

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

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

NAME : Mrs. RAJDUA
AGE/ GENDER : 96 YRS/FEMALE
COLLECTED BY :
REFERRED BY :
BARCODE NO. : 01523000
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1708797
REG. NO./LAB NO. : 012412250051
REGISTRATION DATE : 25/Dec/2024 05:22 PM
COLLECTION DATE : 25/Dec/2024 05:23PM
REPORTING DATE : 28/Dec/2024 11:24AM

Test Name	Value	Unit	Biological Reference interval
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MICROBIOLOGY

CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: OTHERS

CULTURE AND SUSCEPTIBILITY

DATE OF SAMPLE : 25-12-2024
SPECIMEN SOURCE : SWAB
INCUBATION PERIOD : 48 HOURS
GRAM STAIN : GRAM POSITIVE (+ve)
by MICROSCOPY
CULTURE : POSITIVE (+ve)
by AUTOMATED BROTH CULTURE
ORGANISM : Proteus sp.
by AUTOMATED BROTH CULTURE

AEROBIC SUSCEPTIBILITY

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

AMPICILLIN : RESISTANT
by AUTOMATED BROTH MICR DILUTION, CLSI
Concentration: 8 µg/mL

AMPICILLIN+SULBACTAM : INTERMEDIATE
by AUTOMATED BROTH MICR DILUTION, CLSI
Concentration: 8/4 µg/mL

CHLORAMPHENICOL : INTERMEDIATE
by AUTOMATED BROTH MICR DILUTION, CLSI
Concentration: 8 µg/mL

CIPROFLOXACIN : RESISTANT
by AUTOMATED BROTH MICR DILUTION, CLSI
Concentration: 1 µg/mL

DOXYCYCLINE : INTERMEDIATE
by AUTOMATED BROTH MICR DILUTION, CLSI
Concentration: 4 µg/mL



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GENTAMICIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 16 µg/mL	INTERMEDIATE		
NORFLOXACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	RESISTANT		
MINOCYCLINE <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	SENSITIVE		
TOBRAMYCIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	SENSITIVE		
AMIKACIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 16 µg/mL	SENSITIVE		
AZETREONAM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	INTERMEDIATE		
CEFAZOLIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 16 µg/mL	RESISTANT		
CEFIXIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i>	RESISTANT		
CEFOXITIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 8 µg/mL	RESISTANT		
CEFTAZIDIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 4 µg/mL	INTERMEDIATE		




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CEFTRIAXONE by AUTOMATED BROTH MICRODILUTION, CLSI	SENSITIVE		
FOSFOMYCIN by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 64 µg/mL	SENSITIVE		
GATIFLOXACIN by AUTOMATED BROTH MICRODILUTION, CLSI	SENSITIVE		
LEVOFLOXACIN by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 2 µg/mL	SENSITIVE		
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	INTERMEDIATE		
DORIPENEM by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 1 µg/mL	INTERMEDIATE		
IMIPINEM by AUTOMATED BROTH MICRODILUTION, CLSI Concentration: 1 µg/mL	RESISTANT		




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MEROPENEM
 by AUTOMATED BROTH MICRოდILUTION, CLSI
 Concentration: 1 µg/mL

INTERMEDIATE

COLISTIN
 by AUTOMATED BROTH MICRოდILUTION, CLSI
 Concentration: 0.06 µg/mL

INTERMEDIATE

INTERPRETATION
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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