

Name : **Jose T J**Lab No : **KDCC-9587**

Age : Age: 60 Years Sex: M

Registered On : 21-07-2021 07:20 AM

Collected On : 21-07-2021 07:20AM

D.O.B :

Reported On : 21-07-2021 02:32 PM

Ph No : 8281378209

Status : **Final**

SRF ID : 30/KSD/2021079788

PATIENT ID : P-30/2021075567

PASSPORT NO :

MOLECULAR BIOLOGY

SARS-CoV-2 (COVID-19) Detection by Qualitative RT-PCR

ASSAY NAME	RESULT
SARS CoV-2 (Real Time RT-PCR)	NEGATIVE

Specimen: Nasopharyngeal and Oropharyngeal Swab

KDC LAB ICMR REGISTRATION NO: KDCLAKANKK

INTERPRETATION:

POSITIVE	RNA specific to SARS-CoV-2 DETECTED
NEGATIVE	RNA specific to SARS-CoV-2 NOT DETECTED

Method: Real Time RT-PCR

The COVID-19 RT-PCR test is a Real Time Reverse Transcription Polymerase Chain Reaction (r RT-PCR) test for the qualitative detection of nucleic acid from SARS-CoV-2 in upper and lower respiratory specimens (such as Nasopharyngeal and Oropharyngeal swabs, sputum, lower respiratory tract aspirates, bronchoalveolar lavage, and nasopharyngeal wash/aspirate)

A "Positive" result indicates the presence of SARS-CoV-2 RNA; clinical correlation with patient history and other diagnostic information is necessary to determine patient infection status. Positive results do not rule out bacterial infection or co-infection with other viruses.

A "Negative" results do not preclude SARS-CoV-2 infection and should not be used as the sole basis for patient management decisions. Negative results must be combined with clinical observations, patient history, and epidemiological information. A false negative result may occur, if inadequate number of organisms are present in the specimen due to improper collection, transport or handling. False negative results may also occur if amplification inhibitors are present in the specimen. A single negative test result, particularly if this is from an upper respiratory tract specimen, does not exclude infection. Repeat sampling and testing of lower respiratory specimen is strongly recommended in severe or progressive disease. The repeat specimens may be considered after a gap of 2-4 days after the collection of the first specimen for additional testing if required.

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Target Selection:

The target sequence used for Beta CoV is E gene of Sarbeco virus, and that for SARS CoV-2 is ORF1 (RdRP)/ N gene.

- Test Device Name: Applied biosystems QuantStudio 5 Real time PCR System, Thermofisher.
- Covid-19 Test conducted as per kits approved by ICMR/CE-IVD/USFDA.

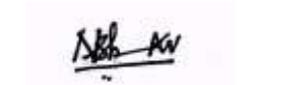
Limitations:

- Negative results do not exclude 2019-nCoV infection and should not be used as the sole basis for treatment or other patient management decisions.
- Optimum specimen types and timing for peak viral levels during infections caused by 2019-nCoV have not been determined. Collection of multiple specimens (types and time points) from the same patient may be necessary to detect the virus.
- A false negative result may occur if the specimen is improperly collected, transported or handled. False negative results may also occur if amplification inhibitors are present in the specimen or if inadequate numbers of organisms are present in the specimen.

----- End of the Report -----

Tests marked with (*) are not included in the scope of NABL accreditation


SHILMIYA JOSEPH
 MSc (Micro)


DR.NISHA K.V
 MSc.Ph.D (Medical Micro)

Note:

1. Test Result released pertains to the specimen submitted. 2. All test results are dependent on the quality of the sample received by the Laboratory. 3. Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the referring Physician. 4. Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. 5. Test result may show inter-laboratory variations. 7. Test result cannot be considered for medico legal trials.