

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

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NAME	: Mr. DARSHAN KUMAR JINDAL	PATIENT ID	: 1718912
AGE/ GENDER	: 96 YRS/MALE	REG. NO./LAB NO.	: 012501080026
COLLECTED BY	: SURJESH	REGISTRATION DATE	: 08/Jan/2025 10:52 AM
REFERRED BY	:	COLLECTION DATE	: 08/Jan/2025 10:59AM
BARCODE NO.	: 01523611	REPORTING DATE	: 10/Jan/2025 09:13AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
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MICROBIOLOGY

CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: SWABS

CULTURE AND SUSCEPTIBILITY: SWABS

DATE OF SAMPLE 08-01-2025
 SPECIMEN SOURCE SWAB
 INCUBATION PERIOD 48 HOURS
 CULTURE STERILE

by AUTOMATED BROTH CULTURE

ORGANISM NO AEROBIC PYOGENIC ORGANISM GROWN AFTER 48 HOURS OF
 INCUBATION AT 37°C
 by AUTOMATED BROTH CULTURE

AEROBIC SUSCEPTIBILITY: SWABS

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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