

Metropolis Healthcare Ltd., EQAS

TATA 1 MG LABS(TATA 1 MG TECHNOLOGIES PVT LTD) (803)

Outlier And Analyte Summary Report Result Details For Cycle No 230104 and Sample No 01

Report Date: 19/05/2023

Instrument:

Clinitex status +

Analyte	Standard Unit	Result Value	Accepted Value
@ pH	-	5.5	5,5.5,6
@ Specific Gravity	<u>-</u>	1.015	1.015,1.020,1.025
@ Glucose (urine)	<u>.</u> .	3+	+2,+3,+4
X Protein (Urine)		2+	+1,Tr
@ Ketone (urine)	•	Negative	Neg
X Blood (urine)	<u>_</u>	Trace	Neg
@ Bilirubin (urine)		Negative	Neg
@ Urobilinogen (urine)	-	Normal	Nor
@ Nitrite (urine)		Present	Pre

Instrument:

Analyte	Standard Unit	Result Value	Accepted Value
@ Urine Pregnancy Test	-	Negative	Neg
Legend @: Acceptable		Total Parameters	
@: Acceptable		X /	
X : Unacceptable		Not Evaluated Parameters	2
#: Not Evaluated		Evaluated Parameters	8
" . Not Evaluated	- 1	Outlier Parameters (X)	2
Delayed Result Entry	EQAS Score Clinical	Path - Urine Routine Chemistry	_

Aknijam

Dr Puneet Kumar Nigam
PT coordinator & Technical Manager, MHL EQAS
Unit No. 409-416.
Commercial Building - 1A
Kohinoor Mall, Kirol Road, Kurla (W),
Mumbai - 400070



	TATA 1mg Labs
TATA 1n	ng Technologies Private Limited
Form Name	Proficiency Testing - Action Needed Form
Form No.	Gen / FR / 59
Issue Date & Version No.	01-Jul-2022 V2

Section 1 - Init	iation of Al	NF (to be filled	by the pers	on who rais	ing the	ANF)	
PT/EQAS Age			BIORAL			RML	□ Other
Survey name & Date on agency			Cycle No	230104			
ANF No: DDN/MAY/23/05		<u>/</u> : Prashant Sin	gh <u>Iss</u> ı	ı <u>e Date</u> :03-Jı	ın-2023	3 <u>D</u>	ue date: 13-Jun-2023
Department: CI	inical Patho	ology					
ANALYTE or EX	KAMINATIO	N: Protein (Ur	ine)				
Sample ID	Result submitted	PT targ	ets PT	acceptable	range		Problem/Performance
Sample No 01	2+	+1, Tr		•		Una	cceptable
Comment /Obse	ervations: (e	.g. trend, previo	ously missed	l within last 1	2 mont	hs, lab	in regulatory jeopardy for this analyte?)

SI	ANF-CHECKLIST	Yes	No	N/A
1	Specimen temperature check, as per kit instructions	7		IVA
2	Specimen storage condition check, as per kit instructions	~		
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?		~	
6	Were there any instrument problem?		1	
7	Were there any method problem?		7	
8	Were there any faulty reagent/QC and Calibrator?		1	
9	Were there QC trends / problems at time of assay?		1	
10	Was Peer group data checked, if required		/	
11	Were there any Calibration (Intercept/slope) problems at time of assay?			
12	Was water quality checked?			
13	Did any technical errors occur due to pipetting error		7	
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,		7	
16	Did any technical errors occur due to misinterpretations		7	
17	Was the instrument checked for daily. Weekly. Monthly, semiannually and Annual maintenance	7		



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	only, transcription removal)	clerical error? (e.g on error onto result	form, wrong metho	od details submit	tted, Factor			
19	Was there a cler	rical error by the P	Γ / EQA agency?				/	
20		ent data trends / pr					✓	
21		gaps / issues in tra					✓	
22		condition appropri		sting (mention te	mperature)			✓
23	Has sample bee	n re-tested / re-exa	amined?				~	
24	The state of the s	orm Interlaboratory				✓		
Que	stions 4-22 give	details for any Ye	s answers					
The	instrument was cl	hecked for weekly,	monthly, semiann	ual and annual r	naintenance.N	o issue	found.	
ILC	has been perform	ed with two sample	es at Okhla Lab.					
Que	stion 23/24: if an	swer is yes, give	results of repeat	testing				
Sam	ple ID	Original result	Repeat value/ Lab Result	PT Targets/ Referral Lab Result	PT/ILC Acceptable Range			Acceptable/Not ceptable)
					 			
