



HAEMATOLOGY QAP Result Sheet and Forms Booklet

Participant Number

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CONTENTS:

- Result sheets and Instructions to Participants (on reverse) for most Haematology QAP programs
- Forms –to notify Haematology QAP of changes or to provide feedback
 - HQF 232 Notification of Contact information change
 - HQF 231 Notification of Instrument or Reagent change
 - HQF 18 Participant Concerns / Feedback
 - HQF 150 Request for Additional Sample, Result Amendment and Report Reprint
- Program Schedule and Sign-off

PLEASE NOTE:

- Result sheets for Special Haemostasis are under review and will be issued prior to the first survey of 2012
- CD34, Molecular Diagnostics and Oncology Immunophenotyping are not included
- Use results sheets only for programs in which your laboratory is enrolled

CONTENTS:

- Result sheets and Instructions to Participants (on reverse) for most Haematology QAP programs – Special Haemostasis, CD34, Molecular Diagnostics and Oncology Immunophenotyping are not included. Use only for programs in which your laboratory is enrolled. These sheets are to be used as masters – please photocopy to use for each Survey.
 - Auto Differential sheets - AD1, AD2, AD3, AD4, AD6, AD7
 - Additional Factors sheet - AF
 - Manual Differential sheet – BF
 - D-Dimer sheets – Option 1 DD, Option 2 DS
 - ESR sheet – Options 1 and 2 – ES
 - Full Blood Count sheet – FB
 - G6PD sheet – GD
 - Haemoglobinopathy sheet – HP
 - Haemostasis sheet – HS
 - Malaria sheet – MA
 - Morphology sheet – MO
 - Point-of-Care – INR sheet – POC
 - Reticulocyte sheets – Options 1, 2 and 3 - RE
- Forms –to notify Haematology QAP of changes or to provide feedback
 - HQF 232 Notification of Contact information change
 - HQF 231 Notification of Instrument or Reagent change
 - HQF 18 Participant Concerns / Feedback
 - HQF 150 Request for Additional Sample, Results Amendment and Report Reprint

The above forms can also be located on the RCPA Haematology QAP website.
<http://www.rcpaqap.com.au/haematology/otherforms.cfm>
- Program Schedule and Signoff– General Haematology and POC-INR – to replace the previous Dispatch Declaration

ADDITIONAL INFORMATION:

- Participant numbers have been pre-printed on all result sheets – if you have multiple instruments please record the instrument number in the box provided – labelled “Inst”.
- Please record instrument Manufacturer/Model, serial number and reagent information where requested. This information can be recorded on the “master” sheets at the start of the year for photocopying of all surveys. This information is particularly important for verification purposes when participants have multiple instruments / methods enrolled.
- The units in which results are to be submitted are clearly labelled on all result sheets.

- To ensure your Interim and End of Cycle reports are relevant, it is crucial you notify the Haematology QAP of any instrument or reagent change at the time of changeover. Please use HQF 231 to record any changes.
- Please review the Contact and Delivery address information accompanying this document – Enrolment Confirmation letter. If any of this information is incorrect please use HQF 232 to notify the Haematology QAP of any changes.
- The “contact” person information should be kept up to date as this person will be used for verification purposes when any changes are requested.
- It is the participant’s responsibility to notify the Haematology QAP if any staff member, with an online data account, leaves your organisation. This allows us to delete their account and prevent any further access. Please use HQF 232 for this purpose.

2012 AUTO DIFFERENTIAL

Instructions to Participants

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. They are stabilised whole blood products and are commercially produced by R & D Laboratories.

IMPORTANT INFORMATION:

- The Auto Differential Program is sent 4 times per year.
- Auto Differential Options 5 and 8 have been discontinued due to participant numbers being too low to allow the provision of meaningful statistics.
- The Auto Differential program supplies instrument specific material. It is important to check you have enrolled in the correct Option for your instrumentation.
- If your laboratory changes instruments during the year you must notify the Haematology QAP to guarantee you receive the correct material.
- The material supplied for the different Options have specific handling instructions – please review the back of the result sheets for relevant information.
- **THE PERCENTAGE VALUE, NOT THE ABSOLUTE COUNT, MUST BE REPORTED. In past surveys, courtesy calls were made to participants to resubmit correctly expressed results. No more calls will be made, and results expressed incorrectly will not be accepted.**

Option	Instrument Group
AD1	SYSMEX XT1800i, XT2000i, XE2100/5000, XS1000i, XS800i, XT4000i
AD2	ABBOTT Cell-Dyn 1700, 1800, 3000, 3200/Ruby, 3500, 3700, 4000/Sapphire SIEMENS Advia 70
AD3	BECKMAN COULTER ACT5Diff, ABX Pentra 60 C, Pentra DX 120
AD4	SIEMENS ADVIA 120/2120
AD5*	SYSMEX K-1000, KX-21, K-4500, pocH-100 DELETED 2011
AD6	ABBOTT Cell-Dyn 1200,1300, 1400, 1600 BECKMAN COULTER ACT/ACT Diff, T Series, JT Series, JS, JR, ST, ONYX, MD Series. ABX MICROS 60, Spirit (MINOS), ABX ARGOS NIHON KOHDEN Celltac SIEMENS ADVIA 60 MINDRAY and ORPHEE instrumentation
AD7	BECKMAN COULTER STKS, MAXM, HmX, GEN.S, LH 750/755/780, LH500, Unicell DxH800
AD8*	SYSMEX SE9500, SE9000, SF3000 DELETED 2011

INSTRUCTIONS TO PARTICIPANTS WITH MULTIPLE INSTRUMENTS

If your laboratory has multiple instruments which are all using material from the same Option the easiest method is to record instrument numbers in the same order as the Full Blood Count (FB) Program.

- Example:

FB Program Number	Instrument	AD Option	Instrument No. for that Option	AD Option Number
999.1	Sysmex XE	AD1	1	999.1
999.2	Sysmex XE	AD1	2	999.2
999.3	Sysmex XT	AD1	3	999.3

All instruments belong to Option AD1 so the results can be recorded as above which corresponds to the order of the instruments in the FB Program.

If your laboratory has multiple instruments which belong to different Automated Differential Options the instrument numbers for the Automated Differential will not correspond to the instrument numbers in the FB Program.

- Example:

FB Program Number	Instrument	AD Option	Instrument No. for that Option	AD Option Number
999.1	Sysmex XE	AD1	1	999.1
999.2	Sysmex XE	AD1	2	999.2
999.3	CD4000	AD2	1	999.1
999.4	Sysmex XT	AD1	3	999.3
999.5	LH750	AD7	1	999.1

This laboratory has multiple instruments which requires enrolment in 3 different Automated Differential Options – AD1, AD2 and AD7. Whilst in the FB Program these instruments are simply numbered 999.1 to 999.5 this is not possible in the Automated Differential Program.

Instruments in the same Option are numbered sequentially but if you then change to another Option the instrument number reverts back to xxx.1

If your laboratory has more than one instrument of the same model (eg in this case 2 Sysmex XE instruments) it is the participants responsibility to be consistent in the submission of results. For example Sysmex XE instrument 1 needs to remain the same instrument throughout the cycle for the statistics to be meaningful.

2012 AUTO DIFFERENTIAL OPTION 1

SYSMEX XT1800i, XT2000i, XE2100/XE5000, XS1000i, XS800i, XT4000i

Participant No. _ _ _ _

Inst.

PLEASE SEE REVERSE FOR INSTRUCTIONS

Instrument (Manufacturer/Model):	Serial Number:
----------------------------------	----------------

__/__/__ Due Date	AD12- 1 -□□a	AD12- 1 -□□b	Units
WCC	□□□.□	□□□.□	x 10 ⁹ /L
NEUT / GRAN	□□.□	□□.□	%
LYMP	□□.□	□□.□	%
MONO	□□.□	□□.□	%
EOS	□□.□ * The anomalous eosinophil count (if applicable) must be reported	□□.□ * The anomalous eosinophil count (if applicable) must be reported	%
BASO	□□□.□ * The anomalous basophil count must be reported	□□□.□ * The anomalous basophil count must be reported	%

AUTOMATED DIFFERENTIAL (AD1): INSTRUCTIONS TO PARTICIPANTS

These directions have been obtained from the manufacturer of the control material.

Store samples at 2-8°C until testing can be performed. Sample the vials using the same techniques as those used for patient samples.

XE SERIES

The specimens need to be run into one of the Manual E-Check QC files – for example Level 2 Manual.

The results are then deleted from the QC files and printed from the Explorer screen. See Operators Manual Chapter 2, Section 3.3.1.

- Allow tubes to warm to RT for 15 mins before mixing.
- Press “QC” on the main screen.
- Press “Exec QC” on the QC menu.
- Select one of the manual mode E-Check files – for example “Level 2 Manual”. (Do not use one of the “Other” files).
- Press “Select”.
- Mix the vial by end-to-end inversion until all red blood cells are completely resuspended.
- Aspirate sample.
- Press “Accept”
- Repeat for the next tube.
- Go to “Explorer” and select the RCPA results.
- (You may change the ID of the QC specimens that you have just run from “QC-lot number” to an RCPA ID).
- Print the results.
- Delete results from the QC file that have been accepted.

