

Neu-QAP

(an EXTERNAL QUALITY ASSURANCE PROGRAMME)



| Cycle No | СЗ |
|-----------|-------------------------------|
| Ref.No. | NEUQAP189 |
| Sample ID | NEUQAP HEM BLOOD/2021/9/C3/S9 |

Report Date: 18/10/2021

Sample: SEP 2021

All Methods

| | Parameters | Labs (n) | Lab Value | Unit | Assigned value | SDPA | Um | Z-Score | Remarks |
|----|----------------|-------------|--------------|---------------|----------------|-------|-------|---------|--------------|
| 1 | TOTAL COUNT | 43 | 1.64 | 10^3/c umm | 4.12 | 1.15 | 0.219 | 2.17 | Questionable |
| 2 | Neutrophils | 40 | 6.80 | % | 48.30 | 19.99 | 3.951 | 2.08 | Questionable |
| 3 | Lymphocyte | 40 | 83.90 | % | 39.23 | 16.75 | 3.310 | 2.67 | Questionable |
| 4 | HEMOGLOBIN | 46 | 12.30 | g/dL | 12.05 | 0.23 | 0.043 | 1.07 | Satisfactory |
| 5 | RBC | 47 | 3.94 | 10^6/c umm | 3.84 | 0.07 | 0.013 | 1.33 | Satisfactory |
| 6 | MCV | 47 | 94.20 | fl | 96.91 | 2.50 | 0.456 | 1.09 | Satisfactory |
| 7 | ANC | 32 | 0.11 | 10^3/c umm | 2.32 | 1.12 | 0.247 | 1.98 | Satisfactory |
| 8 | Monocyte | 40 | 1.90 | % | 5.45 | 3.01 | 0.594 | 1.18 | Satisfactory |
| 9 | Eosinophils | 40 | 6.30 | % | 3.36 | 1.59 | 0.315 | 1.85 | Satisfactory |
| 10 | PLATELET COUNT | 43 | 190.00 | 10^3/c umm | 196.26 | 11.12 | 2.119 | 0.56 | Good |
| 11 | мсн | 47 | 31.10 | pg | 31.33 | 0.52 | 0.095 | 0.44 | Good |
| 12 | мснс | 47 | 33.00 | g/dL | 32.30 | 0.97 | 0.177 | 0.73 | Good |
| 13 | AEC | 32 | 0.10 | 10^3/c umm | 0.13 | 0.06 | | 0.49 | Good |
| 14 | ALC | 32 | 1.38 | 10^3/c umm | 1.34 | 0.20 | 0.044 | 0.20 | Good |
| 15 | Basophils | 39 | 1.10 | % | 1.61 | 1.46 | 0.292 | 0.35 | Good |
| 16 | Hematocrit | 39 | 37.10 | % | 37.26 | 0.95 | 0.190 | 0.17 | Good |
| 17 | CD4 | 1 | Not Recvd | cells/dl | 280.00 | | | | N/A |

Authorised Signatory

* denotes adjusted SDPA as per ISO 13528:2015(E) SDPA - Standard Deviation for Proficiency Assessment

Dr. Sujay Prasad Technical Manager and Program coordinator

This report is for use only by the intended participant.



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| Sample ID | NEUQAP HEM BLOOD/2021/9/C3/S9 |

Report Date: 18/10/2021

Sample: SEP 2021

Interpretation of z scores is as follows:

|Zscore|≤1.0 - Good

| Z score | between 1.0 to 2.0 - Satisfactory

| Z score | between 2.0 to 3.0 - Questionable

|Zscore|≥3.0 - Unsatisfactory

Authorised Signatory

Dr. Sujay Prasad Technical Manager and Program coordinator * denotes adjusted SDPA as per ISO 13528:2015(E) SDPA - Standard Deviation for Proficiency Assessment

Page 2 of 2



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PROFICIENCY TESTING REPORT

ISHTM-AIIMS EXTERNAL QUALITY ASSURANCE PROGRAMME



NABL accredited program as per ISO/IEC 17043:2010 standard Organized By Department of Hematology, AIIMS, New Delhi-110029

Duration of stability testing - minimum upto 8 days at ambient temp. after dispatch of specimens

Instrument ID: 710YOXH01128

Name & Contact No. of PT Co-ordinator: Dr. Seema Tyagi (Prof.), Hematology, AIIMS, Delhi,

Tel: 9013085730 , E-Mail : accuracy2000@gmail.com **Date of issue & status of the report:** 13-09-2021[Final].

