



Proficiency Testing (PT)

I	To be completed by SRL		
1	Name of the State	<input type="text" value="Tamil Nadu"/>	* All the fields are mandatory
2	Name of District	<input type="text" value="COIMBATORE"/>	*
3	Name of linked SRL	<input type="text" value="GMC, Coimbatore, Tamil Na"/>	*
4	Email Address	<input type="text" value="ictcsinganallur@gmail.com"/>	*
5	Name of the ICTC	<input type="text" value="SINGANALLUR"/>	*
6	SIMS Code / ID	<input type="text" value="3302601"/>	*
7	Round	<input type="text" value="Second"/>	* Year <input type="text" value="2022-23"/>
II	Proficiency Testing Samples		
1	RCA/CA done for discordant samples for last round	<input type="text" value="No"/>	Root Cause Analysis (RCA), Corrective Action (CA)
2	Sample received Date	<input type="text" value="2023-04-12"/>	Sample tested Date <input type="text" value="2023-04-13"/>
	Reviewed by SRL		
3	Panel member 1-->	<input type="text" value="A1"/> result--> <input type="text" value="Positive"/>	SRL review result--> <input type="text" value="Concordant"/>
4	Panel member 2-->	<input type="text" value="A2"/> result--> <input type="text" value="Negative"/>	SRL review result--> <input type="text" value="Concordant"/>
5	Panel member 3-->	<input type="text" value="A3"/> result--> <input type="text" value="Positive"/>	SRL review result--> <input type="text" value="Concordant"/>
6	Panel member 4-->	<input type="text" value="A4"/> result--> <input type="text" value="Negative"/>	SRL review result--> <input type="text" value="Concordant"/>
7	Remarks by ICTC	<input type="text" value="NIL"/>	
8	Date & time of data submitted by ICTC	<input type="text" value="13-04-2023 03:14:35 PM"/>	PT Final Result <input type="text" value="Satisfactory"/>
9	Remarks by SRL	<input type="text" value="Satisfactory"/>	
10	Date & time of data submitted by SRL	<input type="text" value="20-04-2023 02:24:12 PM"/>	

Print

Please cross check all details before submitting