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Misp

I	<b>To be completed by SRL</b>		
1	Name of the State	Mizoram	* All the fields are mandatory
2	Name of District	AIZAWL	*
3	Name of linked SRL	CH, Aizwal, Mizoram	*
4	Email Address	darlawncphc@gmail.com	*
5	Name of the ICTC	ICTC DARLAWN	*
6	SIMS Code / ID	1500168	*
7	Round	FIRST	*
II	<b>Proficiency Testing Samples</b>		
1	RCA/CA done for discordant samples for last round	No	Root Cause Analysis (RCA), Correct
2	Sample received Date	2023-02-28	Sample tested
			<b>Review</b>
3	Panel member 1--> A	result--> Positive	SRL review result
4	Panel member 2--> B	result--> Negative	SRL review result
5	Panel member 3--> C	result--> Negative	SRL review result
6	Panel member 4--> D	result--> Negative	SRL review result
7	Remarks by ICTC	6/3/23	
8	Date & time of data submitted by ICTC	06-03-2023 11:18:30 AM	PT Final R
9	Remarks by SRL	Satisfactory	
10	Date & time of data submitted by SRL	07-03-2023 02:12:39 PM	

Print

Please cross check all details before submitting

*Shreem*  
 09/3/23  
 Incharge  
 State Reference Laboratory  
 Department of Microbiology  
 Civil Hospital  
 Aizawl : Mizoram