CBC and Retic Assessment

| | | | | Among Lab (Accuracy Testing) | | | | Within Lab (Precision Testing) | | | | |
|--------------------------|-------|---------------------|--------------------|---|---|-------------|-------|--------------------------------|------|--------------------------------------|------------|--|
| Test Parameters | S.No. | Your Result 1 | | Your Results Sum of 2 Value | Consensus result sum of 2 values (Assigned Value) | Uncertainty | | Results | | Uncertainty of Assigned Values | Z Score | |
| WBC x10³/μl | 1 | 6.85 | 4.96 | 11.81 | 5.5 | 0.0230 | 10.84 | 1.89 | 0.08 | 0.0050 | 27.13 | |
| RBC x10 ⁶ /μl | 1 | 3.85 | 3.82 | 7.67 | 7.54 | 0.0070 | 0.70 | 0.03 | 0.03 | 0.0020 | 0.00 | |
| Hb g/dl | 1 | 12.1 | 12 | 24.1 | 23.8 | 0.0200 | 0.58 | 0.1 | 0.1 | 0.0070 | 0.00 | |
| НСТ% | 1 | 37.8 | 37. <mark>5</mark> | 75.3 | 74.3 | 0.1290 | 0.27 | 0.3 | 0.3 | 0.0230 | 0.00 | |
| MCV-fl | 1 | 98.1 | 97.9 | 196 | 196.6 | 0.2900 | -0.07 | 0.2 | 0.3 | 0.0250 | -0.22 | |
| MCH-Pg | 1 | 31.5 | 31.4 | 62.9 | 63.1 | 0.0300 | -0.13 | 0.1 | 0.2 | 0.0160 | -0.45 | |
| MCHC-g/dl | 1 | 32.1 | 32.1 | 64.2 | 64.2 | 0.1170 | 0.00 | 0 | 0.2 | 0.0170 | -0.90 | |
| Plt. x10³/μl | 1 | 141 | 126 | 267 | 222 | 1.09 | 1.41 | 15 | 4 | 0.28 | 2.12 | |
| Retic % | 2 | 0.7 | 0.5 | 1.2 | 1.2 | 0.03 | 0.00 | 0.2 | 0.1 | 0.01 | 1.35 | |

P.S. Assesment

| | | YOUR REPORT | CONSENSUS REPORT |
|-------------------|---|--------------------------|---|
| DLC% | 3 | | Poly: 40 - 60, Myelo: 10 - 25, Meta: 5 - 20, Promyelo: 1-10, nRBC/Lympho/Blast/Eos/Baso/Mono: 0 - 5 |
| RBC Morphology | 3 | | Predominantly: Normocytic/Normochromic; Moderate: Anisocytosis, hypochromia, Microcytosis; Mild: Macrocytosis, Poikilocytosis |
| Diagnosis | 3 | Chronic Myeloid Leukemia | Chronic Myeloid Leukemia (Chronic Phase) |

COMBINED DATA VALUES OF TOTAL PARTICIPANTS

| Test | C No | Total participants covered in | Total No. | % of Labs with Z Score 0-2 | | % of Labs with Z Score 2-3 | | % of Labs with Z Score >3 | |
|--------------------------|-------|-------------------------------|-----------|-------------------------------|--------------------|-------------------------------|------------|------------------------------|---------------|
| parameters | S.No. | the current dist. | responded | Among labs | Within lab | Among labs | Within lab | Among labs | Within lab |
| WBC x10³/μl | 1 | 317 | 315 | 84.76 | 87.94 | 3.49 | 1.59 | 11.75 | 9.84 |
| RBC x10 ⁶ /μl | 1 | 317 | 315 | 92.7 | 91.11 | 4.13 | 3.81 | 3.17 | 4.76 |
| Hb g/dl | 1 | 317 | 315 | 88.25 | 91.75 | 6.67 | 0.32 | 5.08 | 4.44 |
| НСТ% | 1 | 317 | 315 | 95.24 | 90.16 | 2.22 | 3.49 | 2.54 | 6.03 |
| MCV-fl | 1 | 317 | 315 | 96.51 | <mark>9</mark> 2.7 | 2.22 | 3.17 | 1.27 | 4.13 |
| MCH-Pg | 1 | 317 | 315 | 88.57 | 91.75 | 8.25 | 3.49 | 3.17 | 4.76 |
| MCHC-g/dl | 1 | 317 | 315 | 94.6 | 88.25 | 3.49 | 3.17 | 1.9 | 8.57 |
| Plt. x10³/μl | 1 | 317 | 315 | 93.33 | 90.48 | 4.44 | 4.13 | 2.22 | 5.4 |
| ReticCount% | 2 | 317 | 283 | 90.46 | 87.63 | 4.95 | 6.71 | 3.89 | 5.65 |
| PS Assessment | 3 | 317 | 296 | Acceptable | e:98.65%,W | arning Sig | nal:1.35% | ,Unaccepta | ble :0% |