Sect	tion 3 Root caus	e (Refer to Non-c	onformance erro	r Reason)				
Sect	tion 3 Root caus	e (Refer to Non-c	onformance erro	r Reason)			1000 g 1000	
Sect	tion 3 Root caus	e (Refer to Non-c	onformance erro	r Reason)	North College	3. T 115.	16.7	
Sect	tion 3 Root caus	e (Refer to Non-c	onformance erro	r Reason)				
Sect	tion 3 Root caus	e (Refer to Non-c	onformance erro	r Reason)				
		Refer to Non-conformance			explain your fir	dings.		
Why The	do you think the	non-conformance inalytical and post	error occurred? U	Jse this area to e			n-conforn	nity occurred ma
Why The	do you think the pre-analytical,an	non-conformance inalytical and post	error occurred? U	Jse this area to e			n-conform	nity occurred ma
Why The	do you think the pre-analytical,an	non-conformance inalytical and post	error occurred? U	Jse this area to e			n-conform	nity occurred ma
Why The	do you think the pre-analytical,an	non-conformance inalytical and post	error occurred? U	Jse this area to e			n-conforn	nity occurred ma

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

There is no patient impact as the ILC was performed with two samples at the Okhla lab to rule out patient impact. The

Describe any previous proficiency testing issues with this test in the last sample:NA

Page 2 of 3

Explain why there was no patient impact?

ILC results are found satisfactory.

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Section 4: Department - Conclusion & Corrective / Preventive Action	
What corrective action have you carried out?	
Daily IQC is being monitored regularly.	
ILC has been carried out with two samples at Okhla Lab and results were found concordant.	
Preventive action put into place?	
It will be under observation till the next cycle result evaluation.	
Due date for closure of proposed corrective and preventive action: NA	
Person investigated Department Manager Lab Signature with Date: Note: After signatures please hand over the form along with supporting documents to QA.	Head Hauly I
Date when ANF received to QA along with supporting documents: by: _	



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TATA 1m	g Technologies Private Limited
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Section 1 - Init	iation of ANF (to	be filled by the	person who raising the	ANF)
PT/EQAS Ager		AIIMS BIG		RML □ Other
Survey name &	distribution ID: N	HL EQAS Cycle	No 230104	
	report: 19/05/20			
ANF No:	Issued by: Pra	shant Singh	Issue Date:03-Jun-2023	Due date: 13-Jun-2023
DDN/MAY/23/04				
Department: CI	inical Pathology			
ANALYTE or E	XAMINATION: BI	ood (urine)		
Sample ID	Result submitted	PT targets	PT acceptable range	Problem/Performance
Sample No 01	T			
Cample 140 01	Trace	Negative	-	Unacceptable
Cample 140 01	Trace	Negative	-	Unacceptable
Cample NO 01	Trace	Negative	-	Unacceptable
Cample No 01	Trace	Negative	-	Unacceptable
				Unacceptable s, lab in regulatory jeopardy for this analyte?)

Section 2 - Investigation of Non Conformance- Checklist

SI	ANF-CHECKLIST .	Yes	No	N/A
1	Specimen temperature check, as per kit instructions	✓		
2	Specimen storage condition check, as per kit instructions	✓		,
3	Specimen physical condition check	✓		
4	Sample integrity up to arrival in lab: any shipping, delay or other sample problems?		√ 1	
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?		✓	
10	Was Peer group data checked, if required		1	
11	Were there any Calibration (Intercept/slope) problems at time of assay?		7	
12	Was water quality checked?			/
13	Did any technical errors occur due to pipetting error		7	
14	Did any technical errors occur due to sample mix-up		/	
15	Did any technical errors occur due to incorrect process, other than reconstitution, dilution or calculation errors,		1	
16	Did any technical errors occur due to misinterpretations		7	
17	Was the instrument checked for daily. Weekly. Monthly, semiannually and Annual maintenance	~		
18	Was there a lab clerical error? (e.g. error in unit conversion needed for survey only, transcription error onto result form, wrong method details submitted, Factor	7		

