Neu-QAP

(an EXTERNAL QUALITY ASSURANCE PROGRAMME)

PC-1047

PARTICIPANT FINAL ASSESSMENT REPORT

PT SCHEME:SEROLOGY

Cycle No	C3
Ref.No.	NEUQAP109
Sample ID	NEUQAP SERO SERUM/2021/7/C3/S3

Report Date : 10/08/2021

Sample : July 2021

All Methods

Parameters	Lab Report	No of Participants	Consensus Report	%	Remarks
Brucella	Not Recvd.	24	Non Reactive - 24		
Brucella Antigen	Not Recvd.	3	Non Reactive - 3		
Brucella IgG	Not Recvd.	17	Non Reactive - 17		
Brucella IgM	Not Recvd.	18	Non Reactive - 18		
Chikungunya	Not Recvd.	42	Negative - 41		
			Positive - 1		
CMV IgG	Not Recvd.	42	Reactive - 42		
CMV IgM	Not Recvd.	43	Non Reactive - 43		
HBsAg	Reactive	91	Non Reactive - 4		
			Reactive - 87	96	Within Consensus
HCV	Reactive	91	Non Reactive - 16		
			Reactive - 75	82	Within Consensus
HIV-1	Reactive	91	Non Reactive - 1		
			Reactive - 90	99	Within Consensus
RPR	Reactive	88	Non Reactive - 68		
			Reactive - 20		Out of Consensus
Rubella IgG	Not Recvd.	41	Reactive - 41		
Rubella IgM	Not Recvd.	39	Non Reactive - 39		
Toxoplasma IgG	Not Recvd.	40	Non Reactive - 1		
			Reactive - 39		
Toxoplasma IgM	Not Recvd.	39	Non Reactive - 39		
Weil Felix OX19	Not Recvd.	36	Negative - 35		
			Positive - 1		

Authorised Signatory

Dr. Sujay Prasad
Technical Manager and Program coordinator

An external quality assurance program from
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CIN: U85300KA2018PTC115147

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PT SCHEME:SEROLOGY

Cycle No	C3
Ref.No.	NEUQAP109
Sample ID	NEUQAP SERO SERUM/2021/7/C3/S3

Report Date : 10/08/2021

Sample : July 2021

Peer group

Parameters	Lab Report	No of Participants	Consensus Report	%	Remarks
HBsAg (Card Method)	Reactive	13	Non Reactive - 2		
			Reactive - 11	85	Within Consensus
HCV (Card method)	Reactive	15	Non Reactive - 10		
			Reactive - 5		Out of Consensus
HIV-1 (Card method)	Reactive	11	Non Reactive - 1		
			Reactive - 10	91	Within Consensus
RPR (--OTHERS--)	Reactive	2	Reactive - 2	100	Within Consensus
Widal (Slide agglutination)	Negative	20	Negative - 20	100	Within Consensus

Note: Sample generation, homogeneity and stability testing are subcontracted to accredited laboratories

**End of report **

Authorised Signatory

Dr. Sujay Prasad
Technical Manager and Program coordinator

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RCA FORM OF ILC / PT / EQAS OUTLIERS

Department: SEROLOGY **Date:** 31/08/2021

1. Proficiency test exception for: RPR/VDRL
2. Proficiency test provider: Non SAP
3. Proficiency test analyte group: peer group
4. Cause for PT exception:

   Random error.

5. How did the section investigate the cause: Satisfactory in peer group - and Inter lab comparison with cared method was satisfactory
6. What was the status of the internal QC on the day PT initially analysed:
7. Category into which the cause will fit into:
   - A. Method
   - B. Technical
   - C. Clerical
   - D. Problem with PT material Other
   - (E.) No explanation after investigation
8. Evidence that the problem was corrected successfully:
9. Specific corrections taken to prevent the recurrence if possible:
10. Signatures :

    Quality manager:

    Pathologist:

Troubleshooting Guidelines

Method	Technical	Clerical	Problem with PT material	No explanation after investigation
Equipment function checks	Misinterpretation / Wrong identification / Wrong labeling	Transcription error	Leaked / broken vial / not fit for analysis	Use this choice only when the investigation has yielded no satisfactory explanation
Scheduled maintenance not carried out or out of acceptable range	Dilution error / incorrect pipetting	Registration of wrong method or method change is not updated	Bacterial contamination	
Problem with data processing functions	Time delay between reconstitution and analysis		Perceived survey bias / inappropriate target value	
Faulty standard or other reagent	Calculation error			
Incorrect calibration	Analysis accepted in nonlinear range		Unstable material	
Carry over from previous specimen	Analysis done even though controls were out of range or controls not assayed		Matrix effect incompatible with method	
Result close to the detection limit of method	QC data within acceptable limits but showed trend suggestive of problem with the assay		No comparable peer group	
			Acceptable range too low	
	Sample mix up		Late shipment	
Other method related problem	Other technical problem		Improper package and temperature control	

Note: When all identifiable sources of error have been excluded, a single unacceptable result may be attributed to random error, particularly when the result of repeat analysis is acceptable. In such cases, no corrective action should be taken; as such an action may actually increase the probability of a future unacceptable result.

RCA FORM OF ILC / PT / EQAS OUTLIERS

Department: SEROLOGY **Date:** 31/08/2021

1. Proficiency test exception for: HCV
2. Proficiency test provider: NEQAS
3. Proficiency test analyte group: ALL METHODS
4. Cause for PT exception:

5. How did the section investigate the cause:
ELISA, CMIA and ELFA methods which are highly sensitive whereas Immunochromatography card method are known to give false negative results (As from NEQAS)
6. What was the status of the internal QC on the day PT initially analysed:
Satisfactory in all methods and also Inter lab comparison satisfactory.
7. Category into which the cause will fit into:
   A. Method
   B. Technical
   C. Clerical
   D. Problem with PT material Other
   (E.) No explanation after investigation

8. Evidence that the problem was corrected successfully:

9. Specific corrections taken to prevent the recurrence if possible:

10. Signatures :

Quality manager:

Pathologist:

Troubleshooting Guidelines

Method	Technical	Clerical	Problem with PT material	No explanation after investigation
Equipment function checks	Misinterpretation / Wrong identification / Wrong labeling	Transcription error	Leaked / broken vial / not fit for analysis	Use this choice only when the investigation has yielded no satisfactory explanation
Scheduled maintenance not carried out or out of acceptable range	Dilution error / incorrect pipetting	Registration of wrong method or method change is not updated	Bacterial contamination	
Problem with data processing functions	Time delay between reconstitution and analysis		Perceived survey bias / inappropriate target value	
Faulty standard or other reagent	Calculation error			
Incorrect calibration	Analysis accepted in nonlinear range		Unstable material	
Carry over from previous specimen	Analysis done even though controls were out of range or controls not assayed		Matrix effect incompatible with method	
Result close to the detection limit of method	QC data within acceptable limits but showed trend suggestive of problem with the assay		No comparable peer group	
			Acceptable range too low	
	Sample mix up		Late shipment	
Other method related problem	Other technical problem		Improper package and temperature control	

Note: When all identifiable sources of error have been excluded, a single unacceptable result may be attributed to random error, particularly when the result of repeat analysis is acceptable. In such cases, no corrective action should be taken; as such an action may actually increase the probability of a future unacceptable result.

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PC-1047

PARTICIPANT FINAL ASSESSMENT REPORT

PT SCHEME:SEROLOGY

Cycle No	**C3**
Ref.No.	**NEUQAP109**
Sample ID	**NEUQAP SERO SERUM/2021/4/C3/S2**