XT SERIES

The specimens need to be run into one of the Manual E-Check QC files – for example Level 2 Manual.

The results are then printed from the Explorer screen. See Operators Manual Chapter 6, Section 3.1.

- Allow tubes to warm to RT for 15 mins before mixing.
- Go to “QC Analysis” on the main menu.
- (If “QC Analysis” is not visible on the main menu then go to “Controller” then “QC Analysis”).
- Select a manual E-Check QC file – for example “Level 2 Manual”. (Do not select one of the “Other files”).
- Mix the vial by end-to-end inversion until all red blood cells are completely resuspended.
- Aspirate sample.
- Press “Cancel” – Results do not have to be accepted.
- Repeat for the next tube.
- Go to “Explorer” and select the RCPA results.
- (You may change the ID of the QC specimens that you have just run from “QC-lot number” to an RCPA ID).
- Print the results.
- Delete any RCPA results from the QC file that have been accepted.

XS SERIES

The specimens need to be run into one of the Manual QC files – for example Level 2 Manual. The results are then printed from the Explorer screen. See Operators Manual Chapter 6, Section 3.1.

Place results in an E-CHECK FILE.

- Allow tubes to warm to RT for 15 minutes before mixing.
- Mix the vial by end-to-end inversion until all red blood cells are completely resuspended.
- Click on “Manual”.
- Select the QC option.
- Select “level 2 e-check file” and click OK.
- Place the sample in the appropriate adaptor and press the start button. (XS-800i: take the lid off the sample).
- Once sample results appear on the screen, accept the results.
- Go into the “Sample Explorer” screen to print off results and edit sample ID.

2012 AUTO DIFFERENTIAL OPTION 2

CELL DYN 1700, 1800, 3000, 3200/Ruby, 3500, 3700, 4000/Sapphire
SIEMENS ADVIA 70

Participant No. _ _ _ _

Inst.

PLEASE SEE REVERSE FOR INSTRUCTIONS

Instrument (Manufacturer/Model):	Serial Number:
----------------------------------	----------------

__/__/__ Due Date	AD12- 2 -□□a	AD12- 2 -□□b	Unit
WCC WOC Count	□□□.□	□□□.□	x 10 ⁹ /L
NEUT / GRAN	□□.□	□□.□	%
LYMP	□□.□	□□.□	%
MONO	□□.□	□□.□	%
EOS	□□.□	□□.□	%
BASO	□□.□	□□.□	%

AUTOMATED DIFFERENTIAL (AD2): INSTRUCTIONS TO PARTICIPANTS

These directions have been obtained from the manufacturer of the control material.

Store samples at 2-8°C until testing can be performed, Sample the vials using the same techniques as those used for patient samples.

- Remove the vials of control from the refrigerator and warm to room temperature (18°C to 30°C) for 15 minutes before use.
- To mix (Do not mix mechanically).
 - Hold the vial horizontally between the palms of the hands and roll the vial back and forth for 20 to 30 seconds. Do not shake.
 - Mix by rapid inversion until all cells are resuspended.
 - Vials stored for an extended period of time may need extra mixing.
 - Gently invert the vial 8 to 10 times immediately before sampling.
 - Refer to the instrument manual for the system in use for analysing control material.
- After sampling, return to refrigeration for maximum open-vial stability. If run in the open mode, wipe the threads of both the vial and cap before replacing the cap and returning to refrigeration.

NOTE:

- Flags are likely to accompany the differential results when survey samples are tested in patient mode. Please ignore the differential flags.
- WIC and WOC may recover slightly different values. The **WOC** value should be recorded as the total White Cell Count.

2012 AUTO DIFFERENTIAL OPTION 3

BECKMAN COULTER AcT 5 DIFF / ABX Pentra 60C / ABX Pentra DX120

Participant No. _ _ _ _

Inst.

PLEASE SEE REVERSE FOR INSTRUCTIONS









Instrument (Manufacturer/Model):	Serial Number:
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__/__/__ Due Date	AD12- 3 -□□a	AD12- 3 -□□b	Units
WCC	□□□.□	□□□.□	x 10 ⁹ /L
NEUT / GRAN	□□.□	□□.□	%
LYMP	□□.□	□□.□	%
MONO	□□.□	□□.□	%
EOS	□□.□ * The anomalous eosinophil count (if applicable) must be reported	□□.□ * The anomalous eosinophil count (if applicable) must be reported	%
BASO	□□□.□ * The anomalous basophil count must be reported	□□□.□ * The anomalous basophil count must be reported	%

AUTOMATED DIFFERENTIAL (AD3): INSTRUCTIONS TO PARTICIPANTS

Store samples at 2-8°C until testing is performed, Sample the vials in the same manner as patient samples.

PROCEDURE FOR SAMPLES ON THE ACT5DIFF™ AL ANALYSER

1. From the main menu screen click on (QA) 
2. Then click on (QC) 
3. If the Levey-Jennings graphs screen appears, click on  to open the QC data grid screen.
4. At the Control Name field, select a CBC/diff control file (from the drop down box) that is currently not used eg CONTROL 24. Note: only files 13 to 24 will provide differential results.
5. Click on . N.B. there is no need to enter targets or ranges.
6. Move your cursor to the Lot Number field. Enter "RCPA.QAP" as your lot number
7. Make sure the reserved box is ticked Reserved
8. Move your cursor to the Expiration date field and select an expiry date (could be the closing date or a date well into the future)
9. Click on  to save the file setup.
10. Follow the instructions for handling and preparing your RCPA samples.
11. Run your "a" sample into this file in either manual or automatic mode using the "RCPA.QAP" reserved id.
12. Add the "a" sample id as a comment to the result via the graphics screen by clicking on the  icon and saving it with 
13. If Autoprint is not activated, manually print your result by clicking the  icon and following the prompts.
14. Run your "b" sample into this file also.
15. Add the "b" sample id as a comment to the result as above.
16. If Autoprint is not activated, manually print your result as above.
17. From your print out (or screen), you can now record your differential results (ie. Not absolute count) onto your survey results sheet including the high basophil percentage. You may save this file for future processing of RCPA differential samples from step 10 onwards. If so, you may need to adjust the expiration date next time you use the file.

PROCEDURE FOR SAMPLES ON THE ACT5DIFF™ CP ANALYSER

1. From the main screen, click on the **Quality Assurance** Tab.
 2. Click the **Controls** tab at the bottom of the window.
 3. At the Select Control field, select a CBC/diff control file (from the drop down box) that is currently not used eg CONTROL 24. Note: only files 13 to 24 will provide differential results.
 4. Click on the **Setup Control** box.
 5. Enter "RCPA-QAP" in the lot number field.
 6. Press tab to move to the next field.
 7. At the expiration date field, enter an expiry date for the control (could be the closing date or a date well in to the future).
 8. Press tab to move to the next field.
 9. At the Source field, select the source of the material as "Commercial" from the drop down box.
 10. Press tab to move to the next field.
 11. At the Level field, select the level "Normal".
 12. *N.B. You do not need to enter any target values or ranges to now use this file.*
 13. Click on the green tick icon to save and exit the setup screen.
 14. Follow the instructions for handling and preparing your RCPA samples.
 15. Sample your first sample (the "a" sample) into this file by staying in this screen.
 16. When the result appears in the top row, click on that row to highlight it then click on the box.
 17. Enter the "a" sample RCPA id into the comments field.
 18. Sample your second sample (the "b" sample) also into this file.
 19. When the result appears in the top row, click on that row to highlight it then click on the **Add Comment** box and enter the "b" sample id.
 20. Click on your print icon (top left hand corner of the screen) and select "Print all rows" and the green check icon.
 21. From your print out, you can now record your differential results (ie. Not absolute count) onto your survey results sheet including the high basophil percentage. You may save this file for future processing of RCPA differential samples from step 14 onwards. If so, you may need to adjust the expiration date next time you use the file.
- Samples processed on the Act 5 Diff "OV" model must be processed as a PATIENT SAMPLE as there is no QC mode on this analyser. ABX Pentra 60+ MUST be run through QC mode.



2012 AUTO DIFFERENTIAL OPTION 4

SIEMENS ADVIA 120 / 2120

Participant No.
_ _ _ _

Inst.
_ _ _ _

PLEASE SEE REVERSE FOR INSTRUCTIONS

Instrument (Manufacturer/Model):	Serial Number:
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_ _ / _ _ Due Date	AD12- 4 - □□ a	AD12- 4 - □□ b	Units
WCC WBCB Baso Count	□□□.□	□□□.□	x 10 ⁹ /L
NEUT / GRAN	□□.□	□□.□	%
LYMP	□□.□	□□.□	%
MONO	□□.□	□□.□	%
EOS	□□.□	□□.□	%
BASO	□□.□	□□.□	%
LUC	□□.□	□□.□	%

AUTOMATED DIFFERENTIAL (AD4): INSTRUCTIONS TO PARTICIPANTS

These directions have been obtained from the manufacturer of the control material.

