



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.: 4364

Distribution No.: 157-L

Month/Year: October/2022

Instrument ID: 109YAXH03499

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: 17-11-2022[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 of Assigned Values		Yours Results	Consensus Result		7
WBC x10³/μl	1	8.36	7.38	15.74	12.5	0.0700	2.05	0.98	0.11	0.0090	6.52
RBC x10 ⁶ /μl	1	4.33	4.31	8.64	8.41	0.0130	0.65	0.02	0.04	0.0030	-0.34
Hb g/dl	1	12.1	12	24.1	23.6	0.0280	0.75	0.1	0.1	0.0090	0.00
нст%	1	35	34.9	69.9	74	0.1930	-0.80	0.1	0.4	0.0280	-0.67
MCV-fl	1	81.2	80.5	161,7	177.4	0.3730	-1.50	0.7	0.3	0.0230	1.08
МСН-Рg	1	28	27.7	55.7	56.4	0.0820	-0.35	0.3	0.2	0.0220	0.34
MCHC-g/dl	1	34.7	34.2	68.9	63.7	0.1580	1.23	0,5	0.3	0.0220	0.67
Plt. x10³/μl	1	182	175	357	593	3.16	-2.53	7	11	0.73	-0.34
Retic %	2	3.6	3.2	6.8	7.18	0.17	-0.08	0.4	0.4	0.03	0.00

P.S. Assesment

		YOUR REPORT	CONSENSUS REPORT		
DLC%	Nrbcs=, Poly=05 L=92, E=00, Mono/Promono=03, B1=00 P.M.=00, Mye=00, Meta=00, Other=SMUDGE CELLS ARE PRESENT		Blast: 44-90, Lympho: 4-21, Poly: 1-6, nRBC/Eos/Baso/Mono /Myelo/Meta/ Promyelo: 0-5		
RBC Morphology	3	NORMOCYTIC NORMOCHROMIC RBCs ARE NOTED. ANISOPOIKILOCYTOSIS PRESENT.	Predominantly: Normocytic/ Normochromic, Moderate: Anisocytosis, Microcytic		
Diagnosis	3	CHRONIC LYMPHOCYTIC LEUKAEMIA	Acute Leukemia (AL)		

COMBINED DATA VALUES OF TOTAL PARTICIPANTS

Test parameters	S.No.	Total participants covered in the current dist. 157L	Total No. responded	The second second	% of Labs with Z Score 0-2		% of Labs with Z Score 2-3		% of Labs with Z Score >3	
				Among labs	Within lab	Among labs	Within lab	Among labs	Within lab	
WBC x10³/µl	1	312	300	77.33	9.0	6.33	2.33	16.34		
RBC x10 ⁶ /µl	1	312	312	88.14	83.65	3.85		10/1///19/19/	7.67	
Hb g/dl	1	312	312	84.29	82.69		5.45	8.01	10.9	
НСТ%	1	312	301	-		5.45	5.77	10.26	11.54	
MCV-fl	1	312		90.03	87,04	6.31	5.65	3.66	7.31	
MCH-Pg	1		301	93.02	89.37	4.65	6.64	2.33	3.99	
	1	312	301	87.71	90.03	7.97	2.66	4.32	7.31	
MCHC-g/dl	1	312	301	92.36	91.03	5.98	2.99	1.66	0.0000000	
Plt. $x10^3/\mu$ l	1	312	297	93,27	92.26	4.38	10.000		5.98	
ReticCount%	2	312	206	88.83			3.7	2.35	4.04	
PS Assessment	3	312	199	Satisfactory	89.81 :90.04%, Bo	5.83 rderline Sat	7.28	5.34	2.91	

'Comments:

- 1). Among Lab (EQA): PS Diagnosis wrongly reported, 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 = $0.7413 \times IQR$

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 > ± 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.

Note 10: Reports are kept confidential.

Report authorized by,

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Dr. Seema Tyagi (Prof.)

