





(Under the aegis of Indian Association of Medical Microbiologists) PT Unit, Department of Clinical Virology, Christian Medical College, Vellore-632004, Tamil Nadu Email: viroeqas@cmcvellore.ac.in Phone: 0416-2283455

15th SEROLOGY CMCVIROEQAS EVALUATION FINAL REPORT

PANEL: BBVS

CMCVIROEQAS ID.

V0283

Opening Date: 01-11-2021

Result Receiving Date: 12/11/2021

Distribution No:

5321

	Intended Resu	lt	Your Result				
HIV	HBsAg {	HCV	HIV	HBsAg	E HCV #		
Negative	Negative	Negative	NEGATIVE	NEGATIVE	NEGATIVE		
Negative	Negative	Positive	NEGATIVE	NEGATIVE	POSITIVE		
Positive	Negative	Negative	POSITIVE	NEGATIVE	NEGATIVE		
Negative	Negative	Negative	NEGATIVE	NEGATIVE	NEGATIVE		
4			8/8 (100%)	8/8 (100%)	8/8 (100%)		
	Negative Negative Positive	Negative Negative Negative Negative Positive Negative	Negative Negative Negative Negative Negative Positive Positive Negative Negative	Negative Negative Negative NEGATIVE Negative Negative Positive NEGATIVE Positive Negative Negative POSITIVE	Negative Negative Negative NEGATIVE NEGATIVE Negative Negative Positive NEGATIVE NEGATIVE Positive Negative Negative POSITIVE NEGATIVE Negative		

Scoring System

Qualitative Results	Score
Concordant Result	2
Intermediate/Indeterminate	1
Discordant Result	0

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PT Unit, Department of Clinical Virology CHRISTIAN MEDICAL COLLEGE, VELLORI:

Dr. Nikhil S. Deshpande Associate Professor Department of Pathology Dr.Balasaheb Vikhe Paril Rural Medical Conege, Loni

Ph. . (UU), LONI BK, 413736

Incharge

Dr.S.N.JANGLE CCL Biochemistry Prof. & H.O.D. Biochemistry Rural Medical College, PMT PMT, RMC, Loni Tal. Rahata, Dist. A'Nagar-413736







CMCVIROEQAS (Under the aegis of Indian Association of Medical Microbiologists) PT Unit, Department of Clinical Virology, Christian Medical College, Vellore-632004, Tamil Nadu

Email: viroeqas@cmcvellore.ac.in Phone: 0416-2283455

Cumulative Report of this cycle:

Total Number of specimens you received Number of markers reported as not examined

Specimen # not used for analysis Number of Specimens Reported Late for analysis :

24 out of the possible total of 24 Your cumulative score for the specimens you reported:

Total Number of participants for BBVS

Total Number of Participants who turned in their results 505

Standard Deviation Index (SDI)

Performance of the participating	HIV Ag/Ab	HBsAg	HCV-Ab
Laboratories	8.0	8.0	8.0
Mean score of all Laboratories Standard Deviation	0.3	0.1	0.2
Your Laboratory SD1	0	0	0

SDI of \pm 3 and above indicates possible poor performance







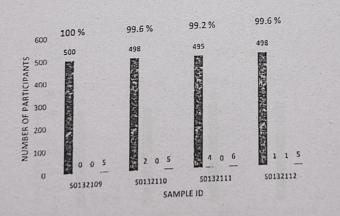
CMCVIROEQAS (Under the aegis of Indian Association of Medical Microbiologists) PT Unit, Department of Clinical Virology, Christian Medical College, Vellore-632004, Tamil Nadu Email: viroeqas@cmcvellore.ac.ln Phone: 0416-2283455

Participants who reported all analyzed specimens accurately

	Number of Participants with all	Percentage of Participants with a concordant result from all four specimen
Marker	four specimen's results	concordant result from any
HIV	199	98.4
HBsAg	503	99.6
HCV-Ab	500	99.4

Performance Graph

BBVS - HIV Ag/Ab



■ Concurrent # Discordant Indeterminate n Not Done

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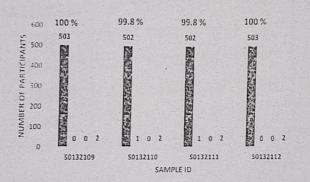