Store samples at 2-8°C until testing can be performed, Sample the vials using the same techniques as those used for patient samples.

- Remove the vials of control from the refrigerator and warm to room temperature (18°C to 30°C) for 15 minutes before use.
- To mix (Do not mix mechanically).
 - Hold the vial horizontally between the palms of the hands and roll the vial back and forth for 20 to 30 seconds. Do not shake.
 - Mix by rapid inversion until all cells are resuspended.
 - Vials stored for an extended period of time may need extra mixing.
 - Gently invert the vial 8 to 10 times immediately before sampling.
 - Refer to the instrument manual for the system in use for analysing control material.
- After sampling, return to refrigeration for maximum open-vial stability. If run in the open mode, wipe the threads of both the vial and cap before replacing the cap and returning to refrigeration.

NOTE:

- Flags are likely to accompany the differential results when survey samples are tested in patient mode. Please ignore the differential flags.
- The total White Blood Cell count should be reported using the WBC (Baso) value from your instrument. If your analyser is capable of enumerating nucleated red blood cells and correcting the WBC count, please report the uncorrected WBC results.

2012 AUTO DIFFERENTIAL OPTION 6

Participant No. _ _ _ _

Inst.

CELL DYN 1200, 1300, 1400, 1600
 BECKMAN COULTER AcT/AcT DIFF, T series, JT series, JS, JR, ST, ONYX, MD series
 ABX MICROS 60, MINOS, ARGOS
 NIHON KOHDEN CELLTAC
 SIEMENS ADVIA 60
 MINDRAY and ORPHEE instrumentation

PLEASE SEE REVERSE FOR INSTRUCTIONS

Instrument (Manufacturer/Model):	Serial Number:
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__ / __ / __ Due Date	AD12- 6 - □ □ a	AD12- 6 - □ □ b	Units
WCC	□ □ □ . □	□ □ □ . □	x 10 ⁹ /L
NEUT / GRAN	□ □ . □	□ □ . □	%
LYMP	□ □ . □	□ □ . □	%
MONO / MID	□ □ . □	□ □ . □	%

AUTOMATED DIFFERENTIAL (AD6): INSTRUCTIONS TO PARTICIPANTS

These directions have been obtained from the manufacturer of the control material.

Store samples at 2-8°C until testing can be performed, Sample the vials using the same techniques as those used for patient samples

- Remove the vials of control from the refrigerator and warm to room temperature (18°C to 30°C) for 15 minutes before use.
- To mix (Do not mix mechanically).
 - Hold the vial horizontally between the palms of the hands and roll the vial back and forth for 20 to 30 seconds. Do not shake.
 - Mix by rapid inversion until all the cells are resuspended.
 - Vials stored for an extended period of time may need extra mixing.
 - Gently invert the vial 8 to 10 times immediately before sampling.
- Refer to the instrument manual for the system in use for analysing control materials.
- After sampling, return to refrigeration for maximum open-vial stability. If run in the open mode, wipe the threads of both the vial and cap before replacing the cap and returning to refrigeration.

NOTE:

- Flags are likely to accompany the differential results when survey samples are tested in patient mode. Please ignore the differential flags.
- ABX Argos users should test specimens using the open tube sampler (secondary mode) to report a three-part differential.

2012 AUTO DIFFERENTIAL OPTION 7

BECKMAN COULTER STKS, MaxM, HMX, LH series, GENS, Unicell DxH800

Participant No. _ _ _ _

Inst.

PLEASE SEE REVERSE FOR INSTRUCTIONS

Instrument (Manufacturer/Model):	Serial Number:
----------------------------------	----------------

__/__/__ Due Date	AD12- 7 -□□a	AD12- 7 -□□b	Units
WCC	□□□.□	□□□.□	x 10 ⁹ /L
NEUT / GRAN	□□.□	□□.□	%
LYMP	□□.□	□□.□	%
MONO	□□.□	□□.□	%
EOS	□□.□	□□.□	%
BASO	□□.□	□□.□	%

AUTOMATED DIFFERENTIAL (AD7): INSTRUCTIONS TO PARTICIPANTS

These directions have been obtained from the manufacturer of the control material.

Store samples at 2-8°C until testing can be performed, Sample the vials using the same techniques as those used for patient samples

- Remove the vials of control from the refrigerator and warm to room temperature (18°C to 30°C) for 15 minutes before use.
- To mix (Do not mix mechanically).
 - Hold the vial horizontally between the palms of the hands and roll the vial back and forth for 20 to 30 seconds. Do not shake.
 - Mix by rapid inversion until all cells are resuspended.
 - Vials stored for an extended period of time may need extra mixing.
 - Gently invert the vial 8 to 10 times immediately before sampling.
 - Refer to the instrument manual for the system in use for analysing control material.
- After sampling, return to refrigeration for maximum open-vial stability. If run in the open mode, wipe the threads of both the vial and cap before replacing the cap and returning to refrigeration.

NOTE:

- Flags are likely to accompany the differential results when survey samples are tested in patient mode. Please ignore the differential flags.

2012 ADDITIONAL FACTORS

Participant No.

Inst.

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Instrument (Manufacturer/Model):

Serial Number:

OPTION 1 Dispatch: January, March, May, July, September, November

__/__/__ Due Date	AF12-□□a	AF12-□□b	Units
FVIII	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
FIX	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	

OPTION 2 Dispatch: January, May, September only

FII	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
FV	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
FVII	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
FX	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
FXI	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	
FXII	□ □ □	□ □ □	%
	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	<input type="checkbox"/> Normal <input type="checkbox"/> Abnormal	

2012 ADDITIONAL FACTORS INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. All samples are lyophilised plasma and will require reconstitution with distilled water. Please see below for reconstitution information. These samples are being commercially produced by Diagnostica Stago.

IMPORTANT INFORMATION:

- Additional Factors Program is split into 2 Options:.
- Option 1 – Factor VIII and Factor IX.
6 dispatches per year.
January, March, May, July, September, November.
- Option 2 – Factor II, Factor V, Factor VII, Factor X, Factor XI and Factor FXII.
3 dispatches per year.
January, May, September.
- Same samples used for all Factor assays.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C).

RECONSTITUTION:

- Reconstitute with 1mL of distilled water.
- Allow to stand at room temperature for 10 mins before testing.

NOTE: For reagent and instrument changes please complete HQF 231 and return to the Haematology QAP

2012 MANUAL DIFFERENTIAL

Participant No.

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IF ENTERING RESULTS ONLINE "0" MUST BE ENTERED IF NO CELLS SEEN.

__ / __ / __ Due Date	BF12-□□	Units
Neutrophils	□ □ □	%
Lymphocytes	□ □ □	%
Monocytes	□ □ □	%
Eosinophils	□ □ □	%
Basophils	□ □ □	%
Blasts	□ □ □	%
Promyelocytes	□ □ □	%
Myelocytes	□ □ □	%
Metamyelocytes	□ □ □	%
Atypicals / Reactive Lymphocytes	□ □ □	%
Other cells Specify _____	□ □ □	%
NRBC	□ □ □	/100 WC

Please comment on the quality of the blood film (please tick the appropriate box)

GOOD

SATISFACTORY

FAIR

POOR

2012 MANUAL DIFFERENTIAL INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous for the purpose of these exercises. These slides are usually prepared by the Haematology QAP although some slides are donated and the donating laboratory will be acknowledged in the report.

IMPORTANT INFORMATION:

- Most films are stained with the ICSH stain. This information is recorded on the insert for each survey.
- If you are not satisfied with the quality of film received please contact the Haematology QAP immediately to organise a repeat slide.
- For the sake of uniformity please do not report band forms but include them as either metamyelocytes or neutrophils according to the stage of maturation.
- Please report your differential in whole numbers only.
- When entering results online you must enter a numerical value in all cell lines. i.e., if no basophils, myelocytes etc are counted on the film, "0" must be entered into the entry field. If a field is left blank it will appear that no results were returned.

2012 D-DIMER

Participant No.

Inst.

— — — —

Option 1: Fully Quantitative (automated) Methods

Instrument (Manufacturer/Model):	Serial number:
REAGENT/KIT:	LOT No.:
EXP DATE:	

_ _ / _ _ / _ _ Due Date	DD12-□□a	DD12-□□b	
D-Dimer	numerical value □□.□□	numerical value □□.□□	D Dimer mg/L
	<input type="checkbox"/> Above cut off <input type="checkbox"/> Below cut off	<input type="checkbox"/> Above cut off <input type="checkbox"/> Below cut off	
D-Dimer	numerical value □□.□□	numerical value □□.□□	FEU mg/L µg/ml
	<input type="checkbox"/> Above cut off <input type="checkbox"/> Below cut off	<input type="checkbox"/> Above cut off <input type="checkbox"/> Below cut off	

PLEASE INCLUDE YOUR NUMERICAL VALUE IN THE BOX PROVIDED FOR BOTH “DETECTED” AND “NOT DETECTED” D-DIMER RESULTS.