*Comments:

- 1). Among Lab (EQA): CBC result for WBC unacceptable, may be due to random/human error
- 2). Within Lab (IQA): Difference in the CBC measurement values for WBC unacceptable, may be due to random/human error.

Note-1: EQA (External Quality Assurance): Your Performance among various of participating labs in PT, to determine the accuracy of your results.

IQA (Internal Quality Assurance): Your Performance of comparison of two consecutive measurement values within your lab to test the precision of your autoanalyzer.

Note-2: Z score among & within lab were calculated, as per to ISO/IEC 13528:2015 standard. Z score among lab (EQA)= (Your Result Sum of two values - Consensus Result sum of two values)/(Normalised IQR)

Z score within lab (IQA)= (Your Result Difference of two values - Consensus Result difference of two values)/(Normalised IQR)

IQR = Quartile 3 - Quartile 1 of participant data, Normalised IQR = 0.7413 x IQR

Note-3: Z score 0 to ± 2 : Acceptable, Z score ± 2 to ± 3 : Warning Signal, Z score $> \pm 3$: Unacceptable [As per ISO/IEC 13528:2015 standard]

Note-4: Z score value between "0 to ± 2 " are texted in green colour. Z score value between " ± 2 to ± 3 " are texted in orange colour. Z score value $> \pm 3$ are texted in red colour.

Note-5: Homogeneity and stability testing of PT sample were done as per ISO 13528:2015 standard. To pass homogeneity test, between sample SD (Ss) should be smaller than the check value (0.3*SDPA). To pass the stability test, average difference in measurement values of first and last day sample $(\bar{x}-\bar{y})$ should be smaller than the check value (0.3*SDPA).

Note-6: ISHTM-AIIMS-EQAP does not subcontract any task of its scheme

Note-7: Participants are free to use methods/analyzer of their own choice.

Note-8: Proficiency testing (PT) samples are sent quarterly to each participant.

Note-9: All the necessary details regarding design and implementation of PT, are provided in the instruction sheet as well as on programme's website www.ishtmaiimseqap.com.

Report authorized by,

Dr. Seema Tyagi (Prof.)

PT Co-ordinator: ISHTM-AIIMS-EQAP

Department of Hematology, AIIMS, New Delhi

-----End Of Report-----



RCA FORM OF ILC / PT / EQAS OUTLIERS

| Department: Date: / | 8/9/21 |
|--|--|
| 1. Proficiency test exception for: WBC COUNT | of Date:- |
| 2. Proficiency test exception ion. PV BC Proficiency test provider: 18HTM AIIMS AUGUST 2021 Leps | 3/9/21 |
| 3. Proficiency test analyte group: PEER METHOD | |
| 4. Cause for PT exception: - WBC Count investigation corried out by HORIBA To Letter Attacked), Duther dove to limited PEER grant for HORIBA YUMIZEN. However HORIBA YUMIZEN how I how be to be the Bear of the Cause: Succenfully validated on Beard attacked Duther is we to HORIBA | Team oup data been PIORAD and QAS |
| 6. What was the status of the internal QC on the day PT initially analysed: | |
| 7. Category into which the cause will fit into: | |
| Method Te | echnique |
| Clerical No explanation after investigation | |
| Problem with PT material Other RANDOM | |
| 8. Evidence that the problem was corrected successfully: - Horiba Team is Working on this soncern. - We have enrolled for an additional EPAS Program 9. Specific corrections taken to prevent the recurrence if possible: 0 19C and LJ Chart for WBC is in range. 0 Enrollment for additional EQAS Programme by NEUQAI 10. Signatures:: Quality manager: 1 M C | nore by NEUPAP. P [faulti an airted] |
| Pathologist: | |
| | *. |
| | |



