

Test Report

Date and time of reporting (dd/mm/yyyy) : 12 hour format	23/05/2021
Address of the referring facility/Hospital	HMCH, ROURKELA
SPECIMEN DETAILS	
Date & Time of receipt of specimen (dd/mm/yyyy)	22/05/2021
Condition of specimen received / Quality on arrival	Under cold chain
REPORTING DETAILS	

SI No	Sample ID	Patient Name	Age	Sex	Address	Specimen type	Date of sample testing	Result 2019-nCoV (RT-PCR)	Department
1	HMCHR/D/598	SUMANTA KUMAR PUTHAL	21	M	BASANTI COLONY ROURKELA MOB- 8455960811	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
2	HMCHR/D/600	MD AMINOOR	19	M	RGH IPD ROURKELA MOB- 7337574377	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
3	HMCHR/D/601	MANO DEVI	70	F	RGH IPD ROURKELA MOB- 8455026771	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
4	HMCHR/D/602	MOTI SATPATHY	55	M	RGH IPD ROURKELA MOB- 6370096523	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
5	HMCHR/D/603	MADHUSUDHAN KISHAN	41	M	RGH IPD ROURKELA MOB- 9439278646	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY


6	HMCHR/D/605	RAMLAL ORAM	60	M	RGH IPD ROURKELA MOB- 9668395270	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
7	HMCHR/D/606	PUSHPA EKKA	63	F	RGH IPD ROURKELA MOB- 9668063477	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
8	HMCHR/D/607	MALTILATA DHAL	70	F	RGH IPD ROURKELA MOB- 9348479803	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
9	HMCHR/D/608	LABANYA SWAIN	75	F	RGH IPD ROURKELA MOB- 9438501849	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY
10	HMCHR/D/609	JYOTI YADAV	25	F	RGH IPD ROURKELA MOB- 7077833491	NP SWAB	23/05/2021	NEGATIVE	MICROBIOLOGY

Checked and Approved

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Note: The results relate only to the specimens tested and should be correlated with clinical findings. Interpretation guidance:-

- Please ensure and maintain the confidentiality of the test report.
- Testing of referred clinical specimens was considered on the basis of request/referral received from/ through State Surveillance Officer (SSO) of concerned State Integrated Disease Surveillance Programme (IDSP) affirming requirements of the case definition/s.
- 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. Therepeat specimens maybe considered after a gap of 2 – 4 days after the collection of the first specimen for additional testing.*
- The sputum (if produced), endotracheal aspirate (ETA) or bronchoalveolar lavage (BAL) fluid would be appropriate for testing.*
- A positive alternate pathogen does not necessarily rule out either, as little is yet known about the role of co infections.
- Please note that these results are not to be used for any thesis or presentations or for Publication in any Journal without the prior permission of the Director, ICMR-National Institute of Virology, Pune


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