

# **KOS Diagnostic Lab**

(A Unit of KOS Healthcare)



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**NAME** : Mrs. MANJU BANSAL

AGE/ GENDER : 61 YRS/FEMALE **PATIENT ID** : 1657439

**COLLECTED BY** REG. NO./LAB NO. : 012410300049

REFERRED BY **REGISTRATION DATE** : 30/Oct/2024 03:41 PM BARCODE NO. :01519833 **COLLECTION DATE** : 30/Oct/2024 03:42PM CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 01/Nov/2024 04:38AM

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

**Value** Unit **Biological Reference interval Test Name** 

# **MICROBIOLOGY**

### CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: URINE

#### **CULTURE AND SUSCEPTIBILITY: URINE**

DATE OF SAMPLE 30-10-2024 SPECIMEN SOURCE URINE INCUBATION PERIOD 48 HOURS by AUTOMATED BROTH CULTURE

**CULTURE** 

by AUTOMATED BROTH CULTURE

NO AEROBIC PYOGENIC ORGANISM GROWN AFTER 48 HOURS OF **ORGANISM** by AUTOMATED BROTH CULTURE

**STERILE** 

**INCUBATION AT 37\*C** 

#### **AEROBIC SUSCEPTIBILITY: URINE**

#### 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 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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