

# Final Report

Jeffreys Bay Laboratory  
Shop 2, Surfside Centre  
37 Da Gama Road.  
Tel: 042 293 4125



Practice No:0774383

**Report to:**  
**GAMTOOS WATER USER ASSOCIATION**  
ATT: LEON GRUNDLING  
PO BOX 237  
6335 PATENSIE

**Referred by:** GAMTOOS WATER USER ASSOCIATION

**Requisition No:** 728223558  
**Specimen No:** 24:IF0009455R  
**Collection Date:** 2024-07-23 09:30  
**Received Date:** 2024-07-23 12:21  
**Reported Date:** 2024-07-26 08:35

**Patient:** (Ref No: V110013)  
**GW 11 WATER**  
**Patient ID No:** 24:728223558  
**Age:Sex:DoB:** U  
**Contact No:** 0420070382

**Guarantor:**  
**GAMTOOS WATER USER ASSOCIATION**  
**Med Aid:** CLIENTS  
**Member No:** NOT AVAILABLE  
**Contact No:** N/A

**Clinical Data:** SAMPLE/S RECEIVED IN GOOD CONDITION  
RECEIVED IN PORT ELIZABETH TESTING LAB: 07H45 24/07/2024  
TEMPERATURE ON RECEIPT: 7.2 degrees celcius  
PERFORMED AT 40A Park Drive  
PE on: 24/07/2024  
\*\*\*\*\*  
\* a SANAS Accredited Testing Laboratory  
No. T0498. \*  
\*\*\*\*\*  
The following CUSTOMER INFORMATION was supplied:  
- Client contact info  
- Collection date  
- Collection time as per telecom  
- Sample description / identification  
- Test/s requested

**Tests requested:** WATER ANALYSIS

**Referral ICD10 code(s):** Z76.9

## Infection Control

**Source:** WATER

Procedure:	Result
<b>WATER ANALYSIS</b>	
TOTAL COLIFORM CNT/100ml:	613
E. COLI/100ml	: 2

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:.....:
: Result Interpretation :
: 0 = Not Detected / 100ml :
:.....:
: OPERATIONAL WATER QUALITY ALERT VALUES: :
:-----:
: 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 (T0498); :
: SANS 5221 - Membrane filtration (T0654) :
:.....:
: 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, :
: except in full, without written approval of the :
: laboratory. :
:.....:

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Signed out by Sinead Morris on 2024-07-26 08:28  
For consultation, contact a Pathologist - +2741 391 5700

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