NAME OF THE LAB- HMCHR RT PCR LAB

Test Report

Date and time of reporting (dd/mm/yyyy): 12 hour format	25/05/2021					
Address of the referring facility/Hospital	HMCH, ROURKELA					
SPECIMEN DETAILS						
Date & Time of receipt of specimen	24/05/2021					
dd/mm/yyyy)	24/05/2021					
Condition of specimen received / Quality on arrival	Under cold chain					
PWP0PWWW PWWW W 0						

REPORTING DETAILS Patient Address Sl No Sample ID Specimen Date of Result Department Age Sex Name 2019sample type nCoV (RT-PCR) testing HMCHR/D/666 NP SWAB 25/05/2021 MICROBIOLOGY NEGATIVE **RGH IPD** AKASH PRASAD **ROURKELA** MOB-7008016525 32 Μ HMCHR/D/667 NP SWAB 25/05/2021 NEGATIVE MICROBIOLOGY **RGH IPD** PATEL EKKA **ROURKELA** MOB-8658994403 Μ 34 HMCHR/D/668 NP SWAB 25/05/2021 NEGATIVE MICROBIOLOGY **RGH IPD MAHENDRA** ROURKELA **KUMAR SAHOO** MOB-8328830774 43 Μ HMCHR/D/669 MICROBIOLOGY NP SWAB 25/05/2021 NEGATIVE **RGH IPD** TILA LAKRA **ROURKELA** MOB-8249585667 59 Μ HMCHR/D/671 NP SWAB 25/05/2021 NEGATIVE MICROBIOLOGY **RGH IPD** BIJAY LAXMI JEET **ROURKELA** MOB-7978768946

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6	HMCHR/D/672					NP SWAB	25/05/2021	NEGATIVE	MICROBIOLOGY
		JULLIEN KANDULANA			RGH IPD ROURKELA MOB- 9437502683				
			27	М					
7	HMCHR/D/673					NP SWAB	25/05/2021	NEGATIVE	MICROBIOLOGY
		RASMITA BUDA			RGH IPD ROURKELA MOB- 6371273252				
			21	F					

Checked and Approved

Checked and Approved by

NODAL OFFICER
COVID LAB.
Hi-Tech Medical College & Hospital
Reurkela-769004, Odisha

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

- Please ensure and maintain the confidentially of the test report.
- Testingofreferredclinicalspecimenswasconsideredonthebasisofrequest/referralreceivedfrom/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 excludeinfection.*
- 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 fortesting.*
- 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 Publicationinany Journal without the prior permission
 of the Director, ICMR-National Institute of Virology, Pune