PT Co-ordinator: ISHTM-AIIMS-EQAP

Department of Hematology, AIIMS, New Delhi

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

PT/ EQAS EVALUATION RECORD
FRM.QCM.03
01
01
01.09.2022



Date of Investigation: 01/11/2022

Date of BT/EOAS: ISHTM AIMS - 1574 (Distribution No.)				
Data (DETERON NO.)				
Date of PT/EQAS: 15/10/2022				
Acceptable/ Unacceptable Results				
15.74				
Acceptable Result Range: 12-5 ± 0.07				
Previous Trends/ Unacceptable Results from this Analyte/ Test:				
unacceptable with negative bias.				
Classification of Dualsham (DL 1111)				
Classification of Problems: (Please tick) Clerical:				
□ Transcription error (may be pre- or post-analytical factors)				
☐ Wrong method has been registered for analysis or method change not updated.				
Details of Investigation:				
NIL NIL				
NIL .				
NIL .				
Methodological				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range.				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range. Scheduled instrument maintenance not performed appropriately.				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range. Scheduled instrument maintenance not performed appropriately. Incorrect instrument calibration.				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range. Scheduled instrument maintenance not performed appropriately. Incorrect instrument calibration. Standards or reagents improperly reconstituted and stored, or inadvertently used beyond expiration date.				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range. Scheduled instrument maintenance not performed appropriately. Incorrect instrument calibration. Standards or reagents improperly reconstituted and stored, or inadvertently used beyond expiration date. Instrument probes misaligned.				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range. Scheduled instrument maintenance not performed appropriately. Incorrect instrument calibration. Standards or reagents improperly reconstituted and stored, or inadvertently used beyond expiration date. Instrument probes misaligned. Problem with instrument data processing functions. The laboratory may need to contact the manufacturer to				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range. Scheduled instrument maintenance not performed appropriately. Incorrect instrument calibration. Standards or reagents improperly reconstituted and stored, or inadvertently used beyond expiration date. Instrument probes misaligned.				
Methodological Instrument function checks (e.g., temperatures, blank readings, pressures) not performed as necessary, or results not within acceptable range. Scheduled instrument maintenance not performed appropriately. Incorrect instrument calibration. Standards or reagents improperly reconstituted and stored, or inadvertently used beyond expiration date. Instrument probes misaligned. Problem with instrument data processing functions. The laboratory may need to contact the manufacturer to				

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Effective Date	01.09.2022



	Automatic pipettor not calibrated to acceptable precision and accuracy.					
	Imprecision from result being close to detection limit of method.					
	□ QC material not run within expiration date, or improperly stored.					
	□ QC material not run at relevant analyte concentration.					
	Result not within reportable range (linearity) for instrument / reagent system.					
	Obstruction of instrument tubing / orifice by clot or protein.					
	Incorrect incubation times.					
D	etails of Investigation:					
	MUL.					
_						
0-						
Te	echnical					
	EOA motorial impress only as a small to the					
	EQA material improperly reconstituted.					
	of the second and the Last material (with problem from evaporation of deterioration).					
	partition of the state of the s					
	Result released despite unacceptable QC data.					
	QC data within acceptable limits but showed trend suggestive of problem with the assay.					
	Inappropriate quality control limits / rules. If the acceptable QC range is too wide, the probability increases that					
	a result will fall within the acceptable QC range yet exceed acceptable limits for EQA.					
	Manual pipetting / diluting performed inaccurately, at an incorrect temperature or with incorrect diluent.					
	Calculation error or result reported using too few significant digits.					
	Secondary specimen tubes incorrectly labeled.					
	In addition to above discipline specific errors may also occur					
De	etails of Investigation:					
_						
	NIL					
Pro	oblem with PT/EQAS Material					
	Matrix effects: The performance of some instrument / method combinations may be affected by the matrix of					
	the PT/EQAS sample. This can be overcome to some extent by assessing participants in peer groups – to be done					
	by the PT/EQAS provider.					

