

TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.



KOS Diagnostic Lab (A Unit of KOS Healthcare)

ISO 9001 : 2008 CERT	IFIED LAB		EXCELLENCE IN HEALTHCARE	& DIAGNOSTICS			
	MD (Vinay Chopra Pathology & Microbiology) man & Consultant Pathologis		(Pathology)			
NAME	: Mr. MOHINDER J	UNEJA			٦		
AGE/ GENDER	: 73 YRS/MALE		PATIENT ID	: 1823065			
COLLECTED BY	: SURJESH		REG. NO./LAB NO.	: 012504080076			
REFERRED BY	:		REGISTRATION DATE	: 08/Apr/2025 05:18 PM			
BARCODE NO.	:01528629		COLLECTION DATE	: 08/Apr/2025 05:50PM			
CLIENT CODE.	: KOS DIAGNOSTIC	LAB	REPORTING DATE	: 10/Apr/2025 05:20PM			
CLIENT ADDRESS	: 6349/1, NICHOLS	SON ROAD, AMBALA CANTT					
Test Name		Value	Unit	Biological Reference interval			
	CULTURE AE	MICRO ROBIC BACTERIA A	DBIOLOGY ND ANTIBIOTIC SEI	NSITIVITY: URINE	_		
CUI TURF AND SI	USCEPTIBILITY: U						
DATE OF SAMPLE			25				
SPECIMEN SOURC		08-04-20 URINE	23				
INCUBATION PER	IOD	48 HOUR	s				
GRAM STAIN by MICROSCOPY	GRAM STAIN		GRAM NEGATIVE (-ve)				
CULTURE by AUTOMATED BRO	TH CULTURE	POSITIV	VE (+ve)				
ORGANISM by AUTOMATED BROT		ESCHER	ESCHERICHIA COLI (E.COLI)				
AEROBIC SUSCE	PTIBILITY: URINE						
AMOXICILLIN+CL by AUTOMATED BROT Concentration: 8/4 μ	TH MICRODILUTION, CLS	RESISTA	ANT				
AMPICILLIN by AUTOMATED BROT Concentration: 8 μg/i	TH MICRODILUTION, CLS	RESISTA	ANT				
AMPICILLIN+SULI by AUTOMATED BRO7 Concentration: 8/4 μ	TH MICRODILUTION, CLS	RESISTA	ANT				
CHLORAMPHENI <i>by AUTOMATED BRO</i> Concentration: 8 µg/I	TH MICRODILUTION, CL	SENSITI SI	VE				
CIPROFLOXACIN by AUTOMATED BROT Concentration: 1 µg/r	тн міскодіцитіом, clsi mL	RESISTA /	ANT				
	DR.VINAY CHOPRA CONSULTANT PATHO MBBS, MD (PATHOLO	DLOGIST CONSU	SAM CHOPRA JITANT PATHOLOGIST MD (PATHOLOGY)				

KOS Central Lab: 6349/1, Nicholson Road, Ambala Cantt -133 001, Haryana KOS Molecular Lab: IInd Floor, Parry Hotel, Staff Road, Opp. GPO, Ambala Cantt -133 001, Haryana 0171-2643898, +91 99910 43898 | care@koshealthcare.com | www.koshealthcare.com









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		Chopra Dr. Yugam Chopra & Microbiology) MD (Pathology) onsultant Pathologist CEO & Consultant Pathologist		
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Test Name		Value	Unit	Biological Reference interval
DOXYCYCLINE		SENSITIVE		
<i>by AUTOMATED BRO</i> Concentration: 4 μg/r	TH MICRODILUTION, CLSI mL			
NALIDIXIC ACID by AUTOMATED BROT Concentration: 16 µg	TH MICRODILUTION, CLSI /mL	RESISTANT		
GENTAMICIN by AUTOMATED BROT Concentration: 16 µg	TH MICRODILUTION, CLSI /mL	RESISTANT		
NITROFURATOIN by AUTOMATED BROT Concentration: 16 µg	TH MICRODILUTION, CLSI	RESISTANT		
NORFLOXACIN by AUTOMATED BROT Concentration: 4 µg/n	TH MICRODILUTION, CLSI mL	RESISTANT		
MINOCYCLINE by AUTOMATED BRO Concentration: 4 µg/r	TH MICRODILUTION, CLSI mL	SENSITIVE		
TOBRAMYCIN by AUTOMATED BROT Concentration: 4 μg/t	TH MICRODILUTION, CLSI ML	RESISTANT		
AMIKACIN <i>by AUTOMATED BRO</i> Concentration: 16 μg	TH MICRODILUTION, CLSI /mL	SENSITIVE		
AZETREONAM by AUTOMATED BROT Concentration: 4 µg/r	TH MICRODILUTION, CLSI mL	RESISTANT		
CEFAZOLIN		RESISTANT		
	an	Ghopr	ai 	