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BBVS - HBsAg



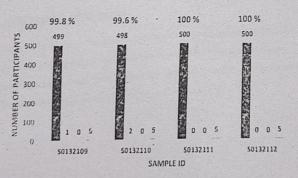
■ Concurrent

Discordant

Indeterminate

Not Dane

BBVS - HCV Ab



m Discordant
Indeterminate

a Not Done

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PT Unit, Department of Clinical Virology CHRISTIAN MEDICAL COLLEGE, VELLORE







PC - 1034

CMCVIROFOAS

(Under the aegis of Indian Association of Medical Microbiologists)
PT Unit, Department of Clinical Virology, Christian Medical College,
Vellore-6,32004, Tamil Nadu
Email: viroeqas@cmcvellore.ac.in Phone: 0416-2283455

	Ш	/ Ag/Ab	1	IBsAg	HCV-Ab		
	n	Discordant	n	Discordant	11	Discordant	
Chemiluminescence	229	2 (0.9%)	219	0	224	1 (0.4%)	
ELFA	11	1 (9.1%)	11 -	0	13	0	
ELISA	77	1 (1.3%)	75	0	78	2 (2.6%)	
Rapid Assay	182	4 (2.2%)	198	2 (1.0%)	185	0	
Not Done	6	-	2		5	-	

Comments:

This PT program is a simultaneous and continuous scheme. Participants are scored based on qualitative result. If more than 30% of the laboratory report discrepant result that sample will not be considered for analysis.

Confidentiality of the results:

The results are kept confidential between the participant and the provider. The results can be revealed to a regulatory body with written consent from the participant. However, in exceptional circumstances, results from a particular participant will be provided to the regulatory body and the participant will be notified of this action in writing.







CMCVIROEQAS

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Vellore-632004, Tamil Nadu
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Assigned Value:

Assigned value is determined using multiple assays/multiple testing of the same analyte. The proficiency testing material is a pooled lyophilized plasma sample prepared by following institutional proficiency testing standard operating protocol (PT-SOP) by trained staff. None of the work related to testing, preparation and packaging of sample is subcontracted. The homogeneity of the PT material is determined using multiple testing. The stability of the testing material is determined by assessing the reactivity of the specimen till the closing date. The homogeneity and stability of the materials were found satisfactory as per ISO13528:2015.

Standard Deviation Index (SDI):

Standard deviation index is used to analyze your laboratories performance relative to the other participating laboratories. The SDI is calculated for each parameter or marker separately using the formula

SDI = (Your score - interlaboratory mean score)/interlaboratory standard deviation of the score

Enquiries: For queries, please contact CMCVIROEQAS coordinator at the email viroeqas@cmcvellore.ac.in For all communications, please use your CMCVIROEQAS LAB ID and Distribution Number.

Name of CMCVIROEQAS Coordinator

Signature

Dr. Rajesh Kannangai

Department of Clinical Virology

Report Dispatch Date: 28-12-2021

Report authorized by: CMCVIROEQAS Coordinator

END OF REPORT

PT Unit, Department of Clinical Virology CHRISTIAN MEDICAL COLLEGE, VELLORE Page 6 of 6



109th IAMM EQAS Microbiology: Bacteriology/ Serology

CMC MICRO EQAS

Department of Clinical Microbiology, Christian Medical College, Vellore-632004, Tamil Nadu

Email: eqas@cmcvellore.ac.in, Twitter: @microeqas, Phone: +91-416-2282588



OCTOBER 2021

109th EQAS EVALUATION REPORT

MEMBER ID: M 0 3

Marks Obtained: 69.5/71 (97.9%)

OCTOBER 2021 / BACTERIOLOGY SMEARS

Question: Carry out the appropriate staining procedure and document the relevant observation.

Provide the Impression or probable organism seen (AS ASKED)

Please refer the attached evaluation format/answer template for details on the criteria for evaluation.

PLEASE NOTE: The inaccuracies in the participant report resulting in deduction of marks has been <u>underlined</u> in the expected smear report.

Number		Expected Report		walimi	on .
M1	Please carry out a Gram stain on the given fixed smear prepared from a BLOOD culture specimen obtained	Description of Organisms (2marks): Many Gram-positive spherical/oval cocci (1) arranged in pairs, long and short chains (1)	0	0.5	1
	from a 74-year-old gentleman presenting with high grade fever and chills following prostrate surgery (TURP).	Probable organism (1 mark): Streptococcus spp/ Enterococcus spp (1) Where can the blood culture specimen be stored if there is a delay in transport? (1 mark): Ideally Incubator / room-temperature (1)	1.5	2	2.5
		What is the upper limit of storing the specimen outside of these conditions? (No marks allotted): As mentioned by the manufacturer	3	3.5	(4

