

Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No/UHID
MaxID/Lab ID	Collection Date/Time
Ref Doctor	Reporting Date/Time



Test Name	Result	Unit	Bio Ref Interval
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Neuroviruses Qualitative PCR (L)*

Real Time PCR

Adenovirus Qualitative PCR	Not Detected
Enteroviruses, Qualitative PCR	Not Detected
EPSTEIN BARR VIRUS(EBV), Qualitative PCR	Not Detected
HUMAN HERPES VIRUS 7(HHV7), Qualitative PCR	Not Detected
HUMAN HERPES VIRUS 6(HHV6), Qualitative PCR	Not Detected
HUMAN PARECHOVIRUS, Qualitative PCR	Not Detected
PARVOVIRUS B19, Qualitative PCR	Not Detected
VARICELLA ZOSTER VIRUS (VZV) Qualitative PCR	Not Detected
CYTOMEGALOVIRUS (CMV), Qualitative PCR	Negative
HERPES SIMPLEX VIRUS(HSV) TYPE 1, PCR Qualitative	Negative
HERPES SIMPLEX VIRUS(HSV) TYPE 2, PCR Qualitative	Negative

Kindly correlate with clinical findings

*** End Of Report ***



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