



PROFICIENCY TESTING REPORT

ISHTM-AHMS EXTERNAL QUALITY ASSURANCE PROGRAMME

NABL accredited program as per ISO/IEC 17043:2010 standard Organized By Department of Hematology, AIIMS, New Delhi-110029



 $Duration\ of\ stability\ testing\ -\ minimum\ up to\ 8\ days\ at\ ambient\ temp.\ after\ dispatch\ of\ specimens$

EQAP CODE No.: 4777

Distribution No.: 158-L

Month/Year: January/2023

Instrument ID: yumizen 550

Name & Contact No. of PT Co-ordinator: Dr. Seema Tyagi (Prof.), Hematology, AIIMS, Delhi, Tel: 9013085730 F-Mail: accuracy2000@gmail.com

Tel: 9013085730 , E-Mail : accuracy2000@gmail.com

Date of issue & status of the report: 23-02-2023[Final].

CBC and Retic Assessment

| | | | 学校 张春 | Amo | ng Lab (Ac | curacy Testi | ng) | With | in Lab (Pre | ecision Testi | ng) |
|--------------------------|-------|---------------------|---------------------|---|---|--------------------------------------|------------|------------------|---|---------------|-------|
| Test Parameters | S.No. | Your Result 1 | Your Result 2 | Your Results Sum of 2 Value | Consensus result sum of 2 values (Assigned Value) | Uncertainty of Assigned Values | Z Score | Yours Results | Consensus Result Diff. of 2 values (Assigned Value) | | 7 |
| WBC x10³/μl | 1 | 1.18 | 1.17 | 2.35 | 9.2 | 0.0280 | -10.15 | 0.01 | 0.1 | 0.0060 | -0.81 |
| RBC x10 ⁶ /µl | 1 | 4.77 | 4.73 | 9.5 | 9.42 | 0.0130 | 0.23 | 0.04 | 0.05 | 0.0030 | -0.22 |
| Hb g/dl | 1 | 13.8 | 13.6 | 27.4 | 26.9 | 0.0280 | 0.75 | 0.2 | 0.1 | 0.0080 | 0.67 |
| НСТ% | 1 | 40 | 39.6 | 79.6 | 85 | 0.2400 | -0.69 | 0.4 | 0.4 | 0.0240 | 0.00 |
| MCV-fi | 1 | 83.9 | 83.8 | 167.7 | 183.2 | 0.4090 | -1.16 | 0.1 | 0.2 | 0.0180 | -0.34 |
| MCH-Pg | 1 | 28.9 | 28.9 | 57.8 | 57.2 | 0.0640 | 0.35 | 0 | 0.2 | 0.0160 | -0.90 |
| MCHC-g/d | 1 1 | 34.4 | 34.4 | 68.8 | 62.8 | 0.1560 | 1.05 | 0 | 0.3 | 0.0210 | -1.01 |
| Plt. x103/1 | ıl 1 | 221 | 216 | 437 | 452 | 1.51 | -0.34 | 5 | 6 | 0.37 | -0.17 |
| Retic % | 2 | 20.5 | 19.8 | 40.3 | 20.5 | 0.37 | 1.78 | 0,7 | 0.7 | 0.05 | 0.00 |

P.S . Assesment

| | | YOUR REPORT | CONSENSUS REPORT |
|-------------------|---|--|---|
| DLC% | 3 | Nrbcs=2, Poly=43 L=21, E=, Mono/Promono=, B1= P.M.=01, Mye=10, Meta=25, Other= | Poly: 28 - 51, Myelo: 12 - 22, Meta: 10- 20, Lympho: 3- 10, Eosino: 1-4 Promyelo: 2-8, nRBC/Blast/Baso/Mono: 0 - 5 |
| RBC Morphology | 2 | Normocytic Normochromic | Predominantly: Normocytic/Normochromic; Moderate: Anisocytosis, hypochromia, Microcytosis; Mild: Macrocytosis, Poikilocytosis |
| Diagnosis | 3 | | Chronic Myeloid Leukemia (Chronic Phase) |