HORIBA India Private Limited

246, Okhla Industrial Estate Phase-III, New Delhi 110020, India Tel :+91 (11) 4646 5000 / 4669 5001 Fax :+91 (11) 4646 5020 https://www.horiba.com CIN :U73100DL2006PTC153232

14th, April 2021

To Whom so ever it may concern

Subject: Proficiency Testing

Dear Sir / Madam,

We would like to inform that performance of HORIBA Yumizen 500/550 has been successfully validated on different Proficiency testing programs, including Bio-Rad (EQAS) & Randox (RIQAS) programs. There are large number of users across the globe including India using Bio-Rad (EQAS) & Randox (RIQAS) successfully.

However, we had received few concerns specially with non-correlation of WBC counts from customers enrolled with AIIMS proficiency testing. In Initial investigation we had observed that there are limited Peer group data for HORIBA Yumizen 500/550 which might be reasons for difference in correlation. However, our technical team is working on the same and any development would be shared shortly.

Thank you for your continued trust in HORIBA Medical products & let us know should you need any additional information.





PROFICIENCY TESTING REPORT

ISHTM-AIIMS EXTERNAL QUALITY ASSURANCE PROGRAMME

NABL accredited program as per ISO/IEC 17043:2010 standard Organized By Department of Hematology, AIIMS, New Delhi-110029

Duration of stability testing - minimum upto 8 days at ambient temp. after dispatch of specimens

EQAP CODE No.: 1302 **Distribution No.**: 152-D **Month/Year:** February/2021

Instrument ID: 710YOXH01128

Name & Contact No. of PT Co-ordinator: Dr. Seema Tyagi (Prof.), Hematology, AIIMS, Delhi,

 $\label{eq:compare} Tel: 9013085730 \ , \ E-Mail: accuracy 2000@gmail.com \\ \textbf{Date of issue \& status of the report: } 02-03-2021[Final].$

CBC and Retic Assessment

| | | | | Amo | ng Lab (Acc | curacy Testin | Within Lab (Precision Testing) | | | | |
|--------------------------|-------|---------------------|------|---|--|--------------------------------------|--------------------------------|---------|--|--------------------------------------|------------|
| Test Parameters | S.No. | Your Result 1 | | Your Results Sum of 2 Value | Consensus result sum of 2 values (Assigned Value) | Uncertainty of Assigned Values | Z Score | Doculte | Consensus Result Diff. of 2 values (Assigned Value) | Uncertainty of Assigned Values | Z Score |
| WBC x10³/μl | 1 | 1.06 | 0.92 | 1.98 | 5.5 | 0.0200 | -6.17 | 0.14 | 0.1 | 0.0050 | 0.62 |
| RBC x10 ⁶ /μl | 1 | 4.57 | 4.47 | 9.04 | 9.32 | 0.0080 | -1.35 | 0.1 | 0.03 | 0.0020 | 2.36 |
| Hb g/dl | 1 | 13.7 | 13.7 | 27.4 | 27 | 0.0200 | 0.67 | 0 | 0.1 | 0.0070 | -1.35 |
| НСТ% | 1 | 39.1 | 38.3 | 77.4 | 83.9 | 0.1780 | -1.11 | 0.8 | 0.3 | 0.0200 | 1.35 |
| MCV-fl | 1 | 85.8 | 85.7 | 171.5 | 179.9 | 0.3170 | -0.80 | 0.1 | 0.2 | 0.0170 | -0.45 |
| МСН-Рд | 1 | 30.6 | 29.9 | 60.5 | 57.7 | 0.0540 | 1.84 | 0.7 | 0.2 | 0.0140 | 2.25 |
| MCHC-g/dl | 1 | 35.7 | 34.9 | 70.6 | 64.15 | 0.1300 | 1.44 | 0.8 | 0.3 | 0.0120 | 1.69 |
| Plt. x10³/μl | 1 | 127 | 121 | 248 | 196 | 0.75 | 2.44 | 6 | 4 | 0.26 | 0.45 |
| Retic % | 2 | 2 | 1.7 | 3.7 | 5 | 0.08 | -0.57 | 0.3 | 0.2 | 0.01 | 0.34 |

