

CLINICAL LABORATORY REPORT

Name	Mrs. NADA ISHAG	Registration No	478627
Age/Sex	43 Years/Female	Sample Drawn At	2010-10-21 11:15:20
Collection Centre	INAPHYD95032	Sample Accepted At	2010-10-21 20:32:18
Referral Doctor	P.RAMA DEVI	Sample Reported At	2010-10-27 17:46:43
Referral Hospital	RAMAS FERTILITY.		

MOLECULAR BIOLOGY

INVESTIGATION	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
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HIV 1 RNA PCR - Viral Load 1300 Copies/
ml

SampleType: PLASMA EDTA

Method:REAL TIME PCR

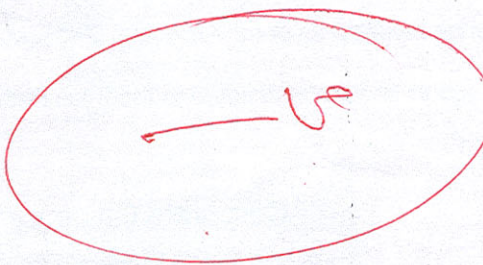
Technology:

In this assay/test, the presence of HIV-RNA is determined by Real Time Polymerase Chain Reaction. It involves the reverse transcription & specific amplification of the Pol gene of HIV 1 genome. This analysis is done on Light Cycler 2 (Roche) by using the highly sensitive & specific probe based assay. The taqman probes are used for Fluorescent detection or only target sequence specific amplicons generated during PCR. Amplified products are indicated by Critical point Cycle (Cp) in amplification Curve.

Interpretation:

Viral RNA is converted into cDNA and double stranded DNA was amplified, the values are compared in the Real Time & quantified against a set of known standards. The amplified product is detected via fluorescent dyes (Taqman chemistry). Fluorescent dyes were linked to oligonucleotide probes which bind specifically to the specific sequence between and forward and reverse primer designed specifically to the Pol gene of the HIV 1 genome. Monitoring the fluorescence intensities during the PCR Run (i.e. in Real Time) allows detection & quantitation of the accumulating product. These analytical detection limit of the test is 50 copies/ml in the given sample. The primer and probe designs ensure that all M subtypes of HIV 1 are detected. There is no cross reactivity with any other known pathogenic virus.

*** END OF THE REPORT ***



U Mehatha
U Mehatha
 Lab In Charge

Dr Raja Vojjala
Dr Raja Vojjala
 MD Pathology

Note: This report is subject to the terms and conditions mentioned overleaf.

All investigations are limited by the sensitivity and specificity of the assay and the condition of the specimen received by the laboratory. Assay result should be interpreted only in the context of other clinical findings and the clinical status of the patient.

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REPORT

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Tel: 020-41295151, e-mail: info@geneombiotech.com

HIV-1 Real Time Quantitative PCR Report

Name of the patient : Mrs. Nada Ishq
Age : - years
Referred by : Dr. Srinivas
Sample received on : 15th December 2010
Date : 16th December 2010
Gender : Female
Lab Code : HYD-10/4491
Assay Code : GBL-04
Name of the assay : HIV-1 Real Time Quantitative PCR
Type of sample : Plasma

RESULT : Below Detection Limit

Comment :
Linear range of detection : 50 - 1000000 HIV-1 RNA copies/mL.

The assay is for HIV-I RNA quantitation by reverse transcriptase real time polymerase chain reaction on Applied Biosystems Real Time PCR platform.

This viral load assay is generally performed when a patient is first diagnosed with HIV-I. The test result functions as a baseline measurement that shows how actively the virus is reproducing and whether treatment is immediately necessary. For patients already in ART, it is also used to monitor the efficacy of the anti retroviral drugs and possible emergence of drug resistance.

This test is intended for use as an aid in management of HIV-I infected patients and is not intended for use in the initial diagnosis of HIV-I infection

Umakant Mahajan MDS In-Charge Contact: 09960000984	Dr. Pratap N. Mukhopadhyaya (Ph.D) CEO and Head R & D Operations Contact: 09730073423
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-End of the report-

Bar Code

Entry: E4113312

Exit: E4113312

Check Sheet No. : 161220101

CONDITIONS OF REPORTING

The reported results are for information and for interpretation of the referring doctor only • It is presumed that the tests performed on the specimen belong to the patient named or identified • Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient • Should the results indicate an unexpected abnormality, the same should be reconfirmed • Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret the results • This report is not valid for medico - legal purposes.