NOTE: Please record your results in the appropriate units of measure.

2012 D-DIMER

INSTRUCTIONS TO PARTICIPANTS

Option 1: Fully Quantitative (automated) Methods

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises.

These samples are commercially produced by Bio-Rad Laboratories.

IMPORTANT INFORMATION:

- Participants who enter results online and wish to submit their results in FEU will have to reconfigure their data entry page for D-Dimer. Please follow these instructions.
 - Login and proceed to online data entry for the General Haematology Program.
 - Enter "Result Page Configuration".
 - Select "D-Dimer – Option 1 (Automated)" and/or "D-Dimer – Option 2 (Semi-Quant/Qual)" tab.
 - For analyte D-Dimer there is a drop down menu which allows you to select either DD mg/L or FEU mg/L. Select FEU mg/L here. Press SAVE.
 - You can now go to the data entry page and enter your results in FEU without any need to convert.
- When your report is issued for D-Dimer, all results will be expressed in the same units as those you submitted. If you entered results in FEU all participant results will be converted to FEU before the report is generated.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C).

RECONSTITUTION:

- Not required.
- Samples are in liquid form.
- Before processing allow samples to reach room temperature and swirl gently to ensure homogeneity.

2012 D-DIMER

Participant No.

Inst.

— — — —

Option 2:

SEMI QUANTITATIVE

REAGENT/KIT:	LOT No.:	EXP DATE:
1 / 2 / 3 Please circle the appropriate number if more than one kit has been registered.		

_ / _ Due Date	DS12-□□a	DS12-□□b																																										
Result mg/L	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">DD</td> <td style="width: 33%; text-align: center;">or</td> <td style="width: 33%;">FEU</td> </tr> <tr> <td>A <input type="checkbox"/> < 0.2</td> <td></td> <td>A <input type="checkbox"/> < 0.5</td> </tr> <tr> <td>B <input type="checkbox"/> 0.2 – 0.4</td> <td></td> <td>B <input type="checkbox"/> 0.5 – 1.0</td> </tr> <tr> <td>C <input type="checkbox"/> 0.4 – 0.8</td> <td></td> <td>C <input type="checkbox"/> 1.0 – 2.0</td> </tr> <tr> <td>D <input type="checkbox"/> 0.8 – 1.6</td> <td></td> <td>D <input type="checkbox"/> 2.0 – 4.0</td> </tr> <tr> <td>E <input type="checkbox"/> 1.6 – 3.2</td> <td></td> <td>E <input type="checkbox"/> 4.0 – 8.0</td> </tr> <tr> <td>F <input type="checkbox"/> > 3.2</td> <td></td> <td>F <input type="checkbox"/> > 8.0</td> </tr> </table>	DD	or	FEU	A <input type="checkbox"/> < 0.2		A <input type="checkbox"/> < 0.5	B <input type="checkbox"/> 0.2 – 0.4		B <input type="checkbox"/> 0.5 – 1.0	C <input type="checkbox"/> 0.4 – 0.8		C <input type="checkbox"/> 1.0 – 2.0	D <input type="checkbox"/> 0.8 – 1.6		D <input type="checkbox"/> 2.0 – 4.0	E <input type="checkbox"/> 1.6 – 3.2		E <input type="checkbox"/> 4.0 – 8.0	F <input type="checkbox"/> > 3.2		F <input type="checkbox"/> > 8.0	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">DD</td> <td style="width: 33%; text-align: center;">or</td> <td style="width: 33%;">FEU</td> </tr> <tr> <td>A <input type="checkbox"/> < 0.2</td> <td></td> <td>A <input type="checkbox"/> < 0.5</td> </tr> <tr> <td>B <input type="checkbox"/> 0.2 – 0.4</td> <td></td> <td>B <input type="checkbox"/> 0.5 – 1.0</td> </tr> <tr> <td>C <input type="checkbox"/> 0.4 – 0.8</td> <td></td> <td>C <input type="checkbox"/> 1.0 – 2.0</td> </tr> <tr> <td>D <input type="checkbox"/> 0.8 – 1.6</td> <td></td> <td>D <input type="checkbox"/> 2.0 – 4.0</td> </tr> <tr> <td>E <input type="checkbox"/> 1.6 – 3.2</td> <td></td> <td>E <input type="checkbox"/> 4.0 – 8.0</td> </tr> <tr> <td>F <input type="checkbox"/> > 3.2</td> <td></td> <td>F <input type="checkbox"/> > 8.0</td> </tr> </table>	DD	or	FEU	A <input type="checkbox"/> < 0.2		A <input type="checkbox"/> < 0.5	B <input type="checkbox"/> 0.2 – 0.4		B <input type="checkbox"/> 0.5 – 1.0	C <input type="checkbox"/> 0.4 – 0.8		C <input type="checkbox"/> 1.0 – 2.0	D <input type="checkbox"/> 0.8 – 1.6		D <input type="checkbox"/> 2.0 – 4.0	E <input type="checkbox"/> 1.6 – 3.2		E <input type="checkbox"/> 4.0 – 8.0	F <input type="checkbox"/> > 3.2		F <input type="checkbox"/> > 8.0
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F <input type="checkbox"/> > 3.2		F <input type="checkbox"/> > 8.0																																										
Interpretation	<input type="checkbox"/> Detected <input type="checkbox"/> Not Detected	<input type="checkbox"/> Detected <input type="checkbox"/> Not Detected																																										

PLEASE REPORT RANGE FOR BOTH "DETECTED" AND "NOT DETECTED" D-DIMER RESULTS.

QUALITATIVE

REAGENT/KIT:	LOT No.:	EXP DATE:
1 / 2 / 3 Please circle the appropriate number if more than one kit has been registered.		

_ / _ Due Date	DS12-□□a	DS12-□□b
Interpretation	<input type="checkbox"/> Detected <input type="checkbox"/> Not Detected	<input type="checkbox"/> Detected <input type="checkbox"/> Not Detected

2012 D-DIMER

INSTRUCTIONS TO PARTICIPANTS

Option 2: Semi-quantitative / Qualitative

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are produced by the Haematology QAP.

IMPORTANT INFORMATION:

- Participants who enter results online and wish to submit their results in FEU will have to reconfigure their data entry page for D-Dimer. Please follow these instructions.
 - Login and proceed to online data entry for the General Haematology Program.
 - Enter "Result Page Configuration".
 - Select "D-Dimer – Option 1 (Automated)" and/or "D-Dimer – Option 2 (Semi-Quant/Qual)" tab.
 - For analyte D-Dimer there is a drop down menu which allows you to select either DD mg/L or FEU mg/L. Select FEU mg/L here. Press SAVE.
 - You can now go to the data entry page and enter your results in FEU without any need to convert.
- When your report is issued for D-Dimer, all results will be expressed in the same units as those you submitted. If you entered results in FEU all participant results will be converted to FEU before the report is generated.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C)

RECONSTITUTION:

- Reconstitute with 0.5 ml of distilled water
- Allow to stand at RT for 10 minutes before testing
- For semi-quantitative methods select appropriate range as well as interpretation e.g. Dimertest 0.4 – 0.8 mg/L Positive interpretation.
- For qualitative methods only an interpretation is required.

2012 ESR

Participant No. _ _ _ _

Inst.

Option 1: Manual and Automated

Excludes Alifax, Sedimat 15 and Starrsed Instruments

MANUAL

ESR RACK:	ESR TUBES:
-----------	------------

__/__/__ Due Date	ES12-1-□□a	ES12-1-□□b	
ESR	result □ □ □	<input type="checkbox"/> Normal <input type="checkbox"/> Raised	result □ □ □
			<input type="checkbox"/> Normal <input type="checkbox"/> Raised
			mm/hr

AUTOMATED

Instrument (Manufacturer/Model):

__/__/__ Due Date	ES12-1-□□a	ES12-1-□□b	
ESR	result □ □ □	<input type="checkbox"/> Normal <input type="checkbox"/> Raised	result □ □ □
			<input type="checkbox"/> Normal <input type="checkbox"/> Raised
			mm/hr

2012 ESR INSTRUCTIONS TO PARTICIPANTS

Option 1:

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are commercially produced by Streck Laboratories. These samples are compatible with all manual and automated methods with the exception of the Alifax Test1 and Sedimat 15 instruments.

Any relevant details pertaining to the samples (e.g. age and sex of patient) will be provided on the dispatch insert.

PLEASE NOTE: A separate option has been created for Starrsed users (Option 2)

STORAGE:

- Upon receipt please refrigerate samples (2-8°C).
- Samples must be brought to room temperature prior to testing.