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				- 1			
	removal)						
19	9 Was there a clerical error by the PT / EQA agency?					V	
20	Were there Pat	tient data trends / p	roblems at time of	f assay?		✓	
21	Were there any	gaps / issues in tra	aining or compete	ncy assessment	?	✓	
22	Was the sample	e condition appropr	iate at time of rete	esting (mention to	emperature)	√	
23	Has sample be	en re-tested / re-ex	amined?				✓
24	Has the lab pe	rform Interlaborator	y Comparison			V	
Que	stions 4-22 give	e details for any Ye	es answers	•	•		
The	instrument was	checked for weekly,	monthly, semian	nual and annual	maintenance.No iss	sue found.	
ILC	has been perforr	ned with two sampl	es at Okhla Lab.				
				4			
		nswer is yes, give	results of repeat	t testing	PT/ILC	Ctatus (Assemble/Not
San	iple ID	Original result	Repeat value/ Lab Result	PT Targets/ Referral Lab Result	Acceptable Range		Acceptable/Not ceptable)
	THE PERSON NAMED IN COLUMN 1	market a market a second	HIND TOWNS TOUTSTONE	Daniel Children			tion of the second of the way
Sec	tion 3 Root cau	se (Refer to Non-c	omormance enc	or Reason)	A SAFET WHEN WEST SERVE SORE	Andreas and the second	Self (2012 Albert Mark Self) on happy
Why	do you think the	non-conformance	error occurred? U	Jse this area to e	explain your findings		
		nalytical and post					ies occurred
	be due to a ran						
ever	nt). Describe how	mpact of root cause the conclusion of as no patient impact	impact was made	ts (Patient resule and any correc	ts may be affected tive actions made t	before, durir o the patient	ng or after the Piresult(s); "If No"
The		impact as the ILC v		ith two samples	at the Okhla lab t	o rule out pa	tient impact.The
					•		
			I IAI- AI-I- A		mmla:NIA		
Des	cribe any previou	s proficiency testing	issues with this to	est in the last sar	npie.iva		



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What corrective action have you carried out?
Daily IQC is being monitored regularly.
LC has been carried out with two samples at Okhla Lab and results were found concordant.
Preventive action put into place?
It will be under observation till the next cycle result evaluation.
•
Due date for closure of proposed corrective and preventive action: NA
Person investigated Department Manager Lab Head
ote: After signatures please hand over the form along with supporting documents to QA.
Date when ANE received to On along with supporting documents:by:



TATA 1MG Technologies Pvt. Ltd LABORATORY: Plot No. 1072, Ballupur Road, Chakrata Road, Sunder Vihar, Dehradun - 248001

www.lmg.com/labs care@img.com

CIN: U74140DL2015PTC279229

REGISTERED OFFICE:

LEVEL 3, Vasant Square Mall, Pocket V, Sector B, Vasant Kunj New Delhi - 110070

PO No: PO2640023716-262

Name : Mr.ATUL BHANDARI

Age/Gender : 67/Male Patient ID : DDN32173

Barcode ID/Order ID : D3326477 / 7397640

Referred By : Dr.

