



Metropolis Healthcare Ltd., EQAS

KRSNAA DIAGNOSTICS LTD KAPURTHALA (1043)

Outlier And Analyte Summary Report

Outlier Details For Cycle No 240104 and Sample No 01

Report Date : 10/07/2024

Analyte	Instrument	Result Value	Standard Unit	Z-Score
No Outlier				
Legend @ : z score \leq 2.0 - Acceptable ! : 2.0 < z score < 3.0 - Warning X : z score \geq 3 - Unacceptable # : Not Evaluated ⌚ : Delayed Result Entry * : Not considered for evaluation.				

Problem Classification: _____

Corrective Action: _____

Reviewed by: _____

Dated: _____

Instrument : Diasys 200 Pro

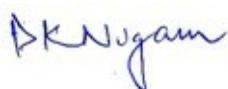
Analyte	Standard Unit	Result Value	Mean	Z-Score	RMZ
@ Urea	mg/dl	46.70	40.67	1.95	0.77
@ Creatinine	mg/dl	1.10	0.85	0.95	1.44
@ Bilirubin Total	mg/dl	0.30	0.45	-0.62	0.45
@ Bilirubin Direct	mg/dl	0.13	0.22	-1.00	-0.73
@ Total Protein	g/dL	6.99	6.81	0.66	0.10
@ Albumin	g/dL	4.00	4.20	-0.37	0.27
@ Uric Acid	mg/dl	4.45	4.36	-0.05	-0.11
@ Calcium	mg/dl	8.99	8.82	0.44	-0.22
@ Cholesterol	mg/dl	172.00	170.36	-0.04	-0.31
@ Triglycerides	mg/dl	150.80	137.36	0.75	0.44
@ HDL	mg/dl	34.00	31.25	-0.27	0.16
@ LDL	mg/dl	90.36	99.01	-1.14	-0.72
@ ALT	U/L	24.40	21.41	0.96	0.25
@ AST	U/L	37.95	41.16	0.11	-0.33
@ ALP	U/L	84.83	70.28	0.25	0.81

Instrument : ACCULYTE-3P

Analyte	Standard Unit	Result Value	Mean	Z-Score	RMZ
@ Chloride	mmol/L	114.42	114.30	0.28	0.53
@ Sodium	mmol/L	164.86	162.40	0.23	-0.48
@ Potassium	mmol/L	6.50	6.31	0.42	-0.10

Legend @ : Acceptable
 ! : 2.0 < z score < 3.0 - Warning
 X : z score ≥3 - Unacceptable
 # : Not Evaluated
 ⊙ : Delayed Result Entry
 * : Not considered for evaluation.

Total Parameters	18
Not Evaluated Parameters	0
Evaluated Parameters	18
Outlier Parameters (X)	0
EQAS Score Biochemistry	100.00 %



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



Metropolis Healthcare Ltd., EQAS

KRSNAA DIAGNOSTICS LTD KAPURTHALA (1043)

Outlier And Analyte Summary Report

Outlier Details For Cycle No 240104 and Sample No 02

Report Date : 10/07/2024

Analyte	Instrument	Result Value	Standard Unit	Z-Score
! Urea	Diasys 200 Pro	34.10	mg/dl	2.12
! Creatinine	Diasys 200 Pro	1.30	mg/dl	2.14
Legend @ : z score \leq 2.0 - Acceptable ! : $2.0 < z \text{ score} < 3.0$ - Warning X : z score ≥ 3 - Unacceptable # : Not Evaluated ⌚ : Delayed Result Entry * : Not considered for evaluation.				