HANDLING INSTRUCTIONS:

1. Remove vials from refrigerator and allow them to equilibrate to room temperature (20-30 minutes).
2. Mix vials by inversion by vigorously rolling upright between palms until red cells are completely suspended. Continue to mix for 90 seconds. The samples may also be rotated on a rotator prior to use.
3. Draw the sample immediately after thorough mixing is completed.
4. If mixed vials sit for more than 1 minute, the vial must be remixed by repeating step 2. *Incomplete mixing can invalidate both the sample drawn and the remaining product in the vial.*
5. Follow the manufacturer's directions for filling the sedimentation rate tube for both automated and manual systems.
6. Wipe threads of vial and cap with clean tissue before closing. Recap the vial tightly.
7. Store opened vials at room temperature (18-30°C) or 2-10°C.

NOTE:

- DO NOT REMOVE DILUENT FROM TEST RESERVOIRS / TESTING TUBES BEFORE PROCESSING THESE SAMPLES. This diluent is present in order to dilute the samples 4 to 1 as per Westergren principle. There are no participants enrolled in the Wintrobe ESR method.
- If there is no diluent in your testing reservoirs / testing tubes, you must dilute the samples 4 to 1 as per Westergren principle prior to testing.
- If there is still doubt as to the correct processing procedure for any ESR method in use, please contact the Haematology QAP immediately.
- **Diesse / Elan Diagnostics Ves-Matic and Mini-Ves instruments** – use “Westergren 1hr” setting
- **ESR-8 / Sedimatic 8** – use “30 minute measuring” setting
- **Diesse Vesmatic CUBE Series:** Mix samples as described above. Transfer an aliquot of the sample to an EDTA tube to the “fill line”, process as normal.

2012 ESR

Participant No.

Inst.

— — — —

Option 2: Automated STARRSED series

STARRSED INSTRUMENT

StaRRsed Instrument Model:

— — / — — Due Date	ES12-2-□□a	ES12-2-□□b	
ESR	result □ □ □ <input type="checkbox"/> Normal <input type="checkbox"/> Raised	result □ □ □ <input type="checkbox"/> Normal <input type="checkbox"/> Raised	mm/hr

2012 ESR

INSTRUCTIONS TO PARTICIPANTS

Option 2:

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are commercially produced by R & D Laboratories and are compatible with all the StaRRsed instrument series.

Any relevant details pertaining to the samples (e.g. age and sex of patient) will be provided on the dispatch insert.

STORAGE:

- Upon receipt please refrigerate samples (2-8°C).
- Samples must be brought to room temperature prior to testing.

HANDLING INSTRUCTIONS:

These directions have been obtained from the manufacturer of the control material supplied.

Sample the vials using the same techniques as those used for patient samples.

1. Remove vials from refrigerator and allow them to equilibrate to room temperature (18-30°C) for 20-30 minutes.
2. Invert the tubes until the packed cells have been resuspended. Continue mixing for an additional 30 seconds. Avoid foaming. DO NOT VORTEX.
3. The survey samples are the primary sampling tubes. Follow the manufacturer's directions for loading the tubes onto the analyser.
4. After each use, store opened vials at room temperature (18-30°C). Avoid long exposure to light and excessive heat.

NOTE:

To ensure consistent and reproducible results, the control material must be thoroughly mixed and handled in the same manner each time.

2012 FBC

Participant No.

— — — —

Inst.

Instrument (Manufacturer/Model):

Serial Number:

— / — Due Date	FB□□-□□a	FB□□-□□b	Units
WCC	□□□.□	□□□.□	x 10 ⁹ /L
RCC	□.□□	□.□□	x 10 ¹² /L
Hb	□□□	□□□	g/L
HCT	0.□□	0.□□	0.xx
MCV	□□□	□□□	fL
PLT	□□□	□□□	x 10 ⁹ /L

2012 FBC

INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are commercially produced by R & D Systems.

IMPORTANT INFORMATION:

- If your laboratory has more than one backup instrument, the sample may be insufficient to process through the primary mode. In cases like this, please process your samples through the secondary mode.
- The volume of sample is sufficient to process through up to 3 instruments. If your laboratory has enrolled more than 3 instruments in the FBC program, you must contact the enrolment office (email: enrolment@rcpaqap.com.au) to order additional material.
- It is the participant's responsibility to be consistent in the submission of results. The instrument designated xxxx.1 should remain the same throughout the cycle in order for the end of cycle statistics and cumulated data to be meaningful.

BECKMAN COULTER USERS

- Please report UNCORRECTED WCC

CELL DYN USERS

- CD4000: Please report your "Optical" count for the Platelets.

SIEMENS USERS

- Laboratories processing their QAP-FBC samples on Advia Instrumentation should run a saline primer after aspirating the RCPA Haematology QAP-FBC samples. This is done to prevent carryover of the platelets, which has occurred in the past and is unique to the product and the Advia instrumentation.
- Advia 2120/2120i users please report UNCORRECTED WCC

SYSMEX USERS

- As a result of the Primary/Secondary Mode special exercise sent in 2004 we recommend all Sysmex users process the QAP samples through the OPEN/MANUAL MODE.
- Sysmex XE/XT: The reticulocyte channel should NOT be enabled.
- Sysmex XE/XT: Please report your Impedance count for all parameters.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C).

RECONSTITUTION:

- No reconstitution required – the samples contain 1ml of stabilised blood.
- Allow to stand at RT for 15 minutes before testing.
- Mix well before processing.
 - To mix, hold vial horizontally between palms of the hands. Do not pre-mix on a mechanical mixer.
 - Roll the vial back and forth for 20-30 seconds; occasionally invert the vial.
 - Mix vigorously but do not shake.
 - Continue to mix in this manner until the red cells are completely suspended. Vials stored for a long time may need extra mixing.
 - Gently invert the vial 8-10 times immediately before running each sample.
 - Return vials to refrigerator within 30 minutes of use.

2012 G6PD

Participant No. - - - -

SCREEN

Principle / Method:

__/__/__ Due Date	GD12-□□a	GD12-□□b
G6PD	<input type="checkbox"/> Normal <input type="checkbox"/> Equivocal <input type="checkbox"/> Deficient	<input type="checkbox"/> Normal <input type="checkbox"/> Equivocal <input type="checkbox"/> Deficient

ASSAY

Instrument (Manufacturer/Model):	Serial Number:
----------------------------------	----------------

__/__/__ Due Date	GD12-□□a	GD12-□□b	Unit
G6PD	□□□.□	□□□.□	U/g Hb
	<input type="checkbox"/> Normal <input type="checkbox"/> Equivocal <input type="checkbox"/> Deficient	<input type="checkbox"/> Normal <input type="checkbox"/> Equivocal <input type="checkbox"/> Deficient	

2012 G6PD

INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises.

The samples are haemolysates of human red cells in lyophilised form, containing stabilisers and preservatives. These samples are commercially produced by Dialab.

IMPORTANT INFORMATION:

G6PD Screens:

- Perform a G6PD screening test according to your laboratory's protocol. The samples should be treated in the same manner as a test blood sample.

G6PD Assays:

- In order to standardise resulting and to provide meaningful statistical analysis, results must be expressed as G6PD activity at 37°C. (See instructions below).

TRINITY BIOTECH (345-UV) METHOD:

- If you perform AND/OR report your result at 37°C, DO NOT APPLY A CONVERSION FACTOR. eg, with reference to the package insert,

$$\text{G6PD (U/g Hb)} = \Delta A \text{ per min} \times \frac{100 \times 3.01}{0.01 \times 6.22 \times \text{Hb (g/dL)}}$$

- If you perform AND/OR report your result at 30°C, divide the results achieved at 30°C (U/g Hb) by 0.66 to convert your results to G6PD activity at 37°C:
eg, if results reported at 30°C are 12.2 U/g Hb,

$$\text{G6PD activity at 37°C would be } \frac{12.2}{0.66} = 18.5 \text{ U/g Hb}$$

OTHER ASSAY METHODS:

- Express your results as G6PD activity at 37°C. If you are using a different kit method and you perform and/or report your results as activity at 30°C, you must contact the manufacturer of your kit to provide instructions to convert your results to G6PD activity at 37°C.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C).

RECONSTITUTION:

- Check expiry of reagents (READY FOR USE and RECONSTITUTED) prior to testing.
- Open the vial very carefully, avoiding any loss of the lyophilized material.
- Add exactly 0.5ml of distilled water.
- Close the vial carefully and gently swirl to dissolve.
- Allow the controls to stand for 15 minutes.
- Invert gently and swirl to assure homogeneity, avoiding the formation of foam. Do not shake.
- Let the controls stand at least 10 minutes. Swirl gently just prior to each use. Do not shake.
- Whole Blood Haemoglobin values for individual samples will be supplied with the dispatch insert.
- If your assay method uses the *Haemolysate* Haemoglobin in the calculation of G6PD activity eg Manual Beutler assay method, you must determine the haemoglobin of the haemolysate in the sample vial after reconstitution, as you would a patient sample.

