|  |  |  |  |
| --- | --- | --- | --- |
| **NAME** | EHAB MOHAMED MOHAMED IBRAHIM | **PASSPORT NO.** | A 23120630 |
| **DATE OF BIRTH** | 01/09/1986 | **SEX** | **MALE** |
| **DATE COLLECTED** | 09/11/2021 18: 20 | **LABORATORY ID** | 140162 |
| **REPORT DATE** | 10/11/2021 |  | |

**MOLECULAR BIOLOGY DEPARTMENT**

**COVID-19 RT\_PCR TEST REPORT:**

**SPECIMEN**

**RESULT**

**NASOPHARYNGEAL SWAB**

Negative

**COMMENT :**

Virus of COVID-19 fast spread across the world emphasized the need of most countries to respond properly to such a new virulent pathogen. SARS-COV2 (Severe acute respiratory syndrome corona virus 2, is responsible for COVID-19 disease , that was spread from Wuhan City of China to whole world. Since the reporting of full genome of COVID-19 by Chinese Center for Disease Control and Prevention, several target genes have been announced to screen and identify the COVID-19 infected cases. The method used in this test is TaqMan-based 1-step RT-qPCR assay. Limitations: 1-rare mutations within target regions may affect the primers and / or probe recognition sites and lead to PCR failure. 2-SARS COV2 detection depends on the number of copies present in the specimen, that may be affected by specimen collection methods, transport and/or storage , also patient factors, and /or stage of infection. 3-The assay analytical sensitivity is 10 copies/reaction, so any specimen with a result of not detected cannot be assumed to be negative. 4-Negative results don't preclude SARS COV2 infection and should not be used as the sole basis for treatment or patient management. -The collection of multiple specimens(type and time points for the same patient may be necessary to detect the virus. -The results of the test should be evaluated by a health care professional in the context of medical history, clinical symptoms and other diagnostic tests

**DR.KHALED SH. ABDELALEEM CONSULTANT OF MICROBIOLOGY LAB.**