Report Date : 23/05/2021

Sample : April 2021

All Methods

Parameters	Lab Report	No of Participants	Consensus Report	%	Remarks
Brucella	Not Recvd.	25	Non Reactive - 25		
Brucella Antigen	Not Recvd.	3	Non Reactive - 3		
Brucella IgG	Not Recvd.	14	Non Reactive - 14		
Brucella IgM	Not Recvd.	15	Non Reactive - 15		
Chikungunya	Not Recvd.	37	Negative - 37		
CMV IgG	Not Recvd.	37	Non Reactive - 1		
			Reactive - 36		
CMV IgM	Not Recvd.	38	Equivocal - 1		
			Non Reactive - 37		
HBsAg	Reactive	83	Reactive - 83	100	Within Consensus
HCV	Reactive	84	Non Reactive - 7		
			Reactive - 77	92	Within Consensus
HIV-1	Reactive	84	Non Reactive - 6		
			Reactive - 78	93	Within Consensus
RPR	Reactive	78	Non Reactive - 59		
			Reactive - 19		Out of Consensus
Rubella IgG	Not Recvd.	37	Non Reactive - 1		
			Reactive - 36		
Rubella IgM	Not Recvd.	35	Non Reactive - 34		
			Reactive - 1		
Toxoplasma IgG	Not Recvd.	34	Non Reactive - 1		
			Reactive - 33		
Toxoplasma IgM	Not Recvd.	34	Non Reactive - 34		

Authorised Signatory

Dr. Sujay Prasad
Technical Manager and Program coordinator

Kindly refer last page for a note on VDRL TEST

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PT SCHEME:SEROLOGY

Cycle No	**C3**
Ref.No.	**NEUQAP109**
Sample ID	**NEUQAP SERO SERUM/2021/4/C3/S2**

Report Date : **23/05/2021**

Sample : April 2021

Peer group

Parameters	Lab Report	No of Participants	Consensus Report	%	Remarks
HBsAg (Card Method)	Reactive	12	Reactive - 12	100	Within Consensus
HCV (Card method)	Reactive	13	Non Reactive - 7		
			Reactive - 6		Out of Consensus
HIV-1 (Card method)	Reactive	11	Non Reactive - 5		
			Reactive - 6	55	Within Consensus
RPR (--OTHERS--)	Reactive	3	Non Reactive - 1		
			Reactive - 2	67	Within Consensus
Widal (Slide agglutination)	Positive	18	Negative - 17		
			Positive - 1		Out of Consensus

Note: Sample generation, homogeneity and stability testing are subcontracted to accredited laboratories

**End of report **

Authorised Signatory

Dr. Sujay Prasad
Technical Manager and Program coordinator

Kindly refer last page for a note on VDRL TEST

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CIN: U85300KA2018PTC115147

Name	: Mr. INTERLAB COMPARTION -2	Ref. Doctor	: DR. SELF	Registered Date	: 26/08/2021 02:46 PM
Age / Sex	: 23 Year(s) / Male	Client	: Yelahanka	Collected On	: 26/08/2021 03:20 PM
Patient ID	: PDY052063			Received On	: 26/08/2021 03:21 PM
Visit No.	: 21YP99164			Reported On	: 26/08/2021 06:46 PM

21YP99164

Report Type : Final

Test	Results	Units	Biological Reference Range
HEMATOLOGY			
CBC - Complete Blood Count			
CBC			
Haemoglobin - Whole Blood Photometric (SLS Hemoglobin)	15.3	g/dL	13.5-18.0
Red blood cell count - Whole Blood Electrical impedance	4.97	million/cu.mm	4.2-6.5
Hematocrit(PCV) - Whole Blood Electrical impedance	46.1	%	39-54
Mean Corpuscular Volume(MCV) - Whole Blood Calculated from HCT and RBC	92.8	fL	75-95
Mean Corpuscular Hemoglobin(MCH) - Whole Blood Calculated from RBC and Hb	30.8	pg	26-32
Mean Corpuscular Hemoglobin Concentration (MCHC) - Whole Blood Calculated from HCT and Hb	33	g/dL	30-35
Red cell distribution width (RDW)-CV - Whole Blood Calculated	14.3	%	11.6-14.6
Platelet count - Whole Blood Electrical impedance	1.88	lakh/cu.mm	1.50-4.40
Total WBC count - Whole Blood	9400	cells/cu.mm	4000-11000
Absolute Basophil Count - Whole Blood Flow Cytometry	0.10	10^3 / µl	0.01-0.05
Absolute Eosinophil Count - Whole Blood Flow Cytometry	1.20	10^3 / µl	0.02-0.50
Absolute Lymphocyte Count - Whole Blood	2.40	10^3 / µl	1-3

