



Proficiency Testing (PT)

I**To be completed by SRL**

1 Name of the State * *All the fields are mandatory*

2 Name of District *

3 Name of linked SRL *

4 Email Address *

5 Name of the ICTC *

6 SIMS Code / ID *

7 Round * Year *

II**Proficiency Testing Samples**

1 RCA/CA done for discordant samples for last round *Root Cause Analysis (RCA), Corrective Action (CA)*

2 Sample received Date Sample tested Date

Reviewed by SRL

3 Panel member 1--> result--> SRL review result-->

4 Panel member 2--> result--> SRL review result-->

5 Panel member 3--> result--> SRL review result-->

6 Panel member 4--> result--> SRL review result-->

7 Remarks by ICTC

8 Date & time of data submitted by ICTC PT Final Result

9 Remarks by SRL

10 Date & time of data submitted by SRL

Print

Please cross check all details before submitting