Problem Classification: _____

Corrective Action: _____

Reviewed by: _____

Dated: _____

Instrument : Diasys 200 Pro

Analyte	Standard Unit	Result Value	Mean	Z-Score	RMZ
@ Glucose	mg/dl	93.10	71.18	1.08	0.32
! Urea	mg/dl	34.10	26.57	2.12	0.77
! Creatinine	mg/dl	1.30	0.99	2.14	1.44
@ Bilirubin Total	mg/dl	0.30	0.35	0.04	0.45
@ Bilirubin Direct	mg/dl	0.04	0.14	-1.10	-0.73
@ Total Protein	g/dL	7.81	7.58	0.64	0.10
@ Albumin	g/dL	4.00	4.19	-0.23	0.27
@ Uric Acid	mg/dl	4.64	4.32	0.07	-0.11
@ Calcium	mg/dl	8.77	8.55	0.03	-0.22
@ Cholesterol	mg/dl	173.00	162.79	0.25	-0.31
@ Triglycerides	mg/dl	167.00	135.91	1.73	0.44
@ HDL	mg/dl	31.00	29.24	-0.16	0.16
@ LDL	mg/dl	90.55	89.65	-0.37	-0.72
@ ALT	U/L	5.40	5.92	-0.17	0.25
@ AST	U/L	13.01	13.94	-0.51	-0.33
@ ALP	U/L	59.66	45.36	0.26	0.81

Instrument : ACCULYTE-3P

Analyte	Standard Unit	Result Value	Mean	Z-Score	RMZ
@ Chloride	mmol/L	104.45	105.34	0.25	0.53
@ Sodium	mmol/L	136.87	133.36	0.23	-0.48
@ Potassium	mmol/L	5.31	5.13	0.31	-0.10

Legend @ : Acceptable

! : 2.0 < z score < 3.0 - Warning

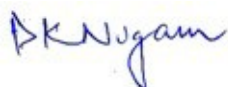
X : z score ≥ 3 - Unacceptable

: Not Evaluated

⊙ : Delayed Result Entry

* : Not considered for evaluation.

Total Parameters	19
Not Evaluated Parameters	0
Evaluated Parameters	19
Outlier Parameters (X)	0
EQAS Score Biochemistry	100.00 %



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

none

19/7/24
Acceptable Res
1.30mg

19/7/24
Acceptable Results
3.010 mg/dl

Sample receipt

YES NO NA



Krсна Dіаgнoѕtісѕ Ltd,
Sultānрur Rоad Cіvіl
Hоѕріtal Kāpurthāhā
Pіn Cоde- 144601

INTER LABORATORY COMPARISON RESULTS

Sr. No	Date	Analyte Name	Barcode ID	Lab Result	Unit	ILC Lab Result	Unit	Acceptability Criteria	Observed CV %	Acceptability range	Result Acceptable Yes / No	Done by	Reviewed by
1	19/7/24	Urea	116323358	28.10	mg/dl	26.50	mg/dl	29.48 - 33.72	5.62%	5.6%	Yes	Bhar	Bhar
2	19/7/24	creatinine	116323358	1.00	mg/dl	1.00	mg/dl	0.8-1.2	0.2%	0%	Yes	Bhar	Ka

Qualitative: Clinically comparable results shall be Concordance
(Clinically not comparable results shall be Disconcordance.)

Quantitative: Acceptability: 10% (As per NABL. 112)

Sign of Doctor

Issued by : Vinod Lankar Vinod

Issue Date : 01/03/2025

Approved by : Dr. Manish Karakar

Version No : 1

Amend No : -

Amend Date

Proficiency Testing Outlier Investigation Form

Laboratory Name : Krsnaa Diagnostics PB Kapurthala

Date 19/7/24 Department Biochemistry Test Analyte Urea Reported Results 26.57 mg/dl

Acceptable Results
34.10 mg/dl

Sample receipt

	YES	NO	NA
Was the kit received in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the correct program/cycle received?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the kit stored at the proper temperature following receipt?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sample Preparation:

Who Prepared sample? Bhawna Date Prepared 26/6/24

	YES	NO	NA
Was the correct reconstitution instruction followed (handling, time, temperature)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was a volumetric Class A (or calibrated) pipette used for reconstitution?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was distilled or deionized water used for reconstitution?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the sample mixed according to the package insert prior to testing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sample Processing:

Who processed test? Bhawna Date of processing 26/6/24

	YES	NO	NA
Was the correct sample number tested?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the sample at room temperature?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the person running the test current in their training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the affected test run within the stability claim listed in the package insert	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reporting Results:

Who reported Results Bhawna Date reported 28/6/24

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Issued by <u>Vinod Lonkar</u> <u>Vinod</u>	Issue Date <u>01.03.2023</u>
Approved by <u>Dr. Manish Karekar</u> <u>Manish</u>	
Doc No. <u>GEN 03</u>	Version No. <u>1</u>
Amend No. <u>--</u>	Amend Date

- Was the test configuration correct (instrument, method and reagent)?
- Have the results been reported correctly (match instrument print out)?
- Was the correct unit reported?
- Was the decimal symbol placed correctly when reported?
- Was the reported result within the instrument's linear range?
- Was the calculation of the reported result done correctly?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Internal QC:

- Was IQC within an acceptable range on the day that the EQAS sample was run?
- Where there any shifts or trends in IQC just before/after the EQAS sample was run?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

C on the day on EQAS sample

	Reading	MEAN	SD	CV	Z Score
level-I	43.5	35.95	8.02		
level-II	15.6	15.0	16.5		
level-III					

Previous month IQC

	Mean	SD	CV	Z Score
level-I	30.2	10.32	4.37%	
level-II	15.0	16.5	5.3%	
level-III				

Previous three month EQAS reports

	Z score	BIAS	RMZ
Month-I			
Month-II			
Month-III			

Calibration:

- Was the last calibration acceptable?
- Was the last calibration within the manufacturer's recommended dating?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reagent:

Reagent lot / exp.

Lot _____ Expiration _____

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Approved by Dr. Manish Karekar <i>Manish</i>	
Doc No GEN 03	Version No : 1
Amend No --	Amend Date

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Was the test reagent stored correctly?
- Was the test reagent properly prepared?
- Was the test reagent within manufacturer's dating?

Instrument:

- Was daily maintenance performed on the day that the EQAS sample was run?
- Was the person performing maintenance current on training?
- Was the instrument operating correctly on the day the sample was tested?
- Was the lab environment acceptable for the instrument (temperature, humidity, electrical, etc.)?

Sample Retest:

Who retested sample? Bhawna Date tested _____

YES	NO	NA
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

- Was the EQAS sample retested following receipt of EQAS sample report?
- If yes, was the result within acceptable limits for the EQAS sample?

EQAS Evaluation:

- Inappropriate peer group or comparator?
- Inappropriate evaluation criteria, e.g. narrow limits due to use of a precise method or instrument.

YES	NO	NA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Issued by: Vinod Lonkar <u>Vinod</u>	Issue Date: 01.03.2023
Approved by: Dr Manish Karekar <u>Manish</u>	
Doc No: G/N 03	Version No: 1
Amend No: --	Amend Date:

SOP

YES NO NA

Was the SOP followed correctly?

Staining performed and interpreted correctly?

YES NO NA

Interpretation of microscopic examination interpreted correctly?

YES NO NA

Lot Verification

Type of error identified - Temp. issue

Root cause of the problem - Sample Received with high temp.

Corrective Action → GLC Done For urea.

^{LAB} [116323358 → 28.10mg/dl]. And [^{GLC LAB} 26.50mg/dl].

Signature and Name of Technologist / Section Head

Bhaon

Review by QM / HO / TM: Sign and Name

Issued by Vinod Lonkar <u>Vinod</u>	Issue Date 01.03.2023		
Approved by Dr. Manish Karekar <u>Manish</u>	Version No. 1	Amend No. --	Amend Date .
Doc No. GEN 03			

Proficiency Testing Outlier Investigation Form

Laboratory Name : Krsnaa Diagnostic PB Kapurthala

Date: 19/7/24 Department: Biochemistry Test Analyte: creatinine Reported Results: 0.99 mg/dl
 Acceptable Results: 1.30 mg/dl

Sample receipt

- Was the kit received in good condition?
- Was the correct program/cycle received?
- Was the kit stored at the proper temperature following receipt?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sample Preparation:

Who Prepared sample? Bhawna Date Prepared 26/6/24

- Was the correct reconstitution instruction followed (handling, time, temperature)?
- Was a volumetric Class A (or calibrated) pipette used for reconstitution?
- Was distilled or deionized water used for reconstitution?
- Was the sample mixed according to the package insert prior to testing?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sample Processing:

Who processed test? Bhawna Date of processing 26/6/24

- Was the correct sample number tested?
- Was the sample at room temperature?
- Was the person running the test current in their training?
- Was the affected test run within the stability claim listed in the package insert

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reporting Results:

Who reported Results Bhawna Date reported 28/6/24

Issued by: Vinod Lonkar <u>Vinod</u>	Issue Date: 01.03.2023		
Approved by: Dr. Manish Karekar <u>Manish</u>			
Doc No. GEN 03	Version No. 1	Amend No. --	Amend Date

- Was the test configuration correct (instrument, method and reagent)?
- Have the results been reported correctly (match instrument print out)?
- Was the correct unit reported?
- Was the decimal symbol placed correctly when reported?
- Was the reported result within the instrument's linear range?
- Was the calculation of the reported result done correctly?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Internal QC:

- Was IQC within an acceptable range on the day that the EQAS sample was run?
- Where there any shifts or trends in IQC just before/after the EQAS sample was run?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

C on the day on EQAS sample

	Reading	MEAN	SD	CV	Z Score
level-I	1.6	1.33	0.145		+1SD
level-II	5.1	4.88	0.533		
level-III					

Previous month IQC

	Mean	SD	CV	Z Score
level-I	1.38	0.16	6.52%	
level-II	4.88	0.553	10.14%	
level-III				

Previous three month EQAS reports

	Z score	BIAS	RMZ
Month-I			
Month-II			
Month-III			

Calibration:

- Was the last calibration acceptable?
- Was the last calibration within the manufacturer's recommended dating?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reagent:

Reagent lot / exp.

Lot _____ Expiration _____

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Approved by Dr. Manish Karekar <i>Manish</i>		Amend Date _____	
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Krsnaa Diagnostics Ltd,
Sultanpur Road Civil
Hospital Kapurthala
Pin Code-144601

- Was the test reagent stored correctly?
- Was the test reagent properly prepared?
- Was the test reagent within manufacturer's dating?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Instrument:

- Was daily maintenance performed on the day that the EQAS sample was run?
- Was the person performing maintenance current on training?
- Was the instrument operating correctly on the day the sample was tested?
- Was the lab environment acceptable for the instrument (temperature, humidity, electrical, etc)?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sample Retest:

Who retested sample?

Date tested

- Was the EQAS sample retested following receipt of EQAS sample report?
- If yes, was the result within acceptable limits for the EQAS sample?

YES	NO	NA
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

EQAS Evaluation:

- Inappropriate peer group or comparator?
- Inappropriate evaluation criteria, e.g. narrow limits due to use of a precise method or instrument.

YES	NO	NA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Approved by: Dr. Manish Karekar <i>Manish</i>	
Doc No: GEN 03	Version No: 1
Amend No: --	Amend Date



SOP

Was the SOP followed correctly?

YES	NO	NA
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Staining performed and interpreted correctly?

YES NO NA

Interpretation of microscopic examination interpreted correctly?

YES NO NA

Lot Verification

Type of error Identified - Temp. Issue

Root cause of the problem - Sample Received with High Temp.

Corrective Action → GLC Done for Creatinine

[^{LAB} 116323358 → 1000 mg/dl] And [GLC 1000 mg/dl]

Signature and Name of Technologist / Section Head

Bhawna

Review by QM / HO / TM: Sign and Name

Issued by: Vinod Lonkar <u>Vinod</u>		Issue Date: 01.03.2023	
Approved by: Dr. Manish Karekar <u>Manish</u>			
Doc No: GEN 03	Version No: 1	Amend No: --	Amend Date: .