

Name	: XXXXXXXXXXXX	Referred By	: XXXXXXXXXXXX
Id	: XXXXXXXXXXXX	Billed	: XXXXXXXXXXXX
Age	: XX/Y	Collected On	: XXXXXXXXXXXX
Gender	: X	Reported	: XXXXXXXXXXXX
Phone	: XXXXXXXXXXXX	Vid	: XXXXXXXXXXXX

Test	Result	Units	Biological Reference Interval
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**DEPARTMENT OF MOLECULARBIOLOGY - BLOOD (EDTA)**

**HHH Panel (1455)**  
(Method: MULTIPLEX RT PCR)

Specimen	EDTA(Whole Blood)		
HIV RNA Qualitative	NEGATIVE		
HCV RNA Qualitative	NEGATIVE		
HBV DNA Qualitative	NEGATIVE		

**REMARKS**

**Clinical Significance:**

- Hepatitis B is a potentially life-threatening liver infection caused by the Hepatitis B virus (HBV).
- HBV is a major global health problem. It can cause chronic infection and puts people at high risk of death from cirrhosis and liver cancer.
- Hepatitis C is a liver disease caused by the Hepatitis C virus. The disease can range in severity from a mild illness lasting a few weeks to a serious, lifelong condition that can lead to cirrhosis of the liver or liver cancer.
- The hepatitis C virus is transmitted through contact with the blood of an infected person. HCV infection is highest among past or present intravenous drug abusers.
- Hepatitis C is an infectious disease affecting the liver, caused by the Hepatitis C virus (HCV). This infection is often asymptomatic, but once established it can progress to chronic scarring of the liver (fibrosis and cirrhosis).
- HIV-1 is prevalent globally with 2.1 million people living with HIV(PL-HIV). India has largest number of PL-HIV in Asia. Currently three main genetic groups are present for HIV-1: Group M(Main), Group O(Outlier), Group N(Non-M and Non-O).
- HIV-2 is distinct retrovirus, but has same mode of transmission that of HIV-1.
- HBV DNA (Genotype A - G), HCV RNA (Genotype 1 - 6) and HIV RNA (HIV-1 Group M and O and HIV-2) were detectable by this PCR technology.
- This test does not discriminate between HIV-1(Group- M and Group-O) and HIV-2.

**INTERPRETATION**

<b>RESULT</b>	
<b>NEGATIVE</b>	HBV DNA, HCV RNA and HIV RNA in the given specimen was not detected or less than the detection limit.
<b>HBV POSITIVE</b>	HBV DNA is Detected in the given sample.
<b>HCV POSITIVE</b>	HCV RNA is Detected in the given sample.
<b>HIV POSITIVE</b>	HIV RNA is Detected in the given sample.

**HBV DNA Qualitative (855)**  
(Method: RT-PCR)

SPECIMEN	WHOLE BLOOD (EDTA)		
RESULT			
HBV DNA QUALITATIVE	<b>DETECTED</b>		

**INTERPRETATION**

<b>RESULT</b>	
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**Disclaimer :**

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<b>Customer Care</b>	<b>Reports</b>
0422 - 4030201	0422 - 4030203
0422 - 4030202	0422 - 4030204

Name	: XXXXXXXXXX	Referred By	: XXXXXXXXXX
Id	: XXXXXXXXXX	Billed	: XXXXXXXXXX
Age	: XX/Y	Collected On	: XXXXXXXXXX
Gender	: X	Reported	: XXXXXXXXXX
Phone	: XXXXXXXXXX	Vid	: XXXXXXXXXX

Test	Result	Units	Biological Reference Interval
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<b>NOT DETECTED</b>	<i>HBV DNA in the given specimen was not detected or less than the detection limit.</i>		
<b>DETECTED</b>	<i>HBV DNA is detected in the given specimen</i>		

**PATHOGEN INFORMATION:**

*HBV Primer and Probe have been designed for the specific and exclusive in-vitro quantification of HBV virus in clinical specimens.*

**Clinical Significance:**

- Hepatitis B is a potentially life-threatening liver infection caused by the hepatitis B virus (HBV).*
- It is a major global health problem. It can cause chronic infection and puts people at high risk of death from cirrhosis and liver cancer.*

**HBV DNA QUANTIFICATION (061)**

*(Method: Real Time RT-PCR)*

<b>SPECIMEN TYPE</b>	WHOLE BLOOD (EDTA)		
<b>RESULT</b>			
<b>HBV DNA QUANTIFICATION</b>	<b>DETECTED</b>		
	<b>1000</b>	IU/mL	

**INTERPRETATION**

<b>RESULT</b>			
<b>NOT DETECTED</b>	<i>HBV DNA in the given specimen was not detected or less than the detection limit.</i>		
<b>DETECTED</b>	<i>HBV DNA is detected in the given specimen</i>		

<b>REPORTABLE RANGE</b>	30 IU/mL to 3 x 10 <sup>9</sup> IU/mL
<b>GENOTYPES</b>	A - H

**PATHOGEN INFORMATION:**

*HBV primer and Probe have been designed for the specific and exclusive in vitro quantification of HBV virus.*