Dr. Shreya Prabhu,
Pathologist
KMC No:114274

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21YP99164

Report Type : Final

Flow Cytometry			
Absolute Neutrophil Count - Whole Blood Flow Cytometry	4.90	10^3 / µl	2-7
Absolute Monocyte Count - Whole Blood Flow Cytometry	0.70	10^3 / µl	0.2-1.0
DIFFERENTIAL COUNT - DC - Whole Blood Flow Cytometry/Microscopy			
Neutrophils	52.5	%	40-75
Lymphocytes	26.1	%	20-45
Monocytes	7.7	%	1-10
Eosinophils	**13.0**	%	1-6
Basophils	0.7	%	0-1

IMMUNOLOGY

T3 (TOTAL) - Serum CLIA	1.59	ng/mL	Newborn : 0.7-2.0 < 1 Year: 1.0-2.4 1 - 5 Years : 1.0-2.4 6 - 10 Years: 0.9-2.4 11 - 50 Years: 0.7-2.0 > 50 Years: 0.4-1.8 First Trimester: 0.8-1.9 Second Trimester: 1.0-2.6

SEROLOGY

RAPID PLASMA REAGIN (RPR) / VDRL - Serum
Slide Flocculation

RAPID PLASMA REAGIN RPR / VDRL — Non Reactive

Dr. Shreya Prabhu,
Pathologist
KMC-No:114274

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JAYANAGAR
ISO 9001 : 2015 Certified

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Visit No.	: 21YP99164			Reported On	: 26/08/2021 06:46 PM

21YP99164

Report Type : Final

Test	Results	Units	Biological Reference Range
BIOCHEMISTRY			
Alanine Transaminase(ALT/ SGPT) - Serum IFCC without P-5-P	14.0	U/L	0-55
Alkaline Phosphatase - Serum IFCC PNPP	51.0	U/L	Male: 13 - 15 Year(s) : < 750 Both: 0 - 12 Year(s) : < 500 Both: 16 - 120 Year(s) : 40 - 150
Cholesterol Total - Serum CHOD-POD	158.00	mg/dl	Desirable: < 200 Borderline High: 200-239 High: > 240
Gamma-Glutamyl Transferase (GGT) - Serum Gamma--Glutamyl-p-nitroanilide IFCC	**9.0**	U/L	12-64
HDL Cholesterol - Serum Accelerator selective detergent	42.00	mg/dL	40-60
ELECTROLYTES (Na+, K+, Cl) - Serum ISE indirect			
SODIUM (Na+)	139	mmol/L	135-148
POTASSIUM (K+)	3.9	mmol/L	3.5-5.3
CHLORIDE(Cl-)	106	mmol/L	98-107

-- End of Report --

Kindly correlate clinically. If necessary discuss/repeat

Ramakrishna

Mr. Ramakrishna.B,
Biochemist

PRIMA DIAGNOSTICS
YELAHANKA

Name	: Mr. INTERLAB COMPARTION -1	Ref. Doctor	: DR. SELF	Registered Date	: 26/08/2021 02:42 PM
Age / Sex	: 22 Year(s) / Male	Client	: Walk-in	Collected On	: 26/08/2021 02:43 PM
Patient ID	: PDY052062			Received On	: 26/08/2021 02:43 PM
Visit No.	: 21YP99163			Reported On	: 27/08/2021 12:08 PM

21YP99163

Report Type : Final

Test	Results	Units	Biological Reference Range
HEMATOLOGY			
CBC - Complete Blood Count			
CBC			
Haemoglobin - EDTA Whole Blood Spectrophotometry	15.8	g/dL	13.5-18
Red blood cell count - EDTA Whole Blood RBC Histogram(Volume)	4.8	million/cu.mm	Male: 4.2-6.5 Female: 3.7-5.6
Hematocrit(PCV) - EDTA Whole Blood RBC Pulse Height detection	44.7	%	Male: 39-54 Female: 34-48
Mean Corpuscular Volume(MCV) - EDTA Whole Blood Calculate From RBC Histogram	94.2	fL	75-95
Mean Corpuscular Hemoglobin(MCH) - EDTA Whole Blood Calculated From RBC and HGB	32.0	pg	26-32
Mean Corpuscular Hemoglobin Concentration (MCHC) - EDTA Whole Blood Calculated From HGB and HCT	**35.0**	g/dL	30-35
Red cell distribution width (RDW)-CV - EDTA Whole Blood Calculated	13.2	%	11.6-14.6
Platelet count - EDTA Whole Blood Platelet Histogram(Volume)	2.05	lakh/cu.mm	1.50-4.40
Total WBC count - EDTA Whole Blood Double Hydrodynamic Sequential System(DHSS)	8880	cells/cu.mm	4000-11000
Absolute Basophil Count - EDTA Whole Blood Flow Cytometry	0.02	10^3 / µl	0.01-0.05
Absolute Eosinophil Count - EDTA Whole Blood	**1.06**	cells/cu.mm	0.01-0.50