2012 HAEMOGLOBINOPATHY

Participant No.
 _ _ _ _

Method HbA ₂ :	Method HbF:
Biorad Variant Users (please circle): Variant Classic / VII / DUAL	

_ _ / _ _ Due Date	<h2 style="margin: 0;">HP12-□□</h2>		
% Hb A ₂	<div style="text-align: center; font-size: 24px; margin-bottom: 5px;"> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> </div> Ref Range: _____	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Borderline <input type="checkbox"/> Raised	
% Hb F	<div style="text-align: center; font-size: 24px; margin-bottom: 5px;"> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> </div> Ref Range: _____	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Borderline <input type="checkbox"/> Raised	
% Hb VARIANT	<div style="text-align: center; font-size: 24px; margin-bottom: 5px;"> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> </div>	HPLC - F A₂ D S C Other.....	ALK - F A₂ S C Other.....
		CE - F A₂ S C Other.....	ACID- F A S C Other..... Gel brand.....
DIAGNOSIS	<hr/> <hr/> <hr/> <hr/>		

COMMENTS:

2012 HAEMOGLOBINOPATHY INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are produced by the Haematology QAP or commercially produced by Canterbury Scientific.

IMPORTANT INFORMATION:

HELENA COLUMN CHROMATOGRAPHY users:

- It is suggested that further dilutions of the haemolysate be prepared as follows:
50µL of haemolysate + 250µL of haemolysate Reagent C = 300µL(total volume) 100µL of this diluted haemolysate should then be applied to the column

HPLC users:

- Please include a copy of the chromatogram with your result sheet.

CAPILLARY ELECTROPHORESIS users:

- Please include a copy of the separation with your result sheet.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C)

RECONSTITUTION:

- A freeze dried haemolysate is supplied.
- Reconstitute the lyophilised sample with 1 ml of distilled H₂O.
- Allow to stand for at least 10 minutes, then gently mix (Hb = 100g/L).
- Keep samples at 4-8°C until the time of testing & perform testing within 1 hour of reconstituting. Quantitate Hb A₂, Hb F and any Hb Variant (if present).

REPORTING RESULTS:

- Report results on RESULT SHEET, marking your results as LOW, NORMAL, BORDERLINE or RAISED.
- State clearly the method used for Hb A₂ and Hb F on the RESULT SHEET.
- Include reference Ranges on the RESULT SHEET.
- If blood film has been provided please provide film comment in the COMMENTS section of the RESULT SHEET.
- Provide Diagnosis.
- Clinical information for the individual samples will be included with the dispatch insert.

RESULT REPORTING RULES:

- In the case of a Variant Haemoglobin that does not separate from Hb A₂
 - The %Hb A₂ will be entered as "0" with an interpretation of "Normal"
 - The value for Hb A₂ + Variant will be entered in the % Variant
 - Laboratories using methods that are able to separate the Haemoglobin variant from the Hb A₂ will also have the above rule applied
- Results of <1.0 for Hb F
 - Laboratories using methods that return Hb F results of <1.0 will have the midpoint of 0.5 entered. "<" signs are not accepted by the software system

2012 HAEMOSTASIS

Participant No.

— — — —

Inst.

Instrument (Manufacturer/Model):	Serial Number:
INR Reagent:	
Fibrinogen Reagent:	
APTT Reagent:	
Thrombin Time Reagent:	

_ _ / _ _ Due Date	HS12-□□ a	HS12-□□ b	Units
INR	□ . □	□ . □	ratio
	<input type="checkbox"/> Below <input type="checkbox"/> Therapeutic <input type="checkbox"/> Above	<input type="checkbox"/> Below <input type="checkbox"/> Therapeutic <input type="checkbox"/> Above	
Fib	□ □ . □	□ □ . □	g/L
APTT	□ □ □ . □	□ □ □ . □	sec
	<input type="checkbox"/> Normal <input type="checkbox"/> Extended	<input type="checkbox"/> Normal <input type="checkbox"/> Extended	
TT	□ □ □ . □	□ □ □ . □	sec
	<input type="checkbox"/> Normal <input type="checkbox"/> Extended	<input type="checkbox"/> Normal <input type="checkbox"/> Extended	

2012 HAEMOSTASIS INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. All samples are lyophilised plasma and will require reconstitution with distilled water. Please see below for reconstitution information. These samples are being commercially produced by Diagnostica Stago.

IMPORTANT INFORMATION:

- Haemostasis module no longer includes Factor VIII (now part of Additional Factors Option 1).
- Haemostasis module has added Thrombin Time testing.
- Same samples used for all tests – INR, Fibrinogen, APTT and TT.
- Clinical information will be included on the insert issued with each dispatch.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C).

RECONSTITUTION:

- Reconstitute with 1mL of distilled water.
- Allow to stand at room temperature for 10 mins before testing.

2012 MALARIA

Participant No.

— — — —

Slides were reported by: **Specialist Haematologist / Pathologist**

Scientist / Medical Technologist

Recording who reported on the Diagnosis is MANDATORY.

Case Study 1:

MA12- a/b

Most prominent features	Malaria code
1.	
2.	
3.	
4.	
5.	
6.	

DIAGNOSIS	CODE

Case Study 2:

MA12- c/d

Most prominent features	Malaria code
1.	
2.	
3.	
4.	
5.	
6.	

DIAGNOSIS	CODE

Recording the "Code" is MANDATORY.

2012 MALARIA INSTRUCTIONS TO PARTICIPANTS

IMPORTANT INFORMATION:

The Malaria Program will now only be offered as a Virtual Microscopy program. All relevant information will be included with the dispatch insert.

VIRTUAL MICROSCOPE VIEWING REQUIREMENTS

ImageScope® viewing software can be provided on disc or downloaded from website www.Aperio.com free of charge with no licence requirements. The software on the website is continually upgraded and is available now to anyone interested in virtual microscopy.

Please note that the software is not compatible with Mac computers and that a CD/DVD computer drive is essential for viewing the images on disc.

The software is present on the enclosed disc and can be installed by opening the file called ImageScopeInstaller_v10.2.exe and following the installation guide.

The software can also be downloaded by visiting the Aperio website using a Broadband (ADSL) internet connection, selecting "Download software" and registering your name and email address. Some institutions may have "firewalls" in place that prevent the downloading of software, so check with your IT support if you have any difficulties.

Once the software is installed on your computer, the images can be opened by double clicking on the file name (*filename.svs*).

While the software can be loaded onto PCs with older operating systems and smaller size processors, given in the minimum specifications below, the large file sizes can cause the images to be slow to load to the screen. The ideal specifications, however, should allow viewing of the images from CD/DVD, saving of images to a hard drive and downloading software from the website.

Access to the Internet via a broadband connection will enable access to conferencing of images for educational purposes and downloading of updates to viewing software.

	Minimum	Ideal
Type of computer*	PC computer*	PC computer*
Type/size of processor	800 Mhz	Intel Processor P4 1.8 Ghz
Operating system	Windows 98	Windows 2000 or XP or Windows XP Pro
RAM	256 MB	512 MB or more
Hard Drive**	30 GB	120 GB or more
Other Drives	CD/DVD ROM, CD/DVD-RW	CD/DVD ROM, CD/DVD-RW
Graphics***	800 x 600	1280 x 1024 or better
Monitor***	Can view on CRT or LCD*** 15"	17" or greater in size LCD***,
Video card	Must support at least 24-bit colour resolution	

*Please note **not** MAC

** The larger the better to handle large file sizes of images

***Quality is paramount for the best images

Specific installation and viewing information will be provided with each Malaria dispatch

2012 MORPHOLOGY

Participant No.

— — — —

Slides were reported by: **Specialist Haematologist / Pathologist**
Scientist / Medical Technologist

Recording who reported on the Morphology cases is MANDATORY.

PART A: Descriptive Comments

MO12-

Recording the "Code" is MANDATORY.

Most prominent RBC features	RBC code	Most prominent WBC features	WBC code	Most prominent PLT features	PLT code
1.		1.		1.	
2.		2.		2.	
3.		3.		3.	
4.		4.		4.	

PART B: Diagnostic Interpretation

Case Study	Most likely Primary Diagnosis	Code
MO12- <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

Recording the "Code" is MANDATORY.

PLEASE PHOTOCOPY A SEPARATE PAGE FOR EACH CASE

2012 MORPHOLOGY INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous for the purpose of these exercises. These slides are usually prepared by the Haematology QAP although some slides are donated and the donating laboratory will be acknowledged in the report.

IMPORTANT INFORMATION:

- Most films are stained with the ICSH stain. This information is recorded on the insert for each dispatch.
- If you are not satisfied with the quality of film received please contact the Haematology QAP immediately to organise a repeat slide.
- Clinical details and FBC results will be included with the dispatch insert.
- Please refer to the 2012 Morphology Description and Diagnosis Codes booklet that will be issued in 2012.
- If you wish to challenge any results in the Morphology Program please submit your case in writing to the Program Chair.
- The Haematology QAP offers an additional Virtual Microscopy option with Morphology. Subscribers receive Virtual Images on DVD of all Morphology cases for the year, which includes additional educational notes on the case studies that have been issued in the surveys – please contact the enrolment office for information – (+61 2) 9045 6010.

