



**icmr** **NARI**  
INDIAN COUNCIL OF MEDICAL RESEARCH  
NATIONAL REFERENCE LABORATORY

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<b>I</b>	<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 ictcsaitualSDH@gmail.com	*
5	Name of the ICTC ICTC SAITUAL SDH	*
6	SIMS Code / ID 1500113	*
7	Round FIRST	*
<b>II</b>	<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 resu
4	Panel member 2--> B result--> Negative	SRL review resu
5	Panel member 3--> C result--> Negative	SRL review resu
6	Panel member 4--> D result--> Negative	SRL review resu
7	Remarks by ICTC Panel sample	
8	Date & time of data submitted by ICTC 06-03-2023 10:12:13 AM	PT Final R
9	Remarks by SRL Satisfactory	
10	Date & time of data submitted by SRL 07-03-2023 02:04:20 PM	

Print

Please cross check all details before submitting

*Srin*  
 9/3/23

Doctor incharge  
 State Reference Laboratory  
 Department of Microbiology  
 Civil Hospital  
 Mizoram