

# **2019 Surveys and Anatomic Pathology Education Programs**



PERFORMANCE YOU CAN MEASURE.
ACCURACY YOU CAN TRUST.

## The science of better PT.

Proficiency Testing (PT) offerings from the CAP are supported by 600 experts in laboratory medicine serving on 32 scientific committees. These experts track testing trends, monitor technical advances, and work collaboratively with professional colleagues and medical specialty societies to improve the quality of testing.

Through their efforts, PT programs from the CAP are based on the latest scientific information and reflect the current needs of laboratory medicine. This expertise not only drives improvements in the laboratory, it helps propel advancements in the in vitro diagnostics industry.



## CAP science in action: Improving Hemoglobin A<sub>1c</sub> PT

The CAP has worked with the National Glycohemoglobin Standardization Program (NGSP) in tightening of the accuracy-based grading by using NGSP targets for the CAP Hemoglobin  $A_{1c}$  PT. When the accuracy-based grading started in 2007, 15% was the initial acceptable limit. In 2019, we use 6%. In response to the tightened grading, the manufacturers have improved their assays and PT results are now more reflective of the patient results. This was made possible by using fresh whole blood specimens in the Hemoglobin  $A_{1c}$  program (GH5).

This improvement in hemoglobin  $A_{1c}$  assays contributes to better patient care and the use of  $A_{1c}$  as a means of diagnosing and monitoring diabetes.

Only the CAP makes such an extensive use of scientific committees and experts. When you rely on CAP PT, you're assured that everything offered is based on the latest scientific advances, and an unrelenting drive for excellence.

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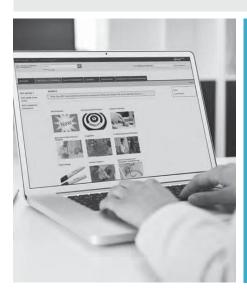
# Insight at a glance.



In just seconds, the CAP's Performance Analytics Dashboard provides valuable insights into your laboratory's performance, letting you proactively focus energy on areas that need immediate attention while filtering out distractions. Updated daily, this complimentary Surveys and CAP accreditation performance monitoring tool reduces the stress of managing today's laboratory by giving you fast access to a single laboratory's or an expansive network's performance.

To view a demo, search Performance Analytics Dashboard at cap.org.

# New Developments



# Simplify your life with the CAP online store.

Now you can order proficiency testing and quality improvement programs, learning opportunities, publications, and more right from your computer.

- Review your 2019 prepopulated quote.
- Add new programs based on your test menu.
- Manage your shipping and billing information.

To get started, visit cap.org and click on the SHOP tab.

## **New Developments**

Quality Management Tools				
Subsection	Name	Program Code	Page(s)	
Q-PROBES™	Technical Staffing Ratios	QP191	25	
Q-PROBES	Opioid Drug Testing Stewardship	QP192	26	
Q-PROBES	Expression Rates in Invasive Breast Carcinoma	QP193	27	
Q-PROBES	The Impact of Pathologist Review of Peripheral Blood Smears	QP194	28	

Quality Cross Check			
Section	Name	Program Code	Page(s)
Transfusion Medicine	Quality Cross Check—Transfusion Medicine	JATQ	49

General Chemistry and Therapeutic Drug Monitoring			
Subsection	Name	Program Code	Page(s)
General Chemistry and Therapeutic Drug Monitoring	Antifungal Drugs Monitoring	AFD	59
General Chemistry and Therapeutic Drug Monitoring	Accuracy-Based Glucose, Insulin, and C-Peptide	ABGIC	63
General Chemistry and Therapeutic Drug Monitoring	Plasma Cardiac Markers International	PCARI	65
Special Chemistry	Fecal Calprotectin	FCAL	75

Endocrinology			
Section	Name	Program Code	Page(s)
Endocrinology	MMA and Active B <sub>12</sub>	MMA	82

Toxicology				
Section	Name	Program Code	Page(s)	
Toxicology	Novel Opioids and Benzodiazepines	NOB	105	
Toxicology	Blood Cannabinoids	THCB	105	
Toxicology	Antifungal Drugs Monitoring	AFD	106	

Accuracy-Based Programs				
Subsection	Name	Program Code	Page(s)	
Accuracy-Based Programs	Accuracy-Based Glucose, Insulin, and C-Peptide	ABGIC	115	

Instrumentation Validation Tools				
Subsection	Name	Program Code	Page(s)	
Instrumentation Validation Tools	C-Peptide/Insulin Calibration Verification/Linearity	LN46	130	

Hematology and Clinical Microscopy			
Subsection	Name	Program Code	Page(s)
Hematology	Hematology Automated Differential Series	FH14, FH14P	137

Reproductive Medicine			
Subsection	Name	Program Code	Page(s)
Andrology and Embryology	Postvasectomy Sperm Count—Automated	PV1	156

Microbiology				
Subsection	Name	Program Code	Page(s)	
Bacteriology	Carbapenem-resistant Organisms	CRO	181	
Bacteriology	Molecular Vaginal Panel	MVP	186	
Multidiscipline Microbiology	Gastrointestinal Panel, 5 Challenge	GIP5	203	

Transfusion Medicine, Viral Markers, and Parentage Testing				
Subsection	Name	Program Code	Page(s)	
Transfusion Medicine	Quality Cross Check—Transfusion Medicine	JATQ	220	
Viral Markers	Viral Markers—Series 6, Additional Material	VM6X	229	

Genetics and Molecular Pathology				
Subsection	Name	Program Code	Page(s)	
Biochemical and Molecular Genetics	CAP/ACMG Cardiomyopathy Sequencing Panel	CMSP	244	
Biochemical and Molecular Genetics	CAP/ACMG Inherited Cancer Sequencing Panel	ICSP	245	

Anatomic Pathology				
Subsection	Name	Program Code	Page(s)	
Surgical Pathology	HQIP Whole Slide Image Quality Improvement Program	HQWSI	268	
General Immunohistochemistry	CD30 Immunohistochemistry Tissue Microarray	CD30	273	
General Immunohistochemistry	p16 Immunohistochemistry Tissue Microarray	P16	273	

# Continuing Education



# Maintain your certification with continuing education (CE) from CAP Surveys.

- Offer your staff more than 100 CE credits.
- Enhance your learning with content that is tightly integrated with proficiency testing challenges.
- Meet certification and licensure requirements with CE across multiple disciplines.

## **Continuing Education**

Continuing Education Programs	. 8
Competency Assessment Program	
QMEd™ Online Educational Courses	

## **Continuing Education Programs**

Your laboratory demonstrates its commitment to quality by choosing CAP Surveys programs. You'll find the same level of quality in the CAP Continuing Education Programs.



**CME (Continuing Medical Education for Physicians)** 

#### Accreditation

The College of American Pathologists (CAP) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

#### **CME Category 1**

The CAP designates these enduring materials educational activities for a maximum of the stated number of AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

#### Note to CME participants of enduring\* materials courses:

An AMA requirement mandates that all physicians wishing to claim CME credits must pass a scored assessment. All CAP enduring materials CME courses require participants to pass a scored assessment prior to claiming credit.

\*Enduring courses are those courses that endure over time, such as print or online courses.



The CAP designates these educational activities for a maximum of the stated number of credits of continuing education. Participants should claim only the credit commensurate with the extent of their participation in the activity.

The American Society for Clinical Pathology (ASCP) Board of Certification (BOC) Certification Maintenance Program (CMP) accepts these activities to meet its continuing education requirements. The states of California and Florida also approve these activities for continuing education credit.

Cytotechnologists may apply the credits from the PAP Education (PAPCE/PAPJE/PAPKE/PAPLE/PAPME), NGC, FNAG, FNA, and TICP programs toward the required educational activities for the American Society of Cytopathology (ASC) Continuing Education Credit Program (CECC) and the International Academy of Cytology (IAC).



credit This activity is eligible for continuing medical education (CME) credit or continuing education (CE) credit.

#### **Surveys Continuing Education Activities**

When your laboratory participates in CAP Surveys, every member of your team can enroll in education activities and earn continuing education (CE) credit at no additional charge. Simply follow these steps:

- 1. Establish a free Web account.
- 2. Complete a reading provided in the Participant Summary or Final Critique.
- 3. Answer online learning assessment questions.
- 4. Claim CE certificate.

Each member of your staff can access the Surveys education activities for a maximum of 12 months.

Surveys Educational Activities				
Program Name	Program Code	Discipline	Catalog Page(s)	
General Chemistry and Therapeutic Drugs	C1, C3/C3X, C4, C7, CZ/CZX/CZ2X, Z	Chemistry	56-58	
Quality Cross Check—Whole Blood Glucose	WBGQ	Chemistry	41	
Endocrinology	Y, YY, DY, BGS, BU, EPO, ING, RAP	Chemistry	84-86, 89	
Coagulation, Limited	CGB, CGL, CGDF	Coagulation	160	
Cytogenetics	CY, CYBK	Cytogenetics	240	
Basic Hematology	HE, HEP	Hematology and Clinical Microscopy	136	
Blood Cell Identification	BCP, BCP2	Hematology and Clinical Microscopy	140	
Hematology Automated Differentials FH Series	FH1-FH4, FH6, FH9-10, FH13-14	Hematology and Clinical Microscopy	136-137	
Virtual Body Fluid	VBF	Hematology and Clinical Microscopy	148	
Bone Marrow Cell Differential	BMD	Hematology and Clinical Microscopy	140	
Clinical Microscopy	CMP, CMP1, GOCB, OCB, DSC	Hematology and Clinical Microscopy	146, 149-151	
CAP/NSH HistoQIP	HQIP	Histology	268	
Immunology	IG, IGX, ANA, ASO, CRP, HCG, IM, RF, RUB, IL, M, OLI, G, LPE, SPE, UBJP, RDS, CCP, S2, S4, S5	Immunology	74,76, 206-207, 210-211	
Bacteriology	D	Microbiology	173	
Mycology and Aerobic Actinomycetes	F	Microbiology	189	
Limited Bacteriology	D1, D2, D3, D4, D5, D6, D7, MC1, MC2, MC3, MC4, MC5	Microbiology	175-178	
Sperm Count, Motility, Morphology, and Viability	SMCD, SM1CD, SM2CD	Reproductive Medicine	156	
Semen Analysis	SC, SC1, PV, SM, SV, ASA	Reproductive Medicine	156	
Embryology	EMB	Reproductive Medicine	157	
Transfusion Medicine	J, J1, JE1, JAT, JATE1, EXM, EXM2	Transfusion Medicine	218-220	

#### **Surveys Self-Reported Training Opportunities**

When your laboratory participates in CAP Surveys, every member of your team can receive self-reported training opportunities.

Self-Repo	rted Training Op	portunities*	
Program Name	Program Code	Source	Catalog Page(s)
Quality Management Tools			
QP191 - Technical Staffing Ratios NEW	QP191	Final Critique	25
QP192 - Opioid Drug Testing Stewardship NEW	QP192	Final Critique	26
QP193 - Expression Rates in Invasive Breast Carcinoma NEW	QP193	Final Critique	27
QP194 - The Impact of Pathologist Review on Peripheral Blood Smears NEW	QP194	Final Critique	28
Hematology and Clinical Microscopy			
Blood Cell Identification	BCP, BCP2	Participant Summary	140
Bone Marrow Cell Differential	BMD	Participant Summary	140
Extended Virtual Peripheral Blood Smear	EHE1	Participant Summary	144
Hematology Automated Differentials FH Series	FH1-FH13, FH1P-FH13P	Participant Summary	136
Basic Hematology	HE, HEP	Participant Summary	136
Hemoglobinopathy	HG	Participant Summary	141
Virtual Body Fluid	VBF	Participant Summary	148
Virtual Peripheral Blood Smear	VPBS	Participant Summary	144
Clinical Microscopy	CMP, CMMP, CMP1	Participant Summary	146-147
Microbiology			
Blood Parasite	BP	Participant Summary/Final Critique	193
Expanded Bacteriology	DEX	Participant Summary/Final Critique	174
Mycobacteriology	E	Participant Summary/Final Critique	188
Yeast	F1	Participant Summary/Final Critique	189
Parasitology	Р	Participant Summary/Final Critique	192
Ticks, Mites, and Other Arthropods	TMO	Participant Summary	193
Worm Identification	WID	Participant Summary	194

<sup>•</sup> CAP Self-Reported Training Opportunities do not offer CE credit, but can be used toward fulfilling requirements for certification maintenance by agencies such as the American Society for Clinical Pathology (ASCP). Please verify with your certifying agency to determine your education requirements.

<sup>•</sup> These opportunities are subject to change. Refer to the Participant Summary/Final Critique for availability.

#### **Continuing Certification (CC)**

Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) is the board certification program that involves continuous professional development and ensures that an American Board of Pathology (ABP) board-certified pathologist is committed to lifelong learning and competency in a specialty and/or subspecialty.

There are six competency categories defined by the American Board of Medical Specialties (ABMS) and endorsed by the ABP to fulfill specific CC requirements. They are listed below with their descriptions.

All CAP education activities providing CME credits meet the CC Part II: Lifelong Learning requirements. Some programs will meet the requirements for Self-Assessment Module (SAM) and/or CC Part IV at the laboratory or the individual levels. Programs that meet Part IV are identified within the description of the program. Visit the CAP website for the current list of programs that meet the requirements for CC Part II and Part IV.

#### Interpersonal and Communication Skills

Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, patients' families, and professional associates.

#### Medical Knowledge

Demonstrate knowledge of established and evolving biomedical, clinical, and cognate sciences and the application of this knowledge to pathology.

#### Practice-Based Learning and Improvement

Demonstrate ability to investigate and evaluate diagnostic and laboratory practices in your own laboratory, appraise and assimilate scientific evidence, and improve laboratory practices and patient care.

#### **Patient Care**

Demonstrate a satisfactory level of diagnostic competence and provide appropriate and effective consultation in the context of pathology services.

#### **Professionalism**

Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to diverse patient population.

#### **Systems-Based Practice**

Demonstrate understanding of and contribution to local, regional, and national health care systems, and support health care in systems-based practice definition.



**Self Assessment Module:** This activity fulfills the SAM credit requirements for CC and is therefore eligible for SAM credit. Participants who successfully complete an online assessment may apply their earned credit(s) to the ABP's SAM requirements.

Note to CME/CE participants: The AMA mandates that all education providers (such as the CAP) require participants pass assessment questions in an enduring\* program in order to earn and claim CME credits. All participants in any activity granting CME/CE will be required to complete and pass assessment questions before claiming their credits.

For CME/SAM activities ONLY: Participants have a total of three opportunities to take and pass the post-test, with feedback provided after each question. The AMA requires that participants pass the post-test in an enduring program to claim credit; therefore, if they do not pass, they cannot claim credit.

<sup>\*</sup>Enduring programs are those courses that endure over time such as print or online courses.

	Educ	cation Programs			
Program Name	Program Code	Maximum AMA PRA CME Category 1 Credits™ Annually	Maximum CE Credits Annually	Format	Catalog Page
Autopsy Pathology	AUP/AUP1	12.5****	NA	Online	275
Clinical Pathology Improvement Program*	CPIP/CPIP1	15****	NA	Online	14
Digital Slide Program in Dermatopathology*	DPATH/DPATH1	15****	NA	Online (DigitalScope®)	265
Digital Slide Program in FNA*	FNA/FNA1	10	10	Online (DigitalScope)	282
Fine-Needle Aspiration Glass Slides	FNAG/FNAG1	10	10	Glass Slides	283
Forensic Pathology	FR/FR1	12.5****	12.5	Online	286
Digital Slide Program in Hematopathology	HPATH/HPATH1	12.5***	12	Online (DigitalScope)	145
Nongynecologic Cytopathology Education**	NGC/NGC1	25	25	Glass Slides With Online Cases (DigitalScope)	281
Neuropathology Program	NP/NP1	10****	NA	Online (DigitalScope)	276
Gynecologic Cytopathology PAP Education Program***	PAPCE/APAPCE PAPUE/APAPUE PAPKE/APAPKE PAPLE/APAPLE PAPME/APAPME Series 1 or 2	8	8	Glass Slides	278
Glass Slide Cytopathology PAP PT Program (with Glass Slide PAP Education)***	PAPCPT/APAPCPT PAPJPT/APAPJPT PAPKPT/APAPKPT PAPLPT/APAPLPT PAPMPT/APAPMPT	8	8	Glass Slides	277

<sup>\*</sup>Program is available for purchase online. Go to cap.org and choose the Learning tab.

<sup>\*\*</sup>NGC provides up to 20 CME/CE credits for the glass slides and 5 CME/CE credits for the online slide portion of the program.

<sup>\*\*\*</sup>PAP provides up to 8 CME/CE credits for glass slides.

<sup>\*\*\*\*</sup>SAM credits are included in CME totals for the appropriate programs.

Education Programs					
Program Name	Program Code	Maximum AMA PRA CME Category 1 Credits™ Annually	Maximum CE Credits Annually	Format	Catalog Page
Performance Improvement Program in Surgical Pathology	PIP/PIP1	40	NA	Glass Slides	263
Online Performance Improvement Program in Surgical Pathology*	PIPW/PIPW1	40	NA	Online (DigitalScope)	262
Nongynecologic Cytopathology Intraoperative Touch Imprint/ Crush Preparation Program*	TICP/TICP1	10****	10	Online (DigitalScope)	267
Variant Interpretation Only Program	VIP/VIP1	3	3	Online	250
Virtual Biopsy Program*	VBP/VBP1	25****	NA	Online (DigitalScope)	264

<sup>\*</sup>Program is available for purchase online. Go to cap.org and choose the Learning tab.

#### **System Requirements**

DigitalScope is a Web-based whole slide image (WSI) retrieval and viewing system. DigitalScope is supported with Microsoft Internet Explorer 11.0 (limited support for IE 9 and 10) or later, Firefox 4.0 or later, Safari 3, and the latest Google Chrome version.

For the most up-to-date information on system requirements, go to cap.org and select CONTACT & SUPPORT. The download speed and the appearance of the activity will vary depending on the type and speed of your Internet connection, computer's power, and browser.

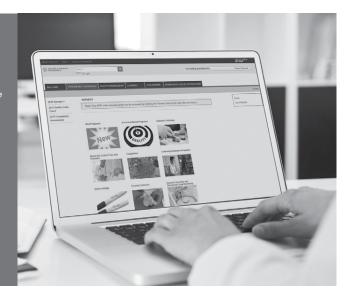
### Simplify Your Life with our Online Store

You can order PT, quality management programs, learning opportunities, publications, and more.

From the online store, you can:

- Review your 2019 prepopulated quote (based on your 2018 order)
- Add new programs based on your test menu
- Manage your shipping and billing information

To get started, visit cap.org and click on the SHOP tab.



<sup>\*\*\*\*</sup>SAM credits are included in CME totals for the appropriate programs.

#### Clinical Pathology Improvement Program (CPIP)

The Clinical Pathology Improvement Program (CPIP) delivers 12 online clinical laboratory cases to study—one per month—and an opportunity to earn up to 15 CME/SAM credits annually. Assess and improve clinical pathology skills and fulfill Continuing Certification (CC) requirements, formerly known as Maintenance of Certification (MOC).

CPIP cases feature real-life case scenarios, including images and clinical background. Participants work through sequentially revealed information and a series of prompts to arrive at a resolution—just as in the laboratory.

Cases include thought-provoking questions with feedback and a multiple-choice post-test. Participants who earn passing scores on post-tests may apply their earned credits to the ABP's CC SAM requirements.

Clinical Pathology Improvement Program CPIP/CPIP1				
Program Name Program Code Cases/Year				
	CPIP/CPIP1			
Online cases in clinical pathology		12		

#### **Additional Information**

Pathologists and residents can use CPIP online to assess and improve their skills in clinical pathology.

- Case topics may originate from the ABP's general listing suggested for CC including laboratory administration and operations, transfusion medicine, chemistry, coagulation, hematology, immunology, microbiology, and molecular genetic pathology.
- Cases may include patient history, case-related static images, and whole slide images.
- Monthly individual CPIP cases can also be ordered online. Go to cap.org and choose the Learning tab. To order both CPIP and CPIP1, please call 800-323-4040 or 847-832-7000 option 1.

#### **Program Information**

- CPIP One online clinical laboratory case per month
- CPIP1 Additional pathologist (within the same institution) reporting option with CME/SAM credit; must order in conjunction with CPIP
- Earn a maximum of 15 CME/SAM credits (AMA PRA Category 1 Credits™) per year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Twelve cases per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available





## **Competency Assessment Program**

# About one of every four laboratories is cited for a deficiency related to its competency assessment records. You can avoid becoming a part of this statistic.

#### **Competency Assessment Program**

The CAP's Competency Assessment Program helps keep you in compliance by managing your personnel's competency assessment performance and records. Use the CAP's Competency Assessment Program to track compliance to all six of the elements of competency assessment as defined by CLIA. Customizable to fit your specific laboratory's procedures, Competency Assessment Program offers benefits that simplify your documentation process.

- Be organized. Stay on top of your documentation and records with easy-to-use management reports, employee progress tracking, and individual employee transcripts so your laboratory is inspection-ready at all times.
- Obtain real-time results. Generate management reports with just a few clicks.
- Strengthen your learning. The program comes ready with multiple relevant, applicable courses already loaded, and new courses are added every six months. Plus, if employees need a refresher learning opportunity, reassessment courses are included.
- Customize training to your needs. If the wide selection of ready-made training courses (Pro Courses) doesn't meet your needs, customize them. You can match courses to your laboratory's exact standard procedures.
- Save time. Tools like ChecklistBuilder, CourseBuilder, and Competency Profiles allow your administrators easy, convenient methods to document all six areas of competency as defined by CLIA and the CAP Laboratory Accreditation Program.
- Access anywhere. The Competency Assessment Program is cloud based, so it's available 24/7 from any PC, laptop, or tablet—wherever you have an Internet connection. Courses are available for users throughout the subscription period.
- Stay focused. Use instrument-specific checklists for assessing competency and training.
- · Remain in compliance. Many of the ready-made educational courses provide your staff the opportunity to earn CE credits.

#### Add Safety & Compliance Courses Especially Developed for the Laboratory

As an add-on option, Competency Assessment Program offers a package of seven non-credit, complementary safety and compliance courses—appropriate for annual laboratory-specific compliance training and for clinical laboratory science students prior to clinical rotations. These courses include:

- · OSHA Bloodborne Pathogens
- · OSHA Hazard Communication and Chemical Hygiene
- · OSHA Electrical Safety
- OSHA Fire Safety
- OSHA Formaldehyde
- Tuberculosis Awareness for Health Care Workers
- Medical Error Prevention: Patient Safety

The CAP updates these courses as necessary to reflect changes in regulations or best practices.

With the Competency Assessment Program, you can keep your laboratory organized and inspection-ready every day of the year. Choose the Competency Assessment Program subscription that fits your lab. Please refer to the ordering information and course descriptions on the following pages. For more information, visit cap.org and choose Learning for Laboratory Professionals via the Learning tab.

Number of Users	Competency Assessment Program	Competency Assessment Program with Optional Safety & Compliance Courses**
1	CA0001	CA0001 + XCA0001
2 to 50	CA0050	CA0050 + XCA0050
51 to 250*	CA0250	CA0250 + XCA0250

<sup>\*</sup>For subscriptions for more than 250 users, please contact the CAP for more information.

<sup>\*\*</sup>Safety & Compliance Course subscriptions require a standard Competency Assessment Program subscription.

Assessment Course Schedule				
Discipline	January 2019 Release	July 2019 Release		
Blood Banking/Transfusion Medicine—Generalist	Blood components—storage, handling, and selection	Quality control in the blood bank laboratory		
Blood Banking/Transfusion Medicine—Specialist	Blood components—storage, handling, and selection	Quality control in the blood bank laboratory		
Chemistry	Cardiac biomarkers	Therapeutic drug monitoring		
Hematology and Coagulation	Erythrocyte inclusions	White blood cells		
Histology	Quality management in histology	IHC - part 1		
Immunology	Hepatitis testing	Rapid serology kit tests		
Microbiology—Generalist	Blood cultures	Microbiology of the gastrointestinal tract		
Microbiology—Specialist	Blood cultures	Microbiology of the gastrointestinal tract		
Phlebotomy/Specimen Processing	Common pitfalls in specimen processing	General specimen handling and transportation requirements		
Point-of-Care Testing	Whole blood glucose testing	Blood gas testing		
Quality Programs/Management	Investigating occurrences (occurrence reports, root cause analysis, corrective action)	Development and implementation of a quality management program		
Safety	Bloodborne pathogens	General laboratory safety		
Urinalysis/Body Fluids	Physical and chemical urinalysis	Microscopic urinalysis - part 1		

Pro Course Schedule				
Discipline	January 2019 Release	July 2019 Release		
Blood Banking/Transfusion Medicine	Antibody screen and ID	Transfusion reactions		
Chemistry	Liver and renal testing	Chemistry QC, calibration, and reportable range		
Hematology and Coagulation	Common coagulation tests	Platelet testing, morphology, and disorders		
Histology	Safety issues in the histology laboratory	Special stains		
Immunology	Qualitative HIV testing	Molecular amplification methods for detection of infectious diseases		
Microbiology	Gram stain: organism detection and differentiation	Urine and body fluid cultures		
Phlebotomy/Specimen Processing	Challenges of phlebotomy: pediatric blood collection, alternate sites, and difficult draws	Specimen collection for workplace urine drug testing programs and forensic drug and alcohol testing		
Point-of-Care Testing	Whole blood prothrombin time and INR (PT/INR) testing	Cardiac biomarkers		
Quality Programs/Management	Laboratory management: monitoring the quality control program	Competency evaluation		
Safety	Fire and electrical safety	Ergonomics		
Urinalysis/Body Fluids	Cerebrospinal fluid analysis	Semen analysis		

## **Safety & Compliance Courses**

OSHA Bloodborne Pathogens. Addresses the OSHA Bloodborne Pathogens standard as it applies to clinical and medical laboratories. Covers major bloodborne pathogens, including hepatitis B and HIV. Focuses on proper handling of sharps, personal protective equipment (PPE), engineering controls such as microbiological safety cabinets, and proper work practices like handwashing.

OSHA Hazard Communication and Chemical Hygiene. Describes the OSHA Chemical Hygiene Standard and helps satisfy OSHA requirements for annual training. Explains Haz-Com, the National Fire Protection Agency diamond, the Safety Data Sheet, and common-sense laboratory safety rules applied to clinical laboratory practice.

OSHA Electrical Safety. Addresses electrical safety and electrical hazards commonly found in the clinical laboratory. Covers prevention and safety measures, fighting electrical fires, and treatment of electrical injuries.

OSHA Fire Safety. Teaches the basics of fire safety in the clinical laboratory, including classes of fire and key acronyms, such as PASS and RACE. Addresses fire prevention, drills, and firefighting techniques.

OSHA Formaldehyde. Covers essentials for any laboratory that uses formaldehyde or formalin. Shares facts about formaldehyde, safety risks, proper handling procedure, monitoring, spill clean-up, and personal protective equipment.

Tuberculosis Awareness for Health Care Workers. Provides background information about spread of tuberculosis, purified protein derivative (PPD) testing procedures, CDC guidelines, and methods of control.

Medical Error Prevention: Patient Safety. Includes potential causes of medical errors in the clinical laboratory, important legislation and definitions, and steps laboratory professionals can take to reduce the impact of medical errors in their workplace. Serves as an ideal part of an effective medical error reduction program. Appropriate for both experienced and newer laboratory personnel.

Note: The Safety & Compliance courses are not available for purchase separately. The courses listed above do not offer CE credit.

## Enhance the culture of patient safety in your laboratory

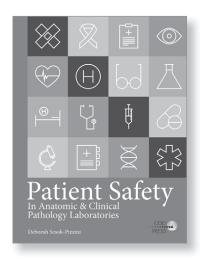
Connect the patient safety culture in your laboratory to the overall mission and goals of your health care enterprise.

- Prevent errors in communication, handoffs, and transitions
- Use technology to improve laboratory patient safety
- Learn how cognitive bias can contribute to patient safety errors
- Build high-reliability teams
- Engage the patient navigator to address safety issues through continuity and coordination of care
- Develop and implement a patient safety curriculum for the laboratory
- Understand how accreditation milestones advance patient safety initiatives

Select Patient Safety in Anatomic & Clinical Pathology Laboratories (PUB316) on your Surveys order form.

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- printed books at estore.cap.org
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**Item number:** PUB316 Softcover; 128 pages; 2017

## QMEd™ Online Educational Courses

# Learn quality tools and techniques with case examples from medical laboratories.



#### **Program information**

- CAP Quality Management Educational Resources (QMEd) courses help you improve your processes and eliminate waste.
- CAP QMEd courses help you build a quality management system—one piece at a time—that sustains your continuous improvement and Lean efforts.
- CAP QMEd courses are delivered online via a highly interactive user interface that allows you to learn at your own pace.
- All CAP QMEd courses are licensed for one year, allow sharing of logins, and include continuing education (CE) credit.

#### CAP online QMEd courses will help you:

- · Understand the concept of a quality management system
- · Self-assess your current QMS against international quality standards
- · Plan and resource for the development of your QMS
- Interpret ISO 15189 requirements
- · Improve your document control system
- Perform internal audits using tracer audit and process audit methods
- Implement and refine occurrence management with root cause analysis
- · Write an effective quality manual
- · Measure, analyze, and set goals with senior management

#### **About the Courses**

#### **Quality Culture**

Order ISOEDCL

Designed for laboratory medical directors, administrative directors, quality managers, and other leaders who can affect the culture of their laboratory through their decisions and actions. The course provides an adaptable program for proactively shaping culture. It includes video commentary by CAP member pathologists.

2 CE credits available

#### **Root Cause Analysis**

Order ISOEDRC

Learn real-world methodology to conduct a root cause analysis, along with the tools necessary to implement it. Learn from actual examples of complete root cause analysis based on projects in laboratories like yours. You will even perform key steps based on a participant case study. The course is designed for laboratory quality managers and implementation team members.

6 CE credits available

#### Mistake Proofing

Order ISOEDMP

Increase your ability to design new processes, modify existing processes, minimize mistakes, and manage your risks. This course provides a methodology focused on five main categories of mistake-proofing tactics and shows examples of these tactics from the domain of laboratory medicine. It includes video commentary by CAP member pathologists with experience using Lean and other process improvement techniques.

4 CE credits available

#### **Internal Auditing**

Order ISOEDIA

Increase your capabilities for internal auditing with a proven methodology for process audits, tracer audits, and laser audits. Learn how to prepare for interviews, communicate findings to your quality management team, and use audits to drive process improvements. The course provides detailed, real-world examples you can use to build your own audit plans, plus multimedia presentations of key concepts.

3 CE credits available

#### **Management Review**

Order ISOEDMR

This course interprets the ISO 15189 requirements for management review. The CAP's ISO 15189 assessors discuss how to structure the review meeting, communicate results of quality assessments, and prompt strategic decisions from management—all in the context of the overall health of your organization.

2 CE credits available

#### **Quality Manual Development**

Order ISOEDQM

This course provides guidance on how to go beyond a quality plan to develop a manual that organizes and communicates your laboratory's quality management system. You will see an example of an effectively structured and written manual so you can organize and create your own. Plus, the CAP's ISO 15189 assessors show you approaches to link your quality policy to quality objectives and metrics.

2 CE credits available

#### **Document Control**

Order ISOEDDC

This "how-to" course on document control systems details how to control documents in a way that meets ISO 15189 requirements, how to accomplish document control even with minimal resources (such as spreadsheets), and how document control contributes to cost containment. Audio recordings of the CAP's ISO 15189 assessors provide examples and commentary on common pitfalls and issues.

2 CE credits available

#### **QMS Implementation Roadmap**

Order ISOEDRM

Outlines the practical steps necessary to build, implement, and maintain a quality management system that meets the ISO 15189 standard. Video recordings of the CAP's ISO 15189 assessors provide perspective on best practices and pitfalls. Designed for laboratory quality managers, plus your implementation team members.

2 CE credits available

#### 15189 Walkthrough

Order ISOEDWT

Designed for laboratory quality managers (along with your medical and administrative decision makers) considering implementation of an ISO 15189 program. Summarizes each section of the standard, while clarifying its intent and key requirements. See video recordings of the CAP's ISO 15189 assessors who offer context and examples of how technical problems relate to more fundamental deficiencies in the quality management system.

2 CE credits available

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# How current is your laboratory quality management plan?



Created specifically for the needs of the anatomic pathology laboratory, this comprehensive manual can help you develop, implement, and maintain a comprehensive quality program. Learn valuable tips for designing your own laboratory quality plan that documents regulatory compliance. Text includes cross-references to the CAP's Laboratory Accreditation Program checklists, Joint Commission standards, and CLIA '88.

Quality Management In Anatomic Pathology

Item number: PUB125

Softcover; 228 pages; 135+ figures

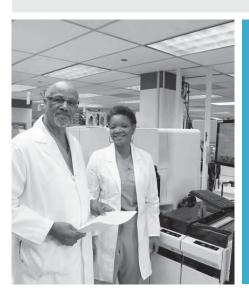
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# **Quality Management Tools**



# Engage in quality measures with the latest Q-PROBES™ programs.

- Gain insight into optimal staffing levels (QP191).
- Benchmark opioid urine drug testing turnaround times and result agreement for initial and definitive tests (QP192).
- Compare invasive breast cancer expression rates for ER, PgR, and HER2 with other laboratories (QP193).
- Investigate the impact of pathologist review of peripheral blood smears (QP194).

## **Quality Management Tools**

Q-PROBES™Q-TRACKS®	
Clinical Pathology Monitors	
Anatomic Pathology Monitor	
New Programs NEW	
Technical Staffing Ratios (QP191)	25
Opioid Drug Testing Stewardship (QP192)	
Expression Rates in Invasive Breast Carcinoma (QP193)	27
The Impact of Pathologist Review of Peripheral Blood Smears (QP194)	

## **Discontinued Programs**

Physician Satisfaction with Clinical Laboratory Services (QP181) Laboratory Staff Turnover (QP182) Technical Competency Assessment of Body Fluid Slide Review (QP183)

Laboratory Result Turnaround Time for Emergency Room Specimens (QP184)
Monitoring of Troponin Metrics for Suspected MI (QM1)

# **Quality Management Tools**

Use the CAP's Quality Management Tools (QMT) to **improve the Total Testing Process** by identifying quality improvement opportunities of selected key processes in the clinical and anatomic pathology laboratories, examining preanalytical, analytical, and postanalytical phases:

- Establish realistic goals by comparing performance against similar institutions with comparable demographics
- Monitor progress through unique and robust quality indicators on a periodical basis
- Make effective quality management decisions based on practical and in-depth individual reports provided to participants
- Improve efficiencies to allow time for more patient-centric activities
- Easily integrate quality management into your daily work processes with predesigned monitoring tools developed by laboratory professionals and scientists

Q-PROBES™ A One-Time Opportunity to Perform In-Depth Quality Assessment

Q-TRACKS® A Program for Continuous Quality Monitoring

Q-PROBES and Q-TRACKS activities meet the American Board of Pathology Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) requirements.

#### Purchase Q-PROBES or Q-TRACKS combination packages and save.

Module/Package	Program Code
Four Q-PROBES studies (includes all four studies)	PRO
CP/AP Q-TRACKS Monitors (combined CP/AP module includes all 11 QT monitors)	QTP
Clinical Pathology Monitors (includes all 10 CP monitors)	QTC

# Q-PROBES and Q-TRACKS

offer a comprehensive collection of tools to complement your quality management program needs.\*

										,	1
Select Q-PROBES and Q-TRACKS studies to support your quality improvement initiatives.	Preanalytic	Analytic	Postanalytic	Anatomic Pathology	Clinical Pathology	Turnaround Time	Patient Safety	Microbiology	Transfusion Medicine	Chemistry/ Hematology	Customer Satisfaction
Q-PROBES											
Technical Staffing Ratios (QP191) NEW					ı			•	I	ı	
Opioid Drug Testing Stewardship (QP192) NEW					ı					ı	ı
Expression Rates in Invasive Breast Carcinoma (QP193) NEW		ı		•			ı				ı
The Impact of Pathologist Review on Peripheral Blood Smears (QP194) NEW	I				ı		ı			•	ı
Q-TRACKS											
Patient Identification Accuracy (QT1)					ı						I
Blood Culture Contamination (QT2)					ı			ı			
Laboratory Specimen Acceptability (QT3)					ı					ı	ı
In-Date Blood Product Wastage (QT4)					ı				ı		
Gynecologic Cytology Outcomes: Biopsy Correlation Performance (QT5)	I	ı		•			ı				ı
Satisfaction With Outpatient Specimen Collection (QT7)					ı						•
Stat Test Turnaround Time Outliers (QT8)					ı					•	
Critical Values Reporting (QT10)					ı					•	
Troponin Turnaround Times (QT15)					ı					•	•
Corrected Results (QT16)					ı			•	ı	•	•
Outpatient Order Entry Errors (QT17)					ı		I			ı	

<sup>\*</sup>The CAP requires accredited laboratories to have a quality management plan that covers all areas of the laboratory and includes benchmarking key measures of laboratory performance (GEN.13806, GEN.20316, COM.04000). The Joint Commission requires accredited hospitals to regularly collect and analyze performance data (PI.01.01.01, PI.02.01.01). CLIA requires laboratories to monitor, assess, and correct problems identified in preanalytic, analytic, and postanalytic systems (§493.1249, §493.1289, §493.1299).