P.S . Assesment

| | | YOUR REPORT | CONSENSUS REPORT |
|-------------------|---|--|---|
| DLC% | 3 | Mono/Promono=3 , B1=- P.M.=-, Mye=-, Meta=-, Other= | nRBC: 30 - 65, Poly: 60 - 75, Lympho: 15-30, Eos/Mono: 1-5, Blast/Myelo/Meta: 0-1 |
| RBC Morphology | 3 | macrocytes, microcytic hypochromic cells, target cells, tear drop cells, polychromatophils and nucleated erythrocytes | Predominantly: Macrocytosis, Microcytosis, Spherocytosis, Polychromasia, Anisocytosis; Moderate: Normocytic/Normochromic, Hypo. |
| Diagnosis | 3 | Haemolytic Anaemia | Hemolytic Anemia |

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COMBINED DATA VALUES OF TOTAL PARTICIPANTS

| Test | C No | Total participants covered in | Total No. | % of Labs with Z Score 0-2 | | % of Labs with Z Score 2-3 | | % of Labs with Z Score >3 | |
|--------------------------|-------|-------------------------------------|-----------|-------------------------------|---------------|-------------------------------|---------------|------------------------------|---------------|
| parameters | S.No. | the current dist. | responded | Among labs | Within lab | Among labs | Within lab | Among labs | Within lab |
| WBC x10³/μl | 1 | 312 | 346 | 89.31 | 92.2 | 2.31 | 1.45 | 8.38 | 6.36 |
| RBC x10 ⁶ /μl | 1 | 312 | 346 | 89.88 | 91.04 | 6.94 | 3.47 | 3.18 | 5.2 |
| Hb g/dl | 1 | 312 | 347 | 91.07 | 99.42 | 6.92 | 3.17 | 2.02 | 0.58 |
| HCT% | 1 | 312 | 346 | 97.69 | 92.2 | 1.73 | 3.47 | 0.58 | 4.34 |
| MCV-fl | 1 | 312 | 345 | 97.68 | 86.09 | 1.45 | 8.99 | 0.87 | 4.93 |
| MCH-Pg | 1 | 312 | 346 | 91.62 | 91.04 | 6.07 | 3.47 | 2.31 | 5.49 |
| MCHC-g/dl | 1 | 312 | 346 | 98.55 | 92.2 | 0.29 | 3.76 | 1.16 | 3.76 |
| Plt. x10³/μl | 1 | 312 | 346 | 93.35 | 91.91 | 3.47 | 5.49 | 3.18 | 2.6 |
| ReticCount% | 2 | 312 | 318 | 93.71 | 86.48 | 4.09 | 2.2 | 2.2 | 11.64 |
| PS Assessment | 3 | 312 | 312 | Acceptable | :91.4,Warı | ning Signal | :7.7,Unaco | eptable :0. | 9 |

*Comments:

- 1). Among Lab (EQA): CBC result for WBC unacceptable, may be due to random/human error
- 2). Within Lab (IQA): Precision acceptable.

Note-1: EQA (External Quality Assurance): Your Performance among various of participating labs in PT, to determine the accuracy of your results.

IQA (Internal Quality Assurance): Your Performance of comparison of two consecutive measurement values within your lab to test the precision of your autoanalyzer.

Note-2: Z score among & within lab were calculated, as per to ISO/IEC 13528:2015 standard. Z score among lab (EQA)= (Your Result Sum of two values - Consensus Result sum of two values)/(Normalised IQR)

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IQR = Quartile 3 - Quartile 1 of participant data, Normalised IQR = 0.7413 x IQR

Note-3: Z score 0 to ±2: Acceptable, Z score ±2 to ±3: Warning Signal, Z score > ±3: Unacceptable [As per ISO/IEC 13528:2015 standard]

Note-4: Z score value between "0 to ± 2 " are texted in green colour. Z score value between " ± 2 to ± 3 " are texted in orange colour. Z score value $> \pm 3$ are texted in red colour.

