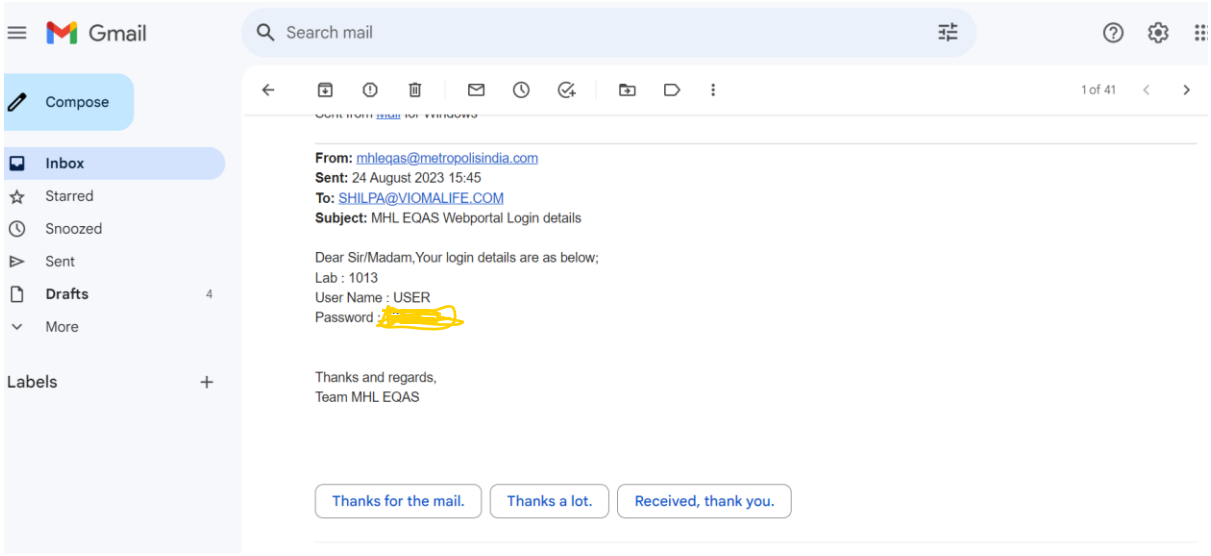
Gmail
Search mail
Compose
Inbox
Starred
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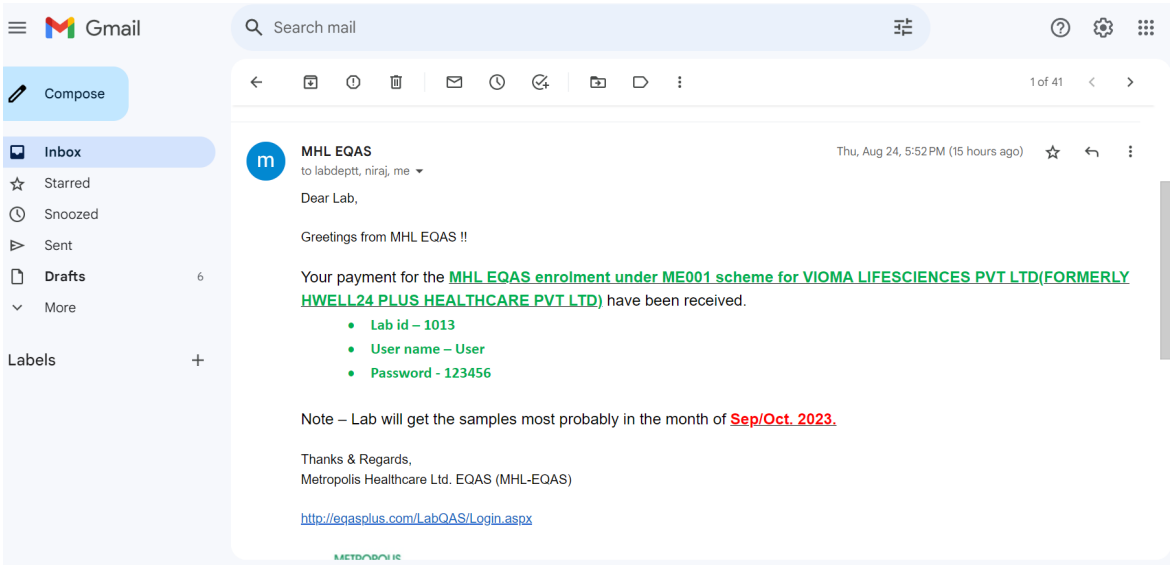
Sent
Drafts 4
More
Labels
1 of 41
From: mhleqas@metropolisindia.com
Sent: 24 August 2023 15:45
To: SHILPA@VIOMALIFE.COM
Subject: MHL EQAS Webportal Login details
Dear Sir/Madam,Your login details are as below;
Lab : 1013
User Name : USER
Password :
Thanks and regards,
Team MHL EQAS
Thanks for the mail.
Thanks a lot.
Received, thank you.


