

Sample Collected At



THE CURESTA HOSPITAL

PT NAME

: MR. ABU MOJAHID MD EQUBAL

SAMPLE REGD. AT

: 03/07/2024 09:16

PT. AGE/SEX

: 59Y/MALE

REPORT RELEASED ON

: 03/07/2024 09:48 0

MOBILE NO

: 9334710322

PATIENT UNIQUE ID NO

· PCLS-17077

REF. BY.

: DR . SATWIK SAURAV

REPORT STAT.

: Final

Туре

: OPD

UHID NO. : TCH-2221

BEDWARD

:/DIALYSIS

SEROLOGY

Test Done

Result

Normal Value

HIV 1 & 2 ANTIBODIES, SCREENING TEST

Sample: Serum

NON-REACTIVE

NON-REACTIVE

Immunodot Assay

Clinical Significance:

HIV 1 & 2 ANTIBODIES

HIV I & II (CARD HIV Rapid test is a qualitative test used to screen for antibodies against HIV 1 and 2 viruses. As per NACO guidelines, all positive samples should be TEST) tested by using 3 different types of kits before report is released.

This is only a screening test. All samples detected reactive by the above screening test must be confirmed by using HIV Western Blot or HIV RNA tests.A non-reactive result does not exclude the possibility of exposure to or infection with HIV or the window period.

HCV RAPID CARD TEST (HEPATITIS C)

NON-REACTIVE

NON-REACTIVE

HEPATITIS B SURFACE ANTIGEN (HBsAg)

Sample : Serum

NON-REACTIVE

NON-REACTIVE

HBSAG (HEPATITIS B VIRUS) Immunochromatography

Hepatitis B surface antigen (HBsAg) is the first serologic marker appearing in the serum at 6 to 16 weeks following exposure to HBV. In acute infection, HBsAg usually disappears in 1 to 2 months after the onset of symptoms. Persistence of HBsAg for more than 6 months in duration indicates development of either a chronic carrier state or chronic HBV infection.

This is only a Screening test. All reactive samples should be confirmed by confirmatory test.

-- End Of Report--

DR. PRERNA CHOUDHARY (MD PATHOLOGY)

Forthama Collection :- 2973 1 27836

In case of any discrepancy due to machine error or typing error, please get it rectified immediately.