## **Q-PROBES**

## A One-Time Opportunity to Perform In-Depth Quality Assessment

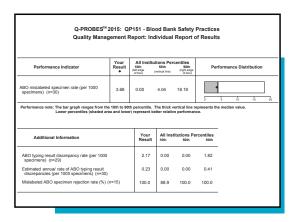
Implement quality monitoring—Use Q-PROBES short-term comprehensive quality studies<sup>1</sup> to learn how to start monitoring and measuring key processes that you may not have followed in the past or that are not commonly monitored in most laboratories. Q-PROBES studies analyze hot topics and industry trends to keep the laboratory current.

Gain experience in data collection and analysis—Participants will collect data during predetermined dates. Based on submitted data, the CAP provides personalized reports with the individual participant's performance compared against other participants.

Strengthen your quality assessment expertise—The CAP's pathologist experts provide in-depth discussion and identify best practices for laboratories to strive for. In addition, consolidated results of the studies are carefully reviewed and analyzed to be published in the form of scientific articles. Such articles give participants an extra layer of information to be utilized for further analysis.

Participants in the Q-PROBES program receive:

- User guide
- Templates and instructions for data collection
- Individual report, how to interpret the results guide, overall aggregated data
- Data Analysis and Critique that includes data distributions and initial analysis of laboratory practices and commentaries from pathologist experts on improvement opportunities



Notification of the scientific articles that are published with the results of the studies

Q-PROBES activities meet the American Board of Pathology Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) requirements.

<sup>&</sup>lt;sup>1</sup> Q-PROBES studies are available only one time annually and may not be repeated in the future.

## Technical Staffing Ratios QP191



#### Introduction

Laboratory staff play an important role in the detection, diagnosis, and treatment of disease by performing tests in laboratories. These staff account for two-thirds of direct clinical laboratory costs. This Q-PROBES study is designed to produce data that will assist laboratorians in managing those costs and gauging their staffing levels.

Laboratories participating in this study will submit data on their overall laboratory staffing levels and on their staffing levels for four laboratory testing sections including anatomic pathology, chemistry/hematology/immunology, microbiology, and transfusion medicine. From these levels, we will calculate staffing ratios for these four sections relative to overall laboratory staffing, managerial staffing, and billable tests. We will benchmark your laboratory's staffing ratios against those of other institutions participating in this study, and where applicable, against peer groups with similar billable test profiles.

Enrollment in this Q-PROBES study will help laboratory directors address CAP Laboratory Accreditation Program Checklist statement TLC.11300, which requires sufficient numbers of personnel are available to meet the needs of the laboratory.

#### **Objectives**

The aim of this Q-PROBES study is to measure staffing levels in different areas of the laboratory, calculate key staffing ratios, and compare all staffing ratios with those of other institutions participating in this study.

#### **Data Collection**

Participants will use their laboratory or institution's revenue and usage reports to obtain billable test counts and staffing figures for the most recently completed fiscal year.

#### **Performance Indicators**

- Overall Laboratory
  - o Non-management laboratory full-time equivalent employees (FTE)/management FTE
  - o Specimen accessioning FTE/non-management FTE
  - o Laboratory quality assurance FTE/all laboratory staff FTEs
  - o FTEs preparing send-out tests/non-management FTE
  - o Billable tests/specimen accessioning FTE
- · Anatomic Pathology
  - o Histology blocks/histology non-management FTE
  - o Cytology accessions/cytology non-management FTE
  - o Non-management FTE/management FTE
- · Chemistry/Hematology/Immunology
  - o Total billable tests/non-management FTE
  - o Non-management FTE/management FTE
- Microbiology
  - o Total billable tests/non-management FTE
  - o Non-management FTE/management FTE
- · Transfusion Medicine
  - o Crossmatches or type and screens/non-management FTE
  - o Transfused units/non-management FTE
  - o Non-management FTE/management FTE

This is a one-time study conducted in the first quarter.

# **Quality Management Tools**



## Opioid Drug Testing Stewardship QP192

#### Introduction

Deaths due to drug overdose continue to rise across the country. Opioids, traditionally prescribed for chronic pain mitigation, account for many of these deaths. Comprehensive programs that focus on drug prescriptions and dependency are required to address the drug epidemic, including monitoring patients through drug testing. Drug testing plays an important role in chronic pain and addiction programs by evaluating compliance with treatment, alerting physicians to potential drug diversion, and documenting that common unprescribed and/or undisclosed drugs are not being taken.

Specimens are generally tested using one of two approaches: by initial (screening) rapid methods that may be followed by more sensitive definitive (confirmatory) methods, or alternatively, by targeted testing only (no screening) using definitive methods. The turnaround times (TATs) of the initial and definitive tests, as well as the performance characteristics of the testing methodology, can have potential effects on patient care and personal aspects of a patient's life.

This Q-PROBES study will focus on non-emergency laboratory urine drug testing of patients (eg, such as those in drug treatment programs, chronic pain management programs, or by physician referral) by examining test TATs, and the methods that laboratories and clinics use to test urine specimens for the presence of drugs. TATs will be measured for both initial and definitive testing. Initial tests are used to identify classes of drugs present in the urine and rely on a set threshold above which a positive result is produced; these tests are often not designed to detect lower concentrations of a drug. Definitive testing of a specimen is used to confirm that a drug detected on initial testing is truly present and in some cases, to document that low levels of a drug are not present when initial testing is negative.

Participation in this Q-PROBES study helps address the following Joint Commission pain assessment and management standards for hospitals through oversight of development and monitoring performance improvement activities, establishment of protocols, quality metrics collection, data review, and data analysis: LD.04.03.13, MS.05.01.01, PC.01.02.07, Pl.01.01.01, and Pl.02.01.01.

#### **Objectives**

The purpose of this study is to benchmark opioid urine drug testing turnaround times for initial and definitive testing, and to examine differences between initial and definitive test results. Laboratories may use this TAT data to determine if changes should be made to the methods and processes used to test urine specimens for opioid drugs. Participants may identify gaps in testing protocols that produce initial results that are inconsistent with definitive testing results.

#### **Data Collection**

Participants will retrospectively record collection, accession, and result times for up to 50 outpatient urine specimens ordered for drug testing on patients from non-emergency sources including chronic pain support programs, addiction services, and physician referrals.

Time intervals may be retrieved from the health care or laboratory information system. Specimen collection time, accession time, and test result time will be collected for each initial test. Definitive order time and result time will be collected for each definitive test. Study results will be provided based on the TATs that are reported to enable institutions only performing initial testing, or definitive testing only, to receive TAT results reflective of their testing process. Institutions that send out opioid testing (initial, definitive, or both) are eligible for participation. Participants will provide drug testing method(s) used for analysis (eg, immunoassay, chromatography, mass spectrometry), and location of drug testing will be recorded.

Each participating laboratory will provide additional general practice characteristics related to opioid drug testing, such as protocol for initial and definitive testing, and drug panel availability.

#### **Performance Indicators**

- Time from sample collection to initial test accession
- · Time from initial test accession to initial test result
- Time from sample collection to initial test result
- · Time from definitive testing order to definitive test result
- Percent agreement between initial test results and definitive test results (%)

This is a one-time study conducted in the second quarter.

## Expression Rates in Invasive Breast Carcinoma QP193



#### Introduction

The 2010 ASCO/CAP guideline recommendations for immunohistochemical testing of estrogen (ER) and progesterone (PgR) receptors in breast cancer suggest that laboratories enact a quality management program encompassing all aspects of testing. With regard to the analytic phase of testing, the guideline suggests periodic trend analysis to confirm an appropriate number of ER-positive breast cancers in the patient population served by the laboratory.

Enrollment in QP193 will assist participating laboratories in comparing their predictive marker results with those of other laboratories, and address compliance with CAP Laboratory Accreditation Program Checklist statement ANP.22970, annual result comparison of immunohistochemical tests performed on invasive breast carcinoma specimens.

#### **Objectives**

This study aims to compare invasive breast cancer expression rates for ER, PgR, and HER2 with those of other laboratories. Expression rates will be stratified by histologic type and patient age, where applicable, to provide participants further insight into this analytic phase of immunohistochemical testing.

#### **Data Collection**

During a one-month period, participants will provide ER, PgR, and HER2 test results from all invasive breast cancer cases. Other case-specific factors will be collected including patient age, histologic tumor type, method of assessment, tumor grade, and tissue type.

Participants will also provide institution level ER/PgR positive rates, and HER2 2+ and 3+ result rates from the previous calendar year or most recent annual data aggregation.

Information regarding general practices involved in expression testing will be collected, such as antibody clones used in testing.

#### **Performance Indicators**

- ER positive rate (%)
- PgR positive rate (%)
- HER2 score 2+ rate (%)
- HER2 score 3+ rate (%)

This is a one-time study conducted in the third quarter.



# The Impact of Pathologist Review of Peripheral Blood Smears QP194

#### Introduction

Automated hematology analyzers that produce image-guided cell differential counts and morphologic flags potentially provide greater accuracy and improve the detection of morphologic abnormalities in peripheral blood specimens. Manual microscopic reviews of peripheral blood (PB) smears by the technologist, and subsequently by the pathologist, are typically performed on cases that meet certain criteria, either recommended by manufacturing companies or established by laboratory directors based on the International Society of Laboratory Hematology guidelines. In addition, a significant proportion of PB smear review cases by pathologists are directly requested by providers.

Pathologists reviewing peripheral blood smears can play a pivotal role in patient care by recognizing and confirming the presence of significant morphologic abnormalities such as blasts, schistocytes, and malignant lymphocytes. However, for PB smear reviews directly requested by providers, careful reviews by experienced technologists are often sufficient, and reviews by pathologists may not add significant value. In this scenario, laboratories may consider adjusting the PB smear review policy in order to focus pathologist time and expertise on those cases that truly require it.

Enrollment in this Q-PROBES study will help participants address the CAP Laboratory Accreditation Program Checklist statement HEME.34600 regarding criteria for blood film review.

#### **Objectives**

This study will investigate the impact of peripheral blood smear review by the pathologist when requested by the technologist or provider, and measure the rate of detection of clinically relevant findings reported by the pathologist. The study will provide a measure of the rate of peripheral smear differentials that undergo pathologist review compared to all peripheral smear differentials, and the rate of peripheral smear differentials that undergo pathologist review compared to all complete blood counts (CBCs) performed during the study period.

#### **Data Collection**

During a four-week study period, participants will prospectively collect information on PB smears requested for pathologist review, including the request source and reason for the request for both inpatients and outpatients. Pathologists will select clinically relevant findings that they added to the case during their review from a standardized short list. For cases requested by technologists, pathologist agreement status will be recorded. Pathologists will indicate if their review provided a morphologic diagnosis and/or recommendations for further evaluation. In addition, the total number of provider-ordered PB smear pathologist reviews, PB smear differentials, and CBCs performed during the study period will be collected.

Participants will provide additional information about general peripheral blood smear review practices in their institutions, including the chosen criteria that result in a pathologist-reviewed slide.

#### **Performance Indicators**

- Rate of clinically relevant findings disclosed by pathologists during provider-ordered PB smear review (%)
- Rate of clinically relevant findings disclosed by pathologists during technologist-requested PB smear review (%)

#### **Additional Measures**

- Peripheral smears that undergo pathologist review/All manual differentials performed during the study period (%)
- Peripheral smears that undergo pathologist review/All CBCs performed during the study period (%)

This is a one-time study conducted in the fourth quarter.

## **Q-TRACKS**

## A Program for Continuous Quality Monitoring

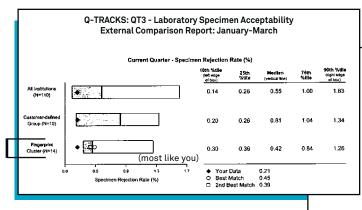
#### Identify and monitor opportunities for quality improvement over time

Use established Q-TRACKS programs to identify opportunities to quantitate your quality improvement measures.

#### **Evaluate quality improvements**

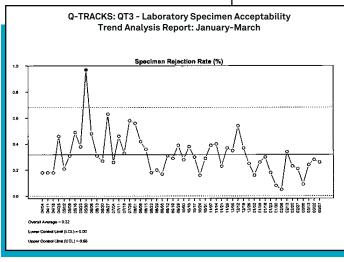
Measure the effectiveness and impact of implemented changes in key processes. The individual reports include performance of quality indicators over time, benchmarking information, trends, and suggested areas for improvement.

#### Step 1: Establish realistic benchmarks by comparing your laboratory to others like yours.



#### Step 2: Identify improvement opportunities.

Specimen Rejection Reasons	Your Date (%)	Aggregate Percent <sup>e</sup>
Specimen lost/not received	0.0	12.1
Unlabeled specimen	6.4	2.2
Mislabeled specimen	4.5	3.0
Incompletely labeled specimen or inadequately filled-out form	0.0	1.6
Specimen hemolyzed	40.0	29.3
Specimen clotted	29.1	17.9
Insufficient specimen quantity	16.4	15.1
Unacceptable variance (delta check)	0.0	3.1
Wrong container	3.6	2.5
Wrong temperature	0.0	0.4
Other reason	0.0	12.7



#### Step 3:

Monitor improvement over time to ensure accurate results, patient safety, and quality patient care.

External Comparison Report - Page 1 CAP Number: SAMP-01-01

#### Participants in the Q-TRACKS program receive:

- · User Guide
- · Templates and instructions for data collection
- Quarterly reports that include fingerprint clusters, customer-defined groups, and all institution comparisons
- · Peer directory

Q-TRACKS activities meet the American Board of Pathology Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) requirements.

## So you're going to collect a blood specimen

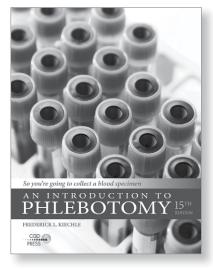
Up to 70% of laboratory errors occur prior to sample analysis and testing. Ensure everyone on your team is equipped to procure a quality blood specimen with this modern update to the classic reference guide.

- Step-by-step instructions for venipuncture, skin puncture, and infant heelstick
- Best practices for collection, transporting, processing, and storage
- Procedures for blood smears, blood cultures, and neonatal screening
- Special considerations for the difficult venipuncture
- Four ways to inspire confidence in your patient

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## Q-TRACKS Clinical Pathology Monitors

## Patient Identification Accuracy QT1

In order to report accurate laboratory results and meet The Joint Commission National Patient Safety Goal #1: "Identify patients correctly," institutions must properly identify patients. Since most laboratories perform testing away from the patient, patient identification, labeling of specimens, and coordination with test requisitions must be performed accurately and completely. By continuously monitoring for wristband errors, participants can promptly identify and correct problems that may interfere with patient care services. Use this monitor to help meet CAP Laboratory Accreditation Program General Checklist statements GEN.20316, GEN 40490, and GEN.40825.

#### **Objectives**

Assess the incidence of wristband errors within individual institutions, compare performance between participating institutions, and identify improvement opportunities.

#### **Data Collection**

On six predetermined days per month, participants will monitor patient wristband identification for all phlebotomies performed at their institution. Phlebotomists will tally the total number of wristbands checked, the number of errors found, and the types of wristband errors. This monitor includes all routinely wristbanded patients. Include emergency department patients only if the emergency department routinely applies wristbands to these patients.

#### Performance Indicator

#### Wristband error rate (%)

#### Performance Breakdown

Breakdown of wristband error types (%)

#### **Blood Culture Contamination QT2**

Despite advances in blood culture practices and technology, false-positive blood culture results due to contaminants continue to be a critical problem. Blood culture contamination rate, the primary indicator of preanalytic performance in microbiology, is associated with increased length of hospital stay, additional expense, and the administration of unnecessary antibiotics. The CAP and other accrediting organizations require you to monitor and evaluate key indicators of quality for improvement opportunities. Use this monitor to help meet CAP Laboratory Accreditation Checklist statement note MIC.22630: "It is recommended that blood culture statistics, including number of contaminated cultures, be maintained and reviewed regularly by the laboratory director. The laboratory should establish a threshold for an acceptable rate of contamination. Tracking the contamination rate and providing feedback to phlebotomists or other persons drawing cultures has been shown to reduce contamination rates." This will also help laboratories meet Joint Commission Standard QSA 04.07.01 EP3.

#### Objective

Determine the rate of blood culture contamination using standardized criteria for classifying contaminants.

#### **Data Collection**

On a monthly basis, participants will tabulate the total number of blood cultures processed and the total number of contaminated blood cultures. Blood cultures from neonatal patients are tabulated separately. For the purposes of this study, participants will consider a blood culture to be contaminated if they find one or more of the following organisms in only one of a series of blood culture specimens: Coagulase-negative Staphylococcus; Micrococcus; Alpha-hemolytic viridans group streptococci; Propionibacterium acnes; Corynebacterium sp. (diptheroids); or Bacillus sp. Participants have the option to monitor institution-specific subgroups, for example, a specific department or patient population.

#### **Performance Indicators**

- Neonatal contamination rate (%)
- Other contamination rate (%)
- Overall contamination rate (%)

Look for your input forms approximately three weeks prior to the quarter.

## Laboratory Specimen Acceptability QT3

A substantial amount of rework, diagnostic and therapeutic delay, and patient inconvenience can result from specimen rejection. Patient redraws may result from unlabeled, mislabeled, and incompletely labeled specimens; clotted and/or hemolyzed specimens; or insufficient specimen quantity. By continuously monitoring specimen acceptability, collection, and transport, laboratories can promptly identify and correct problems. Enrollment in this Q-TRACK may assist the laboratory in monitoring compliance with CAP Laboratory Accreditation Program General Checklist statement GEN.40825: "There is a system to positively identify all patient specimens, specimen types, and aliquots at all times."

#### Objective

Identify and characterize unacceptable blood specimens that are submitted to the chemistry and hematology/coagulation sections of the clinical laboratory for testing.

#### **Data Collection**

This monitor includes all blood specimens submitted for testing to the chemistry and hematology departments of the clinical laboratory. On a weekly basis, participants will record the total number of specimens received, the number of rejected specimens, and the primary reason each specimen was rejected.

#### Performance Indicator

• Specimen rejection rate (%)

#### Performance Breakdown

Breakdown of reasons for rejection (%)

## In-Date Blood Product Wastage QT4

Blood for transfusion is a precious resource. At a minimum, wastage of blood that is not out-of-date represents a financial loss to the health care system. More ominously, systemic wastage of blood may reflect an environment of care that is out of control and could pose risks to patient safety. Enrollment in this program helps laboratories fulfill the CAP Laboratory Accreditation Program Checklist statement TRM.40875 that requires the transfusion service medical director to monitor and audit transfusion practices to ensure the appropriate use of blood, and the AABB Standards for Blood Banks and Transfusion Services assessment 8.2 that requires transfusing facilities to have a peer-review program that monitors transfusion practices for blood components.

#### Objective

Compare the rates of blood product wastage (ie, units discarded in-date) in participating hospitals and track rates of improvement over time.

#### **Data Collection**

On a monthly basis, participants will use blood bank records to obtain information on the total number of units transfused for each type of blood component. Participants will track the number and type of blood units that are wasted in-date and the circumstances of wastage. This monitor includes the following types of blood components: red blood cells (allogeneic), frozen plasma, platelet concentrates, single donor platelets, and cryoprecipitate.

#### **Performance Indicators**

- Overall blood wastage rate (%)
- Wastage rates by blood component type (%)

#### Performance Breakdown

• Breakdown of circumstances of wastage (%)

Look for your input forms approximately three weeks prior to the quarter.

## Satisfaction With Outpatient Specimen Collection QT7

Specimen collection is one of the few areas of laboratory medicine that involves direct outpatient contact. As a result, patient satisfaction with this service is a vital indicator of quality laboratory performance. The CAP's Laboratory Accreditation Program requires measurement of patient satisfaction with laboratory services (Checklist statement GEN.20335). Use this monitor to help meet this requirement.

#### Objective

Assess patient satisfaction with outpatient phlebotomy services by measuring patients' assessments of waiting time, discomfort level, courteous treatment, and overall satisfaction.

#### **Data Collection**

On a monthly basis, participants will provide copies of a standardized questionnaire in English and Spanish to a minimum of 25 outpatients (maximum of 99 outpatients) using predetermined data collection criteria. This monitor includes any outpatient undergoing venipuncture. This monitor excludes patients seen in the emergency department, ambulatory surgery area, urgent care facility, chest pain center, 23-hour short-stay facility, employee health department, outpatient health screening fair/promotion, dialysis center, nursing home, or extended care facility.

#### **Performance Indicators**

- Satisfaction scores and satisfaction rates (% of patients rating 4 or 5) for the following categories:
  - o Overall experience

o Courtesy

o Waiting time

o Patient privacy

o Patient comfort

o Laboratory hours of operation

#### Stat Test Turnaround Time Outliers QT8

The stat test turnaround time (TAT) outlier rate, expressed as a percentage of tests missing target reporting times, is a measure of outcomes that evaluates how well the laboratory meets patient and clinician needs. This monitor helps meet CAP Laboratory Accreditation Program Checklist statement GEN.20316: "The QM program includes monitoring key indicators of quality in the preanalytic, analytic, and postanalytic phases."

Monitor the frequency that stat test TAT intervals exceed institutional stat test TAT expectations.

#### **Data Collection**

Before beginning data collection, participants will establish a specimen receipt-to-report deadline for emergency department (ED) stat potassium tests. On six predetermined days per month, participants will monitor the TAT of up to 10 randomly selected ED stat potassium tests on each of three, eight-hour shifts (up to 180 tests per month) and track the number of ED stat potassium results reported later than the established reporting deadline. This monitor includes stat potassium tests ordered as part of a panel and excludes stat potassium levels that are requested on body fluids other than blood, as part of timed or protocol studies, or after the specimen arrives in the laboratory.

#### Performance Indicator

• Stat test TAT outlier rate (%)

#### **Performance Breakdowns**

- Breakdown of outliers by shift (%)
- Breakdown of outliers by day of week (%)

Look for your input forms approximately three weeks prior to the quarter.

## **Critical Values Reporting QT10**

Laboratories commonly refer to critical values as results requiring immediate notification to the physician or caregiver for necessary patient evaluation or treatment. Regulations from agencies and accreditors such as the CMS, The Joint Commission, and the CAP Laboratory Accreditation Program (Checklist statement GEN.20316, COM.30000, COM.30100) mandate that laboratories develop and implement an alert system for critical values. Use this monitor to document compliance with your laboratory's alert plan.

#### Objective

Evaluate the documentation of successful critical values reporting in the general laboratory for inpatients and outpatients.

#### **Data Collection**

On a monthly basis, participants will evaluate 120 inpatient and 120 outpatient critical values. Data collection will include general chemistry, hematology, and coagulation analytes on the critical values list. Retrospectively, participants will record the total number of critical values monitored and the number with documentation of successful notification. In addition, participants will provide the number of critical values that were not communicated within three hours, the number of failed notifications due to laboratory oversight, and the number of successful notifications to licensed caregivers. This monitor will exclude critical values for cardiac markers, drugs of abuse, therapeutic drug levels, urinalysis, blood gases, point-of-care tests, and tests performed at reference laboratories.

#### Performance Indicators

- Total critical values reporting rate (%)
- Inpatient critical values reporting rate (%)
- Outpatient critical values reporting rate (%)
- Failed notification (<3 hours) rate (%)

Look for your input forms approximately three weeks prior to the quarter.

## Build a culture of quality in your laboratory

The QMEd online course Quality Culture gives you the tools to:

- · Assess your current culture
- · Prioritize your needs
- Use proven change levers that make a lasting difference

The course will help you build a culture characterized by:

- Innovation
- Process Orientation
- Speaking Up
- Teamwork and Involvement
- Going Above and Beyond
- Risk Awareness
- Transparency

Video presentations from CAP member pathologists included.

See p. 18. Choose code ISOEDCL on your Surveys order form.



## **Troponin Turnaround Times QT15**

Patients presenting to the emergency department (ED) with chest pain must be evaluated quickly. Rapid serum troponin measurement is an important part of ED practice that can provide decisive information for patient management. Reducing delays in troponin testing has been reported to result in shorter length of stay in the ED and more rapid initiation of anti-ischemic treatment. EDs and chest pain centers should, therefore, have effective procedures for ensuring optimal turnaround time (TAT) for troponin testing and a process for ongoing monitoring to ensure that performance meets expectations.

**QT15** is enhanced for 2019 with additional time intervals to help pinpoint process time challenges. Laboratories may use this monitor to help meet CAP Laboratory Accreditation Program Checklist statement GEN.20316 QM Indicators of Quality. The American College of Cardiology and the American Heart Association recommend troponin as the preferred diagnostic biomarker in their Acute Coronary Syndromes guideline.

## **Objective**

This study will assist participating laboratories to determine and monitor:

- The median TATs for processes from order time through result availability, with up to five time intervals within the total testing process
- · The percent compliance for troponin results with their institution's established deadline

#### **Data Collection**

Six days per month, collect data from nine patients presenting to the ED with chest pain and tested for troponin level. Data includes time of troponin test order, specimen collection, laboratory receipt, and result availability. Participants are not required to provide data from each TAT component. Participants will select TAT metrics that they wish to monitor, with the option to monitor all metrics.

Participants will also complete a questionnaire about clinical and laboratory practices related to troponin testing.

#### **Performance Indicators**

Median TATs for the following time intervals:

- Test order to specimen collection
- Specimen collection to laboratory receipt
- · Laboratory receipt to result availability
- · Specimen collection to result availability
- · Test order to result availability

Compliance (%) with insitutional threshold for the following time intervals:

- · Specimen collection to result availability
- · Test order to result availability

Look for your input forms approximately three weeks prior to the quarter.

## **Corrected Results QT16**

The CAP developed this Q-TRACKS monitor in recognition of the importance of timely detection and correction of erroneous laboratory results. Accuracy in laboratory results is critical to the effectiveness of a physician's plan of care for a patient. An erroneous result can delay or alter patient treatment; therefore, detection of erroneous results should be a priority in every laboratory and should be monitored as a key quality indicator. Help measure your compliance with CLIA 493.1299, Postanalytic Systems Quality Assessment, and help meet CAP Laboratory Accreditation Program Checklist statement GEN.20316 with this monitor.

## Objective

Monitor the number of corrected test results within individual institutions and compare performance with that of all institutions and those institutions similar to yours.

#### **Data Collection**

On a monthly basis, participants will monitor the number of corrected test results and the total number of billable tests for that month. Include test results for all patients in all care settings with the following exclusions: anatomic pathology tests, narrative physician-interpreted tests (eg, bone marrow biopsies and peripheral smear reports), and point-of-care tests.

## Performance Indicator

• Test result correction rate (per 10,000 billable tests)

## **Outpatient Order Entry Errors QT17**

Order accuracy bears an obvious relationship to the quality of laboratory testing. When the laboratory fails to complete a requested test, it delays the diagnostic evaluation, consumes resources, causes patient inconvenience, and may prolong therapy. When the laboratory completes a test that was not requested, the cost of care increases, patients may be subjected to unnecessary phlebotomy, and laboratory efficiency declines. Use this monitor to help meet CAP Laboratory Accreditation Program Checklist statement GEN.20316 for test order accuracy and meet The Joint Commission Standard DC.01.02.01: The laboratory performs testing based on written laboratory test orders.

#### Objective

Measure the incidence of incorrectly interpreted and entered outpatient physician test orders into the laboratory information system, compare performance across institutions, and track performance over time.

#### **Data Collection**

On six preselected weekdays per month, participants will compare eight outpatient requisitions or order sheets to the orders entered into the laboratory's information system to determine if any order entry errors occurred.

This monitor includes test order review from ambulatory outpatients seen in offices and clinics operated by your laboratory services, private physician offices, nursing homes, extended care facilities, and free-standing phlebotomy areas. Also included are send-out tests, chemistry, hematology, microbiology, immunology, toxicology, and urinalysis tests on outpatients. Order entry error categories include requesting physician errors; incorrect, missing, and extra test errors; test priority errors; and copy or fax result errors.

This monitor excludes tests performed in transfusion medicine or anatomic pathology and also excludes tests from the following patient care settings: inpatient, emergency department, ambulatory surgery, urgent care, chest pain center, 23-hour short-stay facility, employee health department, outpatient screening fair/promotion, and dialysis center.

## **Performance Indicators**

- Overall outpatient order entry error rate (%)
- Order entry error rates by type (%)

## Performance Breakdown

• Breakdown of error types (%)

Look for your input forms approximately three weeks prior to the quarter.

## **Q-TRACKS Anatomic Pathology Monitor**

## Gynecologic Cytology Outcomes: Biopsy Correlation Performance QT5

The correlation of cervicovaginal cytology (Pap test) findings with cervical biopsy results is a significant part of the cytopathology laboratory's quality assurance program. By monitoring this correlation, the laboratory can identify and address potential problems requiring improvement, thereby ensuring better patient results. This Q-TRACKS study helps laboratories meet CAP Laboratory Accreditation Program Cytopathology Checklist statements CYP.07543 and CYP.07600 on cytologic/histologic correlation, and The Joint Commission Standard QSA.08.06.03: The cytology laboratory has a process to correlate cytologic interpretations with the corresponding histologic finding.

## **Objective**

Quantify the correlation between the findings of cervicovaginal cytology and corresponding histologic material.

#### **Data Collection**

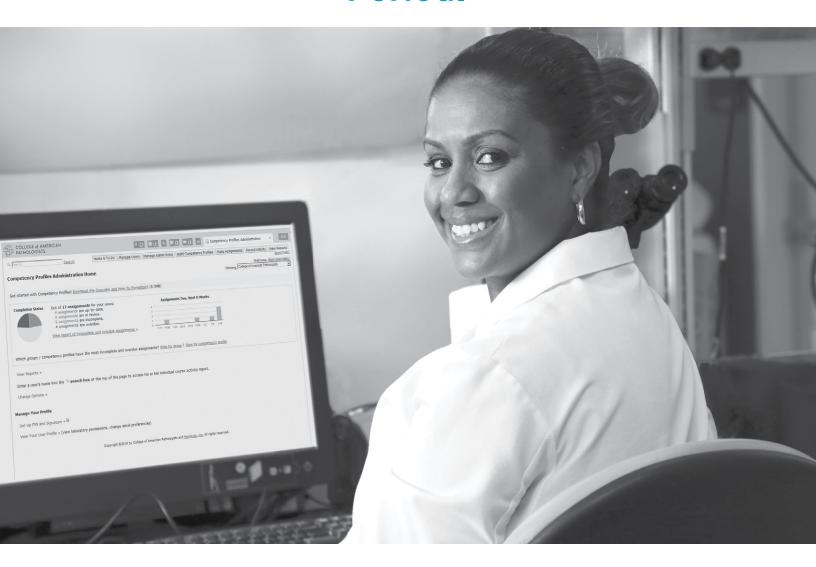
On a monthly basis, participants will record the number of true-positive, false-positive, and false-negative cytology-biopsy correlations. The false-negative correlations will be classified into four error categories: screening errors, interpretive errors, screening and interpretive errors, and adequacy determination errors. Participants will also record the biopsy diagnoses for Pap tests with an interpretation of atypical squamous cells (ASC-US and ASC-H) or atypical glandular cells (AGC). This monitor includes cervical biopsy specimens submitted to the laboratory that have a corresponding satisfactory or satisfactory but limited Pap test within three months of the biopsy.

#### **Performance Indicators**

- Predictive value of positive cytology (%)
- · Sensitivity (%)
- Screening/interpretation sensitivity (%)
- Sampling sensitivity (%)
- · Percent positive for ASC-US interpretations
- · Percent positive for ASC-H interpretations
- · Percent positive for AGC interpretations

Look for your input forms approximately three weeks prior to the quarter.

# If it's not documented, it's not compliant. Period.



Documenting the competency assessment of your staff is the #1 deficiency cited by major laboratory accreditors. It's true—one in four laboratories does not fully meet the documentation requirements of competency assessment.

You may know that your team follows all regulatory requirements to the letter. But when inspection time comes—if it's not documented, it's considered a deficiency. With the Competency Assessment Program you can align your competency assessment plan with the quality assurance processes you already perform regularly.

Improve your laboratory's readiness for inspection. Add the appropriate Competency Assessment Program subscription to your order form.

# 4

## **Quality Cross Check**



# Simplify biannual instrument comparability studies with Quality Cross Check.

- Receive custom reports with peer group evaluations and instrument comparability statistics.
- Monitor transfusion medicine performance and assess comparability across multiple automated and manual methods with the new Quality Cross Check— Transfusion Medicine program (JATQ).

## New Programs NEW

## **Discontinued Programs**

Quality Cross Check—Reticulocyte (RT2Q)

## Perform instrument comparability and stay in compliance

**Quality Cross Check** is a convenient solution to monitor instrument performance and assess comparability across multiple instruments in your laboratory and to identify potential issues before they affect patient results.

## **How It Works**

- Receive three challenges in each of two mailings a year.
- Report up to three instruments for each challenge (and report up to 30 instruments for Quality Cross Check—Whole Blood Glucose).
- Receive a custom report package that includes peer group comparison and instrument comparability statistics for each reported analyte.

## Stay in Compliance

In August 2015, the Centers for Medicare & Medicaid Services (CMS) reiterated that laboratories are not permitted to test proficiency testing samples on multiple instruments unless that is how the laboratory tests patient specimens.

The CMS interpretation was expanded beyond regulated analytes to include analytes not listed in Subpart I of the Clinical Laboratory Improvement Amendments regulations, including waived methods.

Quality Cross Check complements your existing CAP Surveys to monitor multiple instrument performance and is compliant with the CMS directive.

## **Monitoring Performance of Glucose Meters**

Beginning in 2017, PT for waived whole blood glucose on glucose meters was no longer required for laboratories accredited by the CAP. Laboratories are required to perform alternative performance assessment.

In response to this change, the CAP introduced the Quality Cross Check—Whole Blood Glucose program (WBGQ). Participants in this program will enjoy the benefits of Quality Cross Check and have the ability to report up to 30 instruments for each challenge.

## General Chemistry and Therapeutic Drug Monitoring

Quality Cross Check—Chemistry and Therapeutic Drug Monitoring CZQ					
Analyte	Program Code Challenges per Shipment				
	CZQ				
See Survey CZ analytes on pages 56-58	ı	3			

This program does not meet regulatory requirements for proficiency testing; see Survey CZ on pages 56-58. For additional information about the Quality Cross Check program, see page 40.

Quality Cross Check—BNP BNPQ					
Analyte Program Code Challenges per Shipme					
BNPQ					
BNP	I	3			
NT-proBNP	I	3			

This program does not meet regulatory requirements for proficiency testing; see Survey BNP or BNP5 on page 61. For additional information about the Quality Cross Check program, see page 40.

Quality Cross Check—Whole Blood Glucose WBGQ					
Analyte	Program Code Challenges per Shipment				
WBGQ					
Glucose	<b>I</b> 3				

The CAP Accreditation Program requires all accredited laboratories performing waived whole blood glucose testing using glucose meters to perform alternative performance assessment. This program can be used to meet alternative performance assessment requirements.

## **Program Information**

- Three 5.0-mL liquid serum specimens in duplicate
- · Report up to three instruments
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

## **Program Information**

- · Three 1.5-mL liquid specimens
- · Report up to three instruments
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

- Three 2.0-mL whole blood specimens
- Report up to 30 instruments
- · Two shipments per year



Quality Cross Check—Body Fluid Chemistry FLDQ					
Analyte	Program Code	Challenges per Shipment			
	FLDQ				
Albumin	I	3			
Amylase	I	3			
CA19-9	I	1			
Carcinoembryonic antigen (CEA)	I	1			
Cholesterol	I	3			
Creatinine	I	3			
Glucose	I	3			
Lactate	I	3			
Lactate dehydrogenase (LD)	I	3			
рН	I	3			
Protein, total	I	3			
Triglycerides	I	3			
Urea nitrogen	I	1			

This program does not meet regulatory requirements for proficiency testing; see Survey FLD on page 72. For additional information about the Quality Cross Check program, see page 40.

## Quality Cross Check—Hemoglobin A<sub>1c</sub> GHQ Analyte **Program Code** Challenges per Shipment **GHQ**

This program does not meet regulatory requirements for proficiency testing; see Survey GH5 on page 63. For additional information about the Quality Cross Check program, see page 40.

