

Name of the Lab:

ICMR ID:

SRF ID:

### Test Report

<b>Date and Time of Reporting</b>	
<b>Address of the Referring Facility/Hospital</b>	
<b>SPECIMEN DETAILS</b>	
<b>Date of onset of illness</b>	
<b>Date &amp; Time of Sample Collection</b>	
<b>Date &amp; Time of Receipt of Specimen at Lab</b>	
<b>Date of Sample Testing</b>	
<b>Condition of Specimen Received / Quality on Arrival</b>	
<b>REPORTING DETAILS</b>	
<b>Report ID</b>	

Patient ID	Patient Name	Age	Sex	Specimen Type	Result of SARS-CoV2

Prepared by:

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Checked and Approved by

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*Note: The results relate only to the specimens tested and should be correlated with clinical findings.*

*Interpretation guidance:-*

- *A single negative test result, particularly if this is from an upper respiratory tract specimen, does not exclude infection\**
- *A positive test result is only tentative, and will be reconfirmed by retesting.*
- *Repeat sampling and testing of lower respiratory specimen is strongly recommended in severe or progressive disease. The repeat specimens may be considered after a gap of 2 – 4 days after the collection of the first specimen for additional testing if required. \**
- *A positive alternate pathogen does not necessarily rule out either, as little is yet known about the role of co-infections.*
- *Please note that these results are not to be used for any thesis or presentations or for Publication in any Journal without the prior permission of the Director General, ICMR*