IIVITY: URINE	
DATE OF SAMPLE		30-09-2024			
SPECIMEN SOURCE		URINE			
INCUBATION PERIOD		48 HOURS			
CULTURE by AUTOMATED BROT	TH CULTURE	STERILE			
ORGANISM NO AE by AUTOMATED BROTH CULTURE 37*C			D AEROBIC PYOGENIC ORGANISM GROWN AFTER 48 HOURS OF INCUBATION A *C		
AEROBIC SUSCEPTIB	ILITY: URINE				
significant. However 2. Colony count of 10	in symptomatic patients , a small	er number of bacteri n, if isolate from spec	a (100 to 10000/mL) n	n sample of urine is considered clinically nay signify infection. rapubic aspiration or "in-and-out"	

catheterization or from patients with indwelling catheters.

SUSCEPTIBILITY:

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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