Reviewel

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COMBINED DATA VALUES OF TOTAL PARTICIPANTS

| Test parameters | Total participants S.No. covered in the | | Total No. | % of Labs with Z Score 0-2 | | % of Labs with Z Score 2-3 | | % of Labs with Z Score >3 | |
|-----------------|---|-----------------------|-----------|-------------------------------|---------------|-------------------------------|---------------|------------------------------|---------------|
| | ou vo. | current dist. 158L | responded | Among labs | Within lab | Among labs | Within lab | Among labs | Within lab |
| WBC x10³/μl | 1 | 338 | 337 | 83.09 | 93.47 | 4.15 | 3.56 | 12.76 | 2.97 |
| RBC x10⁵/µl | 1 | 338 | 338 | 88.17 | 88.76 | 6.51 | 4.44 | 5.32 | 6.8 |
| Hb g/dl | 1 | 338 | 338 | 86.98 | 84.32 | 5.62 | 6.21 | 7.4 | 9.47 |
| HCT% | 1 | 338 | 336 | 97.62 | 90.77 | 1.79 | 3.57 | 0.59 | 5.66 |
| MCV-fl | 1 | 338 | 337 | 99.11 | 85.76 | 0.89 | 3.86 | 0 | 10.38 |
| MCH-Pg | 1 | 338 | 337 | 91.69 | 89.91 | 4.45 | 5.34 | 3.86 | 4.75 |
| MCHC-g/dl | 1 | 338 | 337 | 98.52 | 88.43 | 0.89 | 5.64 | 0.59 | 5.93 |
| Plt. x10³/μl | 1 | 338 | 337 | 95.55 | 88.72 | 3.56 | 5.93 | 0.89 | 5.35 |
| ReticCount% | 2 | 338 | 217 | 97.7 | 92.17 | 1.84 | 3.23 | 0.46 | 4.60 |
| PS Assessment | 3 | 338 | 212 | Satisfactory | :93.14%, Bo | orderline Sat | . :3.43%, UI | nsatisfactory | :3.43% |

'Comments:

- 1). Among Lab (EQA): CBC result for WBC unacceptable, may be due to random/human error.PS Diagnosis not reported, remaining results acceptable
- 2). Within Lab (IQA): Precision acceptable.

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 x 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 $(\overline{x}-\overline{y})$ 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-----



| | TATA 1mg Labs | | |
|--------------------------|---|--|--|
| TATA 1mg | g Technologies Private Limited | | |
| Form Name | Proficiency Testing - Action Needed Form | | |
| Form No. | Gen / FR / 59 | | |
| Issue Date & Version No. | 01-Oct-2021 V1 | | |

Section 1 - Initiation of ANF (to be filled by the person who raising the ANF)

| PT/EQAS Ager | ncy - CAP - All | IS D BIORAD |) □ Other | |
|-------------------------|---|----------------|-----------------------------|--|
| | distribution ID: ISHTN report: 23-02-2023 | M-AIIMS EQ | AP Distribut | ion No.: 158-L |
| ANF No: DDN/MAR/23/0 | Issued by: Prashan | t Singh Issu | <u>ue Date</u> : 16-03-2023 | Due date: 25-03-2023 |
| Department: H | aematology | | 140 | |
| | XAMINATION: WBC x1 | 0³ /μl | | |
| Sample ID | Result submitted | PT targets | PT acceptable range | Problem/Performance |
| Sample No - 158-L | 1.18/1.17 x10³ /μl | 9.2 x10³ /μl | NA | -10.15 |
| | | | | |
| • | | | | |
| | | 7 | | |
| Comment /Obs | ervations: (e.g. trend, pr | eviously misse | d within last 12 mon | ths, lab in regulatory jeopardy for this analyte?) |
| 1 | | | | |

| <u>SI</u> | ANF-CHECKLIST | Yes | No | N/A |
|-----------|---|----------|----------|----------|
| 1 | Specimen temperature check, as per kit instructions | 1 | | IVA |
| 2 | Specimen storage condition check, as per kit instructions | 1 | | |
| 3 | Specimen physical condition check | √ | | |
| 4 | Sample integrity up to arrival in lab: any shipping, delay or other sample problems? | | √ | |
| 5 | Sample integrity in-house: any problems with sample handling in the lab? | , | 1 | |
| 6 | Were there any instrument problem? | | | |
| 7 | Were there any method problem? | | 1 | |
| 8 | Were there any faulty reagent/QC and Calibrator? | | 1 | |
| 9 | Were there QC trends / problems at time of assay? | 4 | 1 | |
| 10 | Was Peer group data checked, if required | E | 1 | |
| 11 | Were there any Calibration (Intercept/slope) problems at time of assay? | | 1 | |
| 12 | Was water quality checked? | | | √ |
| 13 | Did any technical errors occur due to pipetting error | | 1 | |
| 14 | Did any technical errors occur due to sample mix-up | | 1 | |
| 15 | Did any technical errors occur due to incorrect process, other than reconstitution, dilution or calculation errors, | | 1 | |



Explain why there was no patient impact?