**Clinical Significance:**

- Hepatitis B is a potentially life-threatening liver infection caused by the hepatitis B virus (HBV).*
- It is a major global health problem. It can cause chronic infection and puts people at high risk of death from cirrhosis and liver cancer.*

**HIV RNA Qualitative PCR (854)**

*(Method: Real Time RT-PCR)*

<b>SPECIMEN</b>	WHOLE BLOOD (EDTA)		
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**Customer Care**

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**Reports**

0422 - 4030203

0422 - 4030204

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Age	: XX/Y	Collected On	: XXXXXXXXXXXX
Gender	: X	Reported	: XXXXXXXXXXXX
Phone	: XXXXXXXXXXXX	Vid	: XXXXXXXXXXXX

Test	Result	Units	Biological Reference Interval
<b>RESULT</b>			
HIV RNA Qualitative	NOT DETECTED		

**REMARKS**

The specificity of the Artus HI Virus-1 RG RT-PCR Kit is first and foremost ensured by the selection of the primers and probes, as well as the selection of stringent reaction conditions. The primers and probes were checked for possible homologies to all in gene banks published sequences by sequence comparison analysis. The detectability of all relevant genotypes has thus been ensured by a database alignment and by a PCR run on Rotor-Gene Instruments.

**INTERPRETATION**

**This assay should not be used as a screening test or primary diagnostic test for HIV-1 infection, except in infants <18 months of age born to HIV-1 infected mothers.**

**This assay is optimized for the detection of group M subtypes (A to H), N and O, but it may not detect all HIV-1 group N or O strains. Diagnosis of HIV-1 infection should not rely solely upon a Detected result for HIV-1 DNA and/or RNA. Such a result should be considered in conjunction with a patient's clinical presentation, physical findings and other diagnostic laboratory tests prior to establishing a diagnosis.**

**Undetected results should be interpreted with caution, considering the patient's risk factors for HIV-1 infection, the analytical sensitivity of the assay, and the group of the infecting HIV-1 strain. Follow up testing is recommended for high-risk patients with initially Undetected test results.**

**Undetected result together with repeatedly positive HIV-1 antibody supplemental test results may be observed in HIV-2 infected individuals. For such patients with risk factors for HIV-2 infection, specific testing for HIV-2 antibodies (serologic) and HIV-2 DNA and/or RNA is recommended.**

**HIV I RNA QUANTITATIVE PCR (660)**

(Method: Real Time RT-PCR)

Specimen	WHOLE BLOOD (EDTA)		
<b>RESULT</b>			
HIV I RNA QUANTITATIVE PCR	NOT DETECTED		
	N/A		

**REMARKS**

The specificity of the Artus HI Virus-1 RG RT-PCR Kit is first and foremost ensured by the selection of the primers and probes, as well as the selection of stringent reaction conditions. The primers and probes were checked for possible homologies to all in gene banks published sequences by sequence comparison analysis. The detectability of all relevant genotypes has thus been ensured by a database alignment and by a PCR run on Rotor-Gene Instruments.

**INTERPRETATION**

**This assay should not be used as a screening test or primary diagnostic test for HIV-1 infection, except in infants <18 months of age born to HIV-1 infected mothers.**

**This assay is optimized for the detection of group M subtypes (A to H), N and O, but it may not detect all HIV-1 group N or O strains. Diagnosis of HIV-1 infection should not rely solely upon a Detected result for HIV-1 DNA and/or RNA. Such a result should be considered in conjunction with a patient's clinical presentation, physical findings and other diagnostic laboratory tests prior to establishing a diagnosis.**

**Undetected results should be interpreted with caution, considering the patient's risk factors for HIV-1 infection, the analytical sensitivity of the assay, and the group of the infecting HIV-1 strain. Follow up testing is recommended for high-risk patients with initially Undetected test results.**

**Undetected result together with repeatedly positive HIV-1 antibody supplemental test results may be observed in HIV-2 infected individuals. For such patients with risk factors for HIV-2 infection, specific testing for HIV-2 antibodies (serologic) and HIV-2 DNA and/or RNA is recommended.**

The performance of this test has been validated at department of Molecular Biology Laboratory.

<b>RESULT</b>	
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Test	Result	Units	Biological Reference Interval
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<b>NOT DETECTED</b>	<i>HIV RNA in the given specimen was not detected or less than the detection limit</i>
<b>DETECTED</b>	<i>HIV RNA is detected in the given specimen</i>
<b>REPORTABLE RANGE</b>	<i>120 IU/mL to 1 x 10<sup>8</sup> IU/mL</i>

### HCV RNA QUALITATIVE PCR (262)

(Method: Real Time RT-PCR)

Specimen	WHOLE BLOOD ( EDTA )		
RESULT			
HCV RNA	NEGATIVE		

#### INTERPRETATION

<b>RESULT</b>	
<b>NEGATIVE</b>	<i>HCV RNA in the given specimen was not detected or less than the detection limit.</i>
<b>POSITIVE</b>	<i>HCV RNA is detected in the given sample.</i>

#### PATHOGEN INFORMATION:

HCV diagnosis is based on the amplification of 3' UTR conserved region of HCV genome covering subtypes 1-6.