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Effective Date	01.09.2022		



	lyophilized specimens.
	Non-viable samples for microbiology PT/EQAS program.
	Haemolysis on an immune-haemtology program samples.
	stational and the fractitional program samples.
De	tails of Investigation:
Pro	oblem with PT/EQAS Evaluation
П	Peer group not appropriate.
	Inappropriate target value: Target values developed from participant consensus can be inappropriate from
	non-homogeneous testing material or lingering ("masked") outliers. However, occasional inappropriate target
	values occur in every PT program. Inappropriate evaluation interval: An evaluation interval may be
	inappropriately narrow e.g. if ± 2 standard deviation units are used with an extremely precise method;
	the acceptable range may be much narrower than needed for clinical usefulness.
	Incorrect data entry by PT provider.
Det	ails of Investigation:
p====	
No I	Explanation: Attributed to Random Error
Any	Others (explain)
Sum	mary of Investigation: Och fax quetto coat days in the
Sin	as the principle of deletion of was done in consent outth the applicant chemist of HoriBA,
deg	enthe principle of detection of cubi's is impendence with flow cylometry as based the predation was cells are not count and give bias:
To	verify the same a Study was conducted out NRL and nearest latter laborations
rest	verify the Same a Study was Conducted out NRL and nearest lattelle laboratory using sample and result found Sortiefallong.
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Was patient data affected? & Corrective action taken if Patient data was affected.

No. The patient Sample one analysed immediately in reported us was verified and outlain was found.

Corrective/ Preventive action taken to prevent Reoccurrence

As a perst of Corrective action and Inter laboratory Companison is also done at local laborating wing fresh EDTA sample and results are critical acceptable limit.

Conclusions

Degradation is specimen and peer group disonepency leading to regrate trial in the patient sample. Interless Companion with fresh sample shows that their is no issue with larry analysis or methodosop.

Quality Manager/ Team Leader Lubbodes Pal Date: 08/02/2023

Lab Head

Koushik Samanta

Date: 68 02/2023 ...

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Medical Laboratory Report



Patient Information

Name

: Mrs.ANITA DAN

Age/Gender: 61Y 0M 0D/Female

MobileNo UHID

: 9474552780 : LDAA00321674

Address

Specimen Information

Visit ID

: LCAM22100

Collected Received : 08/Feb/2023 10:52 : 08/Feb/2023 10:54

Reported

: 08/Feb/2023 11:41

IP/OP/Barcode: FW1-231340 Report Status : Final Report

Client/Doctor Information

Client Code : HLM0005

Client Name: HLM CAMRI - CGHS Client Add. :

Client No. :

Ref Doctor : Dr.A.D. BOSE (MD)

Test Name	Result	Bio. Ref. Range	Unit	Method
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Complete Blood Count (CBC), WHOLE BLOOD EDTA

Hemoglobin (Hb)	12.3	13-17	g/dL	Spectrophotometry	
Red Blood Cell (RBC) Count	4.26	3.8-4.8	Million/cu.mm	Impedence	
Packed Cell Volume (PCV) / Hematocrit	37.8	36-46	%	Calculated	
Mean Corpuscular Volume (MCV)	88.7	83-101	fL	Calculated	
Mean Corpuscular Hemoglobin (MCH)	28.8	27-32	pg	Calculated	
Mean Corpuscular Hb Concentration (MCHC)	32.4	31.5-34.5	g/dL	Calculated	
Red Cell Distribution Width (RDW)	14.5	11.6-14	%	Calculated	
Total Leucocyte Count (TLC)	7,320	4000-10000	Cells/cu.mm	Impedence	
Differential Leucocyte Count (DLC)			-		
Neutrophils	78.0	40-80	%	Impedence & FCM	
Lymphocytes	18.0	20-40	%	Impedence & FCM	
Monocytes	2.0	2-10	%	Impedence & FCM	
Eosinophils	2.0	1-6	%	Impedence & FCM	
Basophils	0.0	0-2	%	Impedence & FCM	
Absolute Leucocyte Count					
Neutrophils	5,710	2000-7000	Cells/cu.mm	Calculated	
Lymphocytes	1,318	1000-3000	Cells/cu.mm	Calculated	
Monocytes	146	200-1000	Cells/cu.mm	Calculated	
Eosinophils	146	20-500	Cells/cu.mm	Calculated	
Platelet Count	214,000	150000-410000	per cu.mm	Impedence	
Mean Platelet Volume (MPV)	11.3	7.4-12.0	fL	Impedence	

