



Name	: XXXXXXXXXXX	Referred By	: XXXXXXXXXXX
Id	: XXXXXXXXXXX	Billed	: XXXXXXXXXXX
Age	: XXXXXXXXXXX	Collected On	: XXXXXXXXXXX
Gender	: Y	Reported	: XXXXXXXXXXX
Phone	: XXXXXXXXXXX	Vid	: XXXXXXXXXXX

Test	Result	Units	Biological Reference Interval
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DEPARTMENT OF MOLECULARBIOLOGY - SPUTUM

Orbito Myco Panel - 3 (1443)
(Method: Real Time PCR)

Specimen	BAL FLUID		
PANFUNGAL (DNA)	NOT DETECTED		
Aspergillus spp.(DNA)	NOT DETECTED		
Aspergillus flavus Qualitative (DNA)	NOT DETECTED		
Aspergillus fumigatus Qualitative (DNA)	NOT DETECTED		
Aspergillus niger Qualitative (DNA)	NOT DETECTED		
Mucor spp.(DNA)	NOT DETECTED		
Mucorale DNA	NOT DETECTED		
Rhizopus microsporus DNA	NOT DETECTED		
Rhizopus oryzae DNA	NOT DETECTED		
Rhizomucor pusillus DNA	NOT DETECTED		
Absidia corymbifera / Lichtheimia corymbifera DNA	NOT DETECTED		
Cryptococcus neoformans	NOT DETECTED		
Candida albicans DNA	NOT DETECTED		
Candida auris DNA	NOT DETECTED		

INTERPRETATION

Aspergillus fumigatus: *Aspergillus fumigatus* is a species of mold that is commonly found in the environment, especially in soil and decaying organic matter. It can cause a range of infections, particularly in people with weakened immune systems, such as those with HIV/AIDS, cancer, or undergoing organ transplantation. *Aspergillus fumigatus* infections can affect different parts of the body, including the lungs, sinuses, and brain. In the lungs, it can cause a condition called invasive pulmonary aspergillosis, which can be life-threatening. In the sinuses, it can cause chronic sinusitis, which can be difficult to treat. In the brain, it can cause a rare but serious condition called cerebral aspergillosis.

Aspergillus flavus : *Aspergillus flavus* infections can affect different parts of the body, including the lungs, sinuses, and skin. In the lungs, it can cause a condition called invasive pulmonary aspergillosis, which can be life-threatening. In the sinuses, it can cause chronic sinusitis, which can be difficult to treat. In the skin, it can cause a fungal infection called onychomycosis, which affects the nails.

Aspergillus niger : *Aspergillus niger* infections can affect different parts of the body, including the lungs, sinuses, and skin. In the lungs, it can cause a condition called invasive pulmonary aspergillosis, which can be life-threatening. In the sinuses, it can cause chronic sinusitis, which can be difficult to treat. In the skin, it can cause a fungal infection called onychomycosis, which affects the nails.

Mucorale : *Mucormycosis* is a life-threatening infection that occurs in immunocompromised patients, diabetic patients with ketoacidosis, and immunocompetent patients after trauma exposure to contaminated soil. About 20 different species from the order mucorale have been shown to be pathogenic for humans. The species that were the most frequent encountered were *Rhizopus* spp., *Mucor* spp., *Cunninghamella* spp and *Absidia* spp. The filamentous fungi responsible for these infections belong to the Mucorales order.

Candida albicans: *Candidiasis* is a fungal infection caused by yeasts in the *Candida* genus, most commonly *Candida albicans*. *Candida* yeasts are normally present in small amounts on the skin and in the mouth, digestive tract, and genital

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Customer Care	Reports
0422 - 4030201	0422 - 4030203
0422 - 4030202	0422 - 4030204



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area, but under certain conditions, they can grow and cause infections.

Rhizopus pusillus: *Rhizopus pusillus is a species of fungus belonging to the class Zygomycetes. Rhizopus pusillus can cause opportunistic infections in humans these infections can include rhinocerebral zygomycosis, which is a serious fungal infection that affects the sinuses, brain, and other organs.*

Rhizopus microsporus: *Rhizopus microsporus is a filamentous fungus is known to cause mucormycosis, a serious and potentially life-threatening fungal infection.*

Absidia corymbifera: *Absidia corymbifera is a saprophytic organism with worldwide distribution and Invasive fungal infection with Absidia corymbifera is rare opportunistic infection encountered in patient with burn injury.*

--- End of the Report ---

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