| | TATA 1mg Labs |
|--------------------------|--|
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| Form Name | Proficiency Testing - Action Needed Form |
| Form No. | Gen / FR / 59 |
| Issue Date & Version No. | 01-Oct-2021 V1 |

| 16 | Did any technica | al errors occur due | | / | | | | |
|-----|--|--|-----------------------------|---------------------------------------|----------------------|--------|---------------|---------------|
| 17 | maintenance | ent checked for da | | ✓ | | | | |
| 18 | Was there a lab only, transcription removal) | clerical error? (e.gon error onto result | | √ | | | | |
| 19 | Was there a cle | rical error by the P | | V | | | | |
| 20 | Were there Pati | ent data trends / pr | | | 1 | | | |
| 21 | Were there any | gaps / issues in tra | | | 1 | | | |
| 22 | | | | | | | | |
| 23 | Has sample bee | en re-tested / re-exa | amined? | | | | 1 | |
| 24 | Has the lab per | form Interlaboratory | / Comparison | | | √ , | | |
| Que | stions 4-22 give | details for any Ye | es answers | | | | | |
| | | enance was done t | | cheduled. | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | nswer is yes, give | | | | | | |
| Sam | iple ID | Original result | Repeat value/ Lab Result | PT Targets/ Referral Lab Result | PT/ILC Acce Range | ptable | | eptable/Not |
| NA | | <u>NA</u> | NA | NA | <u>NA</u> | | NA | |
| | | | | | | | | |
| - | | | | | | | | |
| | | | | | | | | |
| | | | | • | | | | |
| Sec | tion 3 Root caus | se (Refer to Non-c | onformance erro | or Reason) | 文学的种种的 | CHECK | The Mark Mark | HINE ISPERIEN |
| | | | | | | | | |
| 1 | , | 1 | | | | | | |

Why do you think the non-conformance / error occurred? Use this area to explain your findings.

Same issue has been observed PAN India with WBC where the EQAS sample was performed on Horiba H550 instrument.

Assessment of the impact of root cause on patient results (Patient results may be affected before, during or after the PT event). Describe how the conclusion of impact was made and any corrective actions made to the patient result(s); "If No" -



| TATA 1mg Labs | | | | | |
|--------------------------|---|--|--|--|--|
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There is no patient impact as the ILC result for a sample which had similar WBC Count was sent and the results are concordant.

| Describe any previous proficien | ov tooting issues with th | nic tost in the last cycle: | |
|---------------------------------|-------------------------------------|---|-----------------------------|
| Same issue was observed wit | h the previous EQAS | result of WBC. | |
| Section 4: Department - Co | nclusion & Corrective | / Preventive Action | |
| What corrective action have | you carried out? | | |
| The pre analytical, analytical | and post analytical a | ssessment has been done, There a | re no issue observed.ILC ha |
| been done with one patient | sample to rule out any | y patient impact.The ILC result is s | atisfactory. |
| Also the daily QC is being n | | | |
| | | | |
| Preventive action put into p | lace? | | |
| . The issue has been escalate | ed to the Central QA to | eam.As per the Central QA team Cl | BC will be enrolled with |
| Metropolis EQAS.The first of | cycle for Metropolis E | QAS is expected in April 23. We wil | I closely monitor the next |
| Metropolis EQAS cycle for | any outliers. | | |
| Due date for closure of pro | | preventive action: NA | |
| | | | |
| Signature with Date: | on investigated Overthe form along | Department Manager with supporting documents to QA. | Lab Director |
| Date when ANF received to | QA along with suppor | rting documents: | by: |



Name : Miss. ILC MANJU GOEL Client Name : PROFICIENCY TESTING
Age/Gender : 65 Y 0 M 0 D /Female DOB: Registration Date : 20-Mar-23 06:58 PM
: DDN23032 Collection Date : 20/Mar/2023 07:01PM

Patient ID : DDN23922 Collection Date : 20/Mar/2023 07:01PM

Barcode ID/Order ID : B1799188 / Sample Receive Date : 21/Mar/2023 08:33AM

Referred By : SELF Report Status : Final Report

Referred By : SELF Report Status : Final Report
Sample Type : Whole Blood-EDTA Report Date : 21/Mar/2023 12:03PM