Sample Type

: Urine

Client Name

Registration Date

Collection Date

Sample Receive Date

Report Status

: 07-Jun-23 11:00 AM

: 07/Jun/2023 09:47AM

: 07/Jun/2023 11:46AM

: Final Report

Report Date : 07/Jun/2023 02:12PM

CLINICAL PATHOLOGY

GOOD HEALTH GOLD PACKAGE						
Test Name	Result	Unit	Bio. Ref. Interval	Method		
Urine Routine & Microscopy						
Colour	PALE YELLOW		Pale Yellow	Manual		
Appearance	SLIGHTLY TURBID		Clear	Manual		
Specific gravity	1.010		1.003 - 1.035	pKa change		
pH .	6.0		4.6 - 8.0	Double Indicator		
Glucose	Negative		Negative	GOD-POD		
Protein	2+		Negative	Protein Error Principle		
Ketones	Negative		Negative	Nitroprusside		
Blood	1+		Negative	Peroxidase		
Bilirubin	Negative		Negative	Diazonium		
Urobilinogen	0.20		Normal	Ehrlich		
Leucocyte Esterase	3+		Negative	Pyrrole		
Nitrite	Negative		Negative	P-arsanilic acid		
Pus cells	60-70	/hpf	0-5	Microscopy		
Red Blood Cells	3-5	/hpf	0-2	Microscopy		
Epithelial cells	1-2	/hpf	Few	Microscopy		
Casts	Nil	/lpf	Nil	Microscopy		
	Nil	- 1/2 · · · · · · · · · · · · · · · · · · ·	Nil	Microscopy		
Crystals	Nil		Nil	Microscopy		
Yeast Bacteria	Nil		Nil	Microscopy		

Comment:

•Note: Pre-test condition to be observed while submitting the sample-first void, mid stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, Avoid prolonged transit time & undue exposure to sunlight.

•During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections. Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes, ascorbic acid and certain drugs. • Urine microscopy is done in centrifuged urine specimens

*** End Of Report ***

Dr. Anupriya Nautiyal MBBS, MD (Pathology) **Consultant Pathologist**

Reg No: 6189



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TATA IMG Technologies Pvt. Ltd LABORATORY: 2nd Floor, B-225, Okhla Industrial Area, Phase - 1. New Delhi, 110020

www.lmg.com/labs a care@Img.com CIN: U74140DL2015PTC279229

REGISTERED OFFICE: LEVEL 3, Vasant Square Mall, Pocket V, Sector B, Vasant Kunj New Delhi - 110070



: Mr.ATUL BHANDARI ILC Name

: 67 Y 0 M 0 D / Male Age/Gender

: OKH760418 Patient ID

Barcode ID/Order ID : aZ3326477 / DDN32247

: SELF Referred By : Urine Sample Type

Client Name

Registration Date

Collection Date

Sample Receive Date

Report Status Report Date

TATA IMG OKHLA

: 08-Jun-23 07:42 PM

: 08/Jun/2023 07:44PM : 08/Jun/2023 07:46PM

: Final Report

: 08/Jun/2023 08:40PM

CLINICAL PATHOLOGY

Test Name Result	Unit	Bio. Ref. Interval	Method
------------------	------	--------------------	--------

Urine Routine & Microscopy						
Colour Appearance Specific gravity	PALE YELLOV SLIGHTLY HA 1.010		Pale Yellow Clear 1.003 - 1.035 pKa change			
pH Glucose Protein Ketones Blood Bilirabin	6.0 NEGATIVE 2+ NEGATIVE 1+ NEGATIVE NORMAL		4.6 - 8.0 Negative Negative Negative Negative Negative Negative Normal	Double Indicator GOD-POD Protein Error Principle Nitroprusside Peroxidase Diazonium Ehrlich		
Urobilinogen Leucocyte Esterase Nitrite Pus cells Red Blood Cells	3+ NEGATIVE 15-20 2-3	Apf Apf	Negative Negative 0-5 0-2 Few	Pyrrole P-arsanilic acid Microscopy Microscopy Microscopy		
Epithelial cells Casts Crystals Yeast Bacteria	1-2 NIL NIL NIL NIL	Ληρί Αρί	NI NI NI	Microscopy Microscopy Microscopy Microscopy		

•Note: Pre-test condition to be observed while submitting the sample-first yold, mid stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, Avoid prolonged transit time & undue exposure to sunlight.

*During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections. Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes, ascurbic acid and certain drugs. Urine microscopy is done in centrifuged urine specimens

*** End Of Report ***





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Dehradun - 248001 www.lmg.com/labs

CIN: U74140DL2015PTC279229

REGISTERED OFFICE:

LEVEL 3, Vasant Square Mall, Pocket V, Sector B, Vasant Kunj New Delhi - 110070

PO No: PO3088021134-504

Name : Mr.D S RAWAT

Age/Gender : 57/Male Patient ID : DDN32175

Barcode ID/Order ID : D3325419 / 7394898

Referred By : Dr. Sample Type : Urine Client Name

Registration Date

Collection Date

Sample Receive Date

Report Status

Report Date

: TATA 1MG DEHRADUN

: 07-Jun-23 11:00 AM : 07/Jun/2023 06:12AM

: 07/Jun/2023 11:45AM : Final Report

: 07/Jun/2023 02:10PM

CLINICAL PATHOLOGY FULL BODY HEALTH PACKAGE

Docult.	Unit	Dia	Dof	Intornal	NA

Test Name	Result Unit		Bio. Ref. Interval	Method	
Urine Routine & Microscopy					
Colour	PALE YELLOW		Pale Yellow	Manual	
Appearance	CLEAR		Clear	Manual	
Specific gravity	<=1.005		1.003 - 1.035	pKa change	
pH	6.5		4.6 - 8.0	Double Indicator	
Glucose	Negative		Negative	GOD-POD	
Protein	Negative		Negative	Protein Error Principle	
Ketones	Negative		Negative	Nitroprusside	
Blood	Negative /		Negative	Peroxidase	
Bilirubin	Negative		Negative	Diazonium	
Urobilinogen	0.20		Normal	Ehrlich	
Leucocyte Esterase	Negative		Negative	Pyrrole	
Nitrite	Negative		Negative	P-arsanilic acid	
Pus cells	0-1	/hpf	0-5	Microscopy	
Red Blood Cells	NIL	/hpf	0-2	Microscopy	
Epithelial cells	1-2	/hpf	Few	Microscopy	
Casts	Nil	/lpf	Nil	Microscopy	
Crystals	Nil		Nil	Microscopy	
Yeast	Nil		Nil	Microscopy	
Bacteria	Nil		Nil	Microscopy	

Comment:

•Note: Pre-test condition to be observed while submitting the sample-first void, mid stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum,

Avoid prolonged transit time & undue exposure to sunlight. •During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections. Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes, ascorbic acid and certain drugs. • Urine microscopy is done in centrifuged urine specimens

*** End Of Report ***

Dr. Anupriya Nautiyal

MBBS, MD (Pathology) Consultant Pathologist Reg No: 6189





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CIN: U74140DL2015PTC279229

REGISTERED OFFICE: LEVEL 3, Vasant Square Mall, Pocket V, Sector B, Vasant Kunj New Delhi - 110070



Name

: Mr.D S RAWAT ILC

Client Name

Age/Gender

: 57 Y 0 M 0 D /Male

Registration Date

: 07-Jun-23 06:41 PM

Patient ID

: DDN32246

Collection Date

: 07/Jun/2023 06:45PM

Barcode ID/Order ID

: Z3325419 /

Referred By

Sample Receive Date

: 08/Jun/2023 06:30AM

Sample Type

: SELF : Urine

Report Status Report Date

: Final Report : 08/Jun/2023 11:24AM

CLINICAL PATHOLOGY

Test Name

Result

Bio. Ref. Interval Unit

Method

pKa change

Urine Routine & Microso	copy
Colour	
Appearance	
Specific gravity	
pH	
Glucose	
Protein	
Ketones	
Blood	
Bilirubin	
Urobilinogen	
Leucocyte Esterase	
Nitrite	
Pus cells	
Red Blood Cells	
Epithelial cells	
Casts	
Crystals	
Yeast	
Bacteria	

Pale Yellow PALE YELLOW Clear CLEAR 1.003 - 1.035 1.010 4.6 - 8.06.5 Negative **NEGATIVE** Negative NEGATIVE Negative **NEGATIVE** Negative **NEGATIVE** Negative NEGATIVE Normal NORMAL Negative **NEGATIVE** Negative NEGATIVE 0-5 /hpf 1-2 0-2 **hpf** NIL Few 1-2 /hpf Nil /lpf NIL Nil NIL

Double Indicator GOD-POD Protein Error Principle Nitroprusside Peroxidase Diazonium Ehrlich Pyrrole P-arsanilic acid Microscopy Microscopy Microscopy Microscopy Microscopy Nil Microscopy Microscopy Nil

*Note: Pre-test condition to be observed while submitting the sample-first void, mid stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum,

Avoid prolonged transit time & undue exposure to sunlight. During interpretation, points to be considered are Negative nitrite test does not exclude the urinary tract infections. Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet. False positive reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic

dyes, ascorbic acid and certain drugs. Urine microscopy is done in centrifuged urine specimens

NIL

NIL

*** End Of Report ***





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