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KMC NO:95296

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PRIMA DIAGNOSTICS
YELAHANKA

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Visit No.	: 21YP99163			Reported On	: 27/08/2021 12:08 PM

21YP99163

Report Type : Final

Double Hydrodynamic Sequential System(DHSS) Absolute Lymphocyte Count - EDTA Whole Blood Double Hydrodynamic Sequential System(DHSS) -	2.29	cells/cu.mm	1-3
Absolute Neutrophil Count - EDTA Whole Blood Flow Cytometry	4.90	10^3 / µl	2-7
Absolute Monocyte Count - EDTA Whole Blood Flow Cytometry	0.61	10^3 / µl	0.2-1.0

DIFFERENTIAL COUNT - DC

Neutrophils - EDTA Whole Blood DHSS / Microscopy	55	%	40-75
Lymphocytes - EDTA Whole Blood DHSS / Microscopy	26	%	20-45
Monocytes - EDTA Whole Blood Flow Cytometry/Microscopy	06	%	1-10
Eosinophils - EDTA Whole Blood DHSS / Microscopy	**12**	%	1-6
Basophils - EDTA Whole Blood DHSS / Microscopy	01	%	0-1

BIOCHEMISTRY

Alanine Transaminase(ALT/ SGPT) - Serum UV with P-5-P Dry Chemistry	15.0	U/L	Adult: < 45
Alkaline Phosphatase - Serum Para Nitro Phenyl Phosphate,AMP Buffer Dry Chemistry	**52.0**	U/L	53-128
Cholesterol Total - Serum Cholesterol Oxidase Dry Chemistry	153.0	mg/dl	Desirable: < 200 BorderLine High: 200-239 High: >= 240

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Age / Sex	: 22 Year(s) / Male	Client	: Walk-in	Collected On	: 26/08/2021 02:43 PM
Patient ID	: PDY052062			Received On	: 26/08/2021 02:43 PM
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21YP99163

Report Type : Final

Gamma-Glutamyl Transferase (GGT) - Serum ?-glutamyl-p-nitroanilide Dry Chemistry	14.0	U/L	< 55
HDL Cholesterol - Serum Colorimetric: non HDL Precipitation Method	**43.0**	mg/dL	Low: < 40.0 High: >= 60.0
ELECTROLYTES (Na+, K+, Cl) - Serum DIRECT ISE			
SODIUM (Na+)	141.5	mmol/L	137-145
POTASSIUM (K+)	3.81	mmol/L	3.5-5.1
CHLORIDE(Cl-)	105.5	mmol/L	98-107

IMMUNOLOGY

T3 (TOTAL) - Serum Enhanced Chemiluminescence	1.27	ng/mL	Newborn: 0.7-2.0 < 1 Year: 1.0-2.4 1 - 5 Years: 1.0-2.4 6 - 10 Years: 0.9-2.4 11 - 50 Years: 0.7-2.0 > 50 Years: 0.4-1.8 First Trimester: 0.8-1.9 Second Trimester: 1.0-2.6

SEROLOGY

RAPID PLASMA REAGIN (RPR) / VDRL

RAPID PLASMA REAGIN RPR / VDRL - Serum, Slide Flocculation	Non Reactive	
INTERPRETATION - Serum	Non Reactive	

-- End of Report --

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21YP99163

Report Type : Final

Kindly correlate clinically. If necessary discuss/repeat

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