HAEMATOLOGY

| | H | AEMATOLOGY | | | |
|------------------------------|--------|------------|--------------------|------------------------------------|--|
| Test Name | Result | Unit | Bio. Ref. Interval | Method | |
| Complete Blood Count | | | 10.0 15.0 | Cyanide Free SLS | |
| Hemoglobin | 12.9 | g/dL | 12.0 - 15.0 | Impedance | |
| RBC | 4.57 | 10^6/cu.mm | 3.8-4.8 | Calculated | |
| НСТ | 39.1 | % | 36-46 | RBC pulse measurement | |
| MCV | 85.6 | fL | 83 - 101 | Calculated | |
| MCH | 28.4 | pg | 27 - 32 | Calculated | |
| MCHC | 33.1 | g/dL | 31.5 - 34.5 | Calculated | |
| RDW-CV | 20.4 | % | 11.6-14 | Impedance | |
| Total Leucocyte Count | 8.19 | 10^3/μL | 4 - 10 | Impedance | |
| Differential Leucocyte Count | | | | DINIG/ | |
| Neutrophils | 62.3 | % | 40-80 | Flowcytometery DHHS/ Microscopy | |
| Lymphocytes | 27.4 | % | 20-40 | Flowcytometery DHHS/ Microscopy | |
| Monocytes | 7.6 | % | 2-10 | Flowcytometery DHHS/ Microscopy | |
| Eosinophils | 2.5 | % | 1-6 | Flowcytometery DHHS/ Microscopy | |
| Basophils | 0.2 | % | 0-2 | Impedance / Microscopy | |
| Absolute Leucocyte Count | | | | | |
| Absolute Neutrophil Count | 5.1 | 10^3/μL | 2-7 | Calculated | |
| Absolute Lymphocyte Count | 2.24 | 10^3/μL | 1-3 | Calculated | |
| Absolute Monocyte Count | 0.62 | 10^3/μL | 0.2-1 | Calculated | |
| Absolute Eosinophil Count | 0.2 | 10^3/μΙ | 0.02-0.5 | Calculated | |
| Absolute Basophil Count | 0.02 | 10^3/μL | 0.02-0.1 | Calculated | |
| Platelet Count | 295 | 10^3/μL | 150-410 | Impedance /Microscopy | |
| MPV | 10.2 | fL | 6.5 - 12 | Calculated | |
| PDW | 19 | fL | 9-17 | Calculated | |

Comment:

• As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts

Dr. Reema Agrawal MBBS, MD (Pathology) Consultant Pathologist Reg No: 56096



PO1132507903-620

: Ms.MANJU GOEL Name

Age/Gender : 65/Female DOB:

: DDN23846 Patient ID Barcode ID/Order ID : D1799188 / 6892562

: Dr. Referred By

: Whole Blood-EDTA Sample Type

: TATA 1MG DEHRADUN

: 20-Mar-23 11:08 AM

Registration Date : 20/Mar/2023 07:03AM Collection Date : 20/Mar/2023 11:28AM

Sample Receive Date : Final Report Report Status

: 20/Mar/2023 12:15PM Report Date

HAEMATOLOGY

Client Name

| | GOOD H | EALTH GOLD PAC | KAGE | |
|---|--|--|--|--|
| Test Name | Result | Unit | Bio. Ref. Interval | Method |
| Complete Blood Count Hemoglobin RBC HCT MCV MCH MCHC RDW-CV | 13.8 4.61 39.4 85.3 30.0 35.1 18.2 8.99 | g/dL 10^6/cu.mm % fl pg g/dL % 10^3/µI | 12.0 - 15.0 3.8 - 4.8 36 - 46 83 - 101 27 - 32 31.5 - 34.5 11.6-14 4 - 10 | Spectrophometry Electrical Impedence Pulse Height Average Calculated Calculated Calculated Calculated Calculated DHSS/Microscopy |
| Total Leucocyte Count Differential Leucocyte Count Neutrophils Lymphocytes Monocytes Eosinophils | 70.0 25.0 2.0 3.0 0.0 | % % % % % | 40 - 80 20 - 40 2 - 10 1 - 6 0 - 2 | DHSS/Microscopy DHSS/Microscopy DHSS/Microscopy DHSS/Microscopy |
| Basophils Absolute Leucocyte Count Absolute Neutrophil Count Absolute Lymphocyte Count Absolute Monocyte Count Absolute Eosinophil Count Absolute Basophil Count Platelet Count | 6.29 2.25 0.18 0.27 0 264 | 10^3/μΙ 10^3/μΙ 10^3/μΙ 10^3/μΙ 10^3/μΙ 10^3/μΙ | 2-7 1-3 0.2-1 0.02-0.5 0.02-0.1 150 - 410 | Calculated Calculated Calculated Calculated Calculated Electrical Impedence/Microscopy |
| MPV PDW | 10.5 ~~ 19 | fl fl. | 6.5 - 12 9 - 17 | Calculated Calculated |

Comment:

 As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of blood.