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V DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST MBBS , MD (PATHOLOGY)

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	Dr. Vinay (MD (Patholog Chairman & C	v Chopra Dr. Yugam Chopra ogy & Microbiology) & Consultant Pathologist CEO & Consultant Pathologist			
NAME AGE/ GENDER COLLECTED BY REFERRED BY BARCODE NO. CLIENT CODE. CLIENT ADDRESS	: Mr. MOHINDER JUNEJA : 73 YRS/MALE : SURJESH : : 01528629 : KOS DIAGNOSTIC LAB : 6349/1, NICHOLSON ROA	D, AMBALA CANTT	PATIENT ID REG. NO./LAB NO. REGISTRATION DATE COLLECTION DATE REPORTING DATE	: 1823065 : 012504080076 : 08/Apr/2025 05:18 PM : 08/Apr/2025 05:50PM : 10/Apr/2025 05:20PM	
Test Name		Value	Unit	Biological Reference interval	
Concentration: 16 µg CEFIXIME by AUTOMATED BROT CEFOXITIN by AUTOMATED BRO Concentration: 8 µg/r CEFTAZIDIME	TH MICRODILUTION, CLSI TH MICRODILUTION, CLSI mL	RESISTA SENSITI RESISTA	VE		
Concentration: 4 µg/r		RESISTA	ANT		
FOSFOMYCIN	<i>TH MICRODILUTION, CLSI</i> TH MICRODILUTION, CLSI /mL	SENSITI	VE		
LEVOFLOXACIN by AUTOMATED BROT Concentration: 2 µg/r	TH MICRODILUTION, CLSI mL	RESISTA	ANT		
NETLIMICIN SULF by AUTOMATED BROT Concentration: 8 μg/r	TH MICRODILUTION, CLSI	RESISTA	ANT		
PIPERACILLIN+T <i>by AUTOMATED BRO</i> Concentration: 16/4	TH MICRODILUTION, CLSI	SENSITI	VE		
TICARCILLIN+CLA by AUTOMATED BROT Concentration: 16/2	TH MICRODILUTION, CLSI	RESISTA	ANT		
	SULPHAMETHAZOLE TH MICRODILUTION, CLSI	RESISTA	ANT		
			SAM CHOPPA		

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Test Name		Value	Unit	Biological Reference interval	
Concentration: 2/38 µ CEFIPIME <i>by AUTOMATED BROT</i> Concentration: 2 µg/r	TH MICRODILUTION, CLSI	RESISTANT			
DORIPENEM <i>by AUTOMATED BRO</i> Concentration: 1 μg/r	TH MICRODILUTION, CLSI nL	SENSITIVE			
IMIPINEM <i>by AUTOMATED BRO</i> : Concentration: 1 μg/r	TH MICRODILUTION, CLSI nL	SENSITIVE			
MEROPENEM by AUTOMATED BRO Concentration: 1 μg/r	TH MICRODILUTION, CLSI nL	SENSITIVE			
COLISTIN by AUTOMATED BRO Concentration: 0.06 µ	TH MICRODILUTION, CLSI Ag/mL	SENSITIVE			
		0			





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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 suprapublic 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

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..
 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".
 A test interpreted as RESISTANT implies that the "isolates are not inhibited by the usually achievable concentration of the agents with normal descent species indicated are likely in the research and eliminate are likely (a public by the usually achievable concentration of the agents with normal descent species are bedrug and species are bedrug to a be used".

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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