Note-5: Homogeneity and stability testing of PT sample were done as per ISO 13528:2015 standard. To pass homogeneity test, between sample SD (Ss) should be smaller than the check value (0.3*SDPA). To pass the stability test, average difference in measurement values of first and last day sample $(\bar{x}-\bar{y})$ should be smaller than the check value (0.3*SDPA).

Note-6: ISHTM-AIIMS-EQAP does not subcontract any task of its scheme

Note-7: Participants are free to use methods/analyzer of their own choice.

Note-8: Proficiency testing (PT) samples are sent quarterly to each participant.

Note-9: All the necessary details regarding design and implementation of PT, are provided in the instruction sheet as well as on programme's website www.ishtmaiimsegap.com.

Report authorized by,

Dr. Seema Tyagi (Prof.)

PT Co-ordinator: ISHTM-AIIMS-EQAP

Department of Hematology, AIIMS, New Delhi

-----End Of Report-----



RCA FORM OF ILC / PT / EQAS OUTLIERS

| | partment: HAEMATOLOGY | Date: | 9/9/21 |
|----------------|--|---|------------------------------------|
| 1. | Proficiency test exception for: WBC Febr Proficiency test provider: 15HTM AIIM. | nary 2021 Cycle | Report on 7 2/3/21 |
| 2. | Proficiency test provider: 15HTM AIM. | 5 | |
| 3. | Proficiency test analyte group: PEER / METH | to D | |
| 4. | Cause for PT exception: In Initial investigation carried limited feer group data for Horist be the cause of WBC outlier (Horist How did the section investigate the cause: We had escalated the outlier | out by HORIBA, A YUMIZEN 500/550 21BA'S PT Testing & | they observed, this could tatement |
| 5. | How did the section proestigate the cause: We had excalated the outlier | r issue to Hory | Hached) BA. |
| | However their HORIBA YUMIZEN K What was the status of the internal QC on the day PT | Team is still wo an been successfully of initially analysed: B1 | validated in ORAD a |
| | IPC had passed. | <i>1 K i</i> | ANDOX EQAS |
| 7. | Category into which the cause will fit into: | | |
| | , Method | Technique | |
| | Clerical No explanation after investi | gation | |
| 4 | Problem with PT material Other | | |
| ① 9. | Evidence that the problem was corrected successfully Awaiting results of August 2021 / Horisa Team is working on this Specific corrections taken to prevent the recurrence in Wall Williams Will | SHTM EQAS | will be in rest cycle. |
| (2 | Signatures: | n range. | que. |
| | Quality manager: M-C | | |
| | Pathologist: M. M. C. | • | * |



Troubleshooting Guidelines

| Method | Technical | Clerical | Problem with PT | No explanation |
|--|---|--|--|---|
| ir | St. W.D | | material | 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 | 0 | đ | · | 2 |
| 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 | • |
| | The second section of the section | | Acceptable range too low | |
| | Sample mix up | | Late shipment | 8 |
| 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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NABL accredited program as per ISO/IEC 17043:2010 standard Organized By Department of Hematology, AIIMS, New Delhi-110029

Duration of stability testing - minimum upto 8 days at ambient temp. after dispatch of specimens

Instrument ID: 710YOXH01128

Name & Contact No. of PT Co-ordinator: Dr. Seema Tyagi (Prof.), Hematology, AIIMS, Delhi,

Tel: 9013085730 , E-Mail : accuracy2000@gmail.com **Date of issue & status of the report:** 27-11-2020[Final].