## **Program Information**

- Three 3.0-mL simulated liquid body fluid specimens in duplicate
- · Report up to three instruments
- Two shipments per year

## **Program Information**

- Three 0.8-mL previously frozen liquid specimens in triplicate
- · Report up to three instruments
- Two shipments per year

Hemoglobin A<sub>1c</sub>

## **Endocrinology**

Quality Cross Check—Parathyroid Hormone PTHQ					
Analyte	Program Code Challenges per Shipment				
	PTHQ				
Parathyroid hormone (PTH)	I	3			

This program does not meet regulatory requirements for proficiency testing; see Survey ING on page 86. For additional information about the Quality Cross Check program, see page 40.

## **Program Information**

- Three 5.0-mL lyophilized serum specimens in duplicate
- · Report up to three instruments
- · Two shipments per year

## World-class recognition deserves to be displayed.



Let your peers, patients, and the public know you've earned the CAP accreditation certification mark.

Proudly display the mark. It distinguishes you as one of more than 8,000 laboratories worldwide that have attained CAP accreditation, the most respected and recognized laboratory accreditation in the world.

## **Blood Gas, Critical Care, and Oximetry**

Quality Cross Check—Blood Oximetry SOQ				
Analyte	Program Code	Challenges per Shipment		
	SOQ			
Carboxyhemoglobin		3		
Hematocrit, estimated		3		
Hemoglobin, total		3		
Methemoglobin		3		
Oxyhemoglobin		3		

This program does not meet regulatory requirements for proficency testing; see Survey SO on page 94. For additional information about the Quality Cross Check program, see page 40.

## **Program Information**

- Three 1.2-mL liquid specimens in triplicate
- Report up to three instruments
- Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Quality Cross Check—Blood Gas					
AQQ, AQ2Q, AQ3Q, AQ4Q					
Analyte		Progra	Challenges per Shipment		
	AQQ	AQ2Q	AQ3Q	AQ4Q	
Calcium, ionized			•	•	3
Chloride			•	•	3
Hematocrit			•	•	3
Hemoglobin, estimated			•	•	3
Lactate			ı	•	3
Magnesium, ionized					3
PCO <sub>2</sub>			•	•	3
рН			•	•	3
PO <sub>2</sub>			•	•	3
Potassium			•	•	3
Sodium			•	•	3
tCO <sub>2</sub>	I		•	•	3
Creatinine					3
Glucose					3

These programs do not meet regulatory requirements for proficiency testing; see Surveys AQ and AQ2-AQ4 on page 92. For additional information about the Quality Cross Check program, see page 40.

## **Program Information**

- AQQ, AQ2Q Three 2.5-mL specimens in triplicate and three 2.5-mL specimens for hematocrit testing in triplicate; appropriate for all methods except i-STAT®
- AQ3Q, AQ4Q Three
   1.7-mL specimens in triplicate for i-STAT methods only
- Report up to three instruments
- Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Urea nitrogen (BUN)

## **Hematology and Clinical Microscopy**

Quality Cross Check—Hematology Series FH3Q, FH4Q, FH6Q, FH9Q					
Analyte/Procedure	Program Code Challenges p Shipment				Challenges per Shipment
	FH3Q	FH4Q	FH6Q	FH9Q	
Hematocrit		ı	ı	ı	3
Hemoglobin		ı	ı	ı	3
Immature granulocyte parameter				ı	3
Immature platelet function (IPF)%				ı	3
Large unstained cells (LUC)		I			3
MCV, MCH, MCHC		I	I	ı	3
MPV		ı	ı	ı	3
Nucleated red blood cell count (nRBC)	ı				3
Platelet count		ı	ı	ı	3
RDW	I	I	ı	ı	3
Red blood cell count	I	I	I	I	3
WBC differential	I	I	I	ı	3
White blood cell count		I	I	ı	3

These programs do not meet regulatory requirements for proficiency testing; see the FH Series on page 136. For additional information about the Quality Cross Check program, see page 40.

Quality Cross Check—Reticulocyte RTQ, RT3Q, RT4Q				
Instrument/Method Program Code				Challenges per Shipment
	RTQ	RT3Q	RT4Q	
Abbott Cell-Dyn 4000, Sapphire, Siemens ADVIA 120/2120, and all other automated and manual methods	ı			3
Coulter GenS, HmX, LH500, LH700 series, MAXM, STKS, Unicel DxH		1		3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100L, XE-5000, XN Series, XT-2000i, XT-4000i				3

These programs do not meet regulatory requirements for proficiency testing; see the RT Series on page 142. For additional information about the Quality Cross Check program, see page 40.

## **Program Information**

- Three 2.5-mL whole blood specimens with pierceable caps
- · Report up to three instruments
- · For method compatibility, see instrument matrix on page 139
- Two shipments per year

- RTQ Three 1.0-mL stabilized red blood cell specimens
- RT3Q Three 3.0-mL stabilized red blood cell specimens
- RT4Q Three 2.0-mL stabilized red blood cell specimens
- · Includes percentage and absolute result reporting
- · Report up to three instruments
- · Two shipments per year

Quality Cross Check—Urinalysis CMQ				
Analyte	Program Code	Challenges per Shipment		
	CMQ			
Bilirubin	I	3		
Blood or hemoglobin	I	3		
Glucose	I	3		
hCG urine, qualitative	I	3		
Ketones	I	3		
Leukocyte esterase	I	3		
Nitrite	I	3		
Osmolality	I	3		
рН	I	3		
Protein, qualitative	I	3		
Reducing substances	I	3		
Specific gravity	1	3		
Urobilinogen	I	3		

This program does not meet regulatory requirements for proficiency testing; see Surveys CMP and CMP1 on page 146. For additional information about the Quality Cross Check program, see page 40.

Quality Cross Check—Occult Blood OCBQ				
Analyte	Program Code Challenges per Shipment			
	OCBQ			
Occult blood	I	3		

This program does not meet regulatory requirements for proficiency testing; see Survey OCB on page 151. For additional information about the Quality Cross Check program, see page 40.

## **Program Information**

- Three 10.0-mL liquid urine specimens for use with all instruments
- · Report up to three instruments
- Two shipments per year

- Three 2.0-mL simulated fecal specimens
- · Report up to three instruments
- Two shipments per year

## Coagulation

Quality Cross Check—Coagulation CGLQ				
Analyte	Program Code	Challenges per Shipment		
	CGLQ			
Activated partial thromboplastin time	I	3		
Fibrinogen	I	3		
International normalized ratio (INR)	I	3		
Prothrombin time	I	3		
D-dimer	I	1		
Fibrin(ogen) degradation products, plasma	I	1		
Fibrin(ogen) degradation products, serum	I	1		

This program does not meet regulatory requirements for proficiency testing; see Survey CGL on page 160. For additional information about the Quality Cross Check program, see page 40.

#### **Program Information**

- Three 1.0-mL lyophilized plasma specimens in triplicate, one 1.0-mL plasma specimen, and one 2.0-mL serum specimen
- · Report up to three instruments
- · Two shipments per year

## Have you created or updated your CAP Profile?

Each laboratory staff member should have their own profile. Your profile is transferrable when you leave your current position. Use it to maintain information about yourself, including:

- · Business affiliations
- Personal contact information

Certifications

- Specialties and skills
- · Contact preferences
- Addresses
- Inspector-related information

To create or update your profile, visit cap.org, log in, and click on UPDATE MY PROFILE.



## Quality Cross Check— Activated Clotting Time Series CTQ, CT1Q, CT2Q, CT3Q, CT5Q

Instrument/Cartridge		Program Code			Challenges per Shipment	
	CTQ	CT1Q	CT2Q	CT3Q	CT5Q	
Helena Actalyke®						3
Helena Cascade POC	ı					3
IL Gem® PCL ACT						3
IL Gem PCL ACT-LR						3
IL GEM PCL Plus ACT						3
IL GEM PCL Plus ACT-LR						3
ITC Hemochron® CA510/FTCA510						3
ITC Hemochron FTK-ACT						3
ITC Hemochron Jr. Signature/ACT+						3
ITC Hemochron Jr. Signature/ACT-LR						3
ITC Hemochron P214/P215						3
i-STAT Celite® and Kaolin ACT						3
Medtronic HemoTec ACT/ACTII/ACT Plus HR-ACT						3
Medtronic HemoTec ACT/ACTII/ACT Plus LR-ACT						3
Medtronic HemoTec ACT/ACTII/ACT Plus R-ACT						3
Medtronic Hepcon HMS, HMS Plus						3
Sienco Sonoclot®						3

These programs do not meet regulatory requirements for proficiency testing; see Surveys CT-CT3 and CT5 on page 164. For additional information about the Quality Cross Check program, see page 40.

- CTQ Three 3.0-mL lyophilized whole blood specimens in triplicate with corresponding diluents
- CT1Q Three 1.7-mL lyophilized whole blood specimens in triplicate with corresponding diluents
- CT2Q Three 0.5-mL lyophilized whole blood/ diluent ampules in triplicate
- CT3Q Three 0.5-mL lyophilized whole blood/ diluent ampules in triplicate
- CT5Q Three 1.7-mL lyophilized whole blood specimens in triplicate with corresponding diluents
- Report up to three instruments
- Two shipments per year

## **Transfusion Medicine**

Quality Cross Check—Transfusion  Medicine JATQ					
Procedure	Program Code	Challenges per Shipment			
	JATQ				
ABO grouping		3			
Antibody detection		3			
Rh typing		3			

This program does not meet regulatory requirements for proficiency testing; see Survey JAT on page 219. For additional information about the Quality Cross Check program, see page 40.

## **Program Information**

- Three 7.0-mL 13-17% whole blood specimens
- May be used with automated and manual procedures
- · Two shipments per year

## Make critical transfusion decisions with confidence

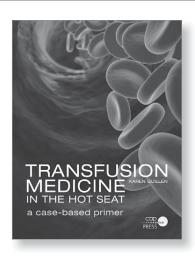
Transfusion Medicine in the Hot Seat is a valuable educational resource for pathology trainees and pathologists practicing transfusion medicine. The text presents a total of 26 realistic transfusion scenarios divided into three sections:

 Antibodies • Blood Components Complications

The short-case format makes the information easily accessible and can serve as the basis for a transfusion medicine curriculum in clinical pathology.

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Item number: PUB224 Softcover; 123 pages

## So you're going to collect a blood specimen

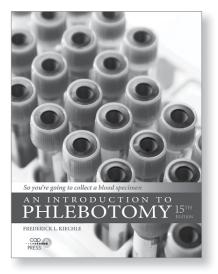
Up to 70% of laboratory errors occur prior to sample analysis and testing. Ensure everyone on your team is equipped to procure a quality blood specimen with this modern update to the classic reference guide.

- Step-by-step instructions for venipuncture, skin puncture, and infant heelstick
- Best practices for collection, transporting, processing, and storage
- Procedures for blood smears, blood cultures, and neonatal screening
- Special considerations for the difficult venipuncture
- Four ways to inspire confidence in your patient

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Item number: PUB225 Spiral bound; 84 pages; 30+ images and tables; 2017

## 5

## **Point-of-Care Programs**



# Keep your point-of-care (POC) instruments and staff operating at peak performance.

- Improve waived test results with POC Competency Challenges that evaluate instrument and method performance, troubleshoot issues, assess staff competency, and provide training information.
- Gain insights with the Point-of-Care Testing Toolkit, an ebook resource for all members of the team.

## **Point-of-Care Programs**

POC Competency Challenges are designed to improve waived test results. These programs evaluate instrument and method performance, troubleshoot, assess staff competency, and provide information to train staff. Expected results will be provided. These programs are not proficiency testing programs and participants will not return results to the CAP.

POC Competency Challenges may have limited availability and stability.

POC Competency Challenges POC1, POC2, POC3, POC4					
Program Name				Challenges per Shipment	
	POC1	POC2	POC3	POC4	
hCG Competency					10
Glucose Competency					10
Urine Dipstick Competency					10
Strep Screen Competency				I	10

## **Program Information**

- POC1 One positive 10.0-mL liquid urine specimen
- POC2 One abnormal 2.0-mL whole blood specimen
- POC3 One abnormal 10.0-mL liquid urine specimen
- POC4 One 1.0-mL positive liquid specimen
- Each program provides material to test up to 10 staff
- Shipments available upon request

POC Competency Challenges POC6, POC7, POC8, POC9					
Program Name					Challenges per Shipment
	POC6	POC7	POC8	POC9	
PT/INR, CoaguChek XS Plus and XS Pro Competency					10
Waived Chemistry, Glucose and HgB Competency					10
Influenza A/B Antigen Detection Competency					10
Fecal Occult Blood Competency				ı	10

- POC6 One abnormal 0.3-mL lyophilized plasma specimen (five vials) and five corresponding diluents
- POC7 One abnormal 2.5-mL whole blood specimen compatible with the HemoCue® B, HemoCue 201, and Stanbio HemoPoint® H2 instruments
- POC8 One 1.5-mL positive liquid specimen for influenza A; one 1.5-mL positive liquid specimen for influenza B
- POC9 One positive 2.0-mL fecal specimen
- Each program provides material to test up to 10 staff
- Shipments available upon request

POC Competency Challenges POC10, POC11, POC12					
Program Name		Challenges per Shipment			
	POC10	POC11	POC12		
Blood Gases Competency				10	
Blood Gases, i-STAT® Competency				10	
Plasma Cardiac Markers Competency			I	10	

## **Program Information**

- POC10 One abnormal 2.5-mL aqueous blood gas specimen (10 vials) and one 2.5-mL hematocrit/ hemoglobin specimen (10 vials)
- POC11 One abnormal 2.5-mL aqueous specimen (10 vials) for blood gas and hematocrit/hemoglobin testing
- POC12 One 1.5-mL plasma specimen (two vials); compatible with plasma-based tests, such as Alere Triage® and i-STAT instruments
- · Programs provide material to test up to 10 staff
- Shipments available upon request

## Guide your point-of-care testing with confidence

## Point-of-Care Testing (POCT) Toolkit

POCT implementation requires a systematic approach that involves all stakeholders. This toolkit serves as a resource for any member of the POCT team who wants to learn about POCT or who has responsibility to guide or direct POCT. Pathologists may also use the toolkit to guide other members of their POCT teams, including POCT coordinators and medical technologists who are involved in POCT.

## The toolkit covers:

- POCT advantages and disadvantages
- Current and projected technology
- · Pathologist, laboratory director, and POCT coordinator roles in POCT
- Selection of appropriate test methods
- · Validation and verification protocols
- · Quality control and data management
- · Patient safety
- POCT training and competency

## Purchase the ebook at ebooks.cap.org.



POC Competency Challenges POC14, POC15, POC16					
Program Name	Program Code Challe Ship				
	P0C14	POC15	POC16		
Medtronic ACT/ACT, i-STAT Competency	•			5	
Hemochron Jr IL GEM PCL ACT-LR Competency		I		5	
Hemochron Jr Signature IL GEM PCL ACT Competency				5	

## **Program Information**

- POC14 Five abnormal

   1.7-mL lyophilized whole
   blood specimens with five
   corresponding diluents
   and one calcium chloride
   diluent vial; compatible with
   Medtronic HemoTect ACT/
   ACTII/ACT Plus, Medtronic
   Hepcon HMS/HMS Plus, and
   i-STAT Celine and Kaolin ACT
- POC15 Five abnormal 0.5-mL lyophilized whole blood/diluent ampules; compatible with IL GEM PCL Plus ACT-LR and ITC Hemochron Jr./Signature ACT-LR
- POC16 Five abnormal

   0.5-mL lyophilized whole
   blood/diluent ampules;
   compatible with IL GEM PCL
   Plus ACT and ITC Hemochron
   Jr./Signature ACT+
- Programs provide material to test up to five staff
- Shipments available upon request

## We are here to help. Fast Focus on Compliance—the inspector's quick guide

A resource for laboratories and inspectors alike, our Fast Focus on Compliance mini-training vignettes help you prepare for future laboratory inspections by gaining a clear understanding of the requirements and receiving insight into areas that need improvement:

- Inspecting Method Validation/Verification Studies
- Inspecting Personnel Records
- 12 Inspector Tools to Make Your Inspection Go More Smoothly
- Proficiency Testing Referral and Communications
- Competency Assessment
- Documenting Your Inspection Findings

Access these concentrated topics online by searching Fast Focus on Compliance at cap.org

# 6

## General Chemistry and Therapeutic Drug Monitoring



# Standardize hemoglobin A<sub>1C</sub> testing with our GH2/GH5 programs.

- Mimic patient testing using specimens from human donors with levels that reflect clinical decision points.
- Ensure accuracy with results evaluated against National Glycohemoglobin Standardization Program (NGSP) reference method targets.

## General Chemistry and Therapeutic Drug Monitoring

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Plasma Cardiac Markers International (PCARI)	

## General Chemistry and Therapeutic Drug Monitoring

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

#### **General Chemistry and Therapeutic Drugs** C1, C3/C3X, C4, CZ/CZX/CZ2X, Z Challenges per Analyte **Program Code** Shipment CZ/CZX/ C1 C3/C3X C4 Z CZ2X Alanine aminotransferase 5 (ALT/SGPT) 5 Albumin ı 5 Alkaline phosphatase **Amylase** 5 Aspartate aminotransferase ı 5 (AST/SGOT) Bilirubin, direct 5 5 Bilirubin. total\* Calcium ı ı 5 Chloride ı ı 5 5 Cholesterol, total ı 5 Cortisol Creatine kinase (CK) 5 Creatinine 5 Glucose 5 **HDL** cholesterol 5 Human chorionic gonadotropin (hCG), ı 5 quantitative ı 5 5 Lactate dehydrogenase (LD) ı 5 LDL cholesterol, measured Lipoprotein (a) ı 5 Magnesium 5 Pancreatic amylase 5 **Potassium** Protein, total 5 ı 5 Sodium ı 5 T3, free (triiodothyronine, free) ı T3, total (triiodothyronine, total) 5 ı T3, uptake and related tests ı 5 ı

## **Program Information**

- C1, C3, C4, CZ, Z Five 5.0-mL liquid serum specimens
- C3X, CZX Five 5.0-mL liquid serum specimens in duplicate
- CZ2X Five 5.0-mL liquid serum specimens in triplicate
- · Conventional and International System of Units (SI) reporting offered
- · Three shipments per year
- · For second instrument reporting options, see the Quality Cross Check program, CZQ, on page 59



Continued on the next page

<sup>\*</sup>General Chemistry and Therapeutic Drugs Surveys do not fulfill the CAP accreditation requirements for neonatal bilirubin proficiency testing. See Surveys NB, NB2 on page 65.

#### **General Chemistry and Therapeutic Drugs** C1, C3/C3X, C4, CZ/CZX/CZ2X, Z continued Challenges per **Program Code** Analyte Shipment CZ/CZX/ C1 Z C3/C3X C4 CZ2X T4, free (thyroxine, free) 5 T4, total (thyroxine, total) ı 5 Thyroid-stimulating 5 ı hormone (TSH) 5 **Triglycerides** Urea nitrogen (BUN) ı 5 ı ı 5 Uric acid Ī Acid phosphatase 5 Ammonia 5 5 Apolipoprotein A1 5 Apolipoprotein B Calcium, ionized 5 Carbon dioxide (CO<sub>2</sub>) 5 Ferritin Ī 5 Gamma glutamyl transferase (GGT) 5 Iron binding capacity, 5 total (measured) Iron binding capacity, 5 unsaturated (measured) Lactate 5 5 Lipase Osmolality 5 5 Phosphorus (inorganic) 5 Prealbumin Transferrin 5 5 Lithium Acetaminophen ı 5 5 Amikacin 5 Caffeine Ī ı 5 Carbamazepine Carbamazepine, free 5 ı Digoxin 5 Digoxin, free ı 5 Disopyramide 5 Continued on the next page

- C1, C3, C4, CZ, Z Five 5.0-mL liquid serum specimens
- C3X, CZX Five 5.0-mL liquid serum specimens in duplicate
- CZ2X Five 5.0-mL liquid serum specimens in triplicate
- · Conventional and International System of Units (SI) reporting offered
- Three shipments per year
- · For second instrument reporting options, see the Quality Cross Check program, CZQ, on page 59



#### **General Chemistry and Therapeutic Drugs** C1, C3/C3X, C4, CZ/CZX/CZ2X, Z continued Challenges per **Analyte Program Code** Shipment CZ/CZX/ C1 C3/C3X C4 CZ2X Z **Ethosuximide** 5 5 Gentamicin Lidocaine 5 Methotrexate 5 N-acetylprocainamide (NAPA) 5 Phenobarbital 5 Phenytoin ı 5 5 Phenytoin, free **Primidone** 5 ı **Procainamide** 5 Quinidine 5 5 Salicylate Ī Theophylline 5 ı Tobramycin ı 5 Valproic acid ı 5 Valproic acid, free 5 Vancomycin 5

## **Program Information**

- C1, C3, C4, CZ, Z Five 5.0-mL liquid serum specimens
- C3X, CZX Five 5.0-mL liquid serum specimens in duplicate
- CZ2X Five 5.0-mL liquid serum specimens in triplicate
- Conventional and International System of Units (SI) reporting offered
- · Three shipments per year
- For second instrument reporting options, see the Quality Cross Check program, CZQ, on page 59



# The CAP is your trusted calibration verification and linearity partner, providing you with the most comprehensive menu of programs.

- Large peer groups—Maximize confidence in your calibration verification results.
- Customized report package—Let our team of biostatisticians perform the statistical analysis of your results so you do not have to.
- Rapid result turnaround—View your linearity evaluation for most CVL programs within two business days.

See the Instrumentation Validation Tools section of this catalog to determine programs that best fit your laboratory's CVL needs.

Quality Cross Check—Chemistry and Therapeutic Drug Monitoring CZQ					
Analyte	Program Code Challenges per Shipment				
	CZQ				
See Survey CZ analytes on pages 56-58	ı	3			

This program does not meet regulatory requirements for proficiency testing; see Survey CZ on pages 56-58. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

## **Program Information**

- Three 5.0-mL liquid serum specimens in duplicate
- · Report up to three instruments
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

CAP/AACC Immunosuppressive Drugs CS					
Analyte	Program Code Challenges per Shipment				
	CS				
Cyclosporine		3			
Sirolimus (rapamycin)	I	3			
Tacrolimus		3			

## **Program Information**

- · Three 5.0-mL whole blood specimens
- · For laboratories monitoring cyclosporine, sirolimus, and tacrolimus in transplant patients
- · Two shipments per year



Antifungal Drugs	Monitoring AF	D NEW
Procedure	Program Code	Challenges per Shipment
	AFD	
Fluconazole		3
Itraconazole		3
Posaconazole		3
Voriconazole	I	3

- Three 5.0-mL serum specimens
- For laboratories performing quantitative analysis of antifungal agents
- Two shipments per year

Everolimus EV				
Analyte	Program Code	Challenges per Shipment		
	EV			
Everolimus	I	3		

Мусо	phenolic Acid MPA	
Analyte	Program Code	Challenges per Shipment
	MPA	
Mycophenolic acid	ı	3

#### Therapeutic Drug Monitoring—Extended ZE Analyte **Program Code** Challenges per Shipment ZΕ Clozapine 3 3 Gabapentin ı Lacosamide 3 Lamotrigine 3 3 Levetiracetam ı Oxcarbazepine metabolite ı 3 Pregabalin ı 3 Rufinamide 3 Teriflunomide 3 **Topiramate** 3 Zonisamide 3

Therapeutic Drug Monitoring—Special ZT				
Analyte Program Code Challenges per Shipr				
	ZT			
Amitriptyline	I	3		
Desipramine	I	3		
Imipramine	I	3		
Nortriptyline	<b>I</b> 3			
Tricyclics, total (qualitative/ quantitative)	1	3		

## **Program Information**

- Three 4.0-mL whole blood specimens
- Two shipments per year

## **Program Information**

- Three 5.0-mL lyophilized serum specimens
- Two shipments per year

## **Program Information**

- Three 5.0-mL serum specimens
- Two shipments per year

- Three 5.0-mL lyophilized serum specimens
- Two shipments per year

Accuracy-Based Lipids ABL				
Analyte	Analyte Program Code Challenges per Shipm			
	ABL			
Apolipoprotein A1*	I	3		
Apolipoprotein B*	I	3		
Cholesterol*	I	3		
HDL cholesterol*	I	3		
Non-HDL cholesterol	I	3		
LDL cholesterol	I	3		
Lipoprotein (a)	I	3		
Triglycerides*	I	3		

<sup>\*</sup>This analyte will be evaluated against the reference method.

B-Type Natriuretic Peptides BNP, BNP5				
Analyte Challenges per Shipment				
Program Code				
BNP BNP5				
BNP	2 5			
NT-proBNP 2 5				

## **Additional Information**

- The College of American Pathologists Accreditation Program requires all accredited laboratories performing non-waived testing for BNP and NT-proBNP to complete 15 PT challenges per year.
- For i-STAT®, use Plasma Cardiac Markers programs PCARM or PCARMX.
- For second instrument reporting options, see the Quality Cross Check program, BNPQ, below.

Quality Cross Check—BNP BNPQ			
Analyte	Program Code	Challenges per Shipment	
	BNPQ		
BNP	I	3	
NT-proBNP	I	3	

This program does not meet regulatory requirements for proficiency testing; see Survey BNP or BNP5 above. For additional information about the Quality Cross Check program, see page 40.

## The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

#### **Program Information**

- Three 1.0-mL human serum specimens
- · Two shipments per year

## **Program Information**

- BNP Two 1.0-mL liquid plasma specimens
- Conventional and International System of Units (SI) reporting offered; two shipments per year
- BNP5 Five 1.0-mL liquid plasma specimens
- Conventional and International System of Units (SI) reporting offered; three shipments per year

- Three 1.5-mL liquid specimens
- Report up to three instruments
- Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Harmonized Thyroid ABTH				
Analyte Program Code Challenges per Shipi				
	ABTH			
T3, free (triiodothyronine, free)		3		
T3, total (triiodothyronine, total)		3		
T4, free (thyroxine, free)				
T4, total (thyroxine, total)		3		
Thyroid-stimulating hormone (TSH)				

## **Program Information**

- Three 1.0-mL frozen human specimens
- Two shipments per year

## **Additional Information**

- Analytes will be evaluated using harmonization.
- Specimens are collected by a modified application of Clinical Laboratory and Standards Institute Guideline CLSI C37-A, Preparation and Validation of Commutable Frozen Human Serum Pools as Secondary Reference Materials for Cholesterol Measurement Procedures; Approved Guideline.

Cardiac Markers CRT, CRTI, TNT, TNT5					
Analyte		Program Code			Challenges per Shipment
	CRT	CRTI	TNT	TNT5	
CK-MB, immunochemical	•	•			5
<b>CK</b> isoenzymes (CK-BB, <b>CK-MB</b> , CK-MM), electrophoretic		•			5
LD1, LD2, LD3, LD4, LD5, electrophoretic					5
LD1/LD2 ratio calculation and interpretation					5
Myoglobin					2
Troponin I	•	•			5
Troponin T, two challenges			•		2
Troponin T, five challenges					5

The College of American Pathologists Accreditation Program requires all accredited laboratories performing non-waived testing for Troponin I and Troponin T to complete 15 PT challenges per year.

- CRT Five 2.0-mL liquid serum specimens
- CRTI Ten 2.0-mL liquid serum specimens
- TNT Two 2.0-mL liquid serum specimens
- TNT5 Five 2.0-mL liquid serum specimens
- · Three shipments per year

Hemoglobin A <sub>1c</sub> GH2, GH5			
Analyte	Challenges	per Shipment	
	Program Code		
	GH2	GH5	
Hemoglobin A <sub>1c</sub>	3	5	

#### Additional Information

- These Surveys will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- The College of American Pathologists Accreditation Program requires all accredited laboratories performing non-waived testing for Hemoglobin A<sub>1c</sub> to complete 15 PT challenges per year.
- For second instrument reporting options, see the Quality Cross Check program, GHQ, below.

## **Program Information**

- GH2 Three 0.8-mL liquid human whole blood specimens; two shipments per year
- GH5 Five 0.8-mL liquid human whole blood specimens; three shipments per year

# Accuracy-Based Glucose, Insulin, and C-Peptide ABGIC Analyte Program Code Challenges per Shipment ABGIC C-peptide I 3 Glucose I 3 Insulin I 3

Insulin			3
	Quality Cross Check	с—Hemoglobir	A <sub>1c</sub> GHQ
Analyte		Program Code	Challenges per Shipment
		GHQ	

This program does not meet regulatory requirements for proficiency testing; see Survey GH5, above. For additional information about the Quality Cross Check program, see page 40.

## The Quality Cross Check Program:

Hemoglobin A<sub>1c</sub>

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

## **Program Information**

- Three 1.0-mL serum specimens
- · Two shipments per year

- Three 0.8-mL previously frozen liquid specimens in triplicate
- Report up to three instruments
- · Two shipments per year

Hemoglobin A <sub>1c</sub> GH5I				
Analyte Program Code Challenges per Shipmer				
	GH5I			
Hemoglobin A <sub>1c</sub> ■ 5				

## **Additional Information**

- This program meets the CAP's Accreditation Program requirements for proficiency testing.
- This Survey will not be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method. See Survey GH5 to be evaluated against the NGSP reference method.

## **Program Information**

- Five 0.5-mL lyophilized specimens with a 3.0-mL dropper-tipped vial of diluent
- Designed for international laboratories that have experienced significant shipping and receiving issues and require longer specimen stability
- Three shipments per year

Glycated Serum Albumin GSA					
Analyte	Program Code Challenges per Shipment				
GSA					
Glycated serum albumin					

## **Program Information**

- Three 1.0-mL liquid serum specimens
- Two shipments per year

High-Sensitivity C-Reactive Protein HSCRP					
Analyte Program Code Challenges per Shipmer					
HSCRP					
High-sensitivity C-reactive protein ■ 3					

## **Program Information**

- Three 0.5-mL liquid serum specimens
- · Two shipments per year

Homocysteine HMS					
Analyte	Program Code Challenges per Shipment				
HMS					
Homocysteine ■ 3					

## **Program Information**

- Three 1.0-mL serum specimens
- Two shipments per year

Ketones KET			
Analyte	Program Code	Challenges per Shipment	
	KET		
Beta-hydroxybutyrate	I	2	
Total ketones	I	2	

- Two 2.0-mL serum specimens
- For use with Acetest® and other qualitative/semiquantitative methods using the nitroprusside reaction for total ketones testing
- · Two shipments per year

Chemistry—Limited, Waived LCW			
Analyte	Program Code	Challenges per Shipment	
	LCW		
Cholesterol	I	3	
Glucose	I	3	
HDL cholesterol	I	3	
LDL cholesterol		3	
Triglycerides		3	

## **Program Information**

- Three 3.0-mL liquid serum specimens
- For use with waived methods such as the Cholestech LDX® and Roche ACCU-CHEK® Instant Plus
- The glucose specimens are not appropriate for use on other whole blood glucose meters
- Two shipments per year

Neonatal Bilirubin NB, NB2			
Analyte	Challenges	per Shipment	
	Program Code		
	NB	NB2	
Bilirubin, direct	2	2	
Bilirubin, total 5 2			

One human-based serum specimen will offer the value assigned using the reference method procedure (Clin Chem. 1985;31:1779-1789).

## **Program Information**

- NB Five 1.0-mL human serum specimens; three shipments per year
- NB2 Two 1.0-mL human serum specimens; must order in conjunction with a five-challenge total bilirubin proficiency testing program to meet regulatory requirements; two shipments per year
- · Conventional and International System of Units (SI) reporting offered

Plasma Cardiac Markers PCARM, PCARMX, PCARI				
Analyte		Program Code Challenges per Shipme		
	PCARM	PCARMX	PCARI NEW	
BNP				5
CK-MB				5
D-dimer	•			2
Myoglobin				2
Troponin I	1			5

The College of American Pathologists Accreditation Program requires all accredited laboratories performing non-waived testing for BNP and Troponin I to complete 15 PT challenges per year.

- PCARM Five 1.5-mL liquid EDTA plasma specimens for point-of-care instruments such as Quidel Triage Cardiac (CardiacHS, D-dimer, BNP, and SOB) and i-STAT
- PCARMX All Survey PCARM specimens in duplicate
- PCARI Five 0.25-mL liquid plasma specimens for use with Quidel Triage Cardio (Cardio2/3 and Troponin I)
- · Three shipments per year

## **Whole Blood Chemistry Compatibility Matrix**

Whole Blood Analyzer/Method	Analyte	Compatible Survey Programs	Page
Hemocue <sup>®</sup>	Glucose	HCC	66
Roche Reflotron®	Cholesterol	C1, C4	56-57
	Glucose	61,64	56-57
Cholestech LDX®	Total cholesterol		65
	HDL cholesterol	LCW	65
	Triglycerides	LCVV	65
	Glucose		65
Whole blood cholesterol meters	Cholesterol	C1, C4, LCW	56-57, 64
Whole blood glucose meters	Glucose	HCC2, WBGQ	66, 67
Nova StatSensor®/ E-Z-EM EZ Chem™	Creatinine	WBCR	66

Waived Combination HCC, HCC2			
Analyte Program Code Challenges per Shipment			
	HCC	HCC2	
Hematocrit		•	2
Hemoglobin		•	2
Urinalysis/urine hCG		•	2
Whole blood glucose		I	2 (HCC)/3 (HCC2)

## **Program Information**

- HCC Two 1.0-mL whole blood specimens; two shipments per year
- HCC2 Total of four shipments per year
- Hematocrit, hemoglobin, and urinalysis/urine hCG testing -Two 3.0-mL whole blood specimens and two 10.0-mL urine specimens; two shipments per year: A and C
- Whole blood glucose testing - Three 2.5-mL whole blood specimens; two shipments per year: B and D
- To verify instrument compatibility, refer to the instrument matrix on this page

Whole Blood Creatinine WBCR			
Analyte	Program Code	Challenges per Shipment	
WBCR			
Creatinine	I	5	

- Five 4.0-mL whole blood specimens
- For use with the Nova StatSensor®/E-Z-EM EX Chem™
- Three shipments per year

**Program Information** 

specimens

Three 2.0-mL whole blood

Report up to 30 instrumentsTwo shipments per year

Quality Cross Check—Whole Blood Glucose WBGQ				
Analyte Program Code Challenges per Shipment				
WBGQ				
Glucose   3				

The CAP Accreditation Program requires all accredited laboratories performing waived whole blood glucose testing using glucose meters to perform alternative performance assessment. This program can be used to meet alternative performance assessment requirements.

## The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

## Improve the reliability of your patient results with CAP Survey Validated Materials

Use the same material that is sent in the Surveys program to:

- Identify and troubleshoot instrument/method problems
- · Correlate results with other laboratories or instruments
- Document correction of problems identified in Surveys
- Utilize material with confirmed results as an alternative external quality control
- · Identify potential proficiency testing failures

Each laboratory receives a Survey Participant Summary, which includes readily available results.

## Chemistry/TDM, Validated Material

Validated Material	Program Code	Corresponding Survey	Pages
Chemistry/TDM	CZVM	CZ	56-58

## **Program Information**

• Five 5.0-mL liquid serum specimens

## Have you created or updated your CAP Profile?

Each laboratory staff member should have their own profile. Your profile is transferrable when you leave your current position. Use it to maintain information about yourself, including:

- · Business affiliations
- Certifications
- Contact preferences
- Inspector-related information
- · Personal contact information
- · Specialties and skills
- Addresses

To create or update your profile, visit cap.org, log in, and click on UPDATE MY PROFILE.



## **Urine Chemistry**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Urine Chem	nistry—General	U
Analyte	Program Code	Challenges per Shipment
	U	
Amylase	1	3
Calcium	1	3
Chloride	I	3
Creatinine	1	3
Glucose	1	3
Magnesium	1	3
Nitrogen, total	1	3
Osmolality	1	3
Phosphorus	1	3
Potassium	1	3
Protein, total	1	3
Sodium	1	3
Urea nitrogen	I	3
Uric acid		3
Urine albumin, quantitative	1	3
Urine albumin:creatinine ratio	1	3

## **Program Information**

- Six 15.0-mL urine specimens
- One mailing per year will include an additional educational specimen for uric acid testing for a total of seven challenges per year
- Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Accuracy-Based Urine ABU			
Analyte	Program Code	Challenges per Shipment	
	ABU		
Calcium		3	
Creatinine		3	
Protein, total		3	
Urine albumin, quantitative		3	
Urine albumin: creatinine ratio		3	

Target values for albumin are obtained by LC-MS/MS after trypsin digestion, performed by the Renal Testing Laboratory, Mayo Clinic, Rochester, MN, using calibration materials prepared from human serum albumin (>99% pure).

Other analytes will be compared by peer group for harmonization purposes.

