



Proficiency Testing (PT)

1		To b	be completed by SRL	
1	Name of the State		* All the fields are mandatory	
2	Name of District	GANJAM		
3	Name of linked SRL	MKCGMC, Behran	mpur, C *	
4	Email Address	Ictc2mkcg@gmai	iil.com *	
5	Name of the ICTC	ICTC2 MUCH.MCI	CH.BERI *	
6	SIMS Code / ID	2100417	*	
7	Round	First	* Year 2019-20 *	
11	Proficiency Testing Samples			
1	RCA/CA done for discordant samples for last round	No	Root Cause Analysis (RCA), Corrective Action (CA)	
2	Sample received Date	2019/10/29	Sample tested Date 2019/10/31	
			Filled by SRL	
3	Member-A, result	Negative	Concordant/Discordant Concordant	
4	Member-B, result	Negative	Concordant/Discordant Concordant	
5	Member-C, result	Negative	Concordant/Discordant Concordant	
6	Member-D, result	Positive	Concordant/Discordant Concordant	
7	Remarks by ICTC	concordant		
8	Date & time of data submitted by ICTC	08-02-2020 03:0	D5:51 PI PT Final Result Satisfactory	
9	Remarks by SRL	All sample are concordant		
10	Date & time of data submitted by SRL	11-02-2020 03:0	08:29 PI	
1750				

Please cross check all details before submitting

Print (2)