

Patient Name	: Mr MR.DUMMY	Sample Collected	: Apr 26, 2024, 01:00 PM.
DOB/Age/Gender	: 23 Y/Male	Report Date	: May 07, 2024,03:51 PM.
Patient ID / UHID	: 8053083/RCL7249605	Barcode No	: MD071899
Referred By	: Dr. X	Report Status	: Final Report
Sample Type	: BLISTER FLUID		

Herpes Simplex Virus (HSV) 1 & 2 Qualitative, PCR

Test Name	Result
HSV-1 DNA PCR	Not Detected
HSV- 2 DNA PCR	Not Detected

INTERPRETATION:

1. This is a qualitative assay; results are reported either as negative or positive for herpes simplex virus (HSV) type 1 or HSV type 2.
2. An Indeterminate result means that HSV DNA was detected, but the assay was unable to differentiate between HSV type 1 and HSV type 2. If typing is required, it is recommended that a new sample be collected and tested by an alternate method.
3. Detection of HSV DNA in clinical specimens supports the clinical diagnosis of infection due to the virus

METHOD :

Real-Time Polymerase Chain Reaction (RT-PCR)

REFERENCE VALUES

HERPES SIMPLEX VIRUS (HSV) -1 Negative
HERPES SIMPLEX VIRUS (HSV) -2 Negative

CLINICAL INFORMATION

Herpes simplex is a viral infection caused by herpes simplex virus (HSV) and characterized by systemic and local symptoms, including the formation of vesicular lesions where the virus is found in high concentrations. After a primary infection, HSV establishes latency and exhibits a tendency for localized recurrence. HSV is differentiated into two subtypes, HSV-1 and HSV-2, which generally produce distinct clinical syndromes, depending on the portal of entry. HSV-1 and HSV-2 can infect the genital tract and oral mucosa, although HSV-2 has been historically associated with genital infection.

Herpes simplex CNS involvement

Central nervous system (CNS) involvement may appear in association with primary HSV infection or during viral reactivation. HSV-1 is a cause of Meningoencephalitis and HSV-2 has been associated with aseptic meningitis, myelitis and radiculitis.

Neonatal/congenital herpes simplex infections

Neonatal herpes simplex infections can be present as disseminated infections involving multiple organs, encephalitis and/or localized infection of the skin, eyes or mouth. Infections are most frequently due to HSV-2, but HSV-1 is also common.

Limitations:

1. This test is intended for patients with evidence of disseminated disease due to herpes simplex virus (HSV).
2. Although the reference value is typically "negative" for this assay, viral shedding may be detected in asymptomatic individuals. This assay is only to be used for patients with a clinical history and symptoms consistent with HSV infection and must be interpreted in the context of the clinical picture.
3. False-negative results may occur if the viruses are present at a level that is below the analytical sensitivity of the assay or if the virus has genomic mutations, insertions, deletions, or rearrangements or if performed very early in the course of illness.
4. Negative results do not rule out HSV infections of the CNS and should not be used as the sole basis for treatment or other patient management decisions.

*** End Of Report ***

Disclaimer: Method given in report are only indicative and can be changed depending upon type of machine and kit available at time of testing.

Not all tests at all locations are under NABL scope. Availability of tests under NABL scope varies from lab to lab.



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Booking Centre :- DEMO PARTNER CHENNAI, DEMO PARTNER CHENNAI
Processing Lab :-

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All Lab results are subject to clinical interpretation by qualified medical professional and this report is not subject to use for any medico-legal purpose.

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2. It is to be presumed that the tests performed pertain to the specimen/sample attributed to the Customer's name or identification. It is presumed that the verification particulars have been cleared out by the customer or his/her representation at the point of generation of said specimen / sample. It is hereby clarified that the reports furnished are restricted solely to the given specimen only.
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DISCLAIMER

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