- Three 5.0-mL human urine specimens
- · Two shipments per year

Kidney Sto	KSA	
Analyte	Program Code	Challenges per Shipment
	KSA	
Citrate	I	3
Cystine	I	3
Oxalate	I	3
Sulfate	I	3

## **Program Information**

- Three 13.5-mL liquid urine specimens
- Two shipments per year

Urine Chemistry—Special N, NX				
Analyte	Program Code	Challenges per Shipment		
	N, NX			
3-methoxytyramines	•	3		
5-hydroxyindoleacetic acid	I	3		
17-hydroxycorticosteroids		3		
17-ketosteroids	I	3		
Aldosterone	I	3		
Coproporphyrins	I	3		
Cortisol, urinary free	I	3		
Dopamine	I	3		
Epinephrine	I	3		
Homovanillic acid		3		
Metanephrine		3		
Norepinephrine	I	3		
Normetanephrine		3		
Uroporphyrin	ı	3		
Vanillylmandelic acid	•	3		

## **Program Information**

- N Six 10.0-mL lyophilized urine specimens and three 10.0-mL liquid urine specimens
- NX All lyophilized Survey N specimens in duplicate and three 10.0-mL liquid urine specimens
- Two shipments per year

Myoglobin, Urine MYG						
Analyte	Program Code	Challenges per Shipment				
	MYG					
Myoglobin, urine, qualitative and quantitative	ı	2				

- Two 1.0-mL urine specimens
- Two shipments per year

Porphobilinogen, Urine UPBG				
Analyte	Program Code	Challenges per Shipment		
	UPBG			
Porphobilinogen	I	3		

## **Program Information**

- Three 5.0-mL urine specimens
- For use with qualitative and quantitative methods
- · Two shipments per year

## Improve the reliability of your patient results with CAP Survey Validated Materials

Use the same material that is sent in the Surveys program to:

- · Identify and troubleshoot instrument/method problems
- · Correlate results with other laboratories or instruments
- · Document correction of problems identified in Surveys
- Utilize material with confirmed results as an alternative external quality control
- · Identify potential proficiency testing failures

Each laboratory receives a Survey Participant Summary, which includes readily available results.

## Urine Chemistry—General, Validated Material

Validated Material	Program Code	Corresponding Survey	Page
Urine Chemistry	UVM	U	68

## **Program Information**

· Six 15.0-mL urine specimens

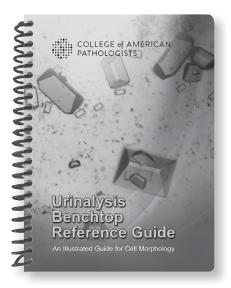
## **Urinalysis Benchtop Reference Guide (UABRG)**

- Thirty-four different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- · Eight tabbed sections for easy reference
  - Urinary Cells
  - Urinary Casts
  - Urinary Crystals
    - At Acid pH
    - At Neutral or Acid pH
    - At Neutral or Alkaline pH
  - Organisms
  - Miscellaneous/Exogenous
- A durable and water-resistant format to withstand years of benchtop use—5" by 6½"

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Item number: UABRG Spiral bound; 38 pages; 34 images; 2014

## **Special Chemistry**

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

1,5-Anhydroglucitol AG		
Analyte Program Code Challenges per Shipme		
	AG	
1,5-anhydroglucitol	I	3

#### **Program Information**

- Three 1.0-mL liquid serum specimens
- Two shipments per year

Aldolase ADL		
Analyte	Program Code	Challenges per Shipment
	ADL	
Aldolase	I	2

#### **Program Information**

- Two 3.0-mL liquid serum specimens
- Two shipments per year

Angiotensin Converting Enzyme ACE		
Analyte Program Code Challenges per Sh		
	ACE	
Angiotensin converting enzyme, quantitative		2

#### **Program Information**

- Two 2.0-mL lyophilized serum specimens
- · Two shipments per year

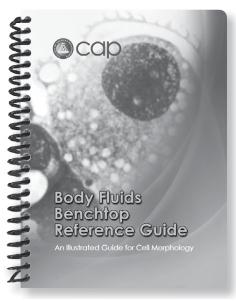
## **Body Fluids Benchtop Reference Guide (BFBRG)**

- Thirty-six color images, including common and rare cells, crystals, and other cell inclusions
- Detailed descriptions of each cell including facts, cell morphology and inclusions
- Nine tabbed sections for easy reference
  - Erythroid Series
  - Lymphoid Series
  - Myeloid Series
  - o Mononuclear Phagocytic Series
  - Lining Cells
  - o Miscellaneous Cells
  - Crystals
  - o Microorganisms
  - Miscellaneous Findings
- A durable and water-resistant format to withstand years of benchtop use—5" x 6½"

#### Select it on your Surveys order form.

#### Or, view sample pages and order online:

- · printed books at estore.cap.org
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**Item number:** BFBRG Spiral bound; 42 pages;

36 images; 2013

Body Fluid Chemistry FLD			
Analyte	Program Code	Challenges per Shipment	
	FLD		
Albumin	I	3	
Amylase	I	3	
CA19-9	I	1	
CEA	I	1	
Cholesterol	I	3	
Creatinine	I	3	
Glucose	I	3	
Lactate	I	3	
Lactate dehydrogenase (LD)	I	3	
рН		3	
Protein, total	I	3	
Triglycerides	1	3	
Urea nitrogen	1	1 per year	

- Three 3.0-mL simulated liquid body fluid specimens
- · Conventional and International System of Units (SI) reporting offered
- Two shipments per year

#### **Additional Information**

• For second instrument reporting options, see the Quality Cross Check program, FLDQ, on page 73.

Quality Cross Check—Body Fluid Chemistry FLDQ		
Analyte	Program Code	Challenges per Shipment
	FLDQ	
Albumin	I	3
Amylase	I	3
CA19-9	I	1
Carcinoembryonic antigen (CEA)	I	1
Cholesterol	I	3
Creatinine	I	3
Glucose	I	3
Lactate	I	3
Lactate dehydrogenase (LD)	I	3
рН	I	3
Protein, total	I	3
Triglycerides	I	3
Urea nitrogen	1	1

This program does not meet regulatory requirements for proficiency testing; see Survey FLD on page 72. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

Body Fluid Chemistry 2 FLD2			
Analyte	alyte Program Code Challenges per Shipm		
	FLD2		
Alkaline phosphatase	I	3	
Bilirubin	I	3	
Calcium	1	3	
Chloride	I	3	
Lipase	I	3	
Potassium	1	3	
Sodium	1	3	
Uric acid	I	3	

#### **Program Information**

- Three 3.0-mL simulated liquid body fluid specimens in duplicate
- Report up to three instruments
- Two shipments per year

- Three 3.0-mL liquid body fluid specimens
- Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Cadmium CD			
Analyte	Program Code	Challenges per Shipment	
	CD		
Beta-2-microglobulin, urine	I	3	
Cadmium, urine	I	3	
Cadmium, whole blood	I	3	
Creatinine, urine	I	3	

This Survey meets the Occupational Safety and Health Administration (OSHA) guidelines for proficiency testing (OSHA standard-29 CFR 1910.1027AppF).

#### **Program Information**

- Three 6.0-mL whole blood specimens and three 13.0-mL urine specimens
- · Conventional and International System of Units (SI) reporting offered
- Six shipments per year

Cerebrospinal Fluid Chemistry M, OLI			
Analyte	Prog	ram Code	Challenges per Shipment
	М	OLI	
Albumin, quantitative			3
Electrophoresis (albumin and gamma globulin)		ı	3
Glucose			3
IgG, quantitative			3
Lactate			3
Lactate dehydrogenase (LD)			3
Protein, total			3
Oligoclonal bands			3

#### **Program Information**

- M Three 5.0-mL simulated liquid spinal fluid specimens
- OLI Three 1.0-mL simulated liquid spinal fluid specimens and three paired serum specimens
- Two shipments per year



Cystatin C CYS		
Analyte	Program Code	Challenges per Shipment
	CYS	
Cystatin C		2

- Two 1.0-mL liquid serum specimens
- Two shipments per year

Fecal Ca	lprotectin FCAL	NEW
Analyte	Program Code	Challenges per Shipment
	FCAL	
Fecal calprotectin	I	3

recat catprotectin	•	3
Fecal Fat FCFS		
Analyte	Program Code	Challenges per Shipment

Fecal Fat FCFS			
Analyte Program Code Challenges per Ship			
	FCFS		
Fecal fat, qualitative	1	2	
recarrat, quantative	•		

Fructosamine FT		
Analyte	Program Code	Challenges per Shipment
	FT	
Fructosamine	I	2

Glucose-6-Phosphate Dehydrogenase G6PDS		
Analyte	Program Code	Challenges per Shipment
	G6PDS	
G6PD, qualitative and quantitative	ı	2

Lipoprotein-Associated Phospholipase A <sub>2</sub> PLA		
Analyte	Program Code	Challenges per Shipment
	PLA	
Lipoprotein-associated phospholipase (Lp-PLA <sub>2</sub> ) activity	ı	2

- Three 1.0-g simulated fecal specimens
- Two shipments per year

#### **Program Information**

- Two 10.0-g simulated fecal fat specimens
- For microscopic detection of neutral fats (triglycerides) and/or split fats (total free fatty acids)
- Two shipments per year

#### **Program Information**

- Two 1.0-mL liquid serum specimens
- Two shipments per year

#### **Program Information**

- Two 0.5-mL lyophilized hemolysate samples
- Two shipments per year

- Two 1.0-mL liquid specimens
- Two shipments per year

#### **Lipoprotein and Protein Electrophoresis** LPE, SPE, UBJP **Program Code** Analyte Challenges per Shipment LPE SPE UBJP Lipoprotein electrophoresis 2 2 IgA, quantitation 2 IgG, quantitation 2 IgM, quantitation M-protein (Paraprotein) identification 2 2 Ī Protein, total Protein electrophoresis 2 ı Protein electrophoresis pattern 2 interpretation Urine Bence Jones protein 2

#### **Program Information**

- LPE Two 1.0-mL liquid serum specimens
- SPE Two 1.0-mL lyophilized serum specimens; two educational protein electrophoresis dry challenges per year
- UBJP Two 10.0-mL urine specimens
- Two shipments per year



Lamellar Body Count LBC		
Procedure	Program Code	Challenges per Shipment
	LBC	
Lamellar body count	ı	3

#### **Program Information**

- Three 2.0-mL simulated liquid amniotic fluid specimens
- For use with LBC methods performed on all hematology analyzers
- Two shipments per year

Plasma Hemoglobin PHG		
Analyte	Program Code	Challenges per Shipment
	PHG	
Plasma hemoglobin		2

- Two 2.0-mL liquid specimens
- Two shipments per year

Procalcitonin PCT		
Analyte	Program Code	Challenges per Shipment
	PCT	
Procalcitonin		3

Procalcitonin PCT		
Analyte	Program Code	Challenges per Shipment
	PCT	
Procalcitonin		3

- Three 1.0-mL lyophilized serum specimens
- Two shipments per year

Pseudocholinesterase C7		
Analyte	Program Code	Challenges per Shipment
	C7	
Pseudocholinesterase	I	1

#### **Program Information**

- One 2.0-mL lyophilized serum specimen
- Three shipments per year



Salivary Cortisol SALC		
Analyte	Program Code	Challenges per Shipment
	SALC	
Salivary cortisol		3

#### **Program Information**

- Three 1.0-mL synthetic oral fluid specimens
- Two shipments per year

Accuracy-Based Testosterone, Estradiol ABS		
Analyte	Program Code	Challenges per Shipment
	ABS	
Albumin	I	3
Calcium	I	3
Cortisol	I	3
Estradiol	I	3
Follicle-stimulating hormone (FSH)	I	3
Luteinizing hormone (LH)	1	3
Sex hormone-binding globulin (SHBG)		3
Testosterone	1	3
Thyroid-stimulating hormone (TSH)		3

#### **Program Information**

- Three 1.0-mL human serum specimens
- Two shipments per year

#### **Additional Information**

• The Centers for Disease Control and Prevention (CDC) will set target values for testosterone and estradiol using the established reference methods.

Total Bile Acids TBLA		
Analyte	Program Code	Challenges per Shipment
	TBLA	
Total bile acids	I	3

# Program InformationThree 5.0-mL liquid serum

specimensTwo shipments per year

Trace Metals R		
Analyte	Program Code	Challenges per Shipment
	R	
Aluminum	I	3
Chromium	I	3
Copper	I	3
Manganese	I	3
Selenium	I	3
Zinc	I	3
· · · · · · · · · · · · · · · · · · ·		

#### **Program Information**

- Three 5.0-mL liquid serum specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Trace Metals, Urine TMU			
Analyte	Program Code	Challenges per Shipment	
	TMU		
Aluminum	I	2	
Arsenic	I	2	
Chromium	I	2	
Cobalt	I	2	
Copper	I	2	
Lead	I	2	
Manganese	I	2	
Mercury	I	2	
Selenium	I	2	
Thallium	ı	2	
Zinc	1	2	

- Two 25.0-mL urine specimens
- Conventional and International System of Units (SI) reporting offered
- For laboratories that monitor trace metals at normal and toxic levels
- Two shipments per year

Trace Metals, Whole Blood TMWB			
Analyte	Program Code	Challenges per Shipment	
	TMWB		
Aluminum	I	3	
Arsenic, total	I	3	
Chromium	I	3	
Cobalt	I	3	
Copper	I	3	
Manganese	I	3	
Mercury	I	3	
Selenium	ı	3	
Thallium	ı	3	
Zinc	ı	3	

- Three 6.0-mL whole blood specimens
- · Conventional and International System of Units (SI) reporting offered
- For laboratories that monitor trace metals at normal and toxic levels
- Two shipments per year

Sweat Analysis Series SW1, SW2, SW3, SW4				
Analyte	Program Code Challenges per Shipment			
	SW1, SW2, SW3, SW4			
Chloride	I	3		
Conductivity	I	3		

For method compatibility, see chart below.

### **Program Information**

- Three 5.0-mL simulated liquid human sweat specimens
- Two shipments per year

#### **Sweat Analysis Series Compatibility Matrix**

Method/Procedure		Progra	m Code		Materials Included
	SW1	SW2	SW3	SW4	
Orion direct electrode	I				Precut 2-cm diameter Whatman filter papers
Wescor Macroduct <sup>™</sup> and Nanoduct <sup>®</sup> Systems					22-gauge blunt-tipped needles
CF Indicator System®					Polystyrene boats and chloride-free sponges
All other methodologies					No additional materials provided

Viscosity V					
Analyte	Program Code Challenges per Shipment				
	V				
Viscosity	I	2			

- Two 10.0-mL serum specimens
- · Two shipments per year

Soluble Transferrin Receptor STFR					
Analyte	Program Code	Challenges per Shipment			
	STFR				
Soluble transferrin receptor (sTfR)	I	3			

#### **Program Information**

- Three 2.5-mL liquid human serum specimens
- · Two shipments per year

# Improve the reliability of your patient results with CAP Survey Validated Materials

Use the same material that is sent in the Surveys program to:

- · Identify and troubleshoot instrument/method problems
- · Correlate results with other laboratories or instruments
- · Document correction of problems identified in Surveys
- Utilize material with confirmed results as an alternative external quality control
- · Identify potential proficiency testing failures

Each laboratory receives a Survey Participant Summary, which includes readily available results.

#### Cerebrospinal Fluid, Validated Material

Validated Material	Program Code	Corresponding Survey	Page
Cerebrospinal Fluid	MVM	M	74

#### **Program Information**

 Three 5.0-mL simulated liquid spinal fluid specimens

## Test your diagnostic skills as a pathologist with CPIP

Online, hands-on and interactive, the Clinical Pathology Improvement Program (CPIP) enables pathologists to sharpen their diagnostic skills in real time by working through an actual case. Each month, you will receive a new case, including related images and clinical background. As the case unfolds, more information is revealed, just as in the laboratory. Participants who successfully complete the posttest may apply their earned credits to their Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) SAM requirements. Enjoy a full year of CPIP and earn up to 15 CME/SAM credits.

Choose code CPIP/CPIP1 on your Surveys order form.

# **Endocrinology**



## **Use the CAP's Participant Summary** Reports to take your laboratory to the next level.

- Compare your results and methods against large peer groups for greater diagnostic confidence.
- Review the extensive discussion to further educate staff on testing trends and best practices.
- Earn continuing education credit with content that aligns with the proficiency testing challenge.

# **Endocrinology**

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Ligand—General K, KK, K2			
Analyte	Program	Challenges per Shipment	
	K, KK	K2	
Alpha-fetoprotein (AFP)	I		5
CEA	ı	ı	3
Cortisol	ı		5
Ferritin	I	ı	3
Folate, serum		I	3
hCG, quantitative	I		5
Immunoglobulin E (IgE)	I		5
Prostate-specific antigen (PSA)	ı	ı	2 (K,KK)/3 (K2)
Prostate-specific antigen, complexed (cPSA)	ı		2
Prostate-specific antigen, free	ı		2
Prostatic acid phosphatase (PAP)	ı		3
T3, free (triiodothyronine, free)	I		5
T3, total (triiodothyronine, total)	I		5
T3 uptake and related tests	ı		5
T4, free (thyroxine, free)	ı		5
T4, total (thyroxine, total)			5
Thyroid-stimulating hormone (TSH)			5
Vitamin B <sub>12</sub>	ı	I	3

#### **Program Information**

- K Five 5.0-mL liquid serum specimens; three shipments per year
- KK Five 5.0-mL liquid serum specimens in duplicate; three shipments per year
- K2 Three 5.0-mL liquid serum specimens; two shipments per year

MMA :	NEW	
Analyte/Procedure	Program Code	Challenges per Shipment
	MMA	
Active vitamin B <sub>12</sub>	I	3
Methylmalonic acid	ı	3

- Three 1.0-mL serum specimens
- Two shipments per year

B-Type Natriuretic Peptides BNP, BNP5				
Analyte Challenges per Shipment				
Program Code				
	BNP	BNP5		
BNP	2	5		
NT-proBNP	2	5		

#### Additional Information

- The College of American Pathologists Accreditation Program requires all accredited laboratories performing non-waived testing for BNP and NT-proBNP to complete 15 PT challenges per year.
- For i-STAT®, use Plasma Cardiac Markers programs PCARM or PCARMX.
- · For second instrument reporting options, see the Quality Cross Check program, BNPQ, below.

Quality Cross Check—BNP BNPQ				
Analyte Program Code Challenges per Shipment				
	BNPQ			
BNP		3		
NT-proBNP		3		

This program does not meet regulatory requirements for proficiency testing; see Survey BNP or BNP5 above. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- · Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- · Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

#### **Program Information**

- BNP Two 1.0-mL liquid plasma specimens
- · Conventional and International System of Units (SI) reporting offered; two shipments per year
- BNP5 Five 1.0-mL liquid plasma specimens
- · Conventional and International System of Units (SI) reporting offered; three shipments per year

- · Three 1.5-mL liquid specimens
- · Report up to three instruments
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Analyte	Program Code		Challenges per Shipment
	Y, YY	DY	-
11-deoxycortisol	ı		3
17-hydroxyprogesterone	ı		3
Androstenedione	ı		3
DHEA sulfate	ı		3
Estradiol	ı		3
Estriol, unconjugated (uE3)	ı		3
Follicle-stimulating hormone (FSH)	ı		3
Growth hormone (GH)	ı		3
IGF-1 (somatomedin C)	ı		3
Luteinizing hormone (LH)	ı		3
Progesterone	ı		3
Prolactin	ı		3
Testosterone	ı		3
Testosterone, bioavailable (measured)		•	3
Testosterone, free (measured)		ı	3
Sex hormone-binding globulin (SHBG)			3

- Y Three 5.0-mL liquid serum specimens in duplicate
- YY Three 5.0-mL liquid serum specimens in triplicate
- DY Must order in conjunction with Survey Y or  $\gamma\gamma$
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year



Antimüllerian Hormone AMH		
Analyte	Program Code	Challenges per Shipment
	АМН	
Antimüllerian hormone	I	3

25-OH Vitamin D, Total VITD			
Analyte	Program Code	Challenges per Shipment	
	VITD		
25-OH vitamin D. total		3	

#### **Program Information**

- Three 1.0-mL lyophilized serum specimens
- Two shipments per year

- Three 1.0-mL liquid serum specimens
- · Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Bone and Growth BGS			
Analyte Program Code Challenges per Shipme			
	BGS		
IGF-1 (somatomedin C)	I	3	
Osteocalcin	I	3	

- Three 1.0-mL liquid serum specimens
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year



Accuracy-Based Vitamin D ABVD			
Analyte Program Code Challenges per Shipme			
ABVD			
25-OH vitamin D (D2 and D3)	I	3	

#### **Additional Information**

- The Centers for Disease Control and Prevention (CDC) will establish reference targets using isotope-dilution LC-MS/MS method.
- Specimens are collected by a modified application of Clinical Laboratory and Standards Institute Guideline CLSI C37-A, Preparation and Validation of Commutable Frozen Human Serum Pools as Secondary Reference Materials for Cholesterol Measurement Procedures; Approved Guideline.

Bone and Mineral Metabolism, Urine BU		
Analyte	Program Code	Challenges per Shipment
	BU	
C-telopeptide (CTx)	I	2
Creatinine	I	2
Deoxypyridinoline (DPD)	I	2
N-telopeptide (NTx)	I	2
Pyridinoline (PYD)		2

#### **Program Information**

- Three 1.0-mL liquid human serum specimens
- Serum is from multi-donor endogenous pools
- · Conventional and International System of Units (SI) reporting offered
- Two shipments per year

- Two 2.0-mL lyophilized human urine specimens
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year



#### **Bone Markers and Vitamins** BMV1, BMV2, BMV3, BMV4, BMV5, BMV6 Challenges per Analyte **Program Code** Shipment BMV1 BMV2 BMV3 BMV4 BMV5 BMV6 1,25 dihydroxy 3 vitamin D Bone-specific alkaline 3 phosphatase Vitamin A 3 ı Vitamin E (alpha tocopherol, gamma 3 tocopherol) C-telopeptide 3 N-telopeptide 3

#### **Program Information**

- BMV1 through BMV4 -Three 5.0-mL liquid serum specimens for each program
- BMV5 and BMV6 Three 1.0-mL liquid serum specimens for each program
- Two shipments per year

Erythropoietin EPO			
Analyte Program Code Challenges per Shipi			
EPO EPO			
Erythropoietin	I	2	

#### **Program Information**

- Two 1.5-mL serum specimens
- Two shipments per year



Fetal Fibronectin FF			
Analyte Program Code Challenges per Shipme			
FF			
Fetal fibronectin		2	

#### **Program Information**

- Two 1.2-mL liquid specimens
- Two shipments per year

Insulin, Gastrin, C-Peptide, and PTH ING		
Analyte	Program Code	Challenges per Shipment
	ING	
C-peptide	I	3
Gastrin	I	3
Insulin	I	3
Parathyroid hormone (PTH)		3

- Three 5.0-mL lyophilized serum specimens
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year



Second Trimester Maternal Screening FP, FPX		
Analyte	Program Code	Challenges per Shipment
	FP, FPX	
Alpha-fetoprotein (AFP), amniotic fluid	I	2
Alpha-fetoprotein (AFP), serum	I	5
Dimeric inhibin A (DIA)	ı	5
Estriol, unconjugated (uE3)	I	5
Human chorionic gonadotropin (hCG), quantitative	ı	5

The CAP designed these Surveys for laboratories using AFP and hCG for prenatal screening purposes only. For all other applications, see Survey K or KK on page 82.

First Trimester Maternal Screening FP1T, FP1B				
Analyte	Prog	Program Code Challenges per Shipment		
	FP1T	FP1B		
Total hCG			5	
Free beta hCG		I	5	
PAPP-A		I	5	

The CAP designed these Surveys for laboratories using hCG for prenatal screening purposes only. For all other applications, see Survey K or KK on page 82.

Noninvasive Prenatal Testing NIPT		
Analyte	Program Code	Challenges per Shipment
	NIPT	
Cell-free DNA screening for fetal aneuploidy	ı	3

Noninvasive prenatal testing is an exercise and is not considered proficiency testing. This exercise may be used to meet the requirements for alternative assessment.

Quality Cross Check—Parathyroid Hormone PTHQ		
Analyte	Program Code	Challenges per Shipment
	PTHQ	
Parathyroid hormone (PTH)	I	3

This program does not meet regulatory requirements for proficiency testing; see Survey ING on page 86. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- · Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- · Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

#### **Program Information**

- FP Five 1.0-mL liquid serum specimens; two 1.0-mL simulated amniotic fluid specimens
- FPX All Survey FP serum specimens in duplicate; two 1.0-mL simulated amniotic fluid specimens
- · Three shipments per year

#### **Program Information**

- FP1T Five 1.0-mL serum specimens
- FP1B Five 1.0-mL serum specimens
- · Three shipments per year

#### **Program Information**

- · Three maternal plasma samples
- Two shipments per year

- Three 5.0-mL lyophilized serum specimens in duplicate
- · Report up to three instruments
- Two shipments per year

Pharmacogenetics PGX, PGX1, PGX2, PGX3					
Analyte/Procedure					Challenges per Shipment
	PGX	PGX1	PGX2	PGX3	
CYP2C19	•				3
CYP2C9					3
CYP2D6					3
CYP3A4	•				3
CYP3A5	ı				3
SLC01B1 (rs4149056)	•				3
VKORC1					3
IL28B (rs12979860)					3
HLA-B*15:02			ı		3
HLA-B*57:01			ı		3
DPYD				I	3
TPMT					3
UGT1A1				I	3

#### **Additional Information**

- UGT1A1 (PGX3 Survey) tests the laboratory's ability to detect variants in the TATA
  repeat sequence in the UGT1A1 promotor (eg, UGT1A1\*28 with seven TA repeats).
  The ability to detect variants in other regions of the UGT1A1 gene is not part of this
  program.
- Survey PGX2 is designed for laboratories that provide *HLA-B\*57:01* testing to identify risk of hypersensitivity to abacavir and *HLA-B\*15:02* testing to identify risk of hypersensitivity to carbamazepine. The intended response is qualitative (presence/absence of the allele). This Survey is not appropriate for laboratories that perform molecular HLA typing. For HLA typing proficiency testing, please consult the HLA Molecular Typing (DML) Survey.

RBC Folate FOL				
Analyte	Program Code	Challenges per Shipment		
	FOL			
RBC folate	I	2		

#### **Program Information**

- Three 25.0-µg extracted DNA specimens
- Includes allele detection (genotyping) and/or interpretive challenges
- Two shipments per year

- Two 2.0-mL lyophilized whole blood specimens
- Conventional and International System of Units (SI) reporting offered
- · Three shipments per year

Renin and Aldosterone RAP				
Analyte	Program Code	Challenges per Shipment		
	RAP			
Aldosterone	I	3		
Renin	ı	3		

- Three 2.0-mL lyophilized plasma specimens
- · Conventional and International System of Units (SI) reporting offered
- Two shipments per year



Tumor Markers TM, TMX					
Analyte	Program Code	Challenges per Shipment			
	TM, TMX				
Adrenocorticotropic hormone (ACTH)	I	3			
Beta-2 microglobulin	I	3			
CA 15-3	ı	3			
CA 19-9	I	3			
CA 27.29	I	3			
CA 72-4	ı	3			
CA 125	ı	3			
Calcitonin	ı	3			
Thyroglobulin	ı	3			

#### **Program Information**

- TM Three 2.0-mL liquid serum specimens
- TMX All Survey TM specimens in duplicate
- Two shipments per year

Human Epididymis Protein 4 HUEP				
Analyte	Program Code	Challenges per Shipment		
	HUEP			
Human epididymis protein 4	ı	3		

- Three 1.0-mL lyophilized serum specimens
- Two shipments per year

# Improve the reliability of your patient results with CAP Survey Validated Materials

Use the same material that is sent in the Surveys program to:

- · Identify and troubleshoot instrument/method problems
- · Correlate results with other laboratories or instruments
- Document correction of problems identified in Surveys
- Utilize material with confirmed results as an alternative external quality control
- · Identify potential proficiency testing failures

Each laboratory receives a Survey Participant Summary, which includes readily available results.

#### **Endocrinology, Validated Materials**

Validated Material	Program Code	Corresponding Survey	Page
Ligand—General	KVM	K	82
Ligand—Special	YVM	Υ	84

#### **Program Information**

- KVM Five 5.0-mL liquid serum specimens; three shipments per year
- YVM Six 5.0-mL liquid serum specimens in duplicate; two shipments per year

## We are here to help. Fast Focus on Compliance—the inspector's quick guide

A resource for laboratories and inspectors alike, our Fast Focus on Compliance mini-training vignettes help you prepare for future laboratory inspections by gaining a clear understanding of the requirements and receiving insight into areas that need improvement:

- Inspecting Method Validation/Verification Studies
- Inspecting Personnel Records
- 12 Inspector Tools to Make Your Inspection Go More Smoothly
- Proficiency Testing Referral and Communications
- Competency Assessment
- Documenting Your Inspection Findings

Access these concentrated topics online by searching Fast Focus on Compliance at cap.org

# 8

# **Blood Gas, Critical Care, and Oximetry**



# Benefit from the support of 600 experts in laboratory medicine.

These experts spend countless hours monitoring testing trends to:

- Determine specimen specifications to challenge participants.
- Keep our offerings contemporary with new analytes and programs.
- Provide peer-reviewed continuing medical education, continuing education, and self-assessment modules.

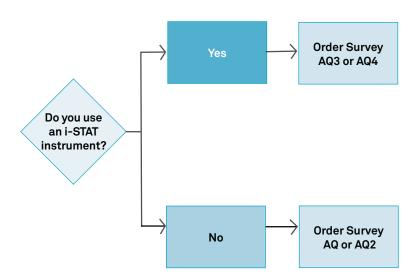
# **Blood Gas, Critical Care, and Oximetry**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Critical Care Blood Gas AQ, AQ2, AQ3, AQ4					
Analyte	Program Code				Challenges per Shipment
	AQ	AQ2	AQ3	AQ4	
Calcium, ionized		ı		ı	2
Chloride		ı		ı	5
Hematocrit	ı			•	5
Hemoglobin, estimated	ı		•	•	5
Lactate	ı			•	2
Magnesium, ionized	ı				2
PCO <sub>2</sub>	ı			•	5
pH	•			•	5
PO <sub>2</sub>	•			•	5
Potassium	•			•	5
Sodium	•	1		I	5
tCO <sub>2</sub>	•	ı		ı	5
Creatinine		1		ı	5
Glucose		1		ı	5
Urea nitrogen (BUN)		•		I	5

For second instrument reporting options, see the Quality Cross Check programs, AQQ, AQ2Q, AQ3Q, and AQ4Q, on page 93.

- AQ, AQ2 Five 2.5-mL aqueous specimens in duplicate and five 2.5-mL specimens for hematocrit testing in duplicate; appropriate for all methods except i-STAT®
- AQ3, AQ4 Five 2.5-mL specimens in duplicate for i-STAT methods only
- Conventional and International System of Units (SI) reporting offered
- · Three shipments per year



Quality Cross Check—Blood Gas AQQ, AQ2Q, AQ3Q, AQ4Q					
Analyte		Progra	m Code		Challenges per Shipment
	AQQ	AQ2Q	AQ3Q	AQ4Q	
Calcium, ionized	ı				3
Chloride	•		•	•	3
Hematocrit	•		•	•	3
Hemoglobin, estimated	•	•	•	ı	3
Lactate	•	•	•	ı	3
Magnesium, ionized		ı			3
PCO <sub>2</sub>		ı			3
рН	•	ı	•	I	3
PO <sub>2</sub>	•	ı		ı	3
Potassium	•	ı		I	3
Sodium	•	•		•	3
tCO <sub>2</sub>	ı	ı	•	•	3
Creatinine		•		I	3
Glucose		•		•	3
Urea nitrogen (BUN)		ı		ı	3

These programs do not meet regulatory requirements for proficiency testing; see Surveys AQ and AQ2-AQ4 on page 92. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- · Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- · Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

- AQQ, AQ2Q Three 2.5-mL specimens in triplicate and three 2.5-mL specimens for hematocrit testing in triplicate; appropriate for all methods except i-STAT®
- · AQ3Q, AQ4Q Three 1.7-mL specimens in triplicate for i-STAT methods only
- · Report up to three instruments
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Blood Oximetry SO					
Analyte	Program Code	Challenges per Shipment			
	S0				
Carboxyhemoglobin	I	5			
Hematocrit, estimated	I	5			
Hemoglobin, total	I	5			
Methemoglobin		5			
Oxyhemoglobin	I	5			

#### Additional Information

- This Survey is not compatible with Oxicom-2000, -2100, or -3000 whole blood oximeters.
- For second instrument reporting options, see the Quality Cross Check program, SOQ, below.

#### **Program Information**

- Five 1.8-mL stabilized human hemoglobin solution specimens
- Conventional and International System of Units (SI) reporting offered
- · Three shipments per year

Quality Cross Check—Blood Oximetry SOQ				
Analyte	Program Code	Challenges per Shipment		
	SOQ			
Carboxyhemoglobin	I	3		
Hematocrit, estimated	I	3		
Hemoglobin, total	I	3		
Methemoglobin	I	3		
Oxyhemoglobin	I	3		

This program does not meet regulatory requirements for proficency testing; see Survey SO above. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

- Three 1.2-mL liquid specimens in triplicate
- Report up to three instruments
- Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

# Toxicology



## Keep pace with the growing opioid abuse crisis.

- The new Novel Opioids and Benzodiazepines program (NOB) includes challenges covering a mix of designer drugs from a regularly updated list.
- Benchmark opioid urine drug testing turnaround times for initial and definitive testing and identify gaps in testing protocols with the new Q-PROBES™ Opioid Testing Stewardship program (QP192).

# New Programs NEW



Antifungal Drugs Monitoring (AFD)	100
Novel Opioids and Benzodiazepines (NOB)	10!
Blood Cannabinoids (THCB)	
New Analyte/Drug Additions 🔍	

#### Drug Monitoring for Pain Management (DMPM) ......107 Urine Toxicology (UT).......97

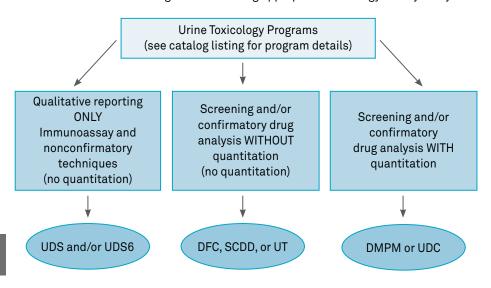
# **Deleted Programs**

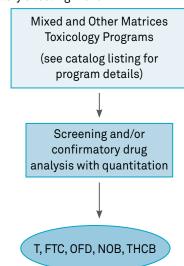
Toxicology Quality Program (TQP)

# **Toxicology**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Use this flowchart as a guide for ordering appropriate toxicology Surveys for your laboratory's testing menu.





Toxicology T				
Analyte	Program Code	Challenges per Shipment		
	Т			
See drug listing on next page	ı	5		

#### **Program Information**

- A total of five specimens consisting of 20.0-mL liquid serum and 50.0-mL liquid urine specimens
- For laboratories performing qualitative and quantitative drug analysis on serum and qualitative analysis on urine specimens
- · Three shipments per year

Urine Toxicology UT		
Analyte	Program Code	Challenges per Shipment
	UT	
See drug listing on next page	I	5

- Five 50.0-mL liquid urine specimens
- For laboratories performing qualitative drug analysis with qualitative confirmatory testing
- · Three shipments per year

## T and UT Programs Drug Listing

Challenges will include a mix of drugs from the list below.