Page 1 of 6

SM2	Please carry out a Gram stain on the given fixed smear prepared from an isolate from a THROAT swab received from a 2-year-old girl who has not received her routine	Description of Organism/s (2marks): Many Gram-positive bacilli (1) club-shaped in X and V / cuneiform arrangements (1) Probable organism (1 mark): Corynebacterium diphtheriae	0	0.5	1
	vaccinations in the last 2 years. She presented with fever, sore throat, bilateral facial swelling with stridor.	What precaution are to be taken in the lab while handling the specimen (Imark) [a] Specimen handling following standard precautions in a BSC Type 2 A2 [b] Personnel should be adequately vaccinated and have a minimal of diphtheria antibody level	1.5	2	2.5
		of at least 0.1 IU/ml. [c] If unvaccinated and exposed should begin antimicrobial prophylaxis if specimen is culture or PCR positive	3	3.5	(1)
SM3	Please carry out a Gram stain on the given fixed smear prepared from a URINE specimen of a 22-year-old pregnant patient in her third trimester with a history of increased frequency of micturition for 2 days.	Please shade all the boxes that are relevant to your findings: Pus cells: Many Moderate Few Occasional None (0.5 mark) Epithelial cells: Many Moderate Few Occasional None (0.5 mark) Organism burden: Many Moderate Few Occasional	0	0.5	1
		✓ Gram positive cocci pairs, chains and clusters (0.25) ✓ Gram positive bacilli (0.5) ✓ Gram negative bacilli (0.5) ✓ Gram positive budding yeast like organisms (0.5)	1.5	2	2.5
		Impression/ Comments regarding the specimen: Improperly collected specimen (0.5 mark) What recommendation may be advised by the lab?: Suggest repeat appropriately collected mid-stream clean catch specimen (0.5 mark)	3	3.5	4

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OCTOBER 2021 / BACTERIOLOGY CULTURE:

Question: A freeze-dried (lyophilized) culture of an organism isolated from a clinical specimen is given. Carry out the appropriate techniques for each exercise and identify the pathogen. Carry out the antimicrobial susceptibility testing according to the panel given below.

Please refer the attached evaluation format for details on the criteria for evaluation.

A 'partially correct' or 'incorrect' component of the participant report which has resulted in a deduction of marks has been in indicated in the evaluation report below.

"REMOVED FROM EVALUATION" refers to a test that has not been evaluated for ALL participants. The explanation can be found in the EQAS statistics and the EQAS explained documents.

CU11 Isolated from a LUNG BIOPSY of a 24-year-old woman with lever-breathlessness and bilateral plearal effections. FINAL INDENTIFICATION: Stephylococcus nirreus

Identification details Microscopy (Gram stain + Motility)	Reported	Not reported	Evaluation (7 marks)
	1		0 0.5 1
alient culture and biochemical findings enabling final dentification (Minimum 3 key characteristics)	1		1 2 3 4
inal identification	1		0.5 1 1.5(2)

Susceptibility	EXP	ECTED REP	ORT	PARTICIPAN	NT REPORT	MARK	TYPE OF ERROR
	Zone size (mm)	MIC (μg/ml)	Interpretation CLSI	Correct	Incorrect	10 marks	Error
Cefoxitin 30µg	≥ 22	≤4	Susceptible	1		-1 0 1 2	mE/ME/VME
Chloramphenicol 30µg	≥18	≤8	Susceptible	1		-1 0 1 (2)	mE/ ME/ VME
Co-trimoxazole 1.25/23.75µg	≥16	≤2/38	Susceptible	REMOVED FROM EVALUATION			
Linezolid 30µg	≥21	≤4	Susceptible	1		-1 0 1 (2)	mE/ME/VME
Erythromycin 15µg	≤13	≥8	Resistant	1		-1 0 1 (2)	mE/ME/VME
Clindamycin 2µg	D-test PO	SITIVE	Resistant	1	Design Control	-1 0 1 (2)	mE/ ME/ VME

GU2: Cohtest from a USSUBBIOPSY specimen taken from a Hyenr old man wills hemophills and an infected hematoma of his right Junce

Identification details	Reported	Not reported	Evaluation (7 marks)
Microscopy (Gram stain + Motility)			0 0.5 (1)
Salient culture and biochemical findings enabling final identification (Minimum 3 key characteristics)	1		1 2 3 4
Final identification	· ·		0.5 1 1.5 (2)