*** End Of Report ***

Reports to follow-

Kidney/Renal Function Tests (KFT/RFT), Liver Function Test (LFT)

Samanha,

Koushik.

DR. KOUSHIK SAMANTA MBBS, MD (PATHOLOGY)

CHIEF OF LAB

REG. NO. - 58035 (WBMC)

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This test has been performed at Lupin Diagnostics Laboratory, HLM CAMRI Bamchandaipur, GT Rd, NH2, Gangpur



KRISHNA DIAGNOSTICS (P) LTD

- Where You Matter Most





AN ISO CERTIFIED LABORATORY

UID: 1141983

Nationality: Indian

Patient ID: Name:

012302080508

Ms. ANITA DAN

Referred By: Self LabID:

Age/Gender: 61 Y/Female

11141767

SpecimenType: Whole Blood EDTA

Primary SampleCollection Time: Collection Date/Time:

Received Date/Time: Approved Date/Time:

Print Date/Time: Client Grp.:

08/Feb/2023 19:19:48 08/Feb/2023 07:20PM 08/Feb/2023 07:21PM

08/Feb/2023 07:53PM 08/Feb/2023 07:54PM LUPIN DIAGNOSTICS LIMITED

1101	DEPARTMENT OF HAEMATOLOGY					
ption	Observed Value	Unit	Meth			

Test Description	Observed Value	Unit	Method	Biological Ref. Interval
Complete Blood Count (CBC)				
Haemoglobin (Hb)	12.5	g/dL	Colorimetric	12.5-16.00
RBC Count	4.37	million/µL	Sheath fluid impedence	4.2-5.4
Packed Cell Volume	38.6*	%	Calculated	41-53
MCV	88.4	fL	Sheath fluid impedence	80-100
MCH	28.5	pg	Calculated	26-34
MCHC	32.2	g/dL	Calculated	31-37
Platelet Count	1.90	L/cumm	Sheath fluid impedence / Microscopy	1.50-4.50
TLC (Total Leucocyte Count)	7,450	/cumm	Laser flowcytometry/ Microscopy	4000-11000
<u>Differential Leucocyte Count</u>			4.3	
Neutrophíl	79	%	Laser flowcytometry/ Microscopy	40-80
Lymphocyte	17*	%	Laser flowcytometry / Microscopy	20-40
Monocytes	3	%	Laser flowcytometry / Microscopy	3-6
Eosinophils	1	%	Laser flowcytometry / Microscopy	01-06
Basophils	0	%	Laser flowcytometry / Microscopy	0-1
	5,885.5	/cumm	Calculated / Microscopy	2000-7000
# D F	1,266.50*	/cumm	Calculated / Microscopy	1500-4000
	224	/cumm	Calculated /	100-1000
	74.50	/cumm	Calculated /	00-500
RDW-CV	14.3	%	Calculated	11.5-17.0
Absolute Neutrophil Count Absolute Lymphocyte Count Absolute Monocyte Count Absolute Eosinophil Count RDW-CV	1,266.50* 224 74.50	/cumm /cumm /cumm	Calculated / Microscopy Calculated / Microscopy Calculated / Microscopy Calculated / Microscopy	1500-4000 100-1000 00-500

DR.PARTHA PRATIM PURKAIT MBBS, MO(PATH) CONSULTANT PATHOLOGIST





Dr.Ratnadipa Banerjee MBBS, DNB (PATH) Consultant Pathologist

Entered By:SINTU DAS

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KRISHNA DIAGNOSTICS (P) LTD

- Where You Matter Most



UID: 1141983

Nationality: Indian

Patient ID:

012302080608

Name: Ms. ANITA DAN

Age/Gender:

61 Y/Female Self

Referred By: LabID:

11141767 SpecimenType: Whole Blood EDTA

Mean Platelet Volume

Primary SampleCollection Time:

Collection Date/Time:

Received Date/Time:

Approved Date/Time:

Print Date/Time:

Client Grp.:

08/Feb/2023 19:19:48

08/Feb/2023 07:20PM

08/Feb/2023 07:21PM 08/Feb/2023 07:53PM

08/Feb/2023 07:54PM

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DEPARTMENT OF HAEMATOLOGY

Test Description RDW-SD

NLR-Ratio

Observed Value 47.3

Unit

Method Cell Counter

Biological Ref. Interval

13.70* 4.65*

f

Calculated

37.0-49.0 8.0-11.0

1-3 Normal 3-6 Stress

6-9 Mild Stress 9-18 Moderate Stress

Dischanner. The test result mentioned here should be interpreted in view of clinical condition of the patient. In case of any clinical suspicion regarding any parameter, repeat test with fresh sample constraint to conclude.

*** End Of Report ***







Dr.Ratnadipa Banerjee MBBS, DNB (PATH) Consultant Pathologist

Entered By:SINTU DAS

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Medical Laboratory Report



Patient Information

Name : Mrs.JYOSTANA MONDAL

Age/Gender: 63Y 0M 0D/Female

MobileNo UHID : 9749878528 : LDAA00551184

Address

Specimen Information

Visit ID : LCAM22097

Collected Received : 08/Feb/2023 10:04

Reported

: 08/Feb/2023 10:06 : 08/Feb/2023 13:37

IP/OP/Barcode : OPD-ESI Report Status : Final Report Client/Doctor Information

Client Code: HLM0003 Client Name: HLM CAMRI Client Add.: GANGPUR

Client No. :

Ref Doctor : Dr.B.GHOSH

Test Name	Result	Bio. Ref. Range	Unit	Method

Complete Blood Count (CBC), WHOLE BLOOD EDTA

Hemoglobin (Hb)	11.1	13-17	g/dL	Spectrophotometry
Red Blood Cell (RBC) Count	3.79	3.8-4.8	Million/cu.mm	Impedence
Packed Cell Volume (PCV) / Hematocrit	34.0	36-46	%	Calculated
Mean Corpuscular Volume (MCV)	89.8	83-101	fL	Calculated
Mean Corpuscular Hemoglobin (MCH)	29.2	27-32	pg	Calculated
Mean Corpuscular Hb Concentration (MCHC)	32.5	31.5-34.5	g/dL	Calculated
Red Cell Distribution Width (RDW)	14.2	11.6-14	%	Calculated
Total Leucocyte Count (TLC)	4,900	4000-10000	Cells/cu.mm	Impedence
Differential Leucocyte Count (DLC)				
Neutrophils	62.0	40-80	%	Impedence & FCM
Lymphocytes	30.0	20-40	%	Impedence & FCM
Monocytes	2.0	2-10	%	Impedence & FCM
Eosinophils	6.0	1-6	%	Impedence & FCM
Basophils	0.0	0-2	%	Impedence & FCM
Absolute Leucocyte Count				
Neutrophils	3,038	2000-7000	Cells/cu.mm	Calculated
Lymphocytes	1,470	1000-3000	Cells/cu.mm	Calculated
Monocytes	98	200-1000	Cells/cu.mm	Calculated
Eosinophils	294	20-500	Cells/cu.mm	Calculated
Platelet Count	270,000	150000-410000	per cu.mm	Impedence
Mean Platelet Volume (MPV)	12.4	7.4-12.0	fL	Impedence

*** End Of Report ***

Kousink.

