



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

CID R : 2110644145 : 177803369198 Ε Name Registered :15-Aug-2021 / 08:53 : Shimona Mathur P 0 Age / Gender : 30 Years / Female Collected :15-Aug-2021 /09:27 R Dr. :16-Aug-2021 /07:15 Reported :16-Aug-2021 /07:46 **Printed** Reg. Location : Kandivali East (Main Centre)

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

**PARAMETER** 

**RESULT** 

Result SARS-CoV-2: Not Detected (Negative)

Kit: Viral Detect II Multiplex(Genes2Me), Target gene(RdRP & N), Cutoff: <37

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

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 \*\*\*

Dr.Heena Satam Ph.D. MOLECULAR BIOLOGIST Dr.SHASHIKANT DIGHADE M.D. (PATH) PATHOLOGIST

HEALTHLINE - 022 617 00 000

For Feedback - customerservice@suburbandiagnostics.com

www.suburbandiagnostics.com

Page 1 of 1