Susceptibility		EXPECTED REPORT			PARTICIPANT REPORT		TYPE OF ERROR
report	Zone size (mm)	MIC (µg/ml)	Interpretation CLSI	Correct	Incorrect	10 marks	Error
Ceftazidime 30µg	≤17	≥16	Resistant	1		-1 0 1 (2)	mE/ME/VME
Cestriaxone 30µg	≤19	≥4	Resistant	1		-1 0 1 2	mE/ME/VME
Co-trimoxazole 1.25/23.75µg	≤10	≥4/76	Resistant	1		-1 0 1 2	mE/ ME/ VME
Levofloxacin 5µg	. ≤16	≥2	Resistant	1		-1 0 1 (2)	mE/ME/VME
Gentamicin 10µg	≤12	≥16	Resistant	1		-1 0 1 (2)	mE/ ME/ VME

Page 4 of 6.

CU3: Isolated from a FAECES specimen of a 6-year-old boy with a 2-day history of abdominal pain and frequent passage of scanty stools with mucous and blood.

FINAL IDENTIFICATION: Shigella flexneri serotype 2

Microscopy (Gram stain + Motility)	Reported	Not reported	Evaluation (7 marks)
salient culture and biochemical 6 - 11	1		0 0.5 (1)
dentification (Minimum 3 key characteristics)	1		1234
The state of the s	-		0.5 1 1.5(2)

Susceptibility report	Zona in Land		EPORT	PARTICIPA	ANT REPORT	MARK	TYPE OF ERROR
	Zone size (mm)	MIC (µg/ml)	Interpretation CLSI	Correct	Incorrect	12 marks	Error
Ampicillin 10µg	≤13	≥32	Resistant	1		-1 0 1(2)	mE/ME/VME
Cefotaxime 30µg	S22	≥4	Resistant			-1 0(1) 2	ME ME VME
Co-trimoxazole 1.25/23.75µg	≥16	≤2/38	Susceptible	7		-1 0 1 2	mE/ME/VME
Ciprofloxacin 5µg	≤21	≥1	Resistant	1		-1 0 1(2)	mE/ME/VME
Azithromycin 15µg	≥16	≤8	Susceptible	1		-1 0 1(2)	mE/ME/VME
Meropenem 10µg	≥23	≤1	Susceptible	-		-1012	mE/ME/VME

OCTOBER 2021 / SEROLOGY

Please refer the attached evaluation format/answer template for details on the criteria for evaluation.

	Pat	ameter !	Your Interp	retation		STATE OF THE PARTY	led Result	E WAR	Your
	CH-HA-	antice t	Correct	Incorrect	STO	STH	Interpretation	Max Marks	Score
F	SE1	Widal*	1 111		Negative /	Negative	Not Suggestive of Enteric Fever / Typhoid Fever	2 /	2

*Expected value is determined by the Proficiency Testing Provider (PTP).

	Parameter	Your Result	Your Value	Intended Result	Method	Robust Mean	Robust	Range	Z&Z'	Max Marks	Your
SE2	ASO T	Negative	<200 IU/mL	Negative	Latex Agglutination (n-450)			plicable	SCOLE	2	2
SE3	CRP	Positive	24 mg/L	Positive	Latex Agglutination (n-220)	34.0754	21.1902	6 to 192	-0.5	2	2

Disclaimer:

This is a confidential document and subject to the rules of confidentiality as described by the ISO 17043:2010 standard.

		39/20	10,177	marine.	1119/
MEMBER ID:	M	0	3	7	2

SM1	SM2	SM3	CU1	CU2	CU3	SE1	SE2	SE3	Marks	obtained
4	4	3.5	17	17	18	2	2	2	69.5	97.9%
4	4	4	17	17	19	2	2	2	Maximum	marks = 71

Dr. Rani Diana Sahni

Scientific Co-ordinator

Report Dispatch Date: 15.03.2022

Dr. John A Jude Prakash Quality Manager

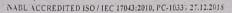
de Prakash Dr. V. Balaji ger PT Co-ordinator

----- End of Report -----

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Department of Clinical Microbiology, Christian Medical College, Vellor: 632(/14, Tamil Nadu Emailtreas & convellore.ac.in Phone: 9416-22828-8





JUNE 2021

108th EQAS EVALUATION REPORT

M 0 3 MEMBER ID:

Marks Obtained: 70.5/71 (99.3%)

JUNE 2021 / BACTERIOLOGY SMEARS

Question: Carry out the appropriate staining procedure and document the relevant observation.

