



# P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

## A PIONEER DIAGNOSTIC CENTRE

☎ 0171-2532620, 8222896961

✉ pkrjainhealthcare@gmail.com

**NAME** : Mr. SURINDER SINGH  
**AGE/ GENDER** : 71 YRS/MALE  
**COLLECTED BY** :  
**REFERRED BY** :  
**BARCODE NO.** : 12504862  
**CLIENT CODE.** : P.K.R JAIN HEALTHCARE INSTITUTE  
**CLIENT ADDRESS** : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

**PATIENT ID** : 1481949  
**REG. NO./LAB NO.** : 122409220002  
**REGISTRATION DATE** : 22/Sep/2024 10:58 AM  
**COLLECTION DATE** : 22/Sep/2024 10:59 AM  
**REPORTING DATE** : 24/Sep/2024 10:57 AM

Test Name	Value	Unit	Biological Reference interval
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### MICROBIOLOGY

#### CULTURE AEROBIC BACTERIA AND ANTIBIOTIC SENSITIVITY: URINE

##### CULTURE AND SUSCEPTIBILITY: URINE

DATE OF SAMPLE  
SPECIMEN SOURCE  
INCUBATION PERIOD  
by AUTOMATED BROTH CULTURE

22-08-2024  
URINE  
48 HOURS

GRAM STAIN  
by MICROSCOPY

GRAM NEGATIVE (-ve)

CULTURE  
by AUTOMATED BROTH CULTURE  
ORGANISM  
by AUTOMATED BROTH CULTURE

POSITIVE (+ve)  
ESCHERICHIA COLI (E.COLI)

##### AEROBIC SUSCEPTIBILITY: URINE

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

INTERMEDIATE

AMPICILLIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 8 µg/mL

RESISTANT

AMPICILLIN+SULBACTAM  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 8/4 µg/mL

SENSITIVE

CHLORAMPHENICOL  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 8 µg/mL

SENSITIVE


CIPROFLOXACIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 1 µg/mL


RESISTANT

DOXYCYCLINE

SENSITIVE



  
DR.VINAY CHOPRA  
CONSULTANT PATHOLOGIST  
MBBS, MD (PATHOLOGY & MICROBIOLOGY)

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





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by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 4 µg/mL

NALIDIXIC ACID  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 16 µg/mL

RESISTANT

GENTAMICIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 16 µg/mL

RESISTANT

NITROFURATOIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 16 µg/mL

RESISTANT

NORFLOXACIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 4 µg/mL

RESISTANT

MINOCYCLINE  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 4 µg/mL

SENSITIVE

TOBRAMYCIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 4 µg/mL

RESISTANT

AMIKACIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 16 µg/mL

SENSITIVE

AZETREONAM  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 4 µg/mL

RESISTANT

CEFAZOLIN  
by AUTOMATED BROTH MICRODILUTION, CLSI  
Concentration: 16 µg/mL

RESISTANT



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Test Name	Value	Unit	Biological Reference interval
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CEFIXIME

by AUTOMATED BROTH MICRODILUTION, CLSI

RESISTANT

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

RESISTANT

LEVOFLOXACIN

by AUTOMATED BROTH MICRODILUTION, CLSI

RESISTANT

Concentration: 2 µg/mL

NETLIMICIN 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

RESISTANT

Concentration: 16/2 µg/mL

TRIMETHOPRIM+SULPHAMETHAZOLE

by AUTOMATED BROTH MICRODILUTION, CLSI

RESISTANT

Concentration: 2/38 µg/mL

CEFIPIME

by AUTOMATED BROTH MICRODILUTION, CLSI

RESISTANT

Concentration: 2 µg/mL

DORIPENEM

SENSITIVE



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Test Name	Value	Unit	Biological Reference interval
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by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 1 µg/mL

IMIPINEM

SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 1 µg/mL

MEROPENEM

SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 1 µg/mL

COLISTIN

SENSITIVE

by AUTOMATED BROTH MICRODILUTION, CLSI

Concentration: 0.06 µg/mL

#### 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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