6-acetylmorphine (6-AM)	Delta-9-THC (serum only)	Meprobamate	Olanzapine
7-aminoclonazepam	Delta-9-THC-COOH	Methadone	Opiate group
7-aminoflunitrazepam	Desipramine	Methadone	Oxazepam
Acetaminophen	Desmethylclomipramine	metabolite (EDDP)	Oxycodone
Alpha-hydroxyalprazolam	Desmethylcyclobenzaprine*	Methamphetamine	Oxymorphone
Alprazolam	Desmethylsertraline	Methylenedioxy-	Paroxetine
Amitriptyline	Dextromethorphan	amphetamine (MDA)	Pentobarbital
Amphetamine	Diazepam	Methylenedioxy-	Phencyclidine
Amphetamine group	Dihydrocodeine	methamphetamine (MDMA)	Phenethylamine
Aripiprazole	Diltiazem	Methylenedioxy-	Pheniramine
Atenolol	Diphenhydramine	pyrovalerone (MDPV)	Phenobarbital
Atropine	Doxepin	Methylphenidate	Phentermine
Barbiturate group	Doxylamine	Metoprolol	Phenylephrine
Benzodiazepine	Duloxetine	Mirtazapine	Phenytoin
group	Ecgonine ethyl ester	Morphine	Pregabalin
Benzoylecgonine	Ecgonine methyl ester	N-desmethyltramadol	Propoxyphene
Brompheniramine	Ephedrine	Naproxen	Propranolol
Buprenorphine	Fentanyl	Nicotine	Pseudoephedrine
Bupropion	Flunitrazepam	Norbuprenorphine	Quetiapine
Butalbital	Fluoxetine	Norchlordiazepoxide	Quinidine
Cannabinoids	Gabapentin	Norclomipramine	Quinine
Carbamazepine	Hydrocodone	Norcodeine	Ranitidine
Carbamazepine-10,	Hydromorphone	Norcyclobenzaprine*	Salicylates
11-epoxide	Hydroxybupropion NEW	Nordiazepam	Sertraline
Carisoprodol	Hydroxyzine	Nordoxepin	Strychnine
Chlordiazepoxide	Ibuprofen	Norfentanyl	Temazepam
Chlorpheniramine	Imipramine	Norfluoxetine	Topiramate
Citalopram	Ketamine	Norketamine	Tramadol
Clomipramine	Lamotrigine	Normeperidine	Trazodone
Clonazepam	Levetiracetam	Noroxycodone	Tricyclic group
Clozapine	Lidocaine	Norpropoxyphene	Trimipramine
Cocaethylene	Lorazepam	Norsertraline	Valproic acid
Cocaine	Lysergic acid diethylamide	Nortrimipramine	Venlafaxine
Codeine	(LSD)	Nortriptyline	Verapamil
Cotinine	Meperidine	Norverapamil	Zolpidem
Cyclobenzaprine	Mephedrone	O-desmethyltramadol	•

<sup>\*</sup>Same compound

#### **CAP/AACC Urine Drug Testing, Screening** UDS, UDS6 Analyte **Program Code** Challenges per Shipment **UDS** Limited 3 Acetaminophen 5 5 3 Amphetamine 5 3 Amphetamine/methamphetamine group 5 3 Barbiturate group Benzodiazepine group 5 3 5 3 Benzoylecgonine/cocaine metabolites 5 3 Buprenorphine and metabolites Delta-9-THC-COOH 5 3 Ethanol 5 3 5 3 Fentanyl 5 Lysergic acid diethylamide (LSD) 3 5 3 Methadone Methadone metabolite (EDDP) 5 3 5 3 Methamphetamine 5 Methaqualone 3 Methylenedioxymethamphetamine (MDMA) 5 3 5 3 Opiate group 5 3 Oxycodone Phencyclidine 5 3 Propoxyphene 5 3 5 3 Tricyclic group

#### **Program Information**

- UDS Five 10.0-mL liquid urine specimens; three shipments per year
- UDS6 Three 10.0-mL liquid urine specimens; two shipments per year
- For laboratories performing drugs of abuse testing on urine specimens using immunoassay or other screening techniques only
- Participants will have access to the AACC quarterly newsletter, Clinical & Forensic Toxicology News



Urine Drug Adulterant/Integrity DAI		
Analyte	Program Code	Challenges per Shipment
	DAI	
Creatinine	•	3
Glutaraldehyde	•	3
Nitrite	I	3
Oxidants	I	3
рН	I	3
Specific gravity	I	3

- Three 25.0-mL urine specimens
- Two shipments per year

CAP/AACC Forensic Urine Drug Testing, Confirmatory UDC		
Analyte	Program Code	Challenges per Shipment
	UDC	
6-acetylmorphine (6-AM)		10
Alpha-hydroxyalprazolam		10
Amphetamine	•	10
Benzoylecgonine		10
Buprenorphine		10
Butalbital		10
Codeine	•	10
Delta-9-THC-COOH	•	10
Hydrocodone		10
Hydromorphone		10
Lorazepam		10
Methadone		10
Methadone metabolite (EDDP)		10
Methamphetamine		10
Methaqualone		10
Methylenedioxyamphetamine (MDA)		10
Methylenedioxyethylamphetamine (MDEA)		10
Methylenedioxymethamphetamine (MDMA)		10
Morphine		10
Norbuprenorphine		10
Nordiazepam		10
Norpropoxyphene		10
Oxazepam		10
Oxycodone		10
Oxymorphone		10
Phencyclidine		10
Phenobarbital		10
Propoxyphene		10
Secobarbital		10
Temazepam		10
Adulterant/Integrity Indicator		
Creatinine		10
рН		10
Specific gravity	ı	10

- Ten 50.0-mL liquid urine specimens
- For laboratories that perform both screening and confirmatory testing, including quantitation, for drugs of abuse in urine specimens; laboratories are asked to report creatinine, pH, and specific gravity for each specimen to ensure specimen adulteration has not occurred
- Participants will have access to the AACC quarterly newsletter, Clinical & Forensic Toxicology News
- Four shipments per year



Oral Fluid for Drugs of Abuse OFD		
Analyte	Program Code	Challenges per Shipment
	OFD	
Amphetamine Group	I	5
Amphetamine	I	5
Methamphetamine		5
Methylenedioxyamphetamine (MDA)	I	5
Methylenedioxyethylamphetamine (MDEA)		5
Methylenedioxymethamphetamine (MDMA)	I	5
Benzodiazepine Group	I	5
Alprazolam	I	5
Diazepam		5
Nordiazepam	I	5
Oxazepam	I	5
Temazepam	I	5
Buprenorphine	I	5
Buprenorphine and norbuprenorphine	I	5
Cocaine and/or metabolite	I	5
Benzoylecgonine		5
Cocaine	I	5
Cannabinoids		5
Delta-9-THC		5
Delta-9-THC-COOH		5
Methadone	I	5
Opiate Group		5
6-acetylmorphine (6-AM)	I	5
Codeine	I	5
Hydrocodone	I	5
Hydromorphone		5
Morphine		5
Oxycodone		5
Oxymorphone	I	5
Phencyclidine (PCP)	I	5

- Five 2.0-mL oral fluid specimens
- For laboratories performing drug screening, confirmation, and quantitation
- Four shipments per year

Vitreous Fluid, Postmortem VF		
Analyte	Program Code	Challenges per Shipment
	VF	
Acetone	I	3
Chloride	I	3
Creatinine	I	3
Ethanol	ı	3
Glucose	ı	3
Potassium	I	3
Sodium	I	3
Vitreous urea nitrogen	I	3

- Three 5.0-mL synthetic vitreous fluid specimens
- For forensic and other toxicology laboratories that perform quantitative analysis of vitreous fluid
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

Serum Drug Screening SDS			
Analyte	Program Code	Challenges per Shipment	
	SDS		
Acetaminophen, quantitative	I	3	
Acetone, semiquantitative and qualitative	I	3	
Barbiturate group, qualitative	I	3	
Benzodiazepine group, qualitative	I	3	
Salicylate, quantitative	I	3	
Total tricyclic antidepressants, qualitative	ı	3	

#### **Program Information**

- Three 2.0-mL serum specimens
- · For laboratories that perform serum drug screening using immunoassay or other screening techniques
- · Two shipments per year

CAP/AACC Alcohol/Volatiles AL1,* AL2			
Analyte	Program Code		Challenges per Shipment
	AL1* Whole Blood	AL2 Serum	
Acetone, quantitative	I		5
Ethanol, quantitative	I		5
Ethylene glycol, qualitative and quantitative		I	5
Isopropanol, quantitative	I		5
Methanol, quantitative	I		5

<sup>\*</sup>The American Society of Crime Laboratory Directors/Laboratory Accreditation Board Proficiency Review Committee (ASCLD/LAB PRC) has approved Survey AL1.

- AL1 Five 5.0-mL liquid whole blood specimens; conventional reporting
- AL2 Five 2.0-mL liquid serum specimens; conventional and International System of Units (SI) reporting offered
- · Three shipments per year



Ethanol Biomarkers ETB		
Analyte	Challenges per Shipment	
	ETB	
Ethyl glucuronide (EtG), qualitative and quantitative	ı	3
Ethyl sulfate (EtS), quantitative	ı	3

- Three 10.0-mL synthetic urine specimens
- · Two shipments per year

CAP/AACC Blood Lead BL			
Analyte	Program Code	Challenges per Shipment	
	BL		
Lead	I	5	

This Survey meets the Occupational Safety and Health Administration (OSHA) requirements for proficiency testing [OSHA lead standards-29 CFR 1910.1025(j)(2)(iii)].

#### **Program Information**

- Five 6.0-mL liquid nonhuman whole blood specimens
- · Conventional and International System of Units (SI) reporting offered
- · Three shipments per year



Cadmium CD			
Analyte Program Code Challenges per Shipi			
	CD		
Beta-2-microglobulin, urine	I	3	
Cadmium, urine	I	3	
Cadmium, whole blood	ı	3	
Creatinine, urine	I	3	

This Survey meets the Occupational Safety and Health Administration (OSHA) guidelines for proficiency testing (OSHA standard-29 CFR 1910.1027AppF).

#### **Program Information**

- Three 6.0-mL whole blood specimens and three 13.0-mL urine specimens
- · Conventional and International System of Units (SI) reporting offered
- Six shipments per year

Nicotine and Tobacco Alkaloids NTA			
Analyte Program Code Challenges per Shipme			
	NTA		
Anabasine		3	
Cotinine	I	3	
Nicotine 3			

- Three 25.0-mL urine specimens
- Designed for laboratories that qualitatively and/or quantitatively test for anabasine, cotinine, and/or nicotine in urine
- Two shipments per year

Trace Metals, Urine TMU		
Analyte	Program Code	Challenges per Shipment
	TMU	
Aluminum	I	2
Arsenic	I	2
Chromium	I	2
Cobalt	I	2
Copper	I	2
Lead	I	2
Manganese	I	2
Mercury	ı	2
Selenium	I	2
Thallium	I	2
Zinc	I	2

- Two 25.0-mL urine specimens
- · Conventional and International System of Units (SI) reporting offered
- For laboratories that monitor trace metals at normal and toxic levels
- Two shipments per year

Trace Metals, Whole Blood TMWB			
Analyte	Program Code	Challenges per Shipment	
	TMWB		
Aluminum	I	3	
Arsenic, total	I	3	
Chromium	I	3	
Cobalt	I	3	
Copper	I	3	
Manganese	I	3	
Mercury	I	3	
Selenium	I	3	
Thallium	I	3	
Zinc	I	3	

- Three 6.0-mL whole blood specimens
- Conventional and International System of Units (SI) reporting offered
- For laboratories that monitor trace metals at normal and toxic levels
- Two shipments per year

Forensic Toxicology, Criminalistics FTC		
Analyte	Program Code	Challenges per Shipment
	FTC	
See drug listing below	I	4

The American Society of Crime Laboratory Directors/Laboratory Accreditation Board Proficiency Review Committee (ASCLD/LAB PRC) has approved Survey FTC.

#### **Program Information**

- Three 20.0-mL whole blood specimens and one 20.0-mL synthetic urine specimen
- For crime and hospital laboratories that have forensic toxicology divisions performing qualitative and quantitative analysis of drugs in whole blood specimens along with a urine qualitative challenge
- Two shipments per year

### **FTC Program Drug Listing**

Challenges will include a mix of drugs from the list below.

6-acetylmorphine (6-AM)	Ecgonine ethyl ester	Norfluoxetine
7-aminoclonazepam	Ecgonine methyl ester	Norketamine
7-aminoflunitrazepam	Ephedrine	Norpropoxyphene
Acetaminophen	Fentanyl*	Norsertraline
Alpha-hydroxyalprazolam	Fluoxetine	Nortriptyline
Alprazolam	Flurazepam*	Oxazepam
Amitriptyline	Gamma-hydroxybutyrate (GHB)	Oxycodone
Amphetamine	Hydrocodone	Oxymorphone
Benzoylecgonine	Hydromorphone	Paroxetine
Brompheniramine	Imipramine	Phencyclidine
Butalbital	Ketamine	Phenethylamine
Carisoprodol	Lorazepam	Phenobarbital
Chlorpheniramine	Lysergic acid diethylamide (LSD)	Phentermine
Clonazepam	Meperidine*	Phenytoin
Cocaethylene	Meprobamate	Propoxyphene
Cocaine	Methadone	Pseudoephedrine
Codeine	Methadone metabolite (EDDP)	Salicylate
Cyclobenzaprine*	Methamphetamine	Secobarbital
Delta-9-THC	Methylenedioxyamphetamine (MDA)	Sertraline
Delta-9-THC-COOH	Methylenedioxymethamphetamine	Temazepam
Desipramine	(MDMA)	Tramadol*
Desmethylcyclobenzaprine	Morphine*	Trazodone
Dextromethorphan	N-desmethyltramadol	Zolpidem
Diazepam	Nordiazepam	
Diphenhydramine	Nordoxepin	
Doxepin	Norfentanyl	*and/or metabolite(s)

Synthetic Cannabinoid/Designer Drugs SCDD		
Analyte	Program Code	Challenges per Shipment
	SCDD	
Synthetic cannabinoid/designer drugs		3

#### **Additional Information**

Synthetic cannabinoids and designer drug stimulants are widespread and constantly changing in respect to the available chemical moieties. In order to stay contemporary, the CAP has decided to modify the compounds in this program in accordance with the appearance and prevalence of new compounds.

#### **Program Information**

- · Three 20.0-mL urine specimens
- · For laboratories that perform screening and confirmatory testing for the compounds found in this program
- · Two shipments per year

### **SCDD Program Drug Listing**

Challenges will include a mix of drugs.

For the most current list of drugs, please go to cap.org. Click on Catalog and Shipping Information. The list is located under the PT Order Supplements header.

Novel Opioids and Benzodiazepines		NOB NEW
Analyte	Program Code	Challenges per Shipment
	NOB	
Novel opioids and benzodiazepines	I	3

NOB Program Drug Listing. Challenges will include a mix of drugs. For the most current list of drugs, please go to cap.org. Click on Catalog and Shipping Information. The list is located under the PT Order Supplements header.

#### **Program Information**

- Three 15.0-mL whole blood specimens
- · For forensic and toxicology laboratories that perform qualitative and/ or quantitative analysis of synthetic opioids and benzodiazepines
- · Two shipments per year

Blood Canna	binoids THCB	NEW
Analyte	Program Code	Challenges per Shipment
	тнсв	
Delta-9-THC		3
Delta-9-THC-COOH		3
11-hydroxy-THC	I	3

#### **Program Information**

MEW

- Three 10.0-mL whole blood specimens
- · For toxicology laboratories that perform qualitative and/or quantitative analysis of cannabinoids in blood
- Two shipments per year

Antifungal Drugs Monitoring AFD		
Analyte	Program Code	Challenges per Shipment
	AFD	
Fluconazole	I	3
Itraconazole	I	3
Posaconazole	I	3
Voriconazole	I	3

- Three 5.0-mL serum specimens
- For laboratories performing quantitative analysis of antifungal agents
- Two shipments per year

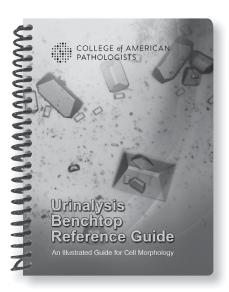
## **Urinalysis Benchtop Reference Guide (UABRG)**

- Thirty-four different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- · Eight tabbed sections for easy reference
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  - Urinary Casts
  - Urinary Crystals
    - At Acid pH
    - At Neutral or Acid pH
    - At Neutral or Alkaline pH
  - o Organisms
  - o Miscellaneous/Exogenous
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Item number: UABRG Spiral bound; 38 pages;

34 images; 2014

Drug Monitoring for Pain Management DMPM		
Analyte	Program Code	Challenges per Shipment
	DMPM	
See drug listing below	I	3

- Three 40.0-mL urine specimens
- For laboratories offering qualitative, confirmatory, and/or quantitative urine drug analysis for pain management
- Includes clinical cases and questions along with detailed descriptions of how to interpret test results
- Two shipments per year

## **DMPM Program Drug Listing**

Challenges will include a mix of drugs from the list below.

Amphetamine group	Fentanyl	Nordiazepam
6-acetylmorphine (6-AM)	Fentanyl and/or metabolites	Norfentanyl
7-aminoclonazepam	Gabapentin	Normeperidine
Alpha-hydroxyalprazolam	Hydrocodone	Noroxycodone
Alprazolam	Hydromorphone	Noroxymorphone
Amphetamine	I-Amphetamine NEW	Norpropoxyphene
Barbiturate group	I-Methamphetamine NEW	O-desmethyltramadol
Benzodiazepine group	Lorazepam	Opiate group
Benzoylecgonine	Lorazepam glucuronide	Oxazepam
Buprenorphine	Meperidine	Oxycodone
Buprenorphine and/or metabolites	Meperidine and/or metabolites	Oxymorphone
Butalbital	Meprobamate	Phenobarbital NEW
Cannabinoids	Methadone	Pregabalin
Carisoprodol	Methadone metabolite (EDDP)	Propoxyphene
Carisoprodol and/or metabolites	Methamphetamine	Propoxyphene and/or metabolites
Clonazepam	Methylenedioxyamphetamine (MDA)	Tapentadol NEW
Cocaine	Methylenedioxymethamphetamine	Tapentadol-O-sulfate NEW
Cocaine and/or metabolites	(MDMA)	Temazepam
Codeine	Morphine	Tramadol
Delta-9-THC-COOH	N-desmethyltramadol	Tramadol and/or metabolites

Norbuprenorphine

Diazepam

Drug-Facilitated Crime DFC		
Analyte	Program Code	Challenges per Shipment
	DFC	
See drug listing below		3

- Three 25.0-mL urine specimens
- For laboratories performing qualitative urine drug analysis with confirmation testing
- Designed for laboratories performing testing for drugs associated with drugfacilitated crimes, which target drugs at much lower concentrations than in other toxicology Surveys
- Two shipments per year

## **DFC Program Drug Listing**

Challenges will include a mix of drugs from the list below.

/ hydroughricaelem	Contonul	Norsertraline
4-hydroxytriazolam	Fentanyl	
7-aminoclonazepam	Fluoxetine	Nortriptyline
7-aminoflunitazepam	Gamma hydroxybutyrate (GHB)	Oxazepam
Alpha-hydroxyalprazolam	Hydrocodone	Oxycodone
Amitriptyline	Hydromorphone	Oxymorphone
Amobarbital	Imipramine	Paroxetine
Amphetamine	Ketamine	Pentobarbital
Benzoylecgonine	Lorazepam	Phencyclidine (PCP)
Brompheniramine	Meperidine	Phenobarbital
Butalbital	Meprobamate	Phenytoin
Carisoprodol	Methadone	Propoxyphene
Chlorpheniramine	Methadone metabolite (EDDP)	Scopolamine
Citalopram/escitalopram	Methamphetamine	Secobarbital
Clonidine	Methylenedioxyamphetamine (MDA)	Sertraline
Codeine	Methylenedioxymethamphetamine	Temazepam
Cyclobenzaprine	(MDMA)	Tetrahydrozoline
Delta-9-THC-COOH	Morphine	Tramadol
Desipramine	Nordoxepin	Valproic Acid
Dextromethorphan	Norfluoxetine	Zaleplon
Diphenhydramine	Norketamine	Ziprasidone
Doxepin	Normeperidine	Zolpidem
Doxylamine	Norpropoxyphene	Zopiclone/Eszopiclone

# Improve the reliability of your patient results with CAP Survey Validated Materials

Use the same material that is sent in the Surveys program. Each laboratory receives a Survey Participant Summary, which includes readily available results.

#### Toxicology, Validated Material

Validated Material	Program Code	Corresponding Survey	Page
Urine Drug Testing, Screen	UDSM	UDS	98

#### **Program Information**

- Five 10.0-mL liquid urine specimens
- Three shipments per year

# Find a practical guide to toxicology laboratory operations with this resource

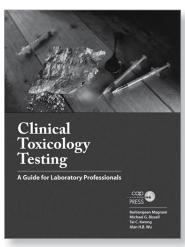
# Clinical Toxicology Testing A Guide for Laboratory Professionals (PUB220)

Complex issues face the laboratory director or pathologist who offers toxicology services. This thorough reference book will guide both experienced physicians and those in training through the pharmacological principles, testing menus, and methodologies for toxicology testing.

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**Item number:** PUB220 Softcover; 304 pages; 2012

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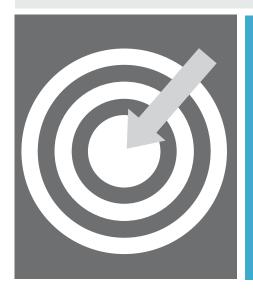
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# 



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- Specimens in the accuracy-based programs are from human donors and are matrix-effect free.
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- New Accuracy-Based Glucose, Insulin, and C-Peptide (ABGIC) program reflects current testing trends for diabetics with kidney failure.
- Results provide feedback to manufacturers regarding their calibrations.

# **Accuracy-Based Programs**

Accuracy-Based ProgramsValidated Materials	
New Programs NEW	
Accuracy-Based Glucose, Insulin, and C-Peptide (ABGIC)	115

# **Accuracy-Based Programs**

# **Accuracy-Based Programs**

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Accuracy-Based Lipids ABL		
Analyte	Program Code	Challenges per Shipment
	ABL	
Apolipoprotein A1*		3
Apolipoprotein B*		3
Cholesterol*		3
HDL cholesterol*		3
Non-HDL cholesterol		3
LDL cholesterol		3
Lipoprotein (a)		3
Triglycerides*		3

#### **Program Information**

- Three 1.0-mL human serum specimens
- · Two shipments per year

<sup>\*</sup>This analyte will be evaluated against the reference method.

Accuracy-Based Vitamin D ABVD			
Analyte	Program Code Challenges per Shipment		
	ABVD		
25-OH vitamin D (D2 and D3)		3	

#### **Additional Information**

- The Centers for Disease Control and Prevention (CDC) will establish reference targets using isotope-dilution LC-MS/MS method.
- Specimens are collected by a modified application of Clinical Laboratory and Standards Institute Guideline CLSI C37-A, Preparation and Validation of Commutable Frozen Human Serum Pools as Secondary Reference Materials for Cholesterol Measurement Procedures; Approved Guideline.

#### **Program Information**

- · Three 1.0-mL liquid human serum specimens
- Serum is from multi-donor endogenous pools
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

## Have you created or updated your CAP Profile?

Each laboratory staff member should have their own profile. Your profile is transferrable when you leave your current position. Use it to maintain information about yourself, including:

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- Certifications
- Contact preferences
- Inspector-related information
- Personal contact information
- Specialties and skills
- Addresses

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Accuracy-Based Testosterone, Estradiol ABS		
Analyte	Program Code	Challenges per Shipment
	ABS	
Albumin		3
Calcium		3
Cortisol		3
Estradiol		3
Follicle-stimulating hormone (FSH)		3
Luteinizing hormone (LH)		3
Sex hormone-binding globulin (SHBG)	•	3
Testosterone		3
Thyroid-stimulating hormone (TSH)		3

- Three 1.0-mL human serum specimens
- Two shipments per year

#### **Additional Information**

• The Centers for Disease Control and Prevention (CDC) will set target values for testosterone and estradiol using the established reference methods.

Accuracy-Based Urine ABU		
Analyte	Program Code	Challenges per Shipment
	ABU	
Calcium		3
Creatinine		3
Protein, total		3
Urine albumin, quantitative		3
Urine albumin: creatinine ratio		3

Target values for albumin are obtained by LC-MS/MS after trypsin digestion, performed by the Renal Testing Laboratory, Mayo Clinic, Rochester, MN, using calibration materials prepared from human serum albumin (>99% pure).

Other analytes will be compared by peer group for harmonization purposes.

- Three 5.0-mL human urine specimens
- · Two shipments per year

Creatinine Accuracy Calibration Verification/Linearity LN24		
Analyte	Program Code	
	LN24	LN24 Target Range
Creatinine		0.6-4.0 mg/dL
Estimated glomerular filtration rate (eGFR)	I	

LN Express service is available.

#### **Additional Information**

The College of American Pathologists (CAP) and the National Kidney Disease Education Program (NKDEP) have an initiative to harmonize clinically reported creatinine values. This initiative is analogous to what the federal health agencies and the clinical laboratory community did to improve the accuracy of cholesterol and glycohemoglobin testing.

#### **Harmonized Thyroid ABTH** Analyte **Program Code** Challenges per Shipment ABTH T3, free (triiodothyronine, free) ı 3 3 T3, total (triiodothyronine, total) ı 3 T4, free (thyroxine, free) T4, total (thyroxine, total) 3 Thyroid-stimulating hormone (TSH)

#### Additional Information

- Analytes will be evaluated using harmonization.
- Specimens are collected by a modified application of Clinical Laboratory and Standards Institute Guideline CLSI C37-A, Preparation and Validation of Commutable Frozen Human Serum Pools as Secondary Reference Materials for Cholesterol Measurement Procedures; Approved Guideline.

Hemoglobin A <sub>1c</sub> Accuracy Calibration Verification/Linearity LN15		
Analyte Program Code		
	LN15	LN15 Target Range
Hemoglobin A <sub>1c</sub>		5%-12%

CAP-assigned target values derived from Hemoglobin A<sub>1c</sub> measurements assayed by National Glycohemoglobin Standardization Program (NGSP) secondary reference laboratories. LN Express service is available.

#### **Program Information**

- · Six 1.0-mL human serum specimens
- · Two shipments per year

#### **Program Information**

- · Three 1.0-mL frozen human specimens
- · Two shipments per year

- Six 0.8-mL liquid human whole blood specimens
- · Two shipments per year

Hemoglobin A <sub>1c</sub> GH2, GH5		
Analyte	Challenges p	er Shipment
Program Code		
	GH2	GH5
Hemoglobin A <sub>1c</sub>	3	5

#### Additional Information

- These Surveys will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- The College of American Pathologists Accreditation Program requires all accredited laboratories performing non-waived testing for Hemoglobin A<sub>1c</sub> to complete 15 PT challenges per year.
- For second instrument reporting options, see the Quality Cross Check program, GHQ, on page 63.

#### **Program Information**

- GH2 Three 0.8-mL liquid human whole blood specimens; two shipments per year
- GH5 Five 0.8-mL liquid human whole blood specimens; three shipments per year

Accuracy-Based Gl and C-Peptid	NEW	
Analyte	nalyte Program Code	
	ABGIC	
C-peptide	I	3
Glucose		3
Insulin		3

#### Program Information

- Three 1.0-mL serum specimens
- · Two shipments per year

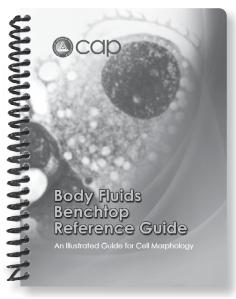
## **Body Fluids Benchtop Reference Guide (BFBRG)**

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**Item number:** BFBRG Spiral bound; 42 pages;

36 images; 2013

## **Validated Materials**

#### Improve the reliability of your patient results with CAP Survey Validated Materials

Use the same material that is sent in the Surveys program to:

- · Identify and troubleshoot instrument/method problems
- · Correlate results with other laboratories or instruments
- · Document correction of problems identified in Surveys
- Utilize material with confirmed results as an alternative external quality control
- · Identify potential proficiency testing failures

Each laboratory receives a Survey Participant Summary, which includes readily available results.

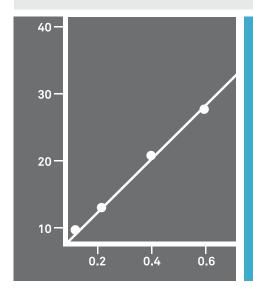
Chemistry, Validated Materials				
Validated Material Code Corresponding Survey				
Chemistry and Therapeutic Drugs	CZVM	CZ	56-58	
Cerebrospinal Fluid	MVM	M	74	
Urine Chemistry—General	UVM	U	68	

Coagulation—Limited, Validated Material				
Validated Material Code Corresponding Survey Pa				
Coagulation—Limited	CGM	CGL	160	

Endocrinology, Validated Materials				
Validated Material Code Corresponding Survey Page				
Ligand—General KVM K			82	
Ligand—Special YVM Y 84				

Toxicology, Validated Material				
Validated Material	Validated Material Code	Corresponding Survey	Page	
Urine Drug Testing, Screen UDSM UDS 98				

# 11 Instrumentation Validation Tools



The CAP is your trusted calibration verification and linearity partner, providing you with the most comprehensive menu of programs.

- Large peer groups—Maximize confidence in your calibration verification results.
- Customized report package—Let our team of biostatisticians perform the statistical analysis of your results so you do not have to.
- Rapid result turnaround—View your linearity evaluation for most CVL programs within two business days.

### Instrumentation Validation Tools

nstrumentation Quality Management Programsnstrumentation Quality Management Programs	
New Programs NEW	
C-Peptide/Insulin Calibration Verification/Linearity (LN46)	130
Program Changes	
Hematology CVL (LN9) New target ranges	
Vitamin D CVL (LN40) New target range	129

# Calibration Verification/Linearity

## The CAP CVL program

The CAP is your trusted calibration verification and linearity partner. Our CVL program will help you meet both CLIA regulations and CAP Laboratory Accreditation Program requirements for calibration and analytical measurement range verification under 42 CFR493.1255(bX3). Do not let instrument problems impact your patient results; use the calibration verification and linearity studies to ensure your instrument and method are performing to their optimal levels.

With your enrollment in the CAP CVL program you will receive:

#### · Testing Kit

- Kit instructions—Contain important information to help you complete testing and accurately report your results
- Result form
- Specimens—The majority of CAP CVL programs offer human-based materials to closely mimic your patient results

#### Customized Report Package

- Executive Summary—A quick overview of both your calibration verification and linearity results for all reported analytes
- o Calibration Verification Evaluation
- Linearity Evaluation
  - Rapid result turnaround is complimentary for most CVL programs with LN Express™. View your linearity evaluations within two business days by logging into e-LAB Solutions Suite.
- Linearity Troubleshooting Report
- Participant Summary—A summary of laboratory performance that includes peer group statistics and enhanced diagnostic information for early insight into potential problems

#### Additional Tools

- Calibration Verification/Linearity Program User's Guide—Get assistance in interpreting your evaluations and reports as well as helpful troubleshooting information with suggested actions. Also available online by logging in to e-LAB Solutions Suite
- Calibration Verification Troubleshooting Guide—The guide provides suggested actions if you receive a
  calibration verification result of Different, or if your evaluation result is Verified over a range that does not
  include all of your reported results
- Calibration Verification/Linearity Surveys Investigation Checklist for Problematic Results—Interpretative checklists are included to help with troubleshooting and documentation

CVL Program	Page No.	Corresponding Proficiency Testing Survey	Page No
LN2 - Chemistry, Lipid, Enzyme CVL	120	C1, C3/C3X, C4,	
LN2BV - Chemistry, Lipid, Enzyme all Beckman (except AU), Vitros CVL	120	CZ/CZX/CZ2X	56-58
LN3 - Therapeutic Drug Monitoring CVL	121	CZ/CZX/CZ2X/Z	56-58
LN5 - Ligand CVL	121-122		
LN5S - Ligand all Siemens ADVIA (Centaur, CP, and XP) CVL	121-122	K/KK	82
LN6 - Urine Chemistry CVL	122	U	68
LN7 - Immunology CVL	123	IG/IGX	206
LN8 - Reproductive Endocrinology CVL	123	Y/YY	84
LN9 - Hematology CVL	123	FH series, HE series	136
LN11 - Serum Ethanol CVL	124	AL2	101
LN12 - C-Reactive Protein CVL	124	CDD	200
LN12E - C-Reactive Protein, Extended CVL	124	CRP	206
LN13, LN13C - Blood Gas/Critical Care CVL	124-125	AQ, AQ2, AQ3, AQ4	92
LN15 - Hemoglobin A <sub>1c</sub> Accuracy CVL	125	GH2, GH5	63
LN16 - Homocysteine CVL	125	HMS	64
LN17 - Whole Blood Glucose CVL	125		
LN18, LN19 - Reticulocyte CVL	126	RT, RT2, RT3, RT4	142
LN20 - Urine Albumin CVL	126	U	68
LN21 - High-Sensitivity C-Reactive Protein CVL	126	HSCRP	64
LN22 - Flow Cytometry CVL	126	FL	213
LN23 - Prostate-Specific Antigen CVL	127	K/KK	82
LN24 - Creatinine Accuracy CVL	127	C1, C3/C3X, C4, CZ/CZX/CZ2X	56-58
LN25, LN27 - Troponin I and T CVL	127	CRT, CRTI, TNT	62
LN30 - B-Type Natriuretic Peptides CVL	127	BNP	61
LN31 - Immunosuppressive Drugs CVL	128	CS	59
LN32 - Ammonia CVL	128	C1, C3/C3X, CZ/CZX/CZ2X	56-58
LN33 - Serum Myoglobin CVL	128	CRT, CRTI	62
LN34 - Tumor Markers CVL	128	TM/TMX	89
LN35 - Thrombophilia CVL	129	CGS2	162
LN36 - Heparin CVL	129	CGS4	162
LN37 - von Willebrand Factor Antigen CVL	129	CGS3	162
LN38 - CMV Viral Load CVL	129	VLS, VLS2	199
LN39 - HIV Viral Load CVL	129	HIVG, HV2	199
LN40 - Vitamin D CVL	129	VITD	84
LN41 - Procalcitonin CVL	130	PCT	77
LN42 - D-Dimer CVL	130	CGL, CGDF	160
LN43 - Lamellar Body Count CVL	130	LBC	151
LN44 - Fibrinogen CVL	130	CGL	160
LN45 - HCV Viral Load CVL	129	HCV2	198
LN46 - C-Peptide/Insulin CVL	130	ING	86

 $All \ CVL \ Surveys \ provide \ individual \ evaluation \ reports \ by \ analytes, an \ Executive \ Summary, and \ graphical \ plots \ for \ linearity \ and \ calibration \ verification.$ 

11

Chemistry, Lipid, Enzyme Calibration Verification/Linearity LN2, LN2BV					
Analyte	Program Code	LN2	LN2 LN2BV		Units
	LN2, LN2BV	(All Instruments)	All Beckman (except AU)	Vitros	
Albumin	•		1.5-9.0		g/dL
Calcium			4.0-18.0		mg/dL
Chloride			60-180		mmol/L
CO <sub>2</sub>			7–40		mmol/L
Creatinine			0.3-32.0		mg/dL
Glucose			20-780		mg/dL
Iron			10-950		µg/dL
Magnesium			0.3-10.0		mg/dL
Osmolality			200-600		m0sm/kg H <sub>2</sub> 0
Phosphorus			0.5-20.0		mg/dL
Potassium			1.5-13.0		mmol/L
Protein			1.5-10.0		g/dL
Sodium			90-215		mmol/L
Urea nitrogen/Urea			3–190		mg/dL
Uric acid	•		1–25		mg/dL
Alkaline phosphatase		25-1,800	25-1,000	25-1,100	U/L
ALT (SGPT)		10-900	10-650	30-700	U/L
Amylase		30-1,800	30-900	30-800	U/L
AST (SGOT)		10-900	10-500	10-700	U/L
Creatine kinase	•	25-2,000	25-1,200	25-700	U/L
CK-2 (MB) Mass		1-250	1-300	1–200	ng/mL
Gamma glutamyl transferase		10-1,400	10-900	10-1,100	U/L
Lactate dehydrogenase		50-1,800	50-700	185-3,000	U/L
Lipase	•	20-1,400	20-190	150-2,500	U/L
Bilirubin, direct			0.1–10.0		mg/dL
Bilirubin, total	•		0.2-25.0		mg/dL
Cholesterol	•	35-625 mg/dL			mg/dL
HDL		7–120 mg/dL			mg/dL
Triglycerides			20-700		mg/dL

# **Program Information**

- Seven 5.0-mL liquid serum specimens for basic chemistry, six 3.0-mL liquid serum specimens for direct and total bilirubin, seven 2.0-mL liquid serum specimens for lipids, and seven 5.0-mL liquid serum specimens for enzymes
- LN2 Appropriate for most major instruments
- LN2BV Appropriate for Beckman (except AU) and Vitros instruments only
- Two shipments per year

LN Express service is available.

