



Name : XXXXXXXXXXXX  
 Age/Gender : YY  
 Referred By : XXXXXXXXXXXX  
 Client : XXXXXXXXXXXX  
 Phone : XXXXXXXXXXXX

Id : XXXXXXXXXXXX  
 Ordered On : XXXXXXXXXXXX  
 Collected On : XXXXXXXXXXXX  
 Reported On : XXXXXXXXXXXX

TEST	RESULT	UNITS	Biological Reference Interval
<b>Orbito Viral Encephalitis - 2 (1508)</b> (Method: Multiplex Real Time PCR)			
Specimen	CSF		
Enterovirus	NOT DETECTED		
HSV - 1	<b>DETECTED (LOW LEVEL)</b>		
HSV - 2	NOT DETECTED		
Varicella Zoaster Virus	NOT DETECTED		
Cytomegalovirus	NOT DETECTED		
Episten Barr Virus	NOT DETECTED		
Adenovirus	NOT DETECTED		

**INTERPRETATION**

- Human cytomegalovirus:** Cytomegalovirus (CMV) formally designated as Human Herpes Virus 5 (HHV-5) belongs to the family Herpes viridae. It has a worldwide distribution and infects humans of all ages with no seasonal or epidemic patterns of transmission. Seroprevalence of CMV increases with age ranging from 40-100%; highest being among lower socioeconomic groups. The infections can be congenital, perinatal or postnatal.
- Epstein barr virus:** Epstein Barr virus (EBV) is the causative agent of Infectious mononucleosis (Glandular fever), Burkitt's lymphoma and Nasopharyngeal carcinoma. Symptoms of Infectious mononucleosis are fever, sore throat and swollen lymph glands. It may involve spleen or liver also. EBV associated central nervous system (CNS) disease is most commonly associated with Primary CNS Lymphoma in patients with AIDS. CNS infection may also be detected in immunocompetent patients.
- Human adenovirus:** Adenoviruses (HAdV) consist of non-enveloped dsDNA and are a common cause of respiratory illness. The symptoms can range from the common cold to pneumonia, croup and bronchitis. Depending on the type, adenoviruses can cause other illnesses such as gastroenteritis, conjunctivitis, cystitis, and less commonly neurological diseases. Adenoviral infections affect infants and young children much more frequently than adults. Severe disseminated infection can occur in immunocompromised subjects.
- Herpes simplex virus:** Herpes simplex virus (HSV) Type 1 belongs to the family Herpes viridae. HSV infections occur worldwide with no seasonal distribution. The prevalence of HSV-1 infection increases gradually from childhood, reaching 80% or more in later years. A large percentage of individuals seropositive for HSV-1 are unaware of the infection, thereby comprising an important reservoir of infection. HSV-1 infections are characterized by oral lesions like gingivostomatitis & pharyngitis.
- Varicella-zoster virus:** Varicella-zoster virus (VZV) causes both Varicella (Chickenpox) and Herpes zoster (Shingles). VZV produces a generalized vesicular rash on the dermis (Chickenpox) in normal children, usually before 10 years of age. After primary infection with VZV, the virus persists in latent form and may emerge, usually in adults 50 years of age and older clinically to cause a unilateral vesicular eruption.
- Enteroviruses:** Enteroviruses are positive-sense RNA viruses in the Picornaviridae family. These viruses were initially classified by serotype as Polioviruses (3 types), Echoviruses (31 types, including types 22 and 23, which are now classified as Parechoviruses), Coxsackie virus A (23 types), and Coxsackie virus B (6 types). The normal site of enterovirus replication is the gastrointestinal tract where the infection is typically subclinical. However, in a proportion of cases, the virus spreads to other organs, causing systemic manifestations, including mild respiratory disease (eg, the common cold); conjunctivitis; hand, foot, and mouth disease; aseptic meningitis; myocarditis; and acute flaccid paralysis. Collectively, enteroviruses are the most common cause of upper respiratory tract disease in children. In addition, the enteroviruses are the most common cause of central nervous system (CNS) disease; they account for almost all viruses recovered in culture from spinal fluid. Detection of enterovirus nucleic acid by PCR is also the most sensitive diagnostic method for the diagnosis of CNS Infection caused by these viruses.

--- End of the Report ---

**Disclaimer :**

All laboratory test results must be interpreted within the context of the patient and should be used along with other tests and clinical findings. Laboratory test results may vary depending upon age, sex, time of sample collection, diet, medication and physiological variations.

737 E, Puliyakulam Road, Coimbatore - 641 045 | E-Mail : [info@orbitoasia.com](mailto:info@orbitoasia.com) | Web : [www.orbitoasia.com](http://www.orbitoasia.com)

Coimbatore | Chennai | Tirupur | Erode | Tirunelveli | Thanjavur | Ooty | Udumalpet | Dharapuram | Kangayam

**Customer Care**

0422 - 4030201

0422 - 4030202

**Reports**

0422 - 4030203

0422 - 4030204