

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

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

NAME	: Mrs. PARVEEN ARORA	PATIENT ID	: 1816198
AGE/ GENDER	: 58 YRS/FEMALE	REG. NO./LAB NO.	: 012504030009
COLLECTED BY	:	REGISTRATION DATE	: 03/Apr/2025 08:36 AM
REFERRED BY	:	COLLECTION DATE	: 03/Apr/2025 08:37AM
BARCODE NO.	: 01528265	REPORTING DATE	: 03/Apr/2025 11:49AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
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CLINICAL PATHOLOGY

URINE ROUTINE & MICROSCOPIC EXAMINATION

PHYSICAL EXAMINATION

QUANTITY RECIEVED	10	ml	
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
COLOUR	AMBER YELLOW		PALE YELLOW
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
TRANSPARANCY	HAZY		CLEAR
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
SPECIFIC GRAVITY	1.01		1.002 - 1.030
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			

CHEMICAL EXAMINATION

REACTION	ACIDIC		
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
PROTEIN	Negative		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
SUGAR	Negative		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
pH	<=5.0		5.0 - 7.5
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
BILIRUBIN	Negative		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
NITRITE	Negative		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY.			
UROBILINOGEN	Normal	EU/dL	0.2 - 1.0
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
KETONE BODIES	Negative		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
BLOOD	2+		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			
ASCORBIC ACID	NEGATIVE (-ve)		NEGATIVE (-ve)
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY			

MICROSCOPIC EXAMINATION




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RED BLOOD CELLS (RBCs) <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	12-15	/HPF	0 - 3
PUS CELLS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	20-25	/HPF	0 - 5
EPITHELIAL CELLS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	5-7	/HPF	ABSENT
CRYSTALS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
CASTS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
BACTERIA <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
OTHERS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
TRICHOMONAS VAGINALIS (PROTOZOA) <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	ABSENT		ABSENT




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MICROBIOLOGY

CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: URINE

CULTURE AND SUSCEPTIBILITY: URINE

DATE OF SAMPLE	03-04-2025
SPECIMEN SOURCE	URINE
INCUBATION PERIOD	48 HOURS
by AUTOMATED BROTH CULTURE	
GRAM STAIN	GRAM NEGATIVE (-ve)
by MICROSCOPY	
CULTURE	POSITIVE (+ve)
by AUTOMATED BROTH CULTURE	
ORGANISM	ESCHERICHIA COLI (E.COLI)
by AUTOMATED BROTH CULTURE	

AEROBIC SUSCEPTIBILITY: URINE

AMOXICILLIN+CLAVULANIC ACID	SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI	
Concentration: 8/4 µg/mL	
AMPICILLIN	RESISTANT
by AUTOMATED BROTH MICRოდILUTION, CLSI	
Concentration: 8 µg/mL	
AMPICILLIN+SULBACTAM	SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI	
Concentration: 8/4 µg/mL	
CHLORAMPHENICOL	SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI	
Concentration: 8 µg/mL	
CIPROFLOXACIN	SENSITIVE
by AUTOMATED BROTH MICRოდILUTION, CLSI	
Concentration: 1 µg/mL	




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




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



[Signature]

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CEFIPIME <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 2 µg/mL	SENSITIVE		
DORIPENEM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 1 µg/mL	SENSITIVE		
IMIPINEM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 1 µg/mL	SENSITIVE		
MEROPENEM <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 1 µg/mL	SENSITIVE		
COLISTIN <i>by AUTOMATED BROTH MICRODILUTION, CLSI</i> Concentration: 0.06 µg/mL	SENSITIVE		




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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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