

VIEW LAB MONTHLY SUMMARY

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Lab Name FAMILY HEALTH CENTRE

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Lab No 9960

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Month March

[Detail about SDI](#)

Year 2023

Constituent Group Chemistry I

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Date of Result Entered : 08/03/2023

Date of Report Published : 04/04/2023

Sl.No	Analyte	Method / Principle Name	Analyzer Name	No of Participants	DV	Participants		Your Value	SDI	U
						CV	SD			
1	GLUCOSE	GOD-POD	Agape	184	332.90	5.98	19.91	399.1 mg/dL	3.32	2.94
2	UREA	Urease UV / GLDH	Agape	211	59.19	7.80	4.62	65.4 mg/dL	1.35	0.64
3	CREATININE	Jaffes End point	Any Analyser (Automation / Semi Automation)	321	1.93	10.47	0.20	1.94 mg/dL	0.05	0.02
4	T.BILIRUBIN	Diazonium salt (Colorimetric) / Jendrassik	Agape	178	5.52	9.41	0.52	6.33 mg/dL	1.56	0.08
5	T-PROTEIN	Biuret - Colorimetric	Agape	209	5.37	6.56	0.35	5.28 g/dL	-0.26	0.05
6	ALBUMIN	BCG - colorimetric	Agape	199	3.50	6.38	0.22	3.94 g/dL	1.97	0.03
7	URIC ACID	Enzymatic / Uricase Colorimetric	Agape	183	3.89	9.41	0.37	4.37 mg/dL	1.31	0.05
8	CHOLESTEROL	CHOD-PAP	Agape	224	102.93	8.27	8.52	126.1 mg/dL	2.72	1.14
9	TRIGLYCERIDE	GPO-PAP / Enzymatic Colorimetric / End Point	Agape	213	138.28	7.41	10.25	175.6 mg/dL	3.64	1.41
10	HDL	Direct method / Enzymatic colorimetric	Agape	163	25.63	9.62	2.46	28.9 mg/dL	1.33	0.39
11	AST	UV kinetic(with & without PLP (P-5-P))	Agape	203	67.58	9.27	6.26	63.2 U/L	-0.70	0.88
12	ALT	UV kinetic(with & without PLP (P-5-P))	Agape	179	219.88	16.88	37.12	170.1 U/L	-1.34	5.55
13	ALP	PNP AMP kinetic	Agape	108	55.97	22.04	12.34	101.8 U/L	3.71	2.37

SDI Range	Interpretation
Within -1.00 to +1.00	Excellent.
Within ±1.01 to ±2.00	Good.
Within ±2.01 to ±2.99	Accept with caution. Warning Signal.
Beyond ±3.0	Unacceptable performance. Action Signal.

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[Handwritten Signature]
Medical Officer
Family Health Centre
Panavally 688526

RCA and CAPA

The laboratory FHC panavally provides corrective and preventive actions at each stage which are defined clearly for effective monitoring of the process of analyzing the nonconformity and remedial action for continual improvement with the guidance of well defined procedure.

- First of all head of the department will conduct random checks to all procedures and tests.
- Then the quality management team would commit rapid investigation and root cause determination.
- As per the analysis appropriate tools and techniques such as new reagents, internal QC checks, cross checking and repeat testing of abnormal values, calibration of all test parameters are implemented to the origin of nonconformity.
- And the corrective and preventive action are initiated and recorded to solve the problem immediately and put the service back into the right track to meet with success.



QUALITY ASSURANCE

A suitable quality strategy will be followed to assure the quality of the services provided by the laboratory. This include,

- Head of laboratory services will conduct random checks to all procedures or tests.
- Daily internal quality checks.
- Internal quality checks for analytical error detection.
- Cross checking and repeat testing of abnormal values.
- Thrice a day calibration of tests.
- Calibrated pipettes and instruments are used.
- Periodic quality assessment by head of the department.

The lab periodically conducts various training on quality assurance like IQC, continuous medical education, safe waste disposal etc. Every new employee joining the laboratory department hospital are given in service training and the same is supervised by the medical officer in charge. Vendors of the different equipment in the laboratory are invited regularly to conduct training on the appropriate usage and the technology of their equipment. Whenever any new equipment is installed in the lab, appropriate training from company engineers are ensure regarding its safe and effective use etc are imparted to the users of the equipment in the laboratory.




MEDICAL OFFICER

FHC PANAVALLY

Medical Officer
Family Health Centre
Panavally 688526