Therapeutic Drug Monitoring Calibration Verification/Linearity LN3		
Analyte	Program Code	
	LN3	LN3 Target Ranges
Acetaminophen	1	20-450 μg/mL
Amikacin	I	2-45 μg/mL
Carbamazepine	I	2–18 μg/mL
Digoxin	I	0.5-4.4 ng/mL
Gentamicin	I	1–11 μg/mL
Lidocaine	I	1–10 μg/mL
Lithium	I	0.3-4.0 mmol/L
N-acetylprocainamide (NAPA)	I	2-25 μg/mL
Phenobarbital	I	8–70 μg/mL
Phenytoin	I	5–35 μg/mL
Primidone	I	1–22 μg/mL
Procainamide	ı	2–18 μg/mL
Quinidine	ı	0.4-7.0 μg/mL
Salicylate	ı	7-90 mg/dL
Theophylline	ı	5–35 μg/mL
Tobramycin	I	1–12 μg/mL
Valproic acid	I	15–140 μg/mL
Vancomycin		7–90 μg/mL

#### LN Express service is available.

#### Ligand Calibration Verification/Linearity LN5, LN5S Program Code Analyte **Target Ranges** LN5, LN5S\* **LN5 Target Ranges LN5S Target Ranges AFP** ı 1.0-900.0 ng/mL CEA 0.5-750.0 ng/mL ı 0.6-90.0 ng/mL Cortisol $1-65 \mu g/dL$ ı Ferritin 2-1,100 ng/mL Folate ı 1.3-20 ng/mL Human chorionic ı 5-14,000 mIU/mL gonadotropin (hCG) T3, total (triidothyronine) $0.5 - 7.0 \, \text{ng/mL}$ T4, total (thyroxine) $1-80 \,\mu g/dL$ Continued on the next page

#### **Program Information**

- Six 4.0-mL liquid serum specimens
- A seventh 4.0-mL liquid serum specimen for acetaminophen and vancomycin
- Two shipments per year

#### **Program Information**

- LN5 Eight 4.0-mL liquid serum specimens; appropriate for most major instruments except Siemens ADVIA Centaur, XP, and CP users
- LN5S Thirteen 4.0-mL liquid serum specimens; appropriate for Siemens ADVIA Centaur, XP, and CP users
- Two shipments per year

Ligand Calibration Verification/Linearity LN5, LN5S continued			
Analyte	Program Code Target Ranges		
	LN5, LN5S*	LN5 Target Ranges	LN5S Target Ranges
Thyroid-stimulating hormone (TSH)		0.01–100 μIU/mL	
Vitamin B <sub>12</sub>	■ 100-2,200 pg/mL		

<sup>\*</sup>The LN5S CVL will allow Siemens ADVIA Centaur users to report other major instruments for analytes other than CEA, if needed.

- LN5 Eight 4.0-mL liquid serum specimens; appropriate for most major instruments except Siemens ADVIA Centaur, XP, and CP users
- LN5S Thirteen 4.0-mL liquid serum specimens; appropriate for Siemens ADVIA Centaur, XP, and CP users
- Two shipments per year

Urine Chemistry Calibration Verification/Linearity LN6				
Analyte	Program Code			
	LN6	LN6 Target Ranges		
Amylase	I	40 –1,500 U/L		
Calcium	ı	5–30 mg/dL		
Chloride	1	20-330 mmol/L		
Creatinine	I	20-460 mg/dL		
Glucose	I	25-640 mg/dL		
Osmolality	ı	30 –1,800 m0sm/kg H <sub>2</sub> 0		
Phosphorus	ı	15-200 mg/dL		
Potassium	I	7–225 mmol/L		
Protein, total	1	10-235 mg/dL		
Sodium	I	20-340 mmol/L		
Urea nitrogen/Urea	I	20-2,000 mg/dL		
Uric acid	1	6-150 mg/dL		

#### LN Express service is available.

#### **Program Information**

- Eighteen 4.0-mL liquid simulated urine specimens
- · Two shipments per year

LN Express service is available.

**Program Information** • Six 2.0-mL liquid serum

• Two shipments per year

specimens

Immunology Calibration Verification/Linearity LN7			
Analyte	Program Code		
	LN7	LN7 Target Ranges	
Alpha-1-antitrypsin	I	25-616 mg/dL	
Complement C3	I	21–420 mg/dL	
Complement C4	I	5-100 mg/dL	
IgA	I	32-650 mg/dL	
IgG	I	150-3,000 mg/dL	
IgM	I	25-450 mg/dL	
Transferrin	•	38-950 mg/dL	

#### LN Express service is available.

#### **Program Information**

- Seven 4.0-mL liquid serum specimens
- Two shipments per year

Reproductive Endocrinology Calibration Verification/Linearity LN8			
Analyte	Program Code		
	LN8	LN8 Target Ranges	
Estradiol	I	25-4,500 pg/mL	
Follicle-stimulating hormone (FSH)	I	3-190 mIU/mL	
Human chorionic gonadotropin (hCG)	I	5-8,000 mIU/mL	
Luteinizing hormone (LH)	I	2-190 mIU/mL	
Progesterone	I	1–50 ng/mL	
Prolactin	ı	3-315 ng/mL	

LN Express service is available.

Testosterone

Hematology Calibration Verification/Linearity LN9			
Analyte	Program Code		
	LN9	LN9 Target Ranges	
Hemoglobin	I	1.0-22.5 g/dL	
Platelet count	ı	10-4,500 x 10 <sup>9</sup> /L	
RBC count	I	0.3-7.5 x 10 <sup>12</sup> /L	
WBC count	ı	0.5-350.0 x 10 <sup>9</sup> /L	

LN Express service is available.

#### **Program Information**

- Twenty 3.0-mL liquid specimens
- Two shipments per year

Please note that the ranges listed are an estimate of the values recovered. Some instruments may recover lower or higher values than the ranges listed.

20-1,500 ng/dL

Serum Ethanol Calibration Verification/Linearity LN11					
Analyte Program Code					
LN11 LN11 Target Range					
Serum ethanol	Serum ethanol ■ 15-550 mg/dL				

LN Express service is available.

#### **Program Information**

- · Seven 3.0-mL liquid serum specimens
- · Two shipments per year

## C-Reactive Protein; C-Reactive Protein, Extended Calibration Verification/Linearity LN12, LN12E

Analyte	Program Code		Program Code	
	LN12	LN12 Target Range	LN12E	LN12E Target Range
C-reactive protein		5-110 mg/L	ı	6-320 mg/L

LN Express service is available.

Not appropriate for reporting high-sensitivity C-reactive protein (hsCRP). For reporting hsCRP, use LN21 on page 126.

#### Program Information

- LN12 Five 1.0-mL liquid serum specimens; appropriate for Beckman Immage, Siemens Dimension, and Vitros instruments
- LN12E Six 1.0-mL liquid serum specimens; appropriate for Abbott Architect, Beckman (except Immage), Roche, and Siemens (except Dimension) instruments
- · Select program based on appropriate target range for assay used
- Two shipments per year

## **Blood Gas/Critical Care** Calibration Verification/Linearity LN13, LN13C

Analyte	Program Code		Program Code	
	LN13	LN13 Target Ranges	LN13C	LN13C Target Ranges
PCO <sub>2</sub>		12-91 mm Hg		12-91 mm Hg
рН		6.83-7.82		6.83-7.82
PO <sub>2</sub>		18-490 mm Hg		18-490 mm Hg
Calcium, ionized				0.15-3.3 mmol/L
Chloride				62–148 mmol/L
Glucose				10-465 mg/dL
Lactate			•	0.2-18 mmol/L
Continued on the next pa	age			

#### **Program Information**

- Ten 2.5-mL ampules of aqueous specimens
- · Two shipments per year

Blood Gas/Critical Care Calibration Verification/Linearity LN13, LN13C continued				
Analyte	nalyte Program Program Code Code			
	LN13	LN13 Target Ranges	LN13C	LN13C Target Ranges
Potassium				0.5-10.7 mmol/L
Sodium				83–172 mmol/L

- · Ten 2.5-mL ampules of aqueous specimens
- · Two shipments per year

Hemoglobin A <sub>1c</sub> Accuracy Calibration Verification/Linearity LN15				
Analyte Program Code				
LN15 LN15 Target Range				
Hemoglobin A <sub>1c</sub> ■ 5%-12%				

CAP-assigned target values derived from Hemoglobin A<sub>1c</sub> measurements assayed by National Glycohemoglobin Standardization Program (NGSP) secondary reference laboratories.

LN Express service is available.

Program	Information

**Program Information** • Six 0.8-mL liquid human whole blood specimens · Two shipments per year

- Six 1.0-mL liquid serum specimens
- · Two shipments per year

Homocysteine Calibration Verification/Linearity LN16				
Analyte	Program Code			
	LN16	LN16 Target Range		
Homocysteine	I	5–65 μmol/L		

LN Express service is available.

#### **Whole Blood Glucose** Calibration Verification/Linearity LN17 Analyte **Program Code** LN17 LN17 Target Range 50-400 mg/dL Whole blood glucose

LN Express service is available.

#### **Program Information**

- Five 2.0-mL liquid whole blood specimens
- · Report up to 10 different ancillary testing sites or instruments
- Two shipments per year

Reticulocyte Calibration Verification/Linearity LN18, LN19				
Instrument/Method Program Code Program Code				
	LN18	LN18 Target Range	LN19	LN19 Target Range
Coulter Gen∙S™, LH 500, LH 700 series, and UniCel DxH				0.3%-27.0%
All other instruments	I	0.3%-24.0%		

#### LN Express service is available.

Urine albumin

Urine creatinine

#### **Program Information**

- LN18 Five 2.5-mL liquid whole blood specimens with pierceable caps
- LN19 Five 3.0-mL liquid whole blood cell specimens with pierceable caps
- Two shipments per year

Urine Albumin Calibration Verification/Linearity LN20			
Analyte	Program Code		
	LN20	LN20 Target Ranges	

#### **Program Information**

10-350 mg/L

20-500 mg/dL

- Six 5.0-mL urine specimens
- Two shipments per year

High-Sensitivity C-Reactive Protein Calibration Verification/Linearity LN21					
Analyte Program Code					
LN21 LN21 Target Ra					
High-sensitivity C-reactive protein ■ 0.5–18.0 mg/L					

LN Express service is available.

#### **Program Information**

- Six 1.0-mL liquid serum specimens
- For high-sensitivity methods
- Two shipments per year

Flow Cytometry	Calibration	Verification/L	inearity	LN22

Analyte	Program Code	
	LN22	LN22 Target Ranges
CD3+	I	50%-70% positive
CD3+ T lymphocytes absolute	I	350–4,000 cells/μL
CD3+/CD4+	1	1%-40% positive
CD3+/CD4+ T lymphocytes absolute	I	6–2,000 cells/μL
CD3+/CD8+	I	25%-40% positive
CD3+/CD8+ T lymphocytes absolute	I	250–1,600 cells/μL

#### **Program Information**

- Seven 1.0-mL liquid whole blood specimens
- Two shipments per year

Prostate-Specific Antigen Calibration Verification/Linearity LN23					
Analyte Program Code					
LN23 LN23 Target Range					
Prostate-specific antigen					

- Twelve 1.0-mL liquid serum specimens
- · Two shipments per year

Creatinine Accuracy Calibration Verification/Linearity LN24				
Analyte Program Code				
LN24 LN24 Target Rang				
Creatinine		0.6-4.0 mg/dL		
Estimated glomerular filtration rate (eGFR)				

#### LN Express service is available.

#### **Additional Information**

The College of American Pathologists (CAP) and the National Kidney Disease Education Program (NKDEP) have an initiative to harmonize clinically reported creatinine values. This initiative is analogous to what the federal health agencies and the clinical laboratory community did to improve the accuracy of cholesterol and glycohemoglobin testing.

Troponin Calibration Verification/Linearity LN25, LN27					
Analyte	Program Code Program Code				
	LN25	LN25 Target Range	LN27	LN27 Target Range	
Troponin I	•	0.05-60.00 ng/mL			
Troponin T ■ 0.1–27.00 ng/mL					

#### **B-Type Natriuretic Peptides** Calibration Verification/Linearity LN30 Analyte **Program Code** LN30 **LN30 Target Ranges** BNP Ī 30-6,500 pg/mL NT-proBNP 50-50,000 pg/mL

LN Express service is available.

#### **Program Information**

- Six 1.0-mL human serum specimens
- Two shipments per year

#### **Program Information**

- · LN25 Seven 2.0-mL liquid serum specimens
- LN27 Six 2.0-mL liquid serum specimens
- Two shipments per year

#### **Program Information**

- Seven 1.0-mL liquid plasma specimens
- Two shipments per year

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Immunosuppressive Drugs Calibration Verification/Linearity LN31					
Analyte	Program Code				
	LN31	LN31 Target Ranges			
Cyclosporine	I	60-1,200 ng/mL			
Tacrolimus	■ 1.5−30.0 ng/ml				

#### **Program Information**

- Seven 2.0-mL liquid whole blood hemolysate specimens
- Two shipments per year

Ammonia Calibration Verification/Linearity LN32					
Analyte Program Code					
	LN32 LN32 Target Range				
Ammonia	■ 13-900 µmol/L				

LN Express service is available.

#### **Program Information**

- Seven 2.0-mL aqueous specimens
- Two shipments per year

Serum Myoglobin Calibration Verification/Linearity LN33						
Analyte Program Code						
	LN33 LN33 Target Range					
Myoglobin	oglobin ■ 25-900 ng/mL					

LN Express service is available.

#### **Program Information**

- Seven 1.0-mL liquid serum specimens
- Two shipments per year

Tumor Markers Calibration Verification/Linearity LN34			
Analyte	Program Code		
	LN34	LN34 Target Ranges	
CA 125		1–1,000 U/mL	
CA 15-3	I	2-190 U/mL	
CA 19-9		10-900 U/mL	

LN Express service is available.

#### **Program Information**

- Seven 3.0-mL liquid serum specimens
- Two shipments per year

Coagulation Calibration Verification/Linearity LN35, LN36, LN37				
Analyte	Pi	ogram Co	de	
	LN35	LN36	LN37	Target Ranges
Antithrombin activity				10%-130%
Protein C activity				10%-100%
Heparin, low molecular weight				0.1-2.0 U/mL
Heparin, unfractionated				0.1-1.3 U/mL
von Willebrand factor antigen			•	5%-140%

The LN35, LN36, and LN37 CVL programs meet the CAP Accreditation requirements HEM.38009, 38010, and 38011.

# Program Information

- LN35, LN37 Six 1.0-mL frozen plasma specimens per mailing
- LN36 Twelve 1.0-mL frozen plasma specimens per mailing, which include six for low molecular weight heparin and six for unfractionated heparin
- Two shipments per year; ships on dry ice

Viral Load Calibration Verification/Linearity LN38, LN39, LN45				
Analyte	Program Code			
	LN38*	LN39	LN45	Target Ranges
CMV viral load				316-1.0M IU/mL
HIV viral load		•		50-5.0M IU/mL
HCV viral load				50-280M IU/mL

<sup>\*</sup>The biohazard warning applies to Survey LN38.

#### **Program Information**

- LN38 Six 1.5-mL frozen plasma specimens
- Two shipments per year; ships on dry ice



- LN39 Six 2.5-mL plasma specimens
- LN45 Seven 2.5-mL frozen DNA specimens
- Two shipments per year; ships on dry ice (dry ice does not apply to LN39)

Vitamin D Calibration Verification/Linearity LN40				
Analyte Program Code				
LN40 Target Range				
25-OH vitamin D, total	I	4–140 ng/mL		

LN Express service is available.



Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

Please note that the ranges listed are an estimate of the values recovered. Some instruments may recover lower or higher values than the ranges listed.

- Six 1.0-mL serum specimens
- Two shipments per year

LN Express service is available.

LN Express service is available.

Procalcitonin Calibration Verification/Linearity LN41			
Analyte Program Code			
LN41 Target Range			
Procalcitonin ■ 0.3-190 ng/mL			

LN Express service is available.

#### **Program Information**

- Six 1.0-mL frozen serum specimens
- Two shipments per year; ships on dry ice

D-Dimer Calibration Verification/Linearity LN42			
Analyte Program Code			
	LN42	Target Range	
D-dimer	I	220-5,500 ng/mL FEU	

LN Express service is available.

#### **Program Information**

- Six 1.0-mL plasma specimens
- Two shipments per year

Lamellar Body Count Calibration Verification/Linearity LN43			
Analyte Program Code			
	LN43	Target Range	
Lamellar body count	ı	5–200 particles x 10 <sup>9</sup> /L	

LN Express service is available.

#### **Program Information**

- Six 2.0-mL simulated liquid amniotic fluid specimens
- For use with lamellar body count methods performed on hematology analyzers
- · Two shipments per year

Fibrinogen Calibration Verification/Linearity LN44			
Analyte Program Code			
LN44 Target Range			
Fibrinogen ■ 80-900 mg/dL			

LN Express service is available.

#### **Program Information**

- Six 1.0-mL frozen plasma specimens
- Two shipments per year; ships on dry ice

C-Pe Veri		
Analyte	Program Code	
	LN46	LN46 Target Ranges
C-Peptide	•	0.1-35.0 ng/mL
Insulin	•	0.8-800 µJU/mL

#### **Program Information**

- · Seven 2-mL frozen serum specimens
- Two shipments per year

# **Instrumentation Quality Management Programs**

Instrumentation I			
Challenges	Program Code		
	I		
	A Shipment	B Shipment	C Shipment
Adjustable micropipette calibration verification/linearity	•		
Analytical balance check	•		I
Gravimetric pipette calibration	•		
Microtiter plate linearity			
Refractometer calibration			
Spectrophotometer (stray light check)	•		I
Absorbance check – UV wavelength			
Fluorescent intensity check – fluorescent microscopes		ı	
Ocular micrometer calibration		I	
Osmometer study			
Peak absorbance measurement		I	
pH meter check			
Photometric calibration – visible wavelength		ı	

WARNING: The Instrumentation (I) Survey specimens may contain corrosive or toxic substances,

#### **Program Information**

- · Designed to assess instruments not routinely challenged during the proficiency testing process
- Includes appropriate materials to assess important functional parameters, including accuracy and linearity
- · Three shipments per year

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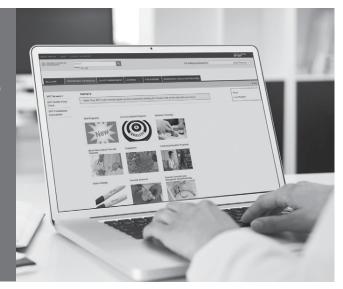
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Interfering Substance IFS				
Analyte	Program Code			
	IFS			
	Bilirubin Interferent	Hemoglobin Interferent	Lipid Interferent	
Alanine aminotransferase (ALT/SGPT)	ı	I		
Albumin	ı	•	ı	
Alkaline phosphatase	ı	•	ı	
Amylase	ı	ı	•	
Aspartate aminotransferase (AST/SGOT)	I	I	ı	
Calcium	I	I	ı	
Chloride	ı	•	ı	
CK2 (MB) mass	I	I	ı	
Creatine kinase (CK)	ı	•	ı	
Creatinine	I	•	ı	
Gamma glutamyl transferase (GGT)	ı	I	ı	
Glucose	ı	•	ı	
Iron	I	I	ı	
Lactate dehydrogenase (LD)	ı	•	ı	
Lipase	ı	•	ı	
Magnesium	I	•	ı	
Osmolality	I	•	ı	
Phosphorus	ı	ı	ı	
Potassium	I	ı	ı	
Protein, total	ı	ı	I	
Sodium	ı	ı		
Urea nitrogen (BUN)	ı	ı	ı	
Uric acid	I	ı	ı	

The material expires December 1, 2019.

- Eighteen 10.0-mL liquid serum specimens
- Designed for verifiying manufacturing interference specifications and investigating discrepant results caused by interfering substances
- Submit results any time prior to the material's expiration date
- One shipment per year

Serum Carryover SCO		
Analyte	Program Code	
	sco	
Creatinine	•	
hCG	•	
Lactate dehydrogenase (LD)	ı	
Phenytoin	I	

# **Program Information** • One 10.0-mL liquid serum

• Designed to screen for instrument sample probe carryover

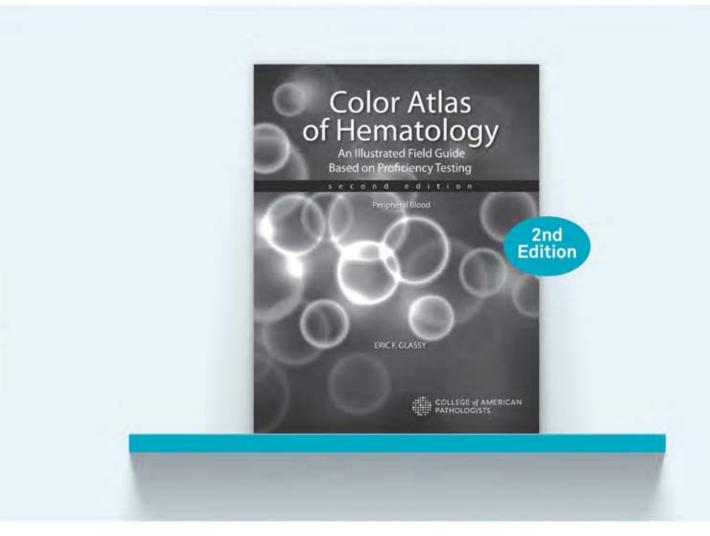
specimen (low level) and one 5.0-mL liquid serum specimen (high level)

• One shipment per year

Urine Toxicology Carryover UTCO		
Analyte	Program Code	
	итсо	
Benzoylecgonine		
Delta-9-THC-COOH		
Opiates		
Amphetamine		

- Two 40.0-mL urine specimens (low and high levels)
- Designed to screen for instrument sample probe carryover
- · One shipment per year

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- Updated information
- Online interactivity

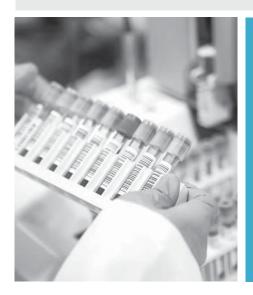
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# 12 Hematology and Clinical Microscopy



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# Hematology and Clinical Microscopy

Hematology	136
Clinical Microscopy	
New Programs NEW	
Hematology Automated Differential (FH14, FH14P)	137

# Hematology

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Hematology—Basic HE, HEP			
Analyte/Procedure	Program Code		Challenges per Shipment
	HE	HEP	
Blood cell identification			10
Hematocrit			5
Hemoglobin			5
MCV, MCH, and MCHC			5
MPV			5
Platelet count			5
RDW			5
Red blood cell count			5
White blood cell count			5

#### **Program Information**

- HE and HEP Five 3.0-mL whole blood specimens
- HEP Ten images, each available as photographs and online images
- · Three shipments per year



Hematology Automated Differential Series FH1–FH13, FH1P–FH13P					
Analyte/Procedure		Progra	m Code		Challenges per Shipment
	FH1- FH10	FH1P- FH10P	FH13	FH13P	
Blood cell identification		I		ı	10
Hematocrit			ı	•	5
Hemoglobin	•			ı	5
Immature granulocyte parameter (IG)					5 (FH9 only)
Immature platelet fraction (IPF)	I				5 (FH9 only)
Large unstained cell (LUC)	ı				5 (FH4 only)
MCV, MCH, and MCHC	•		ı	ı	5
MPV	•		ı	•	5
Nucleated red blood cell count (nRBC)	•	•	•	•	5 (FH3, FH9, and FH13)
Platelet count		ı	ı	•	5
RDW	ı	ı	ı	ı	5
Red blood cell count	ı		ı	ı	5
White blood cell count	ı	I	ı	ı	5
WBC differential			I	ı	5

# For second instrument reporting options, see the Quality Cross Check programs, FH3Q, FH4Q, FH6Q, and FH9Q, on page 138.

- FH1-FH10 and FH1P-FH10P

   Five 2.5-mL whole blood specimens with pierceable caps
- FH13 and FH13P Five 2.0-mL whole blood specimens with pierceable caps
- FHP series Ten images, each available as photographs and online images
- For method compatibility, see instrument matrix on page 139
- · Three shipments per year



Hematology Automated Differential FH14, FH14P					
Analyte/Procedure	Progra	m Code	Challenges per Shipment		
	FH14	FH14P			
Blood cell identification		ı	10		
Hematocrit	ı		5		
Hemoglobin	ı	I	5		
Large unclassified cell (LUC), percent and absolute	ı	•	5		
MCV, MCH, and MCHC	ı	I	5		
MPV	ı	I	5		
Nucleated red blood cell count (nRBC), percent and absolute	ı	•	5		
Platelet count	ı	I	5		
RDW	ı		5		
Red blood cell count	ı	ı	5		
White blood cell count	ı	ı	5		
WBC differential	ı		5		
Reticulocyte count	ı	I	3		
Reticulocyte count, absolute	ı		3		
Reticulocyte hemoglobin (RET-He)	I	I	3		

- FH14 and FH14P Five 2.5-mL whole blood samples with pierceable caps
- FH14P Ten images, each available as photographs and online images
- · For instrument compatibility, see instrument matrix on page 139
- Three shipments per year



Centrifugal Hematology FH15							
Analyte/Procedure	Program Code	Challenges per Shipment					
	FH15						
Hematocrit	I	5					
Hemoglobin	I	5					
Platelet count	I	5					
WBC count	I	5					
WBC differential (2-part)	I	5					

- Five 0.6-mL whole blood specimens
- · For use with QBC instruments; not intended for spun hematocrit methods
- Three shipments per year

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#### **Quality Cross Check—Hematology Series** FH3Q, FH4Q, FH6Q, FH9Q Challenges per Analyte/Procedure **Program Code Shipment** FH3Q FH9Q FH4Q FH6Q 3 Hematocrit 3 Hemoglobin ı Immature granulocyte parameter ı 3 Immature platelet function (IPF)% 3 Large unstained cells (LUC) 3 MCV, MCH, MCHC 3 MPV ı 3 ı Nucleated red blood cell count 3 (nRBC) Platelet count 3 **RDW** ı 3 Red blood cell count ı 3 WBC differential 3 White blood cell count

These programs do not meet regulatory requirements for proficiency testing; see the FH Series on page 136. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

#### **Program Information**

- Three 2.5-mL whole blood specimens with pierceable caps
- Report up to three instruments
- For method compatibility, see instrument matrix on page 139
- · Two shipments per year

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# Hematology Automated Differential Series, Instrument Matrix

Instrument					FH a	nd FHQ S	Series				
	FH1	FH2	FH3/ FH3Q	FH4/ FH4Q	FH6	FH6Q	FH9/ FH9Q	FH10	FH13	FH14	FH15
Abbott Cell-Dyn® 1200, 1400, 1600, 1700, 1800, Emerald™	•										
Horiba ABX 9000+, 9018+, 9020+	ı										
Sysmex K-series, KCP-1, KX-21/21N, pocH-100i, XP-series	•										
CDS/Medonic M-series											
Coulter® AcT™, MD, ONYX™, S880, S-plus V, ST, STKR, T-series		•									
Drew Scientific DC-18, Drew3, Excell 10/16/18, I-1800,		•									
Horiba ABX Micros											
Mindray BC - 2800, 3000/3200 series											
Siemens ADVIA® 360											
Abbott Cell-Dyn 3000, 3200, 3500, 3700, 4000, Ruby™, Sapphire™			•								
Cell-DYN Emerald 22											
Coulter DxH 500											
Drew Scientific Excell 22, 2280			I								
Orphee Mythic 22 AL, Orphee Mythic 22 OT											
Siemens ADVIA 560											
Siemens ADVIA 120, 120 w/SP1, 2120											
Coulter Gen-S™, HmX, LH500, MAXM™, MAXM A/L, STKS, VCS™						•					
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XE-Alpha, XE-HST, XN-series, XN-L series, XS-500i, XS-800i, XS-1000i, XS-1000iAL, XS-1000iC, XT-1800i, XT-2000i, XT-4000i, XE-2100D/L (Blood Center)							ı				
Coulter AcT 5 diff (AL, CP, OV)											
DIRUI BF series								ı			
Horiba ABX Pentra 60, 80, 120								ı			
Coulter LH750, LH755, LH780, LH785, Unicel DxH (except DxH500)											
Roche cobas m511											
QBC											

Blood Cell Identification, Photographs BCP, BCP2						
Procedure	Program Code Challenges per Shipi					
	ВСР	BCP2				
Blood cell identification			5			
Educational challenge(s)	I	I	5 (BCP)/1 (BCP2)			

- BCP Ten images, each available as photographs and online images
- BCP2 Six images, each available as photographs and online images
- · Three shipments per year



Blood Parasite BP						
Procedure	Program Code Challenges per Shipme					
	ВР					
Thin/thick blood film sets*	I	5				

<sup>\*</sup>This Survey will include corresponding thick films when available.

#### **Program Information**

- Five Giemsa-stained blood film sets, photographs, and/or online images
- A variety of blood parasites, including Plasmodium, Babesia, Trypanosoma, and filarial worms
- · Three shipments per year

Bone Marrow Cell Differential BMD						
Procedure	Program Code	Challenges per Shipment				
	BMD					
Bone marrow differential		1				
Bone marrow cell identification	I	5				

#### **Additional Information**

- Examine an online, whole slide image that includes a manual 500 bone marrow differential count and annotated cells for identification.
- Recognize and integrate problem-solving skills through the use of interpretive questions found throughout the discussion.
- Evaluate cell morphology and identify specific cells in bone marrow.
- See system requirements on page 13.

- One online bone marrow aspirate whole slide image that includes five annotated cells for identification
- Powered by DigitalScope® technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



Erythrocyte Sedimentation Rate ESR, ESR1, ESR2, ESR3					
Procedure	Program Code Challenges per Shipmen				
	ESR	ESR1	ESR2	ESR3	
All methods except the ALCOR, Alifax®, Sedimat 15®, and Sedimat 15 Plus	•				3
Sedimat 15, Sedimat 15 Plus		•			3
Alifax					3
ALCOR iSED					3

- ESR, ESR1 Three 6.0-mL whole blood specimens
- ESR2 Three 3.0-mL simulated whole blood specimens
- ESR3 Three 3.5-mL whole blood specimens
- Two shipments per year

Fetal Red Cell Detection HBF					
Procedure	Program Code	Challenges per Shipment			
	HBF				
Kleihauer-Betke and flow cytometry	•	2			
Rosette fetal screen	I	2			
Acid elution whole slide image		1			

#### **Program Information**

- Two 1.2-mL liquid whole blood specimens
- Not designed for F cell quantitation
- Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope® technology
- Two shipments per year

Hemoglobinopathy HG					
Procedure	Program Code	Challenges per Shipment			
	HG				
Hemoglobin identification and quantification	ı	4			
"Dry lab" educational challenges	I	2			
Hemoglobin A <sub>2</sub> quantitation	I	4			
Hemoglobin F quantitation	I	1			
Sickling test, qualitative	I	4			

#### **Program Information**

- Four 0.5-mL stabilized red blood cell specimens
- Two "dry lab" educational challenges (case histories, electrophoresis patterns, and clinical interpretation questions)
- Two shipments per year

Rapid Total White Blood Cell Count RWBC					
Procedure	Program Code	Challenges per Shipment			
	RWBC				
Rapid total white blood cell count		5			

- Five 2.0-mL whole blood specimens
- · For use with the HemoCue WBC instrument
- Three shipments per year

Reticulocyte Series RT, RT2, RT3, RT4					
Instrument/Method	ı	Progra	m Cod	е	Challenges per Shipment
	RT	RT2	RT3	RT4	
Abbott Cell-Dyn 4000, Sapphire, Siemens ADVIA 120/2120, and all other automated and manual methods	ı				3
Abbott Cell-Dyn 3200, 3500, 3700, Ruby		•			3
Coulter GenS, HmX, LH500, LH700 series, MAXM, STKS, Unicel DxH					3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN series, XT-2000i, XT-4000i				•	3
Pierceable caps			I	I	3

- RT, RT2 Three 1.0-mL stabilized red blood cell specimens
- RT3 Three 3.0-mL stabilized red blood cell specimens
- RT4 Three 2.0-mL stabilized red blood cell specimens
- · Includes percentage and absolute result reporting
- · Two shipments per year

Quality Cross Check—Reticulocyte RTQ, RT3Q, RT4Q				
Instrument/Method	Program Code			Challenges per Shipment
	RTQ	RT3Q	RT4Q	
Abbott Cell-Dyn 4000, Sapphire, Siemens ADVIA 120/2120, and all other automated and manual methods	•			3
Coulter GenS, HmX, LH500, LH700 series, MAXM, STKS, Unicel DxH				3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100L, XE-5000, XN Series, XT-2000i, XT-4000i				3

These programs do not meet regulatory requirements for proficiency testing; see the RT Series above. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- · Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- · Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

- RTQ Three 1.0-mL stabilized red blood cell specimens
- RT3Q Three 3.0-mL stabilized red blood cell specimens
- RT4Q Three 2.0-mL stabilized red blood cell specimens
- · Includes percentage and absolute result reporting
- Report up to three instruments
- · Two shipments per year

Sickle Cell Screening SCS						
Procedure	Program Code Challenges per Shipment					
	scs					
Sickling test, qualitative	I	3				

Transfusion-Related Cell Count TRC					
Procedure Program Code Challenges per Shipme					
	TRC				
Platelet count (platelet-rich plasma)	ı	5			
WBC count		4			
Dry challenge		2			

WBC counts must be performed using a Nageotte chamber, fluorescence microscopy, or by flow cytometry.

Waived Combination HCC, HCC2				
Analyte	Program Code Challenges per Shipment			
	нсс	HCC2		
Hematocrit			2	
Hemoglobin	ı		2	
Urinalysis/Urine hCG			2	
Whole blood glucose	I		2 (HCC)/3 (HCC2)	

#### **Program Information**

- · Three 1.0-mL stabilized human erythrocyte specimens
- Two shipments per year

#### **Program Information**

- Five 1.2-mL suspensions of platelet-rich plasma
- Two 1.0-mL vials leukocytereduced platelet material
- Two 1.0-mL vials leukocytereduced red blood cells
- Three shipments per year

- HCC Two 2.5-mL whole blood specimens; two shipments per year
- · HCC2 Total of four shipments per year
- · Hematocrit, hemoglobin, and urinalysis/urine hCG testing -Two 3.0-mL whole blood specimens and two 10.0-mL urine specimens; two shipments per year: A and C
- · Whole blood glucose testing - Three 2.5-mL whole blood specimens; two shipments per year: B and D
- · To verify instrument compatibility, refer to the instrument matrix on page 66

Virtual Peripheral Blood Smear VPBS					
Procedure	Program Code	Challenges per Shipment			
	VPBS				
WBC differential	I	3			
Platelet estimate	I	3			
RBC morphology	I	3			
Blood cell identification	I	15			

#### **Additional Information**

- Examine online, whole slide images that include a manual 100 WBC differential count and annotated cells for identification.
- Evaluate and identify red blood cell (RBC) morphology and identify specific white blood cells (WBC) in peripheral blood.
- Recognize and integrate problem-solving skills through the use of interpretive questions found throughout the discussion.
- See system requirements on page 13.

#### **Program Information**

- · Three online peripheral blood whole slide images that include 15 annotated cells for identification
- · Powered by DigitalScope technology
- · Two online activities per year; your CAP shipping contact will be notified via email when the activity is available

Expanded Virtual Peripheral Blood Smear EHE1						
Procedure Program Code Challenges per Shipme						
	EHE1					
WBC differential	I	2				
Platelet estimate	I	2				
RBC morphology	I	2				
WBC morphology	I	2				
Blood cell identification		10				

#### Additional Information

- More challenging and/or complex testing.
- Examine online, whole slide images that include a manual 100 WBC/differential count and annotated cells for identification.
- · Comprehensive case studies.
- · Ability to recognize and integrate problem-solving skills through the use of interpretive questions found throughout discussion.
- Evaluate and identifyy red blood cell (RBC) morphology and identify specific white blood cells (WBC) in peripheral blood.
- · See system requirements on page 13.

- · Two online peripheral blood whole slide images that include 10 annotated cells for identification
- · Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available

Hematopathology Online Education HPATH/HPATH1						
Program Code Challenges per Shipment						
HPATH/HPATH1						
Hematopathology online case review	■ 5					

#### **Additional Information**

HPATH educates pathologists, hematolopathologists, and hematologists with an interest in hematopathology to assess and improve their diagnostic skills in hematopathology.

- All cases have been specially selected to highlight important changes in the 2016 revision of the WHO Classification.
- · Clinical history and relevant laboratory data.
- At least one online, whole slide image of peripheral blood, bone marrow, spleen, lymph node, or other tissue.
- Results of ancillary studies such as immunohistochemistry, flow cytometry, FISH, karyotyping, and molecular studies, where appropriate.
- · Case discussion and discussion of differential diagnoses.
- · Five SAM questions per case.
- See system requirements on page 13.

