


 Preventive Health Check-up | Pathology | Digital X-Ray | Sonography | Colour Doppler | Mammography | BMD (DXA Scan) | OPG | ECG | 2D Echo  
 Stress Test/TMT | Spirometry | Eye Examination | Dental Examination | Diet Consultation | Audiometry | OT Sterility | Water Sterility | Clinical Research

|                      |                         |                   |                       |  |
|----------------------|-------------------------|-------------------|-----------------------|--|
| <b>CID</b>           | : 2109847747            | <b>SID</b>        | : 177803274015        | <b>R<br/>E<br/>P<br/>O<br/>R<br/>T</b> |
| <b>Name</b>          | : MR.MILIND VISHNU NAIK | <b>Registered</b> | : 08-Apr-2021 / 12:15 |  |
| <b>Age / Gender</b>  | : 40 Years / Male       | <b>Collected</b>  | : 08-Apr-2021 / 11:00 |  |
| <b>Dr.</b>           | : -                     | <b>Reported</b>   | : 09-Apr-2021 / 16:14 |  |
| <b>Reg. Location</b> | : Kalyan Headquarters   | <b>Printed</b>    | : 09-Apr-2021 / 18:18 |  |

### Real time Qualitative RT-PCR detection of 2019-nCoV RNA / COVID-19 RNA

| <u>PARAMETER</u>   | <u>RESULT</u>                   |
|--|---------------------------------|
| Result   | SARS-CoV-2: Detected (Positive) |
| Kit:Viral Detect II Multiplex(Genes2Me),Target gene(RdRP & N),Cutoff:<37 |                                 |
| CT value for target gene   | 23                              |

ICMR Registration No: Andheri-Mumbai- SUBUR001, Pune-SUDIPLPMH

Specimen: Nasopharyngeal & Oropharyngeal swab in VTM Method: Real time RT-PCR

**Note:**

- Ct value indicates the infectivity and not severity of infection.
- ICMR recommended kits are used for reporting. All the positive cases will be notified to ICMR for further surveillance.
- Clinical correlation with patient history, radiology findings and co-infection with other virus infection is necessary to be determined especially in cases with Borderline positive Ct values.
- Borderline positive cases (Ct Value >30) may give variable results on repeat testing. The possible reasons could be the variations in kits and instruments used.

**Limitations:**

- Optimum specimen types and timing of peak viral levels during infections caused by 2019-nCoV have not been determined. Collection of multiple specimens (Types & Time points) may be necessary in view of suspected clinical history. The repeat specimen may be considered after a gap of 2-4 days after the collection of first specimen for additional testing if required. (other respiratory pathogens)
- Negative results do not preclude SARS - CoV - 2 infection and should not be used as the sole basis for patient management decisions.
- This test is a qualitative assay and does not quantify viral load. Various host factors, viral factors, variability in sample collection / site and techniques used by the laboratories can affect Ct values. Therefore, Ct values are not an absolute indication of viral load and should be interpreted with caution.


**Factors leading to false negative RT-PCR report:**


- Inadequate specimen collection, Poor quality of sample and non-representative sample.
- Sample collected too early or too late in the infection, Improper sample handling and shipment.
- Technical reasons- PCR Inhibitor, analytical sensitivity of kit used.
- Active recombination & / mutations in target genes used for detection of SARS-CoV-2 virus.

**References:**

1. Diagnostic detection of 2019-nCoV by real-time RT-PCR, Berlin Jan 17th, 2020.
2. Labcorp COVID-19 RT-PCR test EUA Summary / COVID-19 RT-PCR test (laboratory corporation of America).

\* Sample processed at Molecular Diagnostics Laboratory, CPL, Andheri West  
 \*\*\* End Of Report \*\*\*

  
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