Provide the Impression or probable organism seen (AS ASKED)

Please refer the attached evaluation format/answer template for details on the criteria for evaluation.

PLEASE NOTE: The inaccuracies in the participant report resulting in deduction of marks has been underlined in the expected report.

Exercise Number	Question	Expected Report	E	valuati	on
SM1	Please carry out a Gram stain on the given fixed smear prepared from a	Presence of host cells & debris (1mark): Many pus cells	0	0.5	1
	CSF specimen obtained from a 3-year old child presenting at a rural hospital facility with high grade fever and	Description of Organism/s (2marks): Many (0.5) pleomorphic (0.5) Gram negative bacilli (1)	1.5	2	2.5
	altered sensorium. Mother has defaulted on child's vaccinations.	Probable organism (1 mark): Hemophilus spp	3	3.5	4
SM2	Please carry out a Gram stain on the given fixed smear prepared from an	Presence of host cells & debris (1mark): Moderate pus cells	0	0.5	1
	endotracheal aspirate of a 43-year old man admitted in ICU for 5 days with	Description of Organism/s (2marks): Many (0.5) Gram negative (1) cocco-bacilli (0.5)	1.5	2	2.5
-	SARS-CoV2.	Probable organism (1 mark): Acinetobacter spp	3	3.5	(1

Page 1 of 6

SM3	Please carry out a Gram stain on the given fixed smear prepared from a sputum specimen of an \$2-year old COVID-negative gentleman seen in casualty with fever and breathlessness.	Pus cells: Occasional Epithelial cells: Many Gram positive cocci in clusters	0	0.5	.i"
	casuary wan rever and oreannessness.	✓ Gram positive cocci in pairs and chains ✓ Gram positive bacilli in palisade arrangement ✓ Gram negative cocci in pairs and clusters ✓ Gram negative bacilli ✓ Pran very 19 (2014)	1.5	2	2.5
		Impression/ Comments (1 mark): Excessive salivary contamination. Improperly collected sputum specimen. Name the grading system you used to grade the sputum specimen: not graded	3	3.5	4

JUNE 2021 / BACTERIOLOGY CULTURE:

Question: A freeze-dried (lyophilized) culture of an organism isolated from a clinical specimen is given. Carry out the appropriate techniques for each exercise and identify the pathogen. Carry out the antimicrobial susceptibility testing according to the panel given below.

Please refer the attached evaluation format for details on the criteria for evaluation.

A 'partially correct' or 'incorrect' component of the participant report which has resulted in a deduction of marks has been in indicated in the evaluation report below.

"REMOVED FROM EVALUATION" refers to a test that has not been evaluated for all participants. The explanation can be found in the EQAS statistics and the EQAS explained documents.

CC (; Isolated from a URINE specimen of a 63-year-old patient with recurrent urinary tract infections.

FINAL INDENTIFICATION: Enterocrocus faecalis

Identification details	Reported	Not reported	Evaluation (7 marks)
Microscopy (Gram stain + Motility)	*		0 0.5 (1)
Salient culture and biochemical findings enabling final identification (Minimum 3 key characteristics)	1		1 2 3 4
Final identification	-		0.5 1 1.5 (2)

Susceptibility	EX	PECTED R	EPORT	PARTICIPAL	NT REPORT	MARK	TYPE OF ERROR
report	Zone size	MIC (µg/ml)	Interpretation CLSI	Correct	Incorrect	12 marks	Error
Ampicillin 10µg	(mm) >17	(µg/mi) ≤8	Susceptible	1		-101(2)	mE/ ME/ VME
High Level	=6	>500	RESISTANT	1		-1 0 1 2	mE/ ME/ VME
gentamicin 120µg Nitrofurantoin	≥17	≤32	Susceptible	1		-1 0 1 (2)	mE/ ME/ VME
300µg Vancomycin 30µg	≥17	≤4	Susceptible	1		-1 0 1 2	mE/ ME/ VME
Teicoplanin 30µg	≥14	≤8	Susceptible	1		-1 0 1 2	mE/ ME/ VME
Linezolid 30µg	≥23	≤2	Susceptible	1		-1 0 1 (2)	mE/ ME/ VME

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CU2: Isolated from a SPUTUM specimen of a 45-year man admitted in ICU with Ventilator associated pneumonia.