2012 POINT OF CARE – INR

Participant No. _ _ _ _

Inst.

Instrument (Manufacturer/Model):	Serial Number:	
STRIP/CARTRIDGE LOT NO:	EXP DATE:	CODE:

__/__/__ Due Date	POC12-□□a	POC12-□□b	Units
INR-A Recalcified plasma	□.□ <input type="checkbox"/> Below <input type="checkbox"/> Therapeutic <input type="checkbox"/> Above	□.□ <input type="checkbox"/> Below <input type="checkbox"/> Therapeutic <input type="checkbox"/> Above	ratio

2012 POINT OF CARE – INR

INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. All samples are lyophilised plasma and will require reconstitution with distilled water. Please see below for reconstitution information. These samples are produced by the Haematology QAP.

TESTING INSTRUCTIONS:

Make sure your device is in citrated plasma or control mode for testing if required.

Please test the survey samples by mixing reconstituted INR plasma with the supplied recalcification fluid exactly as described below.

1. You have been supplied with distilled water for reconstitution and CaCl_2 for recalcification in small sealed plastic pasteur pipettes. **Please check the labels carefully before use.**
2. Firstly, carefully cut off the sealed end as close to the tip as possible of the distilled water pipette (blue label). Gently transfer all the distilled water into the lyophilised specimen. Replace the lid and swirl gently for approximately 10secs.
Allow to stand at room temperature for approximately 10 min before processing.
3. Secondly, when you are ready to proceed with testing, and not before, carefully cut off the sealed end as close to the tip as possible of the CaCl_2 pipette (pink label). Gently transfer all the CaCl_2 contents into the reconstituted plasma survey sample. (This is an important step and **all the CaCl_2 contents of the plastic pipette** must be completely transferred into the reconstituted plasma). Replace the rubber cap and mix well by gentle swirling for 10-15secs.
4. Within 20-30secs of recalcification use the supplied baby plastic pipette to draw the plasma up and down a few times to mix well before applying a drop of plasma to your pre-warmed strip or cartridge.

If 2 devices are in use then apply 1 drop of the test mixture simultaneously to each machine.

5. Record the INR on your result sheet for either the **CoaguChek XS** and/or **i-STAT** instrument.

6. Repeat this entire procedure (Steps 1-5) for the second sample.

ENTER your INR results on the result sheet provided in your enrolment package or directly on line through the RCPA Haematology QAP web site.

Important Note: Please record the lot number, expiry date and code (if applicable) of the strip or cartridges and instrument used in this exercise on your result sheet. This information is useful in monitoring any discrepancies between various reagent lot numbers.

2012 RETICULOCYTE OPTION 1

Participant No.

— — — —

PLEASE SEE REVERSE FOR INSTRUCTIONS

MANUAL

Manual Method: With / Without Ocular Insert

In-house Stain: _____

___/___/___ Due Date	RE12-1-□□a	RE12-1-□□b
Reticulocyte Count (IN-HOUSE STAIN)	percentage value □□.□ %	percentage value □□.□ %
	absolute value □□□.□ x 10 ⁹ /L	absolute value □□□.□ x 10 ⁹ /L
Reticulocyte Count (COMMERCIAL STAIN)	percentage value □□.□ %	percentage value □□.□ %
	absolute value □□□.□ x 10 ⁹ /L	absolute value □□□.□ x 10 ⁹ /L
Interpretation (COMMERCIAL STAIN)	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Raised	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Raised

2012 RETICULOCYTE OPTION 1 INSTRUCTIONS TO PARTICIPANTS

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are commercially produced by Streck Laboratories. These samples are compatible with all manual methods registered in this program.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C)

INSTRUCTIONS FOR HANDLING SURVEY SAMPLE (RE12-1-**a / **b)

(These instructions are taken directly from the manufacturer's instructions for use)

Use product immediately after removing from refrigerator.

1. Mix by gentle inversion between thumb and index finger until red blood cells are completely resuspended. Do not mix mechanically. Do not rub between palms of hands.
2. Process as required.
3. Wipe threads of vial and cap with clean tissue before replacing cap. Recap vial.
4. Return to refrigerator immediately.

INSTRUCTIONS FOR USING RETIC STAIN-A

(These instructions are taken directly from the manufacturer's instructions for use)

1. Mix the survey samples by gentle inversion. Do not mix mechanically or rub between palms of hands. Wipe the threads of the vial and cap before replacing the cap.
2. Prepare a dilution using equal number of drops each of survey samples and Retic Stain-A.
3. Incubate the tubes at ROOM TEMPERATURE for 20 minutes.
4. Mix well. Prepare a film and allow to dry.
5. Enumerate reticulocytes according to your laboratory's protocol.

CALCULATION OF ABSOLUTE RETICULOCYTE COUNT

A red cell count will also be provided for users of the MANUAL method to convert their percentage count to the absolute count.

Calculations: Absolute Reticulocyte Count = Reticulocytes (%) x Total RBC ($10^{12}/L$)

Example: Reticulocyte Count (%) = 2.2

Total RBC Count = $3.3 \times 10^{12}/L$

Absolute Reticulocyte Count = $\frac{2.2}{100} \times 3.3 \times 10^{12}/L$

= $0.0726 \times 10^{12}/L$

= $72.6 \times 10^9/L$

2012 RETICULOCYTE OPTION 2

Participant No.

— — — —

Inst.

Beckman Coulter STKS / MAXM / HMX
Sysmex XT2000i / XE2100 / XE5000 / XT4000i / RAM-1

Siemens ADVIA 120 / 2120
Abbott CELL-DYN Systems

PLEASE SEE REVERSE FOR INSTRUCTIONS

AUTOMATED

Instrument (Manufacturer/Model):	Serial Number:
----------------------------------	----------------

_ _ / _ _ Due Date	RE12-2-□□ a	RE12-2-□□ b
Reticulocyte Count	percentage value □□.□ %	percentage value □□.□ %
	absolute value □□□.□ x 10 ⁹ /L	absolute value □□□.□ x 10 ⁹ /L
Interpretation	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Raised	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Raised

2012 RETICULOCYTE OPTION 2

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are commercially produced by Streck Laboratories. These samples are compatible with Beckman Coulter STKS / MAXM / HMX, Siemens ADVIA 120 / 2120, Sysmex XT2000i / XE2100 / XE5000 / XT4000i / RAM-1 and Abbott CELL-DYN Systems.

STORAGE:

- Upon receipt please refrigerate samples (4-8°C)

INSTRUCTIONS FOR USE

Use product immediately after removing from refrigerator.

- Mix by gentle inversion between thumb and index finger until red blood cells are completely resuspended. Do not mix mechanically. Do not rub between palms of hands.
- Process as required (Important! See below for specific procedural instructions*).
- Wipe threads of vial and cap with clean tissue before replacing cap. Recap vial.
- Return to refrigerator immediately.

AUTOMATED PROCEDURE: The user should follow the instrument manufacturer's instructions for performing automated reticulocytes. If required, transfer the sample into another tube prior to testing.

NB: When using the sample on the *Abbott CELL-DYN 3500/3700, it is recommended that analysis be performed 30 minutes after sample is added to the reagent.

When using the sample on the *SYSMEX XE and XT series, it must be processed through the QC mode.

INSTRUCTIONS FOR QC MODE PROCESSING-SYSMEX XE SERIES

Summary: The RCPA specimen needs to be run into one of the Manual E-Check QC files – for example Level 2 Manual. The results are then deleted from the QC files and printed from the Explorer screen.

See Operators Manual Chapter 2, Section 3. 3.1.

Details:

- Refer to the "Instructions for Use" for the control material.
- For HST sites, set the appropriate conveyor in single mode.
- Press "QC" on the main screen.
- Press "Exec QC" on the QC menu.
- Select one of the manual mode E-Check files – for example "Level 2 Manual". (Do not use one of the "Other" files.)
- Press "Select".
- Mix the sample as described in the "Processing Instructions" for the control material.
- Aspirate sample.
- Press "Cancel" – Results do not have to be accepted.
- Go to "Explorer" and select the RCPA results.
- (You may change the ID of the QC specimens that you have just run from "QC-lot number" to an RCPA ID)
- Print the results and delete any results from the QC file that have been accepted.

INSTRUCTIONS FOR QC MODE PROCESSING-SYSMEX XT SERIES

Summary: The RCPA specimen needs to be run into one of the manual E-Check QC files – for example Level 2 Manual. The results are then printed from the Explorer screen. See Operators Manual Chapter 6, Section 3.1

Details:

- Refer to the "Instructions for Use" for the control material.
- Go to "QC Analysis" on the main menu.
- (If "QC Analysis" is not visible on the main menu then go to "Controller" then "QC Analysis").
- Select a manual E-Check QC file – for example "Level 2 Manual". (Do not select one of the "Other" files).
- Mix the sample as described in the "Instructions for Use" for the control material.
- Aspirate sample.
- Press "Cancel" – Results do not have to be accepted.
- Go to "Explorer" and select the RCPA results.
- (You may change the ID of the QC specimens that you have just run from "QC-lot number" to an RCPA ID).
- Print the results and delete any RCPA results from the QC file that have been accepted.