#### Clinical Significance:

- Hepatitis C is a liver disease caused by the hepatitis C virus. The disease can range in severity from a mild illness lasting a few weeks to a serious, lifelong condition that can lead to cirrhosis of the liver or liver cancer.
- The hepatitis C virus is transmitted through contact with the blood of an infected person. HCV infection is highest among past or present intravenous drug abusers.
- Hepatitis C is an infectious disease affecting the liver, caused by the Hepatitis C virus (HCV). This infection is often asymptomatic, but once established it can progress to chronic scarring of the liver (fibrosis and cirrhosis).
- Viral load test results have many uses, such as confirming active HCV infection, and measuring HCV treatment response before, during and after therapy. Viral load determination cannot be correlated with the risk of sexual transmission.
- There are 6 genotypes of hepatitis C and they may respond differently to treatment. Careful screening is necessary before starting the treatment to determine the most appropriate approach for the patient.

### HCV RNA QUANTIFICATION (649)

(Method: Real Time RT PCR)

SPECIMEN TYPE	Whole Blood (EDTA)		
RESULT			
HCV RNA QUANTIFICATION	NOT DETECTED		
	N/A		

#### INTERPRETATION

<b>RESULT</b>	
<b>NOT DETECTED</b>	<i>HCV RNA in the given specimen was not detected or less than the detection limit.</i>

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#### Customer Care

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#### Reports

0422 - 4030203

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Name : XXXXXXXXXXXX  
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 Reported : XXXXXXXXXXXX  
 Vid : XXXXXXXXXXXX

Test	Result	Units	Biological Reference Interval
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<b>DETECTED</b>	<b>HCV RNA is detected in the given specimen</b>		
<b>REPORTABLE RANGE</b>	<b>30 IU/mL to 10<sup>9</sup> IU/mL</b>		
<b>GENOTYPES</b>	<b>1 - 6</b>		

**PATHOGEN INFORMATION:**

HCV diagnosis is based on the amplification of 3' UTR conserved region of HCV genome covering subtypes 1-6.

**Clinical Significance:**

- Hepatitis C is a liver disease caused by the Hepatitis C virus. The disease can range in severity from a mild illness lasting a few weeks to a serious lifelong condition that can lead to cirrhosis of the liver or liver cancer.
- The Hepatitis C virus is transmitted through contact with the blood of an infected person. HCV infection is highest among past or present intravenous drug abusers.
- Hepatitis C is an infectious disease affecting the liver, caused by the Hepatitis C virus (HCV). This infection is often asymptomatic, but once established it can progress to chronic scarring of the liver (fibrosis and cirrhosis).
- Viral load test results have many uses, such as confirming active HCV infection, and measuring HCV treatment response before, during and after therapy. Viral load determination cannot be correlated with the risk of sexual transmission.
- There are 6 genotypes of Hepatitis C and they may respond differently to treatment. Careful screening is necessary before starting the treatment to determine the most appropriate approach for the patient.

**CMV DNA PCR Qualitative (852)**

(Method: RT-PCR)

Specimen	BLOOD		
CMV DNA Qualitative			
Result	NOT DETECTED		

**REMARKS**

**Human cytomegalovirus:** Cytomegalovirus (CMV) formally designated as Human Herpes Virus 5 (HHV-5) belongs to the family Herpes viridae. It has a worldwide distribution and infects humans of all ages with no seasonal or epidemic patterns of transmission. Seroprevalence of CMV increases with age ranging from 40-100%; highest being among lower socioeconomic groups. The infections can be congenital, perinatal or postnatal.

**CMV quantitative PCR (1483)**

(Method: RT PCR)

SPECIMEN	BLOOD		
RESULT			
CMV DNA QUANTIFICATION	NOT DETECTED		
	N/A		

**INTERPRETATION**

**PATHOGEN INFORMATION:**

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Age	: XX/Y	Collected On	: XXXXXXXXXXXX
Gender	: X	Reported	: XXXXXXXXXXXX
Phone	: XXXXXXXXXXXX	Vid	: XXXXXXXXXXXX

Test	Result	Units	Biological Reference Interval
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*CMV primer and Probe have been designed for the specific and exclusive in vitro quantification of CMV virus.*

**Clinical Significance:**

1. CMV, also known as herpesvirus-5 (HHV-5), belongs to the Herpesviridae family.
2. CMV is mostly asymptomatic in healthy people, immunocompromised patients develop a mononucleosis-like syndrome with prolonged fever, mild hepatitis, sore throat and inflammation of the lymph nodes.

<b>RESULT</b>	
<b>REPORTABLE RANGE</b>	77 IU/mL to $7.94 \times 10^7$ IU/mL
<b>NOT DETECTED</b>	CMV DNA in the given specimen was not detected or less than the detection limit.
<b>DETECTED</b>	CMV DNA is detected in the given specimen

--- End of the Report ---



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