CBC and Retic Assessment

| | | | | Amo | ng Lab (Acc | curacy Testin | Within Lab (Precision Testing) | | | | |
|--------------------------|-------|---------------------|------|---|---|---------------|--------------------------------|---------|------|--------------------------------------|------------|
| Test Parameters | S.No. | Your Result 1 | | Your Results Sum of 2 Value | Consensus result sum of 2 values (Assigned Value) | Uncertainty | | Results | | Uncertainty of Assigned Values | Z Score |
| WBC x10³/μl | 1 | 3.18 | 2.7 | 5.88 | 9.8 | 0.0460 | -2.76 | 0.48 | 0.1 | 0.0060 | 3.66 |
| RBC x10 ⁶ /μl | 1 | 3.2 | 3.18 | 6.38 | 6.4 | 0.0060 | -0.11 | 0.02 | 0.03 | 0.0010 | -0.27 |
| Hb g/dl | 1 | 11.5 | 11.4 | 22.9 | 23.4 | 0.0210 | -0.84 | 0.1 | 0.1 | 0.0070 | 0.00 |
| НСТ% | 1 | 34.9 | 34.7 | 69.6 | 72.05 | 0.1860 | -0.40 | 0.2 | 0.3 | 0.0200 | -0.27 |
| MCV-fl | 1 | 109.1 | 109 | 218.1 | 223.5 | 0.4950 | -0.31 | 0.1 | 0.3 | 0.0230 | -0.45 |
| MCH-Pg | 1 | 36 | 35.8 | 71.8 | 73.2 | 0.0760 | -0.67 | 0.2 | 0.3 | 0.0200 | -0.34 |
| MCHC-g/dl | 1 | 33 | 32.8 | 65.8 | 65.3 | 0.1640 | 0.09 | 0.2 | 0.3 | 0.0200 | -0.34 |
| Plt. x10³/μl | 1 | 276 | 275 | 551 | 512 | 1.38 | 1.02 | 1 | 6 | 0.32 | -0.87 |
| Retic % | 2 | 3.5 | 3 | 6.5 | 7.2 | 0.13 | -0.19 | 0.5 | 0.3 | 0.02 | 0.72 |

P.S. Assesment

| | | YOUR REPORT | CONSENSUS REPORT | | | | | |
|-------------------|---|------------------------|--|--|--|--|--|--|
| DLC% | 3 | | Poly: 25-50, Lymph; 2-7, nRBC/Mono/Eo/Blast/Pro: 0-5, Myelo: 20-35, Meta: 15-25, Baso: 0-3 | | | | | |
| RBC Morphology | 3 | 1 " | Predominantly: Normocytic Normochromic. Moderate: Anisocytosis. Mild: Microcytic | | | | | |
| Diagnosis | 3 | Acute Myeloid Leukemia | Chronic Myeloid Leukemia (Chronic Phase) : CML-CP | | | | | |

COMBINED DATA VALUES OF TOTAL PARTICIPANTS

| Test | S.No. | Total participants covered in the current dist. | Total No. responded | % of Labs with Z Score 0-2 | | % of Labs with Z Score 2-3 | | % of Labs with Z Score >3 | |
|--------------------------|-------|---|------------------------|---|--------------------|-------------------------------|---------------|------------------------------|---------------|
| parameters | | | | Among labs | Within lab | Among labs | Within lab | Among labs | Within lab |
| WBC x10³/μl | 1 | 450 | 362 | 88.67 | 86.46 | 4.7 | 5.8 | 6.63 | 7.73 |
| RBC x10 ⁶ /μl | 1 | 450 | 3 <mark>62</mark> | 88.67 | 89.23 | 4.97 | 6.08 | 6.35 | 4.7 |
| Hb g/dl | 1 | 450 | 363 | 85.12 | 90.91 | 6.34 | 0.28 | 8.54 | 4.68 |
| HCT% | 1 | 450 | 362 | 95.03 | 92.54 | 3.04 | 2.76 | 1.93 | 4.7 |
| MCV-fl | 1 | 450 | 361 | 98.34 | <mark>9</mark> 2.8 | 0.55 | 3.05 | 1.11 | 4.16 |
| MCH-Pg | 1 | 450 | 361 | 89.47 | 91.41 | 5.54 | 5.26 | 4.99 | 3.05 |
| MCHC-g/dl | 1 | 450 | 362 | 97.24 | 87.29 | 1.38 | 6.08 | 1.38 | 6.08 |
| Plt. x10³/μl | 1 | 450 | 362 | 90.06 | 91.16 | 5.25 | 5.52 | 4.7 | 3.31 |
| ReticCount% | 2 | 450 | 323 | 92.88 | 83.59 | 4.33 | 1.55 | 2.79 | 16.1 |
| PS Assessment | 3 | 450 | 332 | Acceptable:75.4%, Warning Signal:24.6%, Unacceptable:0% | | | | | |

*Comments:

- 1). Among Lab (EQA): PS partially correct, remaining results acceptable
- 2). Within Lab (IQA): Difference in the CBC measurement values for WBC unacceptable, may be due to random/human error.