- HPATH Five diagnostic challenges/online whole slide images with clinical history; reporting with CME/SAM credit is available for one pathologist/ hematologist. For additional pathologist/hematologist, order HPATH1
- HPATH1 Reporting option with CME/SAM credit for each additional pathologist and hematologist (within the same institution); must order in conjunction with Survey HPATH
- Earn a maximum of 12.5 CME/SAM credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 12.5 CE credits per hematologist for completion of an entire year
- This activity meets the ABP MOC Part IV Practice Performance Assessment requirements
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available





**12** 

# **Clinical Microscopy**

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Urinalysis and Clir	CMP, CMP1		
Analyte/Procedure	Progra	ım Code	Challenges per Shipment
	СМР	CMP1	
Bilirubin	I		3
Blood or hemoglobin	I	ı	3
Body fluid photographs	I	ı	3
Glucose	1	•	3
hCG urine, qualitative	ı	•	3
Ketones	1	•	3
Leukocyte esterase	I	I	3
Nitrite	I	I	3
Osmolality	1	1	3
рН	1	•	3
Protein, qualitative	1	•	3
Reducing substances	1	•	3
Specific gravity	ı	•	3
Urine sediment photographs	•	•	3
Urobilinogen			3

#### **Program Information**

- CMP Three 10.0-mL liquid urine specimens; for use with all instruments except iCHEM; six images, each available as photographs and online images
- CMP1 Three 12.0-mL liquid urine specimens; for use with iCHEM instruments; six images, each available as photographs and online images
- · Two shipments per year



#### **Additional Information**

For second instrument reporting options, see the Quality Cross Check program, CMQ, on page 147.

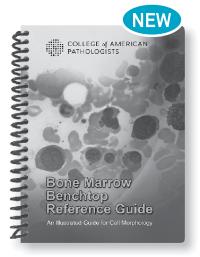
# **Bone Marrow Benchtop Reference Guide**

Bone Marrow Benchtop Reference Guide is an illustrated guide to common and rare cells. With more than 60 different identifications and a detailed description for each cell morphology, it's an affordable, convenient way to identify various cell types quickly and confidently. Its rugged construction is well suited for heavy use at the workbench.

Select Bone Marrow Benchtop Reference Guide (BMBRG) on your Surveys order form.

Or, view sample pages and order online:

- · printed books at estore.cap.org
- · ebooks at ebooks.cap.org



**Item number:** BMBRG Spiral bound; 2018

Quality Cross Check—Urinalysis CMQ				
Analyte	Program Code	Challenges per Shipment		
	CMQ			
Bilirubin	I	3		
Blood or hemoglobin	I	3		
Glucose	I	3		
hCG urine, qualitative	1	3		
Ketones	1	3		
Leukocyte esterase	1	3		
Nitrite	1	3		
Osmolality	1	3		
рН	1	3		
Protein, qualitative	ı	3		
Reducing substances	I	3		
Specific gravity	I	3		
Urobilinogen	I	3		

This program does not meet regulatory requirements for proficiency testing; see Surveys CMP and CMP1 on page 146. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- · Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

Clinical Microscopy Miscellaneous Photopage CMMP					
Procedure	Program Code Challenges per Shipm				
	СММР				
Fern test (vaginal)	I	1			
KOH preparation (skin)	ı	1			
Nasal smear	ı	1			
Pinworm preparation	ı	1			
Spermatozoa	I	1			
Stool for leukocytes	ı	1			
Urine sediment photographs	ı	3			
Vaginal wet preparation photographs (for clue cells, epithelial cells, trichomonas, and yeast)	ı	1			

#### **Program Information**

- Three 10.0-mL liquid urine specimens for use with all instruments
- · Report up to three instruments
- Two shipments per year

- Ten images, each available as photographs and online images
- · Two shipments per year

Amniotic Fluid Leakage AFL					
Procedure Program Code Challenges per Shipmer					
pH interpretation	I	3			

- Three 2.0-mL liquid specimens
- For use with nitrazine paper and the Amniotest™
- Two shipments per year

Automated Body Fluid Series ABF1, ABF2, ABF3					
Procedure	Program Code Challenges per Shipment				
	ABF1	ABF2			
Red blood cell fluid count		•		2	
White blood cell fluid count				2	

For method compatibility, see instrument matrix below.

#### **Program Information**

- Two 3.0-mL simulated body fluid specimens
- Two shipments per year

#### **Automated Body Fluid, Instrument Matrix**

Instrument	ABF Series		
	ABF1	ABF2	ABF3
Advanced Instruments GloCyte, Siemens ADVIA 120/2120 series			
Coulter LH 700 series, Unicel DxH		•	
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-series, XN-L series, XT-1800i, XT-2000i, XT-4000i		1	
IRIS iQ <sup>®</sup> 200			

Virtual Body Fluid VBF					
Procedure Program Code Challenges per Shipment					
VBF					
Total nucleated cells differential	I	2			
Body fluid cell identification	I	10			

#### **Additional Information**

- Examine online, whole slide images that include a manual differential count and annotated cells for identification.
- Evaluate cell morphology and identify specific cells in a body fluid.
- · See system requirements on page 13.

- · Two online, whole slide body fluid images that include 10 annotated cells for identification
- · Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



Automated Urine Microscopy UAA, UAA1			
Analyte	Program Code Challenges per Shipment		
	UAA	UAA1	
Casts, semiquantitative	ı		2
Crystals, semiquantitative	I		2
Epithelial cells, semiquantitative			2
Red blood cells, quantitative	ı	I	2
White blood cells, quantitative	I	I	2

- UAA Two 10.0-mL liquid urine specimens for use with IRIS and Roche instruments
- UAA1 Two 12.0-mL liquid urine specimens for use with Sysmex instruments
- Two shipments per year

### **Automated Urinalysis, Instrument Matrix**

Instrument	UAA, UAA1	
	UAA	UAA1
DIRUI FUS	X	
IRIS Iq200	X	
Roche cobas u701	X	
ARKRAY Auction Hybrid		X
77 Elektronika		X
Sysmex UF 50, 100, 500i, 1000i, 5000		X
Sysmex UX 2000		X

Crystals BCR, BFC, URC				
Procedure Program Code Challenges per Shipment				
	BCR	BFC	URC	
Bile crystal identification				2
Body fluid crystal identification				2
Urine crystal identification			•	2

Dipstick Confirmatory DSC					
Analyte Program Code Challenges per Shipme					
DSC					
Bilirubin	I	2			
Sulfosalicylic acid (SSA)	I	2			

#### **Program Information**

- BFC Two 1.5-mL simulated body fluid specimens (eg, synovial fluid)
- URC Two 1.5-mL urine specimens
- BCR Two photographs
- Two shipments per year

- Two 12.0-mL liquid urine specimens
- For use with methods to confirm positive bilirubin and protein dipstick results
- · Two shipments per year

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Fecal Fat FCFS					
Analyte Program Code Challenges per Shipment					
FCFS					
Fecal fat, qualitative ■ 2					

#### **Program Information**

- Two 10.0-g simulated fecal fat specimens
- For microscopic detection of neutral fats (triglycerides) and/or split fats (total free fatty acids)
- Two shipments per year

Fetal Hemoglobin APT				
Analyte Program Code Challenges per Shipment				
APT				
Fetal hemoglobin (gastric fluid)				

#### **Program Information**

- Two 1.2-mL simulated gastric fluid specimens
- Two shipments per year

Gastric Occult Blood GOCB					
Analyte Program Code Challenges per Shipment					
GOCB					
Gastric occult blood	I	3			
Gastric pH ■ 3					

#### **Program Information**

- Three 2.0-mL simulated gastric specimens
- Two shipments per year

Glucose-6-Phosphate Dehydrogenase G6PDS				
Analyte Program Code Challenges per Shipment				
G6PDS				
G6PD, qualitative and quantitative	I	2		

Glucose-6-Phosphate Dehydrogenase G6PDS			
Analyte Program Code Challenges per Shipmer			
	G6PDS		
G6PD, qualitative and quantitative		2	

#### **Program Information**

- Two 0.5-mL lyophilized hemolysate samples
- Two shipments per year

Hemocytometer Fluid Count HFC			
Procedure Program Code Challenges per Shipme			
	HFC		
Cytopreparation differential		3	
Red blood cell fluid count	I	3	
White blood cell fluid count		3	

- Three 1.0-mL simulated body fluid specimens
- Two shipments per year

Hemocytometer Fluid Count, International HFCI			
Procedure Program Code Challenges per Shipme			
	HFCI		
Red blood cell fluid count	I	3	
White blood cell fluid count	I	3	
Body fluid differential	I	2	

This program meets the CAP's Accreditation Program requirements.

#### **Additional Information**

- Examine online, whole slide images that include a manual differential count.
- · See system requirements on page 13.

Program	Inform	ation
i iogiaiii		ation

- Three 2.0-mL simulated body fluid specimens; two online, whole slide images for 2- and 5-part differential
- Designed for international laboratories that have experienced significant shipping and receiving issues and need longer program stability
- · Powered by DigitalScope technology
- Two shipments per year

Lamellar Body Count LBC							
Procedure	Program Code Challenges per Shipment						
	LBC						
Lamellar body count		3					

#### **Program Information**

- Three 2.0-mL simulated liquid amniotic fluid specimens
- · For use with LBC methods performed on all hematology analyzers
- Two shipments per year

Occult Blood OCB							
Analyte	Program Code Challenges per Shipme						
	OCB						
Occult blood	I	3					

#### Additional Information

For second instrument reporting options, see the Quality Cross Check program, OCBQ, on page 152.

- Three 2.0-mL simulated fecal specimens
- Two shipments per year

Quality Cross Check—Occult Blood OCBQ								
Analyte	nalyte Program Code Challenges per Shipmen							
	OCBQ							
Occult blood		3						

This program does not meet regulatory requirements for proficiency testing; see Survey OCB on page 151. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

Rupture of Fetal Membranes Testing ROM1							
Procedure Program Code Challenges per Shipme							
	ROM1						
Rupture of fetal membranes		3					

#### **Program Information**

- Three 2.0-mL simulated fecal specimens
- Report up to three instruments
- Two shipments per year

#### **Program Information**

- Three 0.5-mL simulated vaginal specimens for methods such as Actim PROM, Amnisure, and Clinical Innovations
- · Two shipments per year

Special Clinical Microscopy SCM1, SCM2							
Analyte/Procedure Program Code Challenges per Shipmen							
	SCM1	SCM2					
Urine hemosiderin, Prussian blue			3				
Urine eosinophils, Wright stain			3				

Ticks, Mites, and Other Arthropods TMO							
Procedure Program Code Challenges per Shipmer							
	ТМО						
Tick, mite, and arthropod identification	I	3					

Urine hCG UHCG							
Procedure Program Code Challenges per Shipment							
	UHCG						
Urine hCG, qualitative	ı	5					

#### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

#### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

- Five 1.0-mL urine specimens
- · Three shipments per year

Urine Albumin and Creatinine, Semiquant UMC							
Analyte/Procedure Program Code Challenges per Shipn							
	UMC						
Creatinine	ı	2					
Urine albumin (microalbumin): creatinine ratio	ı	2					
Urine albumin (microalbumin), semiquantitative	ı	2					

For quantitative reporting, refer to Survey U, page 68.

#### **Program Information**

- Two 3.0-mL liquid urine specimens
- For use with dipstick and semiquantitative methods only
- Two shipments per year

Worm Identification WID						
Procedure	Program Code Challenges per Shipmer					
	WID					
Worm identification	I	3				

#### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

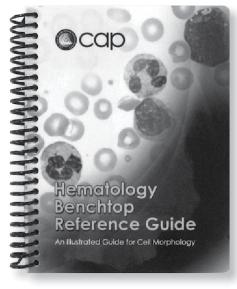
# Hematology Benchtop Reference Guide (HBRG)

- More than 50 different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- · Six tabbed sections for easy reference
  - Erythrocytes
  - Erythrocyte Inclusions
  - o Granulocytic (Myeloid) and Monocytic Cells
  - Lymphocytic Cells
  - Platelets and Megakaryocytic Cells
  - o Microorganisms and Artifacts
- A durable and water-resistant format to withstand years of benchtop use—5" x 6½"

## Select it on your Surveys order form.

#### Or, view sample pages and order online:

- · printed books at estore.cap.org
- ebooks at ebooks.cap.org



Item number: HBRG Spiral bound; 60 pages; 50+ images; 2012

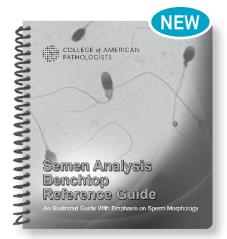
# Semen Analysis Benchtop Reference Guide

Semen Analysis Benchtop Reference Guide is an illustrated guide to sperm morphology. The content includes specimen collection and macroscopic assessment, sperm count, and morphology assessment and classification systems. Also included are 50 images representing normal morphology, head defects, neck/midpiece defects, tail defects, and residual cytoplasm defects, as well as images of nonsperm cells, Pap-stained sperm, and equipment. The sturdy laminated guide features tabbed sections for easy reference.

Select Semen Analysis Benchtop Reference Guide (SABRG) on your Surveys order form.

#### Or, view sample pages and order online:

- · printed books at estore.cap.org
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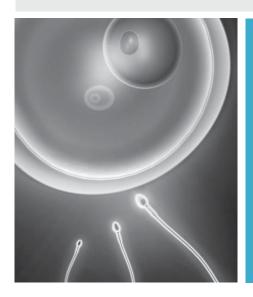


Item number: SABRG

Spiral bound; 6-1/2" x 7";

2018

# 13 Reproductive Medicine



# Access reproductive medicine's integrated laboratory improvement program.

- Unique accreditation checklist specific for the subspecialty of reproductive medicine.
- Comprehensive proficiency testing and educational programs for andrology and embryology.
- New Postvasectomy Sperm Count—Automated (PV1) provides additional volume of the current PV program for use with automated analyzers.

# Reproductive Medicine

Andrology and Embryo	logy	156
New Programs	NEW	

13

# **Andrology and Embryology**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Semen Analysis SC, SC1, PV, PV1, SM, SV, ASA								
Procedure		Program Code						Challenges per Shipment
	SC	SC1	PV	PV1 NEW	SM	sv	ASA	
Sperm count and presence/ absence (manual methods and CASA systems)								2
Sperm count and presence/ absence (automated methods)								2
Postvasectomy sperm count and presence/absence			ı					2
Postvasectomy sperm count and presence/absence (automated methods)								2
Sperm morphology								2
Sperm viability						ı		2
Antisperm antibody IgG							ı	2

#### **Program Information**

- SC Two 0.3-mL stabilized sperm specimens
- SC1 Two 1.0-mL stabilized sperm specimens
- PV Two 0.3-mL stabilized sperm specimens with counts appropriate for postvasectomy testing
- PV1 Two 1.0-mL stabilized sperm specimens with counts appropriate for postvasectomy testing
- SM Two prepared slides for staining
- SV Two eosin-nigrosinstained slides
- ASA Two 0.3-mL serum specimens
- Two shipments per year



# Sperm Motility, Morphology, and Viability SMCD, SM1CD, SM2CD

5M62, 6M 162, 6M262								
Procedure		Program Code						
	SMCD	SM1CD	SM2CD					
Sperm count	ı			2				
Sperm motility/forward progression	I			2				
Sperm morphology		I		2				
Sperm viability				2				

- SMCD Video clips of sperm available for hemocytometer, Makler, and disposable chambers
- SM1CD Two challenges that may be viewed as online, whole slide images by DigitalScope technology or as static images
- SM2CD Two challenges that may be viewed as online, whole slide images by DigitalScope technology or as static images
- Two shipments per year



Embryology EMB								
rocedure Program Code Challenges per Shi								
	ЕМВ							
Embryo transfer and quality assessment (three- and five-day-old embryos)	ı	4						

- Two sets of five video clips
- Two shipments per year

Ligand—Special Y, YY, DY							
Analyte	Progra	m Code	Challenges per Shipment				
	Y, YY	DY					
11-deoxycortisol			3				
17-hydroxyprogesterone			3				
Androstenedione			3				
DHEA sulfate			3				
Estradiol			3				
Estriol, unconjugated (uE3)			3				
Follicle-stimulating hormone (FSH)			3				
Growth hormone (GH)			3				
IGF-1 (somatomedin C)			3				
Luteinizing hormone (LH)	I		3				
Progesterone			3				
Prolactin			3				
Testosterone			3				
Testosterone, bioavailable (measured)			3				
Testosterone, free (measured)			3				
Sex hormone-binding globulin (SHBG)			3				

#### **Program Information**

- Y Three 5.0-mL liquid serum specimens in duplicate
- YY Three 5.0-mL liquid serum specimens in triplicate
- DY Must order in conjunction with Survey Y or
- · Conventional and International System of Units (SI) reporting offered
- Two shipments per year



Antimüllerian Hormone AMH								
Analyte Program Code Challenges per Shipment								
	АМН							
Antimüllerian hormone		3						

- Three 1.0-mL lyophilized serum specimens
- Two shipments per year

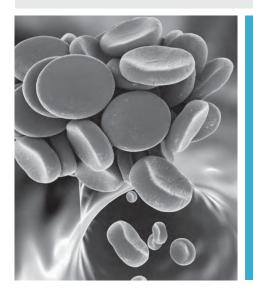
# Insight at a glance.



In just seconds, the CAP's Performance Analytics Dashboard provides valuable insights into your laboratory's performance, letting you proactively focus energy on areas that need immediate attention while filtering out distractions. Updated daily, this complimentary Surveys and CAP accreditation performance monitoring tool reduces the stress of managing today's laboratory by giving you fast access to a single laboratory's or an expansive network's performance.

To view a demo, search Performance Analytics Dashboard at cap.org.

# 14 Coagulation



# Meet requirements for calibration verification and linearity for coagulation testing.

- Hemostasis test methods that are calibrated and directly measure the concentration of an analyte require calibration verification/linearity (CVL).
- Coagulation programs available include Heparin CVL (LN36), von Willebrand Factor Antigen CVL (LN37),
   D-Dimer CVL (LN42), Thrombophilia CVL (LN35), and Fibrinogen CVL (LN44).

# **Discontinued Programs**

# Coagulation

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Coagulation—Limited CGB, CGL, CGDF							
Analyte	Pr	ogram Co	de	Challenges per Shipment			
	CGB	CGL					
Activated partial thromboplastin time				5			
Fibrinogen				5			
International normalized ratio (INR)*	•			5			
Prothrombin time				5			
D-dimer**			•	2 per year			
Fibrin(ogen) degradation products, plasma**				2 per year			
Fibrin(ogen) degradation products, serum**				2 per year			

<sup>\*</sup>Participants reporting INR results will receive a special evaluation to assess the INR calculation.

#### **Additional Information**

For second instrument reporting options, see the Quality Cross Check program, CGLQ, below.

Quality Cross Check—Coagulation CGLQ							
Program Code	Challenges per Shipment						
CGLQ							
I	3						
I	3						
I	3						
I	3						
I	1						
ı	1						
I	1						
	Program Code						

This program does not meet regulatory requirements for proficiency testing; see Survey CGL above. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

#### **Program Information**

- CGB Five 1.0-mL lyophilized plasma specimens; three shipments per year
- CGL Five 1.0-mL lyophilized plasma specimens; three shipments per year; one 1.0-mL plasma specimen and one 1.0-mL serum specimen; three shipments per year
- CGDF One 1.0-mL serum specimen; one 1.0-mL lyophilized plasma specimen; two shipments per year



- Three 1.0-mL lyophilized plasma specimens in triplicate, one 1.0-mL plasma specimen, and one 2.0-mL serum specimen
- Report up to three instruments
- Two shipments per year

<sup>\*\*</sup>D-dimer and FDP are shipped with the CGL A and C mailings.

Coagulation—Extended CGE, CGEX						
Analyte	Program Code	Challenges per Shipment				
	CGE, CGEX					
See analyte listing below	I	2				

- CGE Two 1.0-mL lyophilized plasma specimens in triplicate
- CGEX Two 1.0-mL lyophilized plasma specimens (five vials each)
- · Two shipments per year

# Coagulation Analyte Listing (Quantitative Results)

50:50 mixing study, PT and aPTT Activated partial thromboplastin time

Activated protein C resistance

Alpha-2-antiplasmin

Antithrombin activity/antigen Dilute prothrombin time

Factors II, V, VII, VIII, IX, X, XI, XII, and XIII

Fibrinogen antigen

Heparin-induced thrombocytopenia (HIT)

Plasminogen activator inhibitor Plasminogen activity/antigen

Prekallikrein Protein C Protein S

Prothrombin time Reptilase time Thrombin time

von Willebrand factor activity:

- Collagen binding
- Glycoprotein I<sub>b</sub> binding
- Ristocetin cofactor

von Willebrand factor antigen

# Test your diagnostic skills as a pathologist with CPIP

Online, hands-on and interactive, the Clinical Pathology Improvement Program (CPIP) enables pathologists to sharpen their diagnostic skills in real time by working through an actual case. Each month, you will receive a new case, including related images and clinical background. As the case unfolds, more information is revealed, just as in the laboratory. Participants who successfully complete the posttest may apply their earned credits to their Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) SAM requirements. Enjoy a full year of CPIP and earn up to 15 CME/SAM credits.

Choose code CPIP/CPIP1 on your Surveys order form.

# Coagulation Special Testing Series CGS1, CGS2, CGS3, CGS4, CGS5, CGS6, CGS7, CGS8

Module/Analyte			Challe	enges p	er Ship	ment		
				Prograi	m Code			
	CGS1	CGS2	CGS3	CGS4	CGS5	CGS6	CGS7	CGS8
Activated partial thromboplastin time*	2		2	3				
International normalized ratio (INR)	2			3				
Prothrombin time*	2			3				
Lupus Anticoagulant and Mixing St	udies	Module	9					
Dilute Russell's viper venom time	2							
Lupus anticoagulant (confirmation and screen)	2							
50:50 mixing studies, PT and aPTT	2							
Thrombophilia Module								
Activated protein C resistance		2						
Antithrombin (activity, antigen)		2						
Protein C (activity, antigen)		2						
Protein S (activity, free antigen, total antigen)		2						
von Willebrand Factor Antigen Mod	lule	1	ı		1	1		
Factor VIII assay			2					
von Willebrand factor (antigen, activity, multimers)			2					
Factor VIII inhibitor			2					
Fibrin monomer			2					
Heparin Module								
Heparin activities using methodologies including Anti-Xa (unfractionated, low molecular weight, and hybrid curve)				3				
Thrombin time				3				
Heparin-Induced Thrombocytopen	ia Mod	ule						
Appropriate with methods such as Gen-Probe Lifecodes PF4 IgG and Gen-Probe Lifecodes PF4 Enhanced® assays					2			
Appropriate with the Akers Biosciences, Inc. PIFA® Heparin/ Platelet Factor 4 Rapid Assay						3		
Continued on the next page								

- CGS1, CGS2, CGS3 A total of two 2.0-mL of lyophilized plasma specimens
- CGS4 Three 1.0-mL lyophilized plasma specimens
- CGS5 Two 60.0-µL serum specimens
- CGS6, CGS8 Three 400.0-μL frozen serum specimens
- CGS7 Three 1.0-mL lyophilized plasma specimens in duplicate
- Two shipments per year

<sup>\*</sup>Not appropriate for meeting regulatory requirements, see page 160.

Coagulation Special Testing Series CGS1, CGS2, CGS3, CGS4, CGS5, CGS6, CGS7, CGS8 continued								
Module/Analyte Challenges per Shipment								
	Program Code							
	CGS1	CGS2	CGS3	CGS4	CGS5	CGS6	CGS7	CGS8
Heparin-Induced Thrombocytopen	ia Mod	ule cor	tinued					
Appropriate with the Akers Biosciences, Inc. PIFA PlussPF4™ Heparin/Platelet Factor 4 Rapid Assay								3
ADAMTS13 Module								
ADAMTS13 (activity, inhibitor screen, and titer)							3	

<sup>\*</sup>Not appropriate for meeting regulatory requirements, see page 160.

- CGS1, CGS2, CGS3 A total of 2.0-mL of lyophilized plasma specimens
- CGS4 Three 1.0-mL lyophilized plasma specimens
- CGS5 Two 60.0-µL serum specimens
- CGS6, CGS8 Three 400.0-μL frozen serum specimens
- CGS7 Three 1.0-mL lyophilized plasma specimens in duplicate
- Two shipments per year

# Apixaban, Dabigatran, Fondaparinux, **Rivaroxaban Anticoagulant Monitoring** APXBN, DBGN, FNPX, RVBN

Analyte		Program Code					
	APXBN	DBGN	FNPX	RVBN			
Activated partial thromboplastin time*		1			3		
Prothrombin time*	ı	ı			3		
Thrombin time		ı			3		
Apixaban	ı				3		
Dabigatran		ı			3		
Fondaparinux					3		
Rivaroxaban					3		

<sup>\*</sup>Not appropriate for meeting regulatory requirements, see page 160.

- Three 1.0-mL lyophilized specimens
- Two shipments per year

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Activated Clotting Time Series CT, CT1, CT2, CT3, CT5							
Instrument/Cartridge		Pro		Challenges per Shipment			
	СТ	CT1	CT2	СТЗ	CT5		
Helena Actalyke®						3	
Helena Cascade POC						3	
IL Gem® PCL ACT						3	
IL Gem PCL ACT-LR						3	
IL GEM PCL Plus ACT						3	
IL GEM PCL Plus ACT-LR			•			3	
ITC Hemochron® CA510/FTCA510	ı					3	
ITC Hemochron FTK-ACT	ı					3	
ITC Hemochron Jr. Signature/ACT+						3	
ITC Hemochron Jr. Signature/ACT-LR						3	
ITC Hemochron P214/P215	ı					3	
i-STAT® Celite® and Kaolin ACT					•	3	
Medtronic HemoTec ACT/ACTII/ACT Plus HR-ACT						3	
Medtronic HemoTec ACT/ACTII/ACT Plus LR-ACT		•				3	
Medtronic HemoTec ACT/ACTII/ACT Plus R-ACT		•				3	
Medtronic Hepcon HMS, HMS Plus		ı				3	
Sienco Sonoclot®						3	

#### **Program Information**

- CT Three 3.0-mL lyophilized whole blood specimens with corresponding diluents
- CT1 Three 1.7-mL lyophilized whole blood specimens with corresponding diluents
- CT2 Three 0.5-mL lyophilized whole blood/ diluent ampules
- CT3 Three 0.5-mL lyophilized whole blood/ diluent ampules
- CT5 Three 1.7-mL lyophilized whole blood specimens with corresponding diluents
- Two shipments per year

#### **Additional Information**

For second instrument reporting options, see the Quality Cross Check programs CTQ-CT3Q and CT5Q, on page 165.

# Have you created or updated your CAP Profile?

Each laboratory staff member should have their own profile. Your profile is transferrable when you leave your current position. Use it to maintain information about yourself, including:

- · Business affiliations
- Certifications
- Contact preferences
- Inspector-related information
- Personal contact information
- Specialties and skills
- Addresses

To create or update your profile, visit cap.org, log in, and click on UPDATE MY PROFILE.



# **Quality Cross Check— Activated Clotting Time Series** CTQ, CT1Q, CT2Q, CT3Q, CT5Q

Instrument/Cartridge		Pro		Challenges per Shipment		
	CTQ	CT1Q	CT2Q	CT3Q	CT5Q	
Helena Actalyke®						3
Helena Cascade POC	•					3
IL Gem® PCL ACT						3
IL Gem PCL ACT-LR						3
IL GEM PCL Plus ACT						3
IL GEM PCL Plus ACT-LR						3
ITC Hemochron® CA510/FTCA510	ı					3
ITC Hemochron FTK-ACT						3
ITC Hemochron Jr. Signature/ACT+						3
ITC Hemochron Jr. Signature/ACT-LR						3
ITC Hemochron P214/P215	ı					3
i-STAT Celite® and Kaolin ACT						3
Medtronic HemoTec ACT/ACTII/ACT Plus HR-ACT						3
Medtronic HemoTec ACT/ACTII/ACT Plus LR-ACT						3
Medtronic HemoTec ACT/ACTII/ACT Plus R-ACT						3
Medtronic Hepcon HMS, HMS Plus						3
Sienco Sonoclot®	ı					3

These programs do not meet regulatory requirements for proficiency testing; see Surveys CT-CT3 and CT5 on page 164. For additional information about the Quality Cross Check program, see page 40.

#### The Quality Cross Check Program:

- · Provides a solution for monitoring performance across multiple instruments, and is in compliance with the CMS directive regarding proficiency testing on multiple instruments.
- · Simplifies instrument comparability efforts by providing custom reports with both peer group comparison and instrument comparability statistics.

- · CTQ Three 3.0-mL lyophilized whole blood specimens in triplicate with corresponding diluents
- CT1Q Three 1.7-mL lyophilized whole blood specimens in triplicate with corresponding diluents
- CT2Q Three 0.5-mL lyophilized whole blood/ diluent ampules in triplicate
- CT3Q Three 0.5-mL lyophilized whole blood/ diluent ampules in triplicate
- CT5Q Three 1.7-mL lyophilized whole blood specimens in triplicate with corresponding diluents
- · Report up to three instruments
- · Two shipments per year

Platelet Function* PF, PF1						
Instrument/Method	Progra	m Code	Challenges per Shipment			
	PF	PF1				
Platelet aggregation			2			
PFA-100			2			
Helena Plateletworks®			2			

<sup>\*</sup>This Survey requires the draw of a normal donor sample.

Viscoelastometry TEG							
Instrument/Method Program Code Challenges per Shipment							
	TEG						
Viscoelastometry	I	2					

- PF Four 3.2% sodium citrate vacuum tubes; two 10.0-mL plastic tubes
- PF1 Four 3.2% sodium citrate vacuum tubes; two 10.0-mL plastic tubes
- Two shipments per year

#### **Program Information**

- Two 1.0-mL lyophilized whole blood specimens with diluents
- For use with the Haemonetics™
  Thromboelastograph®, including TEG5000 and TEG6s (TEG and rapid TEG), ROTEM® delta hemostasis analyzers
- Two shipments per year

Coagulation Calibration Verification/Linearity LN35, LN36, LN37							
Analyte Program Code							
	LN35	LN36	LN37	Target Ranges			
Antithrombin activity				10%-130%			
Protein C activity				10%-100%			
Heparin, low molecular weight		ı		0.1-2.0 U/mL			
Heparin, unfractionated		ı		0.1-1.3 U/mL			
von Willebrand factor antigen				5%-140%			

The LN35, LN36, and LN37 CVL programs meet the CAP Accreditation requirements HEM.38009, 38010, and 38011.

LN Express service is available.

- LN35, LN37 Six 1.0-mL frozen plasma specimens per mailing
- LN36 Twelve 1.0-mL frozen plasma specimens per mailing, which include six for low molecular weight heparin and six for unfractionated heparin
- Two shipments per year; ships on dry ice

D-Dimer Calibration Verification/Linearity LN42								
Analyte	Analyte Program Code							
	LN42 Target Range							
D-dimer	I	220-5,500 ng/mL FEU						

LN Express service is available.

Fibrinogen Calibration Verification/Linearity LN44								
Analyte	Program Code							
	LN44 Target Range							
Fibrinogen		80-900 mg/dL						

LN Express service is available.

Drug-Specific Plate	elet Aggı	regation	PIA, PIAX
Procedure	Progra	m Code	Challenges per Shipment
	PIA	PIAX	
Aspirin assay			3
PRU test			3

#### **Program Information**

- Six 1.0-mL plasma specimens
- Two shipments per year

#### **Program Information**

- Six 1.0-mL frozen plasma specimens
- Two shipments per year; ships on dry ice

- PIA Three lyophilized specimens with diluents
- PIAX All Survey PIA specimens in duplicate
- For use with the Accumetrics VerifyNow® System
- Kit includes sufficient material to perform one assay; multiple assay reporting requires the purchase of PIAX
- Two shipments per year

Whole Blood Coagulation WP3, WP4, WP6, WP9, WP10							
Analyte	Challenges per Shipment						
	Program Code						
	WP3 WP4 WP6 WP9 WP10						
International normalized ratio (INR)	5 5 5 5 3						
Prothrombin time	5	5	5	5	_		

For method compatibility, see instrument matrix below.

#### **Program Information**

- WP3 Five 1.0-mL lyophilized plasma specimens with corresponding diluents
- WP4, WP6 Five 0.5-mL unitized lyophilized blood specimens
- WP9 Five 0.3-mL lyophilized plasma specimens
- Three shipments per year
- WP10 Three 0.3-mL lyophilized plasma specimens with corresponding diluents; two shipments per year

## Whole Blood Coagulation, Instrument Matrix

Instrument Program Code					
	WP3	WP4	WP6	WP9	WP10
Abbott CoaguSense™					
Helena Cascade POC – Citrated					
Helena Cascade POC – Noncitrated					
IL GEM PCL, PCL Plus – Citrated					
IL GEM PCL, PCL Plus – Noncitrated					
ITC Hemochron Jr. Signature/Signature +, Signature Elite and Jr. II – Citrated cuvette					
ITC Hemochron Jr. Signature/Signature +, Signature Elite and Jr. II – Noncitrated cuvette					
i-STAT					
Roche CoaguChek XS Plus and XS Pro					
Roche CoaguChek XS System					

Platelet Mapping* PLTM							
Analyte	Program Code	Challenges per Shipment					
	PLTM						
AA % aggregation/inhibition		2					
ADP % aggregation/inhibition		2					

<sup>\*</sup>This Survey requires the draw of a normal donor sample.

# Improve the reliability of your patient results with CAP Survey Validated Materials

Use the same material that is sent in the Surveys program to:

- · Identify and troubleshoot instrument/method problems
- · Correlate results with other laboratories or instruments
- Document correction of problems identified in Surveys
- · Utilize material with confirmed results as an alternative external quality control
- · Identify potential proficiency testing failures

Each laboratory receives a Survey Participant Summary, which includes readily available results.

## Coagulation—Limited, Validated Material

Validated Material	Program Code	Corresponding Survey	Page
Coagulation	CGM	CGL	160

## Program Information

- One 3.2% sodium citrate and two heparin vacuum tubes; two 3.5-mL plastic tubes; one vial of 0.2M CaCl<sub>2</sub>
- For use with the Haemonetics Platelet Mapping® assay
- · Two shipments per year

#### **Program Information**

 Five 1.0-mL lyophilized plasma specimens; three shipments per year; one 1.0-mL lyophilized plasma specimen and one 1.0-mL serum specimen; two shipments per year

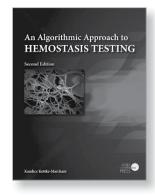
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# 15 Microbiology



# Microbiology testing is changing at a rapid pace—so is our proficiency testing.

Introducing three new programs for:

- Molecular testing utilizing a gastrointestinal panel, 5 challenges (GIP5)
- Molecular testing for carbapenem-resistant organisms (CRO)
- Molecular testing for vaginitis/vaginosis panel (MVP)

# Microbiology

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Virology	
Multidiscipline Microbiology	
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# Microbiology

# **Guide to Molecular Microbiology Testing**

Use this flowchart as a guide for ordering the appropriate Molecular Microbiology Surveys for your laboratory's testing menu. Participants must report five specimens for each mailing to meet CLIA requirements for the subspecialties of bacteriology. See the following pages for more detailed information about each Survey.

Do you perform molecular testing on Chlamydia or GC only?

Do you perform nucleic acid amplification other than GC?

Do you perform viral load testing only?

Do you perform molecular multiplexing?

**↓ YES** 

YES

**↓ YES** 

**↓** YES

Select from the following:

HC6, HC6X,HC7 Chlamydia/GC Nucleic **Acid Amplification** (page 186)

Select from the following:

IDO, ID1, ID1T, ID2, IDN

> **Nucleic Acid Amplification** (pages 197, 198, 201)

■ D1 Throat Culture (page 175)

MRS2M/MRS5M MRSA Screen. Molecular (page 183)

BOR Bordetella pertussis/ parapertussis (page 181)

CDF5 C. difficile Detection (page 182)

TVAG Trichomonas vaginalis (page 187)

VBDM

Zika (page 200)

Select from the following:

HV2 HIV Viral Load (page 199)

■ HCV2, HBVL, HBVL5 Hepatitis Viral Load (page 198)

■ VLS, VLS2 Viral Load (page 199) Select from the following:

ID3 Influenza A, Influenza B, RSV by NAA (page 198)

IDME Meningitis/Encephalitis Panel (page 202)

IDR Infectious Disease Respiratory Panel (page 202)

• GIP, GIP5 Gastrointestinal Panel (page 203)

GNBC, GPBC **Blood Culture Panels** (page 180)

# **Bacteriology**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

#### **Guide for Ordering Regulated Bacteriology Surveys**

Procedure	Program Code									
	D	D4	MC1	MC2	MC5	D2	D7	D3	MC4	D1
Bacterial identification									•	
Gram stain			•							
Antimicrobial susceptibility testing		•	•	•						
Bacterial antigen detection	I		•	•					•	

Participants must report five specimens for each mailing to meet CLIA requirements for the subspecialty of bacteriology. See the following pages for more detailed information about each Survey.

