

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

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

NAME : Mr. OM PRAKASH GANDHI
AGE/ GENDER : 89 YRS/MALE
COLLECTED BY : SURJESH
REFERRED BY :
BARCODE NO. : 01519570
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT
PATIENT ID : 1653801
REG. NO./LAB NO. : 012410260025
REGISTRATION DATE : 26/Oct/2024 10:32 AM
COLLECTION DATE : 26/Oct/2024 11:06AM
REPORTING DATE : 28/Oct/2024 10:26AM

Test Name	Value	Unit	Biological Reference interval
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MICROBIOLOGY

CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: URINE

CULTURE AND SUSCEPTIBILITY: URINE

DATE OF SAMPLE : 26-10-2024
SPECIMEN SOURCE : URINE
INCUBATION PERIOD : 48 HOURS
by AUTOMATED BROTH CULTURE

GRAM STAIN
by MICROSCOPY

GRAM NEGATIVE (-ve)

CULTURE
by AUTOMATED BROTH CULTURE

POSITIVE (+ve)

ORGANISM
by AUTOMATED BROTH CULTURE

ESCHERICHIA COLI (E.COLI)

AEROBIC SUSCEPTIBILITY: URINE

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

SENSITIVE

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

SENSITIVE

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

SENSITIVE

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

SENSITIVE

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

RESISTANT

DOXYCYCLINE
by AUTOMATED BROTH MICRODILUTION, CLSI

SENSITIVE



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Test Name	Value	Unit	Biological Reference interval
Concentration: 4 µg/mL			
NALIDIXIC ACID <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	RESISTANT		
Concentration: 16 µg/mL			
GENTAMICIN <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	RESISTANT		
Concentration: 16 µg/mL			
NITROFURATOIN <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	RESISTANT		
Concentration: 16 µg/mL			
NORFLOXACIN <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	RESISTANT		
Concentration: 4 µg/mL			
MINOCYCLINE <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	SENSITIVE		
Concentration: 4 µg/mL			
TOBRAMYCIN <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	SENSITIVE		
Concentration: 4 µg/mL			
AMIKACIN <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	SENSITIVE		
Concentration: 16 µg/mL			
AZETREONAM <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	SENSITIVE		
Concentration: 4 µg/mL			
CEFAZOLIN <i>by AUTOMATED BROTH MICROWILUTION, CLSI</i>	SENSITIVE		
Concentration: 16 µg/mL			




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Test Name	Value	Unit	Biological Reference interval
CEFIXIME by AUTOMATED BROTH MICRODILUTION, CLSI	SENSITIVE		
CEFOXITIN by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 8 µg/mL	SENSITIVE		
CEFTAZIDIME by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 4 µg/mL	SENSITIVE		
CEFTRIAXONE by AUTOMATED BROTH MICRODILUTION, CLSI	SENSITIVE		
FOSFOMYCIN by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 64 µg/mL	SENSITIVE		
LEVOFLOXACIN by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 2 µg/mL	RESISTANT		
NETILMICIN SULPHATE by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 8 µg/mL	SENSITIVE		
PIPERACILLIN+TAZOBACTAM by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 16/4 µg/mL	SENSITIVE		
TICARCILLIN+CLAVULANIC ACID by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 16/2 µg/mL	SENSITIVE		
TRIMETHOPRIM+SULPHAMETHAZOLE by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 2/38 µg/mL	RESISTANT		
CEFIPIME by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 2 µg/mL	SENSITIVE		




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Test Name	Value	Unit	Biological Reference interval
DORIPENEM by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 1 µg/mL	SENSITIVE		
IMIPINEM by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 1 µg/mL	SENSITIVE		
MEROPENEM by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 1 µg/mL	SENSITIVE		
COLISTIN by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 0.06 µg/mL	SENSITIVE		

INTERPRETATION:

1. In urine culture and sensitivity, presence of more than 100,000 organism per mL in midstream sample of urine is considered clinically significant. However in symptomatic patients, a smaller number of bacteria (100 to 10000/mL) may signify infection.

2. Colony count of 100 to 10000/ mL indicate infection, if isolate from specimen obtained by suprapubic aspiration or "in-and-out" catheterization or from patients with indwelling catheters.

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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