Gmail
Search mail
Compose
Inbox
Starred
Snoozed
Sent
Drafts 6
More
Labels
1 of 41
MHL EQAS
to labdeptt, niraj, me
Thu, Aug 24, 5:52 PM (15 hours ago)
Dear Lab,
Greetings from MHL EQAS !!
Your payment for the MHL EQAS enrolment under ME001 scheme for VIOMA LIFESCIENCES PVT LTD(FORMERLY HWELL24 PLUS HEALTHCARE PVT LTD) have been received.
Lab id – 1013
User name – User
Password - 123456
Note – Lab will get the samples most probably in the month of Sep/Oct. 2023.
Thanks & Regards,
Metropolis Healthcare Ltd. EQAS (MHL-EQAS)
http://eqasplus.com/LabQAS/Login.aspx

Register office: Off swami vivekanand road, Anand nagar, Sandoz Baugh, Thane MH 400607 India.
Website: www.viomalife.com CIN no: U74999MH2017PTC295120

Patient	: **JAIKEE MAURYA**	**Reg. No.**	: **00032**
Age	: **23 Years**	**Reg. Date**	: **17 Jul 2023 4:06 PM**
Sex	: **Male**	**Report Date**	: **17 Jul 2023 6:37 PM**
Ref. by	: **Self**	**Mobile No.**	: **8542046772**

Serology

TEST	RESULT	REFERENCE RANGE
HIV		
HIV 1	NON REACTIVE	
HIV 2	NON REACTIVE	
Method	Immunochromatography /Immuno-Assay	

Interpretation:
1.The above test is screening test for the detection of HIV 1 and HIV 2 in Human Serum or Plasma using recombinant proteins immobilse on an immunofiltation membrane.
2.Their antibodies have a cross recxtivity of 30 - 70 % when tested using recombinant proteins.
3.Appearance of dots of HIV 1 and HIV 2 antibodies on the devic dose not necessarily imply co infection from HIV 1 and HIV 2.
4.This only screening test All positive dectected sample should be reconfirmed by using WESTERN BLOT Techniques.
5.A Negative test result dose not exclude the possibilty of infection or exposure to HIV

HBsAG	
HBsAG Result	NON REACTIVE
Method	Hepacard test. Sensitivity: 0.5ng/ml. This is a screening test
VDRL	
Serum VDRL	NON REACTIVE
METHOD	Lateral flow immunoassay/paper chromatography
KIT USED(VDRL)	ASPEN RAPID SYPHILIS TEST
VDRL (LOT NO)	SYP20110024

Note:
Rapid test for the qualitative detection of igM, igG, IgA antibody of treponema pallidum in human serum/plasma

HCV	
HCV Result	Negative
Method	Rapid Chromatographic immunoassay
HCV Kit used	HCV CARD
HCV Kit Lot No.	HCD122251 EXP 11/24

Note:
*The Presence of Anti-HCV antibodies in serum or Plasma is an indication of an active Hepatitis C infection, either acute or Chronic
*This test is screening test and all positive test must be confirmed using an alternate test such as PCR.
*This test is intended for healthcare professional use only
Note: Kindly Co-relate Clinically

Dr. Supriya Lad Chincholkar
M.D. (Pathology)
Reg.No.: MMC REG 076789

JAIKEE MAURYA

PID NO: P112301521722/
ILC SAMPLE
Age: 23.0 Year(s) Sex: Male

Reference:
Sample Collected At:
Hwell24 Plus Healthcare Pvt. Ltd
C-211 Eastern Business District, Lbs Road, Bhandup West - 400078.
Processing Location:- Metropolis Healthcare Ltd,Unit No409-416,4th Floor,Commercial Building-1,Kohinoor Mall,Mumbai-70

VID: 230011001517034
Registered On:
18/07/2023 04:18 PM
Collected On:
18/07/2023 4:22PM
Reported On:
19/07/2023 08:42 AM

Investigation	Observed Value	Unit	Biological Reference Interval
HBsAg Screening (Serum,CMIA)	Non Reactive,0.02	IU/mL	Non Reactive: < 0.05 Reactive: >= 0.05

All Reactive results must be confirmed by Neutralizing confirmatory test or by HBV DNA detection assay.

Interpretation note : Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5mg per day) supplements, at least 8-hour wait time before blood draw is recommended.
Ref: Arch Pathol Lab Med—Vol 141, November 2017

Anti HCV-Ab to Hepatitic C Virus (Serum,CMIA)	Non Reactive,0.08	S/CO	Non Reactive: < 1.0 Reactive: >= 1.0

Interpretation :

This is a screening test detecting anti-HCV antibody. The CDC recommendation on anti-HCV testing includes the use of method specific optimal signal-to-cut-off ratio in interpretation & reporting positive results. For ECLIA - s/co ratio - between 1 to 5- further supplemental tests are suggested for confirmation, while s/co ratio > or = 5 associated with 95% or more high probability of being true positive. Supplemental testing includes more specific assays like immunoblot or HCV RNA PCR for all positive results for confirmation or to further differentiate past(resolved) and chronic infections.

HIV-DUO (IV th Generation test) (Serum,CMIA)	Non Reactive,0.19	S/CO	Non Reactive: < 1.0 Reactive: >= 1.0

Test Description : The HIV Ag/Ab Combo(HIV DUO) assay is a Screening test for simultaneous qualitative detection of HIV p24 antigen and antibodies to HIV type 1 and/or 2 in human serum or plasma. However, the HIV Ag/Ab Combo result does not distinguish between the detection of HIV p24 antigen, HIV-1 antibody, or HIV-2 antibody separately.

Test Interpretation :

- All reactive samples are tested by 3 different methods as per NACO guidelines, 2015 (Strategy) /algorithm III).
- A single test result is not always indicative of a disease and diagnosis of HIV infection must be based on results of supplemental, confirmatory tests performed on repeat sample & with clinical correlation for the patient's immune status and history.
- The test results obtained relate only to the sample given or received and tested
- Non Reactive results may not rule-out acute or early HIV infection in the window period. If acute HIV-1 infection is suspected, detection of HIV-1 RNA or HIV proviral is recommended.
- Reactive results suggest possibility of preliminary infection with HIV-1 and/or HIV-2. All reactive samples should be verified by submitting a second serum specimen for repeat testing with screening & supplemental or confirmatory HIV tests (by serology-HIV 1 & 2 western blot or molecular- HIV 1 & 2 PCR).
- For the received samples, it is presumed that patient counselling is done at referring centre or by referring physician.

Dr. BHAVYA SAXENA
M.B.B.S., M.D. (Pathology)
Consultant Pathologist,
Reg No.2014/08/3484