FINAL IDENTIFICATION: Pseudomonas aeruginosa

Identification details	Reported	Not reported	Evaluation (7 marks)
Microscopy (Gram stain + Motility)	·		0 0.5 (1)
Salient culture and biochemical findings enabling final identification (Minimum 3 key characteristics)	1		1 2 3 4
Final identification	/		0 0.5 1 1.5 (2)

Susceptibility		EXPECTED	REPORT	PARTICIPAL	NT REPORT	MARK	TYPE OF ERROF
report	Zone size	MIC (µg/ml)	Interpretation CLSI	Correct	Incorrect	10 marks	Error
	(mm)	≤8	Susceptible	1		-1 0 1 2	mE/ME/VME
Ceftazidime 30µg	≥18	20		,		-1 0 1(2)	mE/ME/VME
Levofloxacin 5µg	≤14	≥4	RESISTANT				
Amikacin 30µg	≥17	≤16	Susceptible	1		-1 0 1 (2)	mE/ ME/ VME
Amikaciii 50po	All matures	41.611	Susceptible	Control of the	REMOVED	FROM EVALUA	ATION
Piperacillin-	≥21	≤16/4	Susceptible				
Tazobactam 100/10µg		1 >0	RESISTANT	1		-1 0 1 (2)	mE/ME/VME
Imipenem10µg	≤15	: ≥8					mE/ME/VME
Meropenem 10µg	≤15	≥8	RESISTANT	1		-1 0 1 (2)	IIIE) FIED VIVIE

CU3: Isolated from a BLOOD culture specimen of a 72-year old gentleman in renal failure with urrisepsis.

FINAL IDENTIFICATION: Escherichia coli

ain + Motility) iochemical findings enabling final um 3 key characteristics)	Identification details	Reported	Not reported	Evaluation (/ mar sa)
		,		0 0.5(1)
	Microscopy (Gram stain + Motility)	,		
	Salient culture and biochemical findings enabling final identification (Minimum 3 key characteristics)	,		1 2 3(4)
				0 0.5 1 1.5 (2

-			かんなん 一直	Year and a second	17	STA	Meropenem 10µg
6	-1010		1	Resistant	>4	100	TOTAL TO SECTION STREET, STREE
1		TOTAL OFFICE		SUSCEPTION	4	516	Minocycline 30µg
S	OM EVAL	DEMOVED FROM EVALUATION	101 May 10 101 May 10		Contract of the last of the la		Tazobactam 100/10µg
6				Resistant	≥128/4	≤17	Piperacillin-
7	1016			CAN AND DESCRIPTION OF THE PARTY OF THE PART	1	-	William 2016
1	7.0.1		•	Resistant	>64	41>	Smill-acin 30rig
7	17:15				-	1.	Cenazidime soft
6	-1010		,	Resistant	>16	<17	20.00
7	1016				1.	1	Celotaxime supg
,	3.00			Resistant	>4	17.	20
7	1010			CTSI	(mg/ml)	(mm)	
	TO HILL	Incorrect	Correct	Interpretation	МС	Zone size	-
	10 marks	-			The second second	The state of the s	PEDO-T
	MARK	PARTICIPANT REPORT	PARTICIPA	EPORT	EXPECTED REPORT	E	Susceptibility
J	110						

JUNE 2021 SEROLOGY

-Ple:	Parameter	Your Result	Your Value	Intended Result	for details on the c	Robust Mean	Robust SD	Range	Z&Z'	Max Marks	Your Score
SE1	RA /	Negative	Not Reported	Negative	Latex Agglutination (n-389)	NA	NA	NA .	NA	2	2/
SE2	CRP	Positive	24 mg/L	Positive	Latex Agglutination	32.2239	19.8230	6 to 192	0.4	2	2 /

NA: Not Applicable

	Parameter	Your Result	Intended result	correct /	Incorrect	Marks Marks	Your Score
	RPR/VDRL	Non-Reactive	Non-Reactive	1		2)	2
SE3	TPHA	300					
	Syphilis			NOT DO	AR		

This is a confidential document and subject to the rules of confidentiality as described by the ISO 17043:2010 standard.

MEMBER ID:	M	0	3	7	2

SMI	SM2	SM3	CU1	CU2	CU3	SE1	SE2	SE3	Marks obtained		
4	4	3.5	19	17	. 17	2	2	2	70.5	99.3%	
1-	4	4	19	17	17	2.	2	2	Maximum marks = 71		

--- عنود تسريات

Dr. Rani Diana Sabni Scientific, Co-ordinator

Report Dispatch Date: 30.10 2021

Dr. John A Jude Prakash Quality Manager

Dr. V. Balaji PT Co-ordinator

End of Report

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