Note-1: EQA (External Quality Assurance): Your Performance among various of participating labs in PT, to determine the accuracy of your results.

IQA (Internal Quality Assurance): Your Performance of comparison of two consecutive measurement values within your lab to test the precision of your autoanalyzer.

Note-2: Z score among & within lab were calculated, as per to ISO/IEC 13528:2015 standard. Z score among lab (EQA)= (Your Result Sum of two values - Consensus Result sum of two values)/(Normalised IQR)

Z score within lab (IQA)= (Your Result Difference of two values - Consensus Result difference of two values)/(Normalised IQR)

 $IQR = Quartile \ 3$ - Quartile 1 of participant data, Normalised $IQR = 0.7413 \ x \ IQR$

Note-3: Z score 0 to ± 2 : Acceptable, Z score ± 2 to ± 3 : Warning Signal, Z score $> \pm 3$: Unacceptable [As per ISO/IEC 13528:2015 standard]

Note-4: Z score value between "0 to ± 2 " are texted in green colour. Z score value between " ± 2 to ± 3 " are texted in orange colour. Z score value $> \pm 3$ are texted in red colour.

Note-5: Homogeneity and stability testing of PT sample were done as per ISO 13528:2015 standard. To pass homogeneity test, between sample SD (Ss) should be smaller than the check value (0.3*SDPA). To pass the stability test, average difference in measurement values of first and last day sample (\overline{x} - \overline{y}) should be smaller than the check value (0.3*SDPA).

Note-6: ISHTM-AIIMS-EQAP does not subcontract any task of its scheme

Note-7: Participants are free to use methods/analyzer of their own choice.

Note-8: Proficiency testing (PT) samples are sent quarterly to each participant.

Note-9: All the necessary details regarding design and implementation of PT, are provided in the instruction sheet as well as on programme's website www.ishtmaiimseqap.com.

Report authorized by,

Dr. Seema Tyagi (Prof.)

PT Co-ordinator: ISHTM-AIIMS-EQAP

Department of Hematology, AIIMS, New Delhi

-----End Of Report-----



RCA FORM OF ILC / PT / EQAS OUTLIERS

| Dep | epartment: HAE MATOLOGY | Date: 1/12/20 |
|--------------------|--|-------------------------------|
| 1. | Proficiency test exception for: WBC COUNT [AUGUST 2020 Gy | (de) REPORTED ON 27/11/20 |
| 2. | Proficiency test provider: ISHTM AIIMS EQAS | / / / |
| 3. | Proficiency test analyte group: PEER / METHOD | |
| | / | Method Wise) Accuracy Wise |
| 5. | How did the section investigate the cause: Investigated for Random Error. | |
| 6. | What was the status of the internal QC on the day PT initially analysed: | axed |
| | | |
| 7. | Category into which the cause will fit into: | * |
| ži, | Method | Technique |
| | Clerical No explanation after investigation | |
| | Problem with PT material Other | |
| 8. ₇ | passed and LI graphs were passed. | |
| 9. | Instrument Clean Up is given daily and will be | dore prior to |
| 10. | ourning EQAS sample along with QC par). Signatures :: | U Color. |
| | Quality manager: | |
| | Pathologist: | |
| | | |



HORIBA India Private Limited

246, Okhla Industrial Estate Phase-III, New Delhi 110020, India Tel :+91 (11) 4646 5000 / 4669 5001 Fax :+91 (11) 4646 5020 https://www.horiba.com CIN :U73100DL2006PTC153232

14th, April 2021

To Whom so ever it may concern

Subject: Proficiency Testing

Dear Sir / Madam,

We would like to inform that performance of HORIBA Yumizen 500/550 has been successfully validated on different Proficiency testing programs, including Bio-Rad (EQAS) & Randox (RIQAS) programs. There are large number of users across the globe including India using Bio-Rad (EQAS) & Randox (RIQAS) successfully.

However, we had received few concerns specially with non-correlation of WBC counts from customers enrolled with AIIMS proficiency testing. In Initial investigation we had observed that there are limited Peer group data for HORIBA Yumizen 500/550 which might be reasons for difference in correlation. However, our technical team is working on the same and any development would be shared shortly.

Thank you for your continued trust in HORIBA Medical products & let us know should you need any additional information.