DR. KOUSHIK SAMANTA MBBS, MD (PATHOLOGY)

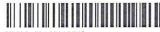
Samanta

CHIEF OF LAB

REG. NO. - 68035 (WBMC)

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SIN No:HA00212709

This test has been performed at Lupin Diagnostics Laboratory, HLM CAMRI Bamchandaipur, GT Rd, NH2, Gangpur



KRISHNA DIAGNOSTICS (P) LTD

---- Where You Matter Most







UID: 1141981

Nationality: Indian

Patient ID:

012302080607

Name: Ms. JYOSTNA MONDAL Age/Gender:

Referred By: LabID:

63 Y/Female Self

11141765 SpecimenType: Whole Blood EDTA Primary SampleCollection Time:

Collection Date/Time:

Received Date/Time: Approved Date/Time:

Print Date/Time: Client Grp.:

08/Feb/2023 19:19:48 08/Feb/2023 07:20PM

08/Feb/2023 07:21PM 08/Feb/2023 07:54PM

08/Feb/2023 07:54PM LUPIN DIAGNOSTICS LIMITED

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Test Description	Observed Value	Unit	Method	Biological Ref. Interval
Complete Blood Count (CBC)				Diological Rel. Interva
Haemoglobin (Hb) RBC Count	10.9*	g/dL	Colorimetric	12.5-16.00
	3.80*	million/µL	Sheath fluid impedence	4.2-5.4
Packed Cell Volume MCV	34.3*	%	Calculated	41-53
MCV	90.3	fL	Sheath fluid	80-100
MCH	28.8	pg	impedence Calculated	26-34
MCHC	31,9	g/dL	Calculated	31-37
Platelet Count	1.70	L/cumm	Sheath fluid impedence / Microscopy	1.50-4.50
TLC (Total Leucocyte Count)	5,180	/cumm	Laser flowcytometry/ Microscopy	4000-11000
Differential Leucocyte Count				
Neutrophii	63	%	Laser flowcytometry/ Microscopy	40-80
ymphocyte	28	%	Laser flowcytometry /	20-40
1onocytes	2*	%	Microscopy Laser flowcytometry /	3-6
osinophils	7*	%	Microscopy Laser flowcytometry /	01-06
asophíls.	0	%	Microscopy Laser flowcylometry I	
bsolute Neutrophil Count	3,263.4	/cumm	Microscopy Calculated /	2000-7000
bsolute Lymphocyte Count	1,450.40*	/cumm	Microscopy Calculated /	1500-4000
solute Monocyte Count	104	/cumm	Microscopy	100-1000
osolute Eosinophil Count		cumm	Microscopy	
DW-CV			Microscopy	00-500
	13.3	%	Calculated	11.5-17.0

OR.PARTHA PRATIM PURKAIT MBBS, MD(PATH) CONSULTANT PATHOLOGIST





Dr.Ratnadipa Banerjee MBBS, DNB (PATH) Consultant Pathologist

Entered By:SINTU DAS

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UID: 1141981

Nationality: Indian

Patient ID: Name:

012302080607

Ms. JYOSTNA MONDAL

Age/Gender: 63 Y/Female

Referred By: Self

Mean Platelet Volume

with fresh sample a mental to conclude.

LabID:

SpecimenType: Whole Blood EDTA

11141765

Primary SampleCollection Time:

Collection Date/Time:

Received Date/Time:

Approved Date/Time:

Print Date/Time:

Client Grp.:

08/Feb/2023 19:19:48 08/Feb/2023 07:20PM

08/Feb/2023 07:21PM 08/Feb/2023 07:54PM

08/Feb/2023 07:54PM LUPIN DIAGNOSTICS LIMITED

DEPARTMENT OF HAEMATOLOGY

Test Description

RDW-SD

NLR-Ratio

Observed Value 45.0

Unit

Method Cell Counter Biological Ref. Interval

37.0-49.0

14.10*

2.25

f

Calculated

8.0-11.0 1-3 Normal

3-6 Stress 6-9 Mild Stress

9-18 Moderate Stress Disclaimer: The test result mentioned here should be interpreted in view of clinical condition of the patient. In case of any clinical suspiction regarding any parameter, repeat less