2012 RETICULOCYTE OPTION 3

Participant No.

— — — —

Inst.

Beckman Coulter Gen.S / LH series / Unicell DxH800

PLEASE SEE REVERSE FOR INSTRUCTIONS

AUTOMATED

Instrument (Manufacturer/Model):	Serial Number:
----------------------------------	----------------

_ _ / _ _ Due Date	RE12-3-□□a	RE12-3-□□b
Reticulocyte Count	percentage value □□.□ %	percentage value □□.□ %
	absolute value □□□.□ x 10 ⁹ /L	absolute value □□□.□ x 10 ⁹ /L
Interpretation	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Raised	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> Raised

2012 RETICULOCYTE OPTION 3

The samples have been tested and found to be homogeneous and stable for the purpose of these exercises. These samples are commercially produced by Streck Laboratories. These samples are compatible with Beckman Coulter Gen.S and LH Series and Unicell DxH800 instruments

STORAGE:

- Upon receipt please refrigerate samples (4-8°C)

INSTRUCTIONS FOR USE

(These instructions are taken directly from the manufacturer's instructions for use).

1. Remove vials of control from the refrigerator. It is not necessary to warm the controls to room temperature before use.
2. To mix: **(Do not mix mechanically)**
 - a. Hold vial horizontally between the palms of the hands and roll the vial back and forth for 20 or 30 seconds.
 - b. Mix by rapid inversion to ensure the cells are suspended.
 - c. Vials stored for an extended period of time may require extra mixing.
 - d. Gently invert the vials 8 to 10 times immediately before sampling.
3. The user should follow the instrument manufacturer's instructions for performing automated reticulocyte counts.
4. After sampling, return to refrigeration for maximum open-vial stability. If run in the open mode, wipe the threads of both the vial and cap before replacing cap and returning to refrigeration.



Haematology

Notification of Contact Information change

HQF232

Requested by			
Participant Number		Institution	
Your Name		Your Phone	
Your Email		Date Requested	

Company Details Change			
Organisation		General email	
General Phone		General Fax	

Contact Change			
Program (tick)	ALL <input type="checkbox"/> CD34 <input type="checkbox"/>	Molecular Diagnostics <input type="checkbox"/> Special Haemostasis <input type="checkbox"/>	Oncology Immunophenotyping <input type="checkbox"/>
Previous Contact		New Contact	
Remove previous contact from Online data entry?	YES	NO	

Delete Online Data entry users			
Delete User		User email	
Delete User		User email	

Address Change			
Program (tick)	ALL <input type="checkbox"/> CD34 <input type="checkbox"/>	Molecular Diagnostics <input type="checkbox"/> Special Haemostasis <input type="checkbox"/>	Oncology Immunophenotyping <input type="checkbox"/>
	Package Address		Report Address
Department			
Address 1			
Address 2			
Suburb			
State			
Post Code			
Country			

Return to Haematology QAP – haematology@rcpaqap.com.au
FAX (+61 2) 9933 0199

OFFICE USE ONLY			
Staff		Date	

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Notification of Instrument or Reagent change

HQF231

Requested by			
Participant Number		Institution	
Your Name		Your Phone	
Your Email		Date Requested	

Instrument Change				
Program Cycle / Run	Instrument number	Serial number	Change from	Change to
1. Have you made a change to an FB Instrument? YES <input type="checkbox"/> NO <input type="checkbox"/> If YES go to 2.				
2. Was the previous instrument enrolled in the Automated Differential Program? YES <input type="checkbox"/> NO <input type="checkbox"/>				
<i>Please write instrument changes as text – the codes will be applied by the Haematology QAP</i>				

Reagent Change				
Program Cycle / Run	Instrument number	Analyte	Change from	Change to
<i>Please write reagent changes as text – the codes will be applied by the Haematology QAP</i>				

Comments

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OFFICE USE ONLY			
Staff		Date	

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Haematology

Participant Concerns and Feedback

HQF18

Submitted by			
Participant Number		Institution	
Your Name		Your Phone	
Your Email		Date Submitted	

Comments			
Program		Dispatch	

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 FAX (+61 2) 9933 0199

OFFICE USE ONLY			
Staff		Date	

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Request for Additional Sample, Result Amendment and Report Reprint

HQF150

Requested by			
Participant Number		Institution	
Your Name		Your Phone	
Your Email		Date Requested	

Additional Sample Request			
Sample Required Program Cycle/Run		Reason	
Sample Required Program Cycle/Run		Reason	
Sample Required Program Cycle/Run		Reason	

Amend Result Request			
Program Cycle/Run	Analyte	Change from	Change to

Report Reprint Request			
Report Required Program Cycle/Run		Reason	
Report Required Program Cycle/Run		Reason	
Report Required Program Cycle/Run		Reason	

Return to Haematology QAP – haematology@rcpaqap.com.au
FAX (+61 2) 9933 0199

OFFICE USE ONLY			
Staff		Date	

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2012 PROGRAM SCHEDULE AND SIGN OFF

		FULL BLOOD COUNT			MANUAL DIFFERENTIAL			HAEMOSTASIS			ADDITIONAL FACTORS		
	Results Due	Sample number	Results Sent	Report Review	Sample number	Results Sent	Report Review	Sample number	Results Sent	Report Review	Sample number	Results Sent	Report Review
Jan	24.01	FB19-01			BF12-01			HS12-01			AF12-01		
Feb	15.02	FB19-02			BF12-02			HS12-02					
Mar	13.03	FB19-03			BF12-03						AF12-03		
Apr	19.04	FB19-04			BF12-04			HS12-04					
May	23.05	FB19-05			BF12-05			HS12-05			AF12-05		
Jun	19.06	FB19-06			BF12-06								
Jul	18.07	FB20-07			BF12-07			HS12-07			AF12-07		
Aug	21.08	FB20-08			BF12-08			HS12-08					
Sep	18.09	FB20-09			BF12-09						AF12-09		
Oct	24.10	FB20-10			BF12-10			HS12-10					
Nov	20.11	FB20-11			BF12-11			HS12-11			AF12-11		
Dec	11.12	FB20-12			BF12-12								

		D-DIMER Option 1			D-DIMER Option 2			HAEMOGLOBINOPATHY			MORPHOLOGY		
	Results Due	Sample number	Results Sent	Report Review	Sample number	Results Sent	Report Review	Sample number	Results Sent	Report Review	Sample number	Results Sent	Report Review
Jan	24.01												
Feb	15.02	DD12-02			DS12-02						MO12-02		
Mar	13.03							HP12-03					
Apr	19.04												
May	23.05	DD12-05			DS12-05			HP12-05			MO12-05		
Jun	19.06												
Jul	18.07										MO12-07		
Aug	21.08	DD12-08			DS12-08			HP12-08					
Sep	18.09												
Oct	24.10							HP12-10			MO12-10		
Nov	20.11	DD12-11			DS12-11								
Dec	11.12												

	Results Due
Jan	24.01
Feb	15.02
Mar	13.03
Apr	19.04
May	23.05
Jun	19.06
Jul	18.07
Aug	21.08
Sep	18.09
Oct	24.10
Nov	20.11
Dec	11.12

AUTO DIFFERENTIAL		
Sample number	Results Sent	Report Review
AD12-...-03		
AD12-...-06		
AD12-...-08		
AD12-...-11		

ESR		
Sample number	Results Sent	Report Review
ES12-02		
ES12-06		
ES12-09		
ES12-12		

RETICULOCYTE		
Sample number	Results Sent	Report Review
RE12-...-02		
RE12-...-06		
RE12-...-09		
RE12-...-12		

MALARIAL PARASITE		
Sample number	Results Sent	Report Review
MP12-04		
MP12-11		

	Results Due
Jan	24.01
Feb	15.02
Mar	13.03
Apr	19.04
May	23.05
Jun	19.06
Jul	18.07
Aug	21.08
Sep	18.09
Oct	24.10
Nov	20.11
Dec	11.12

G-6-PD		
Sample number	Results Sent	Report Review
GD12-04		
GD12-10		

POC-INR		
Sample number	Results Sent	Report Review
POC12-02		
POC12-04		
POC12-06		
POC12-08		
POC12-10		

Please use this form as a record of result return and report review. It serves also as a declaration to certify that as far as possible this material was treated in a manner similar to a patient specimen. Signing this form indicates samples were appropriately processed and results returned. The second sign-off indicates the report was reviewed, results discussed and action taken (if appropriate). This documentation should be kept for a minimum of three years from the date of the proficiency testing event. These are for your records – they do not need to be returned to the Haematology QAP