

LABORATORY TEST REPORT

Name	: Ms. TAYING CHINGSU		
Sample ID	: B2550402		
Age/Gender	: 28 Years/Female	Reg. No	: 0692503130114
Referred by	: Dr. SHEELA MODI	SPP Code	: SPL-AS-110
Referring Customer	: ALPHA DIAGNOSTIC CENTRE.	Collected On	: 12-Mar-2025 01:26 PM
Primary Sample	:	Received On	: 14-Mar-2025 04:14 PM
Sample Tested In	: LBC Fluid	Reported On	: 18-Mar-2025 05:19 PM
Client Address	:	Report Status	: Final Report



MOLECULAR BIOLOGY

Test Name	Results	Units	Biological Reference Interval
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Human Papiloma Virus (HPV) Qualitative
(Method: Real Time PCR)

Detected

Interpretation :

- Human Papilloma Viruses (HPVs) are a group of more than 200 related viruses. More than 40 HPV types can be easily spread through direct sexual contact, from the skin and mucous membranes of infected people to the skin and mucous membranes of their partners. HPV infections are the most common sexually transmitted infections.
- High risk Human papilloma viruses detected are 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59 & 68. The low risk genotypes detected are 6 and 11.
- HPV types 16 and 18, are responsible for most HPV-caused cancers. Most HPV infections are benign and resolve on their own, but persistent infection with any of the high risk HPV genotypes increases a woman's risk for developing cervical cancer.
- Please co-relate the results with clinical status. This test should only be used for initial detection of the HPV virus. A negative high-risk HPV result does not exclude the presence of other high-risk HPV types, the possibility of future cytologic abnormalities, underlying CIN2-3, or cancer.
- Routine screening for HPV DNA in females reduces the incidence of cervical cancer and in males is linked to OSCC. High Risk genotypes 16 and 18 are linked to 70% of cervical cancers & OSCC. The low risk genotypes 6 and 11 are associated with genital warts.

Limitations:

- The results of this test are highly dependent on the sampling technique employed, sample type, cold-chain maintenance and clinical condition.
- Presence of PCR inhibitors (cannot be traced by technologist), rare genotype/ mutations or viral load lesser than the assay lower limit of detection may result in false-negative interpretation. In such cases, it is advised to repeat test with fresh sample.

*** End Of Report ***



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DR. RUTURAJ MANIKLAL KOLHAPURE
MD, MICROBIOLOGIST

*TESTS CONDUCTED @ CENTRAL LAB, HYDERABAD

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