Bacteriology D				
Procedure	Program Code	Challenges per Shipment		
D				
Antimicrobial susceptibility testing		1 graded, 1 ungraded		
Bacterial antigen detection		2		
Bacterial identification		5		
Gram stain	I	1		

#### **Additional Information**

Antigen detection challenges will be included in the following shipments:

- Shipment A: C. difficile antigen/toxin\* and spinal fluid meningitis panel
- Shipment B: Spinal fluid meningitis panel and Group A Streptococcus
- Shipment C: C. difficile antigen/toxin\* and Group A Streptococcus

#### **Program Information**

- Five swab specimens with diluents in duplicate for culture
- Culture sources may include wounds, blood, respiratory, urines, stools, and anaerobes on a rotational basis
- Two specimens for bacterial antigen detection from the following:

One swab for Group A Streptococcus

One 1.0-mL lyophilized specimen for spinal fluid meningitis testing

One 0.5-mL lyophilized specimen for *Clostridium difficile*, for use with rapid or molecular testing methods

· Three shipments per year







Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

<sup>\*</sup>CMS has clarified that the *C. difficile* toxin test is not subject to CLIA regulations; therefore, toxin results will not be sent to CMS. Only *C. difficile* antigen results will be sent.

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Expanded Bacteriology DEX					
Analyte	Program Code Challenges per Shipment				
DEX					
Live organisms   2					

#### **Additional Information**

Expanded Bacteriology (DEX) is an educational opportunity that provides:

- Culture and susceptibility testing challenges for microbiology laboratories that perform complete identification and susceptibility of bacterial isolates including less common or problematic bacteria
- · More exposure to emerging bacterial pathogens and novel resistance mechanisms
- Ability to recognize and identify organisms that exhibit multiple drug-resistance patterns
- Recovery and identification of mixed pathogens such as yeast, aerobic, and anaerobic bacteria in cultures containing multiple organisms

#### **Program Information**

- Two swab specimens in duplicate with diluents to perform bacterial identification and susceptibility (when directed)
- · Three shipments per year



Microbiology Bench Tools Competency MBT					
Procedure Program Code Challenges per Shipmen					
MBT					
Bacterial identification	I	6			
Antimicrobial susceptibility testing	I	2			

#### Additional Information

Microbiology Bench Tools Competency (MBT) is a supplemental module for competency assessment and an educational resource for microbiology laboratories. The module:

- Provides organisms that challenge the basic elements of testing at the microbiology bench, including direct observation, monitoring, recording, and reporting of test results
- Can be used for both competency and educational purposes, including teaching and training pathology residents, new employees, and medical and MT/MLT students
- Provides identification and susceptibility results for supervisor use

This is not a proficiency testing program and participants will not return results to the CAP.

#### **Program Information**

- Six swab specimens with diluents for bacterial identification and susceptibility
- Culture sources will vary with each shipment
- Results will be provided with the kit to assess personnel competency
- · Two shipments per year





Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

GC, 1	hroat, and	d Urine Cu	ultures D	1, D2, D3,	D7
Procedure		Program Code			Challenges per Shipment
	D1	D2	D3	D7	
Antimicrobial susceptibility testing		ı		ı	1
Bacterial identification	I		ı	ı	5
Gram stain			ı	ı	1
Culture source:	Throat	Urine	Cervical	Throat/Urine	
Microbiologic level:	Presence or absence of Group A Streptococcus determination	-	Presence or absence of Neisseria gonorrhoeae determination	Combination of two throat and three urine culture specimens	

- D1- Five swab specimens with diluents in duplicate
- D2 Five loop specimens with diluents in duplicate, with one susceptibility challenge, and one Gram stain challenge
- D3 Five loop specimens with diluents in duplicate, and one Gram stain challenge
- D7 Two swab specimens with diluents in duplicate, three loop specimens with diluents in duplicate, one susceptibility challenge, and one Gram stain challenge
- Throat swabs compatible with molecular- and culture-based methods
- Three shipments per year





 $Refer to the Ordering Information\ provided\ for\ information\ regarding\ additional\ dangerous\ goods\ and\ related\ fees.$ 

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Bacteriology—Limited D4			
Procedure	Program Code	Challenges per Shipment	
	D4		
Antimicrobial susceptibility testing		1	
Group A Streptococcus antigen detection*		1	
Gram stain	I	1	
GC culture	I	1	
Throat culture	I	2	
Urine culture	I	2	

<sup>\*</sup>If you are using a waived method for *Streptococcus* testing, these results will not count toward the required five challenges for the subspecialty of microbiology.

#### **Program Information**

- Three loop specimens with diluents in duplicate, two swab specimens with diluents in duplicate, and one swab specimen for bacterial antigen detection
- Urine culture will have one susceptibility challenge
- Throat swabs compatible with molecular- and culture-based methods
- · Three shipments per year





Microbiology—Combination w/GC MC1, MC2			
Procedure	Challenges per Shipment		
	Program Code		
	MC1	MC2	
Antimicrobial susceptibility	1	1	
GC culture	5		
Gram stain	2	1	
Group A Streptococcus antigen detection*	1	1	
Throat culture	2	3	
Urine culture	3	5	

<sup>\*</sup>If you are using a waived method for *Streptococcus* testing, these results will not count toward the required five challenges for the subspecialty of microbiology.

#### **Program Information**

- MC1 Eight loop specimens with diluents in duplicate, two swab specimens with diluents in duplicate, and one swab specimen for bacterial antigen detection
- MC2 Five loop specimens with diluents in duplicate, three swab specimens with diluents in duplicate, and one swab specimen for bacterial antigen detection
- Urine cultures will only have one susceptibility challenge
- Throat swabs compatible with molecular- and culturebased methods
- · Three shipments per year







Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

Urine Colony Count	MC3, MC4	
Procedure	Challenges p	er Shipment
	Progra	m Code
	мсз	MC4
Urine colony count/urine culture identification	2	5
Group A Streptococcus antigen detection*		3
Throat culture		3

<sup>\*</sup>If you are using a waived method for Streptococcus testing, these results will not count toward the required five challenges for the subspecialty of microbiology.

- MC3 Two 2.0-mL urine specimens with diluents
- MC4 Five 2.0-mL urine specimens with diluents, three swab specimens with diluents in duplicate, and three swab specimens for bacterial antigen detection
- · Throat swabs compatible with molecular- and culturebased methods
- · Three shipments per year





Throat & Urine Culture/Rapid Strep A Antigen Detection MC5					
Procedure	Program Code	Challenges per Shipment			
MC5					
Antimicrobial susceptibility	1	1			
Gram stain	I	1			
Group A Streptococcus antigen detection*	•	2			
Throat culture		3			
Urine culture		3			

*If you are using a waived method for Streptococcus testing, these results will not count
toward the required five challenges for the subspecialty of microbiology.

#### **Program Information**

- Three loop specimens with diluents in duplicate, three swab specimens with diluents in duplicate, and two swab specimens for bacterial antigen detection
- Urine cultures will only have one susceptibility challenge
- · Throat swabs compatible with molecular- and culturebased methods
- · Three shipments per year





Gram Stai	n D5	
Procedure	Program Code	Challenges per Shipment
	D5	
Gram stain	ı	5

#### **Program Information**

- · Five air-dried, methanolfixed unstained glass slides
- · Three shipments per year





Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

Virtual Gram Stain Competency VGS1, VGS2				
Procedure	Progra	Program Code Challenges per Shipment		
	VGS1	VGS2		
Virtual gram stain basic			3	
Virtual gram stain advanced ■ 3				

#### Additional Information

- Virtual Gram Stain Basic Competency (VGS1) is for general and new laboratory technologists/technicians. Participants will assess the quality of specimens and stains and will report artifacts and detailed gram-positive and gram-negative morphology. Challenges will include specimens such as CSF, body fluids, and positive blood cultures.
- Virtual Gram Stain Advanced Competency (VGS2) is for experienced laboratory technologists/technicians and microbiologists. Participants will receive challenging images of sputum, body fluids, and other specimens to assess the quality, quantity, and typical morphology of both gram-positive and gram-negative organisms appropriate for the site.
- See system requirements on page 13.

#### **Program Information**

- Three online, whole slide images
- Results included in the kit to assess personnel competency
- Powered by DigitalScope® technology
- · Two shipments per year

Rapid Group A Strep Antigen Detection D6					
Procedure	Program Code Challenges per Shipment				
D6					
Group A Streptococcus antigen detection*	I	5			

<sup>\*</sup>If you are using a waived method for *Streptococcus* testing, these results will not count toward the required five challenges for the subspecialty of microbiology.

#### **Program Information**

- · Five swab specimens
- Not compatible with molecular- and culturebased methods
- · Three shipments per year



# Rapid Group A Strep Antigen Detection, Waived D9

Procedure	Program Code	Challenges per Shipment
	D9	
Group A Streptococcus antigen detection	1	2

- Two swab specimens
- Not compatible with molecular- and culturebased methods
- · Two shipments per year

Group B Strep Detection D8			
Analyte	Program Code	Challenges per Shipment	
	D8		
Group B Streptococcus	I	5	

- · Five swab specimens with diluents
- Compatible with molecularand culture-based methods
- · Three shipments per year



Bacterial Antigen Detection LBAS, SBAS				
Procedure	Progra	m Code	Challenges per Shipment	
	LBAS	SBAS		
Legionella pneumophila antigen detection			2	
Streptococcus pneumoniae antigen detection			2	

#### **Program Information**

- Two 0.5-mL liquid simulated clinical specimens
- Two shipments per year

Bacterial Strain Typing, Staphylococcus BSTS						
Analyte Program Code Challenges per Shipme						
BSTS						
Staphylococcus	I	2				

#### **Program Information**

- · Two sets of loops with diluents
- Two shipments per year



Blood Culture BCS				
Procedure	Program Code	Challenges per Shipment		
BCS				
Blood culture bacterial detection and identification		2		

#### **Program Information**

- Two specimens with diluents for inoculation of blood culture bottles
- Two shipments per year





Blood Culture, Staphylococcus aureus BCS1					
Analyte Program Code Challenges per Shipment					
BCS1					
Staphylococcus aureus/MRSA					

- Three specimens with diluents for inoculation of blood culture bottles
- Compatible with molecular methods for detection of S. aureus/MRSA from positive blood culture bottles
- Two shipments per year



Blood Culture Panel GNBC, GPBC			
Procedure	Progra	m Code	Challenges per Shipment
	GNBC	GPBC	
Identification of gram-negative organisms such as Acinetobacter, Citrobacter, Enterobacter, Proteus, Haemophilus, Klebsiella, Neisseria, Pseudomonas, Serratia, E. coli, and common resistance mechanisms isolated from positive blood culture bottles	•		3
Identification of gram-positive organisms such as Staphylococcus, Streptococcus, Enterococcus, Listeria, and common resistance mechanisms isolated from positive blood culture bottles		ı	3

#### **Program Information**

- Three 1.0-mL liquid simulated blood culture fluid specimens
- For laboratories using molecular multiplex panels
- Two shipments per year

These Surveys are not for the inoculation of blood culture bottles.

PNA FISH PNA1, PNA2			
Analyte	Progra	m Code	Challenges per Shipment
	PNA1	PNA2	
Staphylococcus	•		3
Yeast			3

#### **Program Information**

- Three specimens with diluents for inoculation of blood culture bottles
- · Two shipments per year





Bordetella pertussis/parapertussis, Molecular BOR					
Analyte Program Code Challenges per Shipmen					
BOR					
Bordetella pertussis ■ 3					
Bordetella parapertussis					

- · Three swab specimens
- Designed for molecular techniques
- Two shipments per year

Carbapenem-resistant Organisms CRO			
Analyte	Program Code	Challenges per Shipment	
	CRO		
KPC	I	3	
IMP		3	
NDM		3	
OXA		3	
VIM		3	

#### **Program Information**

- Three liquid specimens
- Designed for molecular methods such as Cepheid GeneXpert
- Two shipments per year

Campylobacter CAMP					
Analyte Program Code Challenges per Ship					
CAMP					
Campylobacter	ı	2			

#### **Program Information**

- Two swabs with diluents in duplicate
- · For use with rapid antigen, culture-based testing, and molecular methods
- Two shipments per year



C. difficile, 2 Challenge CDF2					
Analyte Program Code Challenges per Shipmen					
CDF2					
Clostridium difficile antigen/toxin ■ 2					

#### **Program Information**

- Two 0.5-mL lyophilized specimens, for use with rapid or molecular testing methods
- Two shipments per year



15

C. difficile, 5 Challenge CDF5					
Analyte	Program Code Challenges per Shipment				
CDF5					
Clostridium difficile antigen/toxin		5			

CMS has clarified that the *C. difficile* toxin test is not subject to CLIA regulations; therefore, toxin results will not be sent to CMS. Only *C. difficile* antigen results will be sent.

#### **Program Information**

- Five 0.5-mL lyophilized specimens, for use with rapid or molecular testing methods
- Three shipments per year

C. trachomatis Antigen Detection HC1, HC3			
Procedure	Program Code Challenges per Shipment		
	HC1	HC3	
Antigen detection (DFA)			5
Antigen detection (EIA)			5

#### **Program Information**

- HC1 Five 5-well slide specimens; for the detection of chlamydial elementary bodies by DFA
- HC3 Five 2.0-mL liquid specimens for Chlamydia antigen testing by EIA
- Three shipments per year

Fecal Lactoferrin FLAC				
Analyte	Program Code Challenges per Shipment			
	FLAC			
Fecal lactoferrin		3		

#### **Program Information**

- Three 0.5-mL simulated stool specimens
- For use with rapid methods
- Two shipments per year

Helicobacter pylori Antigen, Stool HPS					
Procedure Program Code Challenges per Shipme					
	HPS				
Helicobacter pylori antigen detection	I	2			

#### **Program Information**

- Two 0.5-mL fecal suspensions
- Two shipments per year





Methicillin-resistant S. aureus, 2 Challenge MRS						
Procedure Program Code Challenges per Shipment						
	MRS					
MRSA/MSSA detection	I	2				

- · Two swab specimens with diluents
- · For laboratories performing culture-based testing only or using culture and molecular testing
- Two shipments per year



MRSA Screen, Molecular, 2 Challenge MRS2M					
Procedure Program Code Challenges per Shipment					
	MRS2M				
MRSA/MSSA/SA detection	I	2			

#### **Program Information**

- Two swab specimens (in duplicate)
- For use with molecular methods that detect mecA
- Two shipments per year

Methicillin-resistant <i>Staphylococcus aureus</i> Screen, 5 Challenge MRS5					
Procedure Program Code Challenges per Shipment					
MRS5					
MRSA/MSSA detection   ■ 5					

#### **Program Information**

- · Five swab specimens with diluents
- · For laboratories performing culture-based testing only or using culture and molecular testing
- Three shipments per year



MRSA Screen, Molecular, 5 Challenge MRS5M				
Procedure Program Code Challenges per Shipment				
MRS5M				
MRSA/MSSA/SA detection   ■ 5				

#### **Program Information**

- · Five swab specimens (in duplicate)
- · For use with molecular methods that detect mecA
- Three shipments per year



Laboratory Preparedness Exercise LPX					
Analyte Program Code Challenges per Shipmen					
LPX					
Live organisms	<b>I</b> 3				

#### **Additional Information**

The Laboratory Preparedness Exercise (LPX) was developed as a collaborative effort between the College of American Pathologists, the Centers for Disease Control and Prevention (CDC), and the Association of Public Health Laboratories (APHL). Laboratories will be sent live organisms that either exhibit characteristics of bioterrorism agents or demonstrate epidemiologic importance and will be expected to respond following Laboratory Response Network Sentinel Laboratory Guidelines if a bioterrorism agent is suspected. All agents provided are excluded from the CDC's select agent list. These may include strains of *Bacillus anthracis*, *Yersinia pestis*, *Francisella tularensis*, and *Brucella abortus* that have been modified and are safe for testing in a laboratory that contains a certified Class II Biological Safety Cabinet and is capable of handling Category A and B agents.

Rapid Urease RUR				
Analyte	Program Code	Challenges per Shipment		
	RUR			
Urease	ı	3		

Stool Pathogen SP, SPN, SP1				
Analyte	Р	Program Code Challenges per Shipment		
	SP	SPN	SP1	
Adenovirus 40/41	I			2
C. difficile antigen/toxin	I			2
Rotavirus	I			2
Shiga toxin	I			2
Norovirus			ı	1

#### **Program Information**

- Three swab specimens with diluents
- Not available to international customers due to United States export law restrictions
- · Two shipments per year







#### **Program Information**

- Three simulated gastric biopsy specimens
- For use with methods such as CLOTEST®
- Two shipments per year

#### **Program Information**

- SP Two 1.0-mL liquid specimens; for use with rapid or molecular testing methods; not available to international customers due to United States export law restrictions
- SPN Two 1.0-mL liquid specimens; for use with rapid or molecular testing methods; intended for international laboratories
- SP1 One 1.0-mL liquid specimen compatible with molecular methods only
- Two shipments per year



Shiga Toxin ST					
Analyte Program Code Challenges per Shipme					
ST					
Shiga toxin	I	2			

- Two 0.5-mL liquid specimens
- · For use with direct shiga toxin testing only; not compatible with culture methods, cytotoxicity assays, or PCR
- Not available to international customers due to United States export law restrictions
- · Two shipments per year

Bacterial Vaginosis BV			
Procedure	Program Code Challenges per Shipmen		
	BV		
Bacterial vaginosis detection	I	3	

#### **Program Information**

- Three 1.0-mL liquid specimens
- For OSOM® BVBlue users
- Two shipments per year

Vaginitis S	creen '	VS, VS1	
Analyte	Progra	m Code	Challenges per Shipment
	VS*	VS1**	
Candida sp.			5
Gardnerella vaginalis	•		5
Trichomonas vaginalis			5

<sup>\*</sup>The biohazard warning applies to Survey VS.

#### **Program Information**

· VS - Five swabs for DNA probe technology; BD Affirm™ VP III probe detection method; three shipments per year



· VS1 - Five swabs for methods such as Sekisui OSOM Trichomonas Rapid Test, Trichomonas vaginalis methods; two shipments per year



<sup>\*\*</sup>Molecular users are encouraged to use Trichomonas vaginalis, Molecular TVAG on page 187.

Molecular Vagina	l Panel MVP	NEW
Analyte	Program Code	Challenges per Shipment
	MVP	
Candida species group		5
Candida krusei		5
Candida glabrata	I	5
Trichomonas vaginalis	I	5
Bacterial vaginosis		5

- Five liquid simulated vaginal specimens
- Designed for molecular methods such as BD MAX
- Three shipments per year

C. trachomatis and N. gonorrhoeae by NAA HC6, HC6X, HC7			
Procedure	Program Code		Challenges per Shipment
	HC6,* HC6X*	HC7	
Nucleic acid amplification (NAA)	I		5
Nucleic acid amplification (NAA/DNA)		•	5

<sup>\*</sup>The biohazard warning applies to Surveys HC6 and HC6X.

#### **Program Information**

- HC6 Three swab specimens and two 1.0-mL simulated urine specimens
- HC6X Three swab specimens; two 1.0-mL simulated urine specimens in duplicate
- Three shipments per year



- HC7 Five 1.5-mL simulated body fluid specimens; designed for Cepheid users
- · Three shipments per year

Vaginitis Screen, Virtual Gram Stain VS2		
Procedure	Program Code	Challenges per Shipment
	VS2	
Interpretation of Gram-stained vaginal smears	I	3

#### **Additional Information**

• See system requirements on page 13.

#### **Program Information**

- Three online, whole slide images
- Powered by DigitalScope technology
- Two activities per year; your CAP shipping contact will be notified via email when the activity is available



Trichomonas vaginalis, Molecular TVAG		
Analyte	Program Code	Challenges per Shipment
	TVAG	
Trichomonas vaginalis	I	3

- · Three liquid specimens
- Designed for molecular techniques
- · Two shipments per year

Vancomycin-resistant Enterococcus VRE		
Procedure	Program Code	Challenges per Shipment
	VRE	
Vancomycin-resistant <i>Enterococcus</i> (VRE) detection	ı	2

#### **Program Information**

- · Two swabs with diluents
- For use with molecular methods and culture-based testing
- · Two shipments per year



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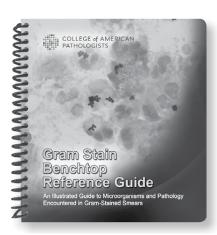
Gram Stain Benchtop Reference Guide is an illustrated guide to gram-positive and gram-negative organisms. Its rugged construction is well suited for students and medical technologists for heavy use at the workbench.

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## Mycobacteriology

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Mycobacteriology E			
Procedure	Program Code	Challenges per Shipment	
	E		
Acid-fast smear		1	
Antimycobacterial susceptibility testing		1 graded, 1 ungraded	
Mycobacterial identification*		5	

<sup>\*</sup>This procedure requires identification of Mycobacterium tuberculosis.

#### **Program Information**

- Five simulated clinical isolates with diluents and one specimen for performing an acid-fast bacillus smear
- Identification may be performed by culture or molecular methods
- · Two shipments per year



Mycobacteriology—Limited E1		
Procedure	Program Code	Challenges per Shipment
	E1	
Acid-fast smear	I	5
Mycobacterial culture	I	5

#### **Program Information**

- Five simulated specimens for acid-fast smears and/or for the determination of the presence or absence of acid-fast bacillus by culture
- Two shipments per year



Molecular MTB Detection and Resistance MTBR		
Procedure	Program Code	Challenges per Shipment
	MTBR	
Mycobacterium tuberculosis detection	ı	3
Rifampin resistance	•	3

#### **Program Information**

- Three 1.25-mL simulated sputum specimens for use with molecular methods
- · Not suitable for culture
- · Two shipments per year



## Mycology

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Mycology and Aerobic Actinomycetes F		
Procedure	Program Code	Challenges per Shipment
	F	
Antifungal susceptibility testing	I	1
Cryptococcal antigen detection	I	2 per year
Mold and yeast identification	I	5

#### **Program Information**

- · Five loops for culture with diluents in duplicate and one 1.0-mL simulated cerebrospinal fluid specimen (A and B shipments only)
- · Identification of yeasts, molds, and aerobic actinomycetes may be performed by molecular- and culture-based methods
- · Three shipments per year





Yeast F1		
Procedure	Program Code	Challenges per Shipment
	F1	
Antifungal susceptibility testing	I	1
Cryptococcal antigen detection	I	2 per year
Yeast identification	I	5

#### **Program Information**

- Five loops for culture with diluents in duplicate and one 1.0-mL simulated cerebrospinal fluid specimen (A and B shipments only)
- Identification of yeast may be performed by molecularand culture-based methods
- · Three shipments per year





Candida Culture F3		
Procedure	Program Code	Challenges per Shipment
	F3	
Yeast identification	I	5

- Five loops for culture with diluents in duplicate
- Identification of Candida species may be performed by culture, molecular, and rapid methods
- Three shipments per year



Cryptococcal Antigen Detection CRYP				
Procedure	Program Code Challenges per Shipmen			
	CRYP			
Cryptococcal antigen		5		

#### **Program Information**

- Five 1.0-mL simulated cerebral spinal fluids
- Three shipments per year

Galactomannan FGAL				
Analyte	Program Code Challenges per Shipmen			
	FGAL			
Galactomannan - Aspergillus		3		

Pr	ogram Information	
•	Three liquid specimens	;

- For use with methods such as Bio-Rad Platelia™
- Two shipments per year

Fungal Serology FSER				
Procedure	Program Code Challenges per Shipmer			
	FSER			
Serological detection of specific fungal antibodies	ı	3		

#### **Program Information**

- Three serum specimens
- For use with immunodiffusion methods
- Designed for the detection of antibodies to Aspergillus, Blastomyces, Coccidiodes, and Histoplasma
- Two shipments per year



Fungal Smear FSM				
Procedure	Program Code Challenges per Shipment			
	FSM			
KOH preparation/calcofluor white	I	3		

India Ink IND				
Procedure	Program Code Challenges per Ship			
	IND			
India ink	I	2		

Pneumocystis PCP1, PCP2, PCP4				
Procedure	Pro	ogram Co	ode	Challenges per Shipment
	PCP1	PCP2	PCP4	
PCP – Calcofluor white stain				3
PCP – DFA stain				3
PCP – GMS stain			I	3

- Three slides
- Two shipments per year

#### Program Information

- · Two liquid specimens
- Two shipments per year

#### **Program Information**

- Three images, each available as photographs and online images for Pneumocystis jirovecii
- Two shipments per year

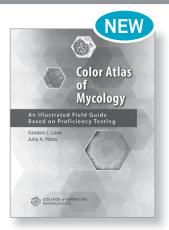
## Get the field guide to mycology

Built upon a foundation of more than 15 years of proficiency testing data, this resource book is designed to assist pathologists and medical technologists in the laboratory identification of fungi using the most recent taxonomic classifications. The text highlights diagnostic clusters of incorrect identifications and addresses conceptual classification issues. Comprehensive and complete, this book merges in vitro mycology (colonies on plated media/LPAB preparations) with in vivo mycology (histology/cytology).

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## **Parasitology**

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Parasitology P, P3, P4, P5				
Procedure Challenges per Shipment				ent
		Progra	m Code	
	Р	P3	P4	P5
Fecal suspension (wet mount)	2	5	2	
Fecal suspension (Giardia and/or Cryptosporidium immunoassay and modified acid-fast stain)	2	1	1	5
Giemsa-stained blood smear	1			
Preserved slide (for permanent stain)	2		3	

#### **Additional Information**

- The proficiency testing materials used for the Parasitology Surveys contain formalin as a preservative.
- Modified acid-fast stain results do not meet CLIA requirements for parasite identification.
- Number of specimen types are indicated in chart.

- P Five specimens
   consisting of thin and thick
  films for blood and tissue
  parasite identification;
  preserved slides for
  permanent stain; 0.75-mL
  fecal suspensions for direct
  wet mount examination,
  photographs, and/or online
  images; two 0.75-mL fecal
  suspensions for Giardia
  and/or Cryptosporidium
  immunoassay testing and
  modified acid-fast stain
- P3 Five 0.75-mL fecal suspensions for direct wet mount examination, photographs, and/or online images; one 0.75-mL fecal suspension for Giardia and/or Cryptosporidium immunoassay testing and modified acid-fast stain
- P4 Five specimens
   consisting of 0.75-mL fecal
   suspensions for direct wet
   mount examination, preserved
   slides for permanent stain,
   photographs, and/or online
   images; one 0.75-mL fecal
   suspension for Giardia
   and/or Cryptosporidium
   immunoassay testing and
   modified acid-fast stain
- P5 Five 0.75-mL fecal suspensions for Giardia and/or Cryptosporidium immunoassay testing and modified acid-fast stain
- · Three shipments per year



Blood Parasite BP				
Procedure	Program Code Challenges per Shipm			
	BP			
Thin/thick blood film sets*	I	5		

<sup>\*</sup>This Survey will include corresponding thick films when available.

- · Five Giemsa-stained blood film sets, photographs, and/or online images
- · A variety of blood parasites, including Plasmodium, Babesia, Trypanosoma, and filarial worms
- · Three shipments per year

Rapid Malaria RMAL				
Procedure Program Code Challenges per Shipmen				
	RMAL			
Rapid malaria detection	I	3		

<sup>\*</sup>Detects Plasmodium falciparum specific histidine-rich protein 2 (HRP2). May not be compatible with methods that use pLDH enzyme detection for mixed malaria infections.

#### **Program Information**

- Three 0.5-mL antigen specimens
- Two shipments per year

Expanded Parasitology PEX					
Procedure	Program Code Challenges per Shipment				
	PEX				
Parasite identification	3				

This program provides an educational opportunity to challenge laboratory professionals' competency in the identification of parasites utilizing photo images.

Program	Informa	+ian
riogiaiii	IIIIOIIIIa	LIUI

- Three images, each available as photographs and online images
- Two shipments per year

Ticks, Mites, and Other Arthropods TMO					
Procedure Program Code Challenges per Shipment					
ТМО					
Tick, mite, and arthropod identification	ı	3			

- Three images, each available as photographs and online images
- · Two shipments per year

15

Worm Identification WID					
Procedure Program Code Challenges per Shipmen					
	WID				
Worm identification		3			

#### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

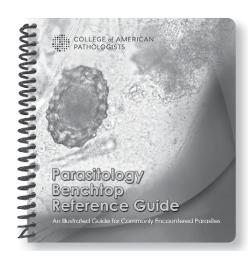
## Parasitology Benchtop Reference Guide (PBRG)

- More than 70 identifications for parasites commonly encountered in the clinical laboratory
- Detailed descriptions of the parasite morphology, ecology, and clinical significance
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## Virology

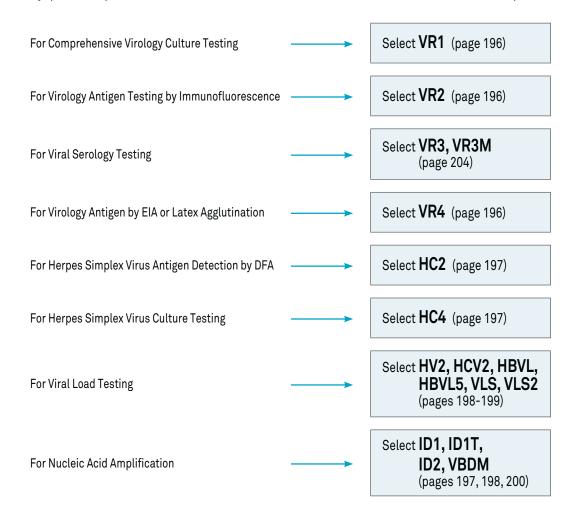
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#### **Guide for Ordering Regulated Virology Surveys**

Draguom Cada	Procedure		
Program Code	Viral Identification	Viral Antigen Detection	
VR1			
VR2			
VR4			
HC2			
HC4	I		
ID3			

## **Guide to Virology Testing**

Use this flowchart as a guide for ordering the appropriate Virology Surveys for your laboratory's testing menu. For the subspecialty of virology, you must test five specimens per mailing. If you have any questions, please call the Customer Contact Center at 800-323-4040 or 847-832-7000 option 1.



Virology Culture VR1					
Procedure Program Code Challenges per Shipment					
VR1					
Chlamydia trachomatis culture	I	1			
Viral isolation/identification	I	5			

- Five 0.5-mL specimens for viral culture and one 0.5-mL specimen for Chlamydia trachomatis culture
- Three shipments per year



Virology Antigen Detection (DFA) VR2				
Analyte/Procedure	Program Code Challenges per Shipment			
	VR2	Α	В	С
Adenovirus antigen	•	1	1	
Cytomegalovirus antigen	•	1	1	
Herpes simplex virus (HSV) antigen	•		1	1
Influenza A antigen		1		1
Influenza B antigen	•		1	
Parainfluenza antigen		1		1
Respiratory syncytial virus (RSV) antigen	•	1		1
Varicella-zoster antigen			1	1
Educational challenge	•	1		

#### **Program Information**

- Five 5-well slide specimens
- Three shipments per year

Virology Antigen Detection (Non-DFA) VR4						
Analyte Program Code Challenges per Shipmen						
	VR4					
Adenovirus (Not 40/41) antigen	I	5				
Influenza A antigen	■ 5					
Influenza B antigen	fluenza B antigen 🔳 5					
Respiratory syncytial virus (RSV) antigen	•	5				
Rotavirus antigen	•	5				

#### **Program Information**

- Five 1.5-mL specimens
- For use with enzyme immunoassay and/or latex agglutination methods
- Three shipments per year



Herpes Simplex Virus HC2, HC4					
Procedure	Program Code Challenges per Shipment				
	HC2 HC4*				
Antigen detection (DFA)	•		5		
Culture			5		

<sup>\*</sup>The biohazard warning applies to Survey HC4.

- HC2 Five 5-well slide specimens
- HC4 Five 0.5-mL lyophilized specimens
- Three shipments per year



Human Papillomavirus HPV			
Analyte	Program Code	Challenges per Shipment	
	HPV		
Human papillomavirus		2	

For laboratories using Digene, SurePath, and/or ThinPrep collection media, see page 279.

#### **Program Information**

- Two simulated cervical specimens contained in Digene transport media
- For Digene Hybrid Capture only
- Two shipments per year

Nucleic Acid Amplification, Viruses ID1, ID1T				
Analyte	Progra	am Code	Challenges per Shipment	
	ID1 ID1T			
Cytomegalovirus			1	
Enterovirus			1	
Epstein-Barr virus	I		1	
Herpes simplex virus			1	
Human herpesvirus 6			1	
Human herpesvirus 8	1		1	
Parvovirus B19	1		1	
Varicella-zoster virus			1	
BK virus	1		1	
JC virus			1	

#### **Program Information**

- ID1- Eight 1.0-mL liquid specimens
- ID1T Two 1.0-mL liquid specimens
- Two shipments per year

Nucleic Acid Amplification, Respiratory ID2					
Analyte Program Code Challenges per Shipment					
	ID2				
Adenovirus		1			
Coronavirus/Rhinovirus*		1			
Human metapneumovirus	I	1			
Influenza virus*	I	1			
Parainfluenza virus		1			
Respiratory syncytial virus (RSV)	I	1			

<sup>\*</sup>Coronavirus/Rhinovirus and Influenza virus will be included in the following shipments:

- · Shipment A: Coronavirus and Influenza A
- Shipment B: Rhinovirus and Influenza B

- Six 1.0-mL liquid specimens
- Two shipments per year

Influenza A, Influenza B, and RSV by Nucleic Acid Amplification ID3						
Analyte Program Code Challenges per Shipment						
ID3						
Influenza A virus   5						
Influenza B virus						
Respiratory syncytial virus (RSV)						

#### **Program Information**

- Five 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Three shipments per year

Hepatitis Viral Load HCV2, HBVL, HBVL5					
Procedure	Challenges per Shipment				
	Program Code				
	HCV2 HBVL HBVL5				
HCV genotyping	1				
HCV, qualitative	1				
HCV viral load	5				
HBV viral load	3 5				

- HCV2 Five 1.5-mL liquid plasma specimens; three shipments per year
- HBVL Three 1.25-mL plasma specimens; two shipments per year
- HBVL5 Five 2.0-mL plasma specimens; three shipments per year

HIV Viral Load HV2, HIVG				
Procedure	Progra	m Code	Challenges per Shipment	
	HV2	HIVG		
HIV-RNA viral load	ı		5	
HIV genotyping		•	1	

Viral Load VLS, VLS2				
Procedure	Progra	m Code	Challenges per Shipment	
	VLS	VLS2		
BK viral load	I	ı	2	
CMV viral load	I	ı	2	
EBV viral load	I	ı	2	
Adenovirus viral load		ı	2	
HHV6 viral load		•	2	

- HV2 Five 2.5-mL EDTA plasma specimens
- HIVG One 1.0-mL defibrinated plasma specimen
- Three shipments per year

#### **Program Information**

- VLS Six 1.0-mL EDTA plasma specimens; two shipments per year
- VLS2 Ten 2.0-mL EDTA plasma specimens; three shipments per year

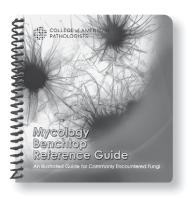
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Viral Load Calibration Verification/Linearity LN38, LN39, LN45				
Analyte	Program Code			
	LN38*	LN39	LN45	Target Ranges
CMV viral load	•			316-1.0M IU/mL
HIV viral load				50-5.0M IU/mL
HCV viral load				50-280M IU/mL

<sup>\*</sup>The biohazard warning applies to Survey LN38.

LN Express service is available.

#### **Program Information**

- LN38 Six 1.5-mL frozen plasma specimens
- Two shipments per year; ships on dry ice



- LN39 Six 2.5-mL plasma specimens
- LN45 Seven 2.5-mL frozen DNA specimens
- Two shipments per year; ships on dry ice (dry ice does not apply to LN39)

Vector-Borne Disease—Molecular VBDM				
Analyte	Program Code	Challenges per Shipment		
	VBDM			
Zika virus		3		

#### **Program Information**

- Three 1.5-mL liquid specimens
- Two shipments per year

# Uncover common infectious diseases with our uncommon resource

This resource book is rich in detailed information and real-world examples to help anatomic pathologists identify infectious organisms in tissue, study patterns of inflammation for clues, understand which stains are best for detecting specific micro-organisms, spot infectious disease mimics, and select ancillary methods of detection.

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## **Multidiscipline Microbiology**

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#### Guide for Ordering Regulated Molecular Multidiscipline Surveys

Program Code	Procedure		
	Bacterial Identification	Viral Identification	
IDR	ı	•	
GIP5	I		

Nucleic Acid Amplification, Organisms IDO, IDN				
Analyte/Procedure	Progra	m Code	Challenges per Shipment	
	IDO	IDN		
Bordetella pertussis/parapertussis	ı	•	1	
Legionella pneumophila/Chlamydophila pneumoniae*	ı	•	1	
Methicillin-resistant Staphylococcus aureus	ı		1	
Molecular typing (bacterial isolates)	ı	1	1	
Mycobacterium tuberculosis	ı		1	
Mycoplasma pneumoniae	ı		1	
Vancomycin-resistant Enterococcus	ı	ı	1	

#### **Program Information**

- IDO Seven liquid or swab simulated clinical isolate specimens and two diluents
