





Name : XXXXXXXXXX

Age/Gender

Referred By : XXXXXXXXXX ld XXXXXXXXX Vid XXXXXXXXX

Billed XXXXXXXXX

**Collected On XXXXXXXXX** 

Reported On : XXXXXXXXXX

**TEST RESULT UNITS Biological Reference Interval** 

## DEPARTMENT OF MOLECULARBIOLOGY

## Orbito Respiratory Bacterial - 1 (1511)

(Method: Multiplex Real Time PCR)

Staphylococcus aureus **NOT DETECTED** NOT DETECTED Chlamydia pneumoniae Haemophilus influenzae NOT DETECTED Streptoccous pneumoniae NOT DETECTED

Moraxella catarhalis **DETECTED** 

Bordtella Spp. NOT DETECTED

Haemophilus influenzae (Type B) **NOT DETECTED NOT DETECTED** Flu C

INTERPRETATION

- Staphylococcus aureus: Staphylococcus aureus is a facultative anaerobic Gram-positive coccus, and it is frequently found as a commensal organism in the respiratory tract and on the skin. These bacteria are spread by having direct contact with an infected person, by using a contaminated object, or by inhaling infected droplets dispersed by sneezing or coughing. This versatile bacterium can invade many tissues and then causes a wide spectrum of infections (cutaneous abscesses, endocarditis, septic shock, etc.).
- Streptococcus pneumoniae: Streptococcus pneumoniae remains the leading cause of bacterial meningitis. It is the commonest cause of meningitis between the ages of 1 and 23 months, and above the age of 19. The nasopharynx is the primary site of colonization, and the vast majority of pneumococcal isolates are encapsulated. In the majority of these people, the bacteria is not growing or active and will not cause illness. However, anyone who carries this bacteria can transmit it to others, potentially causing any of the illnesses or pneumococcal meningitis.
- Chlamydophila Pneumoniae: Chlamydophila Pneumoniae Is a type of bacteria that causes respiratory tract infections, such as pneumonia (lung infection). The bacteria cause illness by damaging the lining of the respiratory tract including the throat, windpipe, and lungs. Some people may become infected and have mild or no symptoms. C. pneumoniae can also cause lower respiratory tract infections like bronchitis (inflammation or swelling of the airways that carry air to the lungs) and pneumonia (lung infection). Some reports say that people with pneumonia caused by C. pneumoniae are more likely to have laryngitis (inflammation of the voice box) compared to people with other types of bacterial pneumonia. It can take 3 to 4 weeks for symptoms to appear after someone has been exposed to the bacteria. Symptoms can also continue for several weeks after they start.
- Haemophilus influenzae B : Haemophilus influenzae B Similar to type A, Haemophilus influenzae B is also highly contagious and can have dangerous effects on your health in more severe cases. However, this form can only be spread from human to human.
- Klebsiella pneumoniae: Klebsiella pneumoniae is a Gram-negative, non-motile, encapsulated, lactose-fermenting, facultative anaerobic, rod-shaped bacterium. Klebsiella bacteria are mostly spread through person-to-person contact. Less commonly, they are spread by contamination in the environment.
- Moraxella catarrhalis: Moraxella catarrhalis is a gram-negative diplococcus that commonly colonizes the upper respiratory tract. It is a leading cause of otitis media in children, acute exacerbations of chronic obstructive pulmonary disease (COPD), and acute bacterial rhinosinusitis. Symptoms include discolored drainage from the nose, high fever, fatigue, swelling in the face, and pain in the forehead or behind the eyes.
- Bordetella pertussis: Bordetella pertussis is a Gram-negative, aerobic, pathogenic, encapsulated coccobacillus of the genus Bordetella, and the causative agent of pertussis or whooping cough. The bacterium is spread by airborne droplets; its incubation period is 7-10 days on average (range 6-20 days). Infection results in colonization and rapid multiplication of the bacteria on the mucous membranes of the respiratory tract. The infection occurs mostly in children under the age of one when they are unimmunized, or

CAP, NABL, NABH & ISO Accredited Laboratory (Ref. Lab - Coimbatore, Tamilnadu)





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• children with faded immunity, normally around the ages 11 through 18. The signs and symptoms are similar to a common cold: runny nose, sneezing, mild cough, and low-grade fever.

--- End of the Report ---