*** End Of Report ***

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Entered By:SINTU DAS

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Lupin Diagnostics ,Camri (HLM)	
Inter laboratory comparison study report of	WBC



Reference Laboratory- Krishna Diagnostics, Kolkata Date of study conducted- 08.02.2023

Sample No	Parameter	Date	Lupin Results (cells/cumm)	Krishna Diagnostics (ILC Lab) (cells/ cumm)	Bias%
1	WBC	08-02-2023	7320	7450	1 70
2	WBC	08-02-2023	770-1		1.78
	MRC	08-02-2023	4900	5180	

Reference Range-

Lupin Diagnostics	4000-10000 (cells/cumm)
Krishna Diagnostics	4000-11000 (cells/cumm)

Observations-

- -100% Clinical correlation noted in both samples.
- -%Bias found < 10% in both sample for WBC parameter.
- -Hence Inter laboratory comparison study successfully passed for WBC parameter.

Documented By (Mr Subhdeep Pal)

Eushadeep Pal

Koushile Samanton
Approved by
(Dr Koushik S)

j	Lupin Diagnostics ,National Reference Laboratory (NRL)
	WPC Post Cours Analysis



Purpose of study: Consistence unacceptable performance noted for WBC In last three surveys in AIIMS Hematology PT program

Root Cause Analysis:

- No any issue noted w.e.f clerical, methodological, technical and equipment.
- ✓ RCA was done in coordination with the Application chemist of Horiba and due to the method of detection in Horiba analyzers is Impedance along with flowcytometry the deterioration in WBC cells results to negative bias.
- As a part of preventive action Inter laboratory comparison study performed with different time interval to check the results recovery and precision and the results were found to be satisfactory.

Reference Laboratory- Lupin Diagnostics, SL Andheri Date of study conducted- 01.02.2023

Sample no	Param eter	0 hrs				6 Hrs		12 hrs		24hrs			Reference	Cliniani	
		o1.02.2023					02.02.2023				range	Clinical inference			
		NRL	Andheri	%Diff	NRL	Andheri	%Diff	NRL	Andheri	%Diff	NRL	Andheri	%Diff	,,	merence
Sample-1	WBC	7.06	7.08	-0.28	7.11	7.23	1.00				15/3/2/2017	The state of the s			
Sample-2	WBC	C 42			50-22-00-0	1.25	-1.66	5.98	6.36	-5.97	7.07	6.36	11.16		Correlating
	VVBC	6.43	6.72	-4.32	6.43	6.32	1.74	6.27	6.72	-6.70	6.27	6.72	-6.70	3.5-10 ×	C 1 .:
Sample-3	WBC	9.8	9.83	-0.31	9.91	10.45						-	-0.70	10^3/ul	Correlating
		1.10 2.00	0.51	3.31	10.45	-5.17	9.94	10.34	-3.87	37 9.58	6.72	42.56		Correlating	

	Sample no	Parameter	Run-1	Run-2	Run-3	Run-4	Mean	SD	%cv
Location-	Sample-1	WBC	7.06	7.11	5.98				1.0.74
NRL	Sample-2	WBC	6.43		3.36	7.07	6.80	0.55	8.09
				6.43	6.27	6.27	6.35	0.09	1.45
	Sample-3	WBC	9.8	9.91	0.04	100000000000000000000000000000000000000			
))————————————————————————————————————			7.0	5.51	9.94	9.58	9.80	0.16	1.66

Observations-

- √ 100% clinical correlation in all three specimens
- %Difference found in all intervals for all samples except for last interval.
- ✓ Precision %CV found < 10% in all three samples.</p>

Conclusion:

Based on obtained result recovery Inter laboratory comparison study successfully passed for WBC test parameter and no any major value variation noted in patient sample.

This is for your update. Jagar Damoni

Regards.