

** Pathologists **
Drs Dietrich, Voigt & Mia

PathCare Reference Laboratory
PathCare Park
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PracNum: 5200539

FINAL REPORT

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Doctor
GAMTOOS IRRIGATION BOARD
ATT: LEON GRUNDLING
PO BOX 237
6335 PATENSIE

Patient
KOUGADAM IRRIGATION WATER
ATT: LEON GRUNDLING
PATENSIE

Age : Sex : DOB: :U: MedAid Num NOT AVAILABLE
ID Number 21:728194140 Tel No (H) NOT AVAILABLE
Other Number V105630 Tel No (C) V105630
Specimen : 21:IF0010516R Lab Ref
Collection Date : 2021-07-22 10:30 728194140
Received Date : 2021-07-22 12:27 File No. NOT SUPPLIED/
Report Date : 2021-07-26 12:43

Clinical Data : SAMPLE/S RECEIVED IN GOOD CONDITION
RECEIVED IN PORT ELIZABETH TESTING LAB: 22/07/21 15:50
TEMPERATURE ON RECEIPT: 10 degrees celcius
PERFORMED AT 40A Park Drive, PE on: 23/07/21

* a SANAS Accredited Testing Laboratory, No. T0498. *

The following CUSTOMER INFORMATION was supplied:

- Client contact info
- Collection date
- Collection time
- Sample description / identification
- Test/s requested

Primary ICD10 Code(s) : Z76.9

Tests Requested : ~PathCare, : WATER ANALYSIS

----- Insurance -----
Source WATER Description
Procedure Result
> WATER ANALYSIS

TOTAL COLIFORM CNT/100ml: 161
E.COLI/100ml : 1

.....
: Result Interpretation :
: 0 = Not Detected / 100ml :
: :
: OPERATIONAL WATER QUALITY ALERT VALUES: :
: ----- :
: :

: 2	Lab Ref	Page
GAMTOOS IRRIGATION BOARD	728194140	KOUGADAM IRRIGATION WA
TER		
Specimen	Collection Date	Received Date
21:IF0010516R	2021-07-22 10:30	2021-07-22 12:27
43		2021-07-26 12:

----- Insurance -----

Source WATER	Description
Procedure	Result
WATER ANALYSIS	(continued...)

: If the below stated microbiological limits are exceeded, :

: an unacceptable health risk is implied: :

: Total Coliform Bacterial Count/100ml: = < 10 :

: E.coli or Faecal Coliform Bacterial Count/100ml: Not :

: Detected :

: :

: NORMATIVE REFERENCE: SANS 241 :

: :

: METHOD USED: SANS 5221 (Colilert) :

: :

: Sampling done by client. :

: Results in this report apply to the sample as received. :

: Samples from the same/similar source may deliver a :

: different result. :

: Sample information provided may affect validity of :

: results. If there is any reason to doubt the information :

: captured, we suggest re-testing of sample. :

: Please note: The test report shall not be reproduced, :

: exceptin full, without written approval of the :

: laboratory. :

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Signed Out by Melani v Tonder on 2021-07-26 12:15:00
 For consultation, contact a Pathologist - +27 41 581 2393

~ File [] Phone Patient [] Appointment [] Prescription [] Draw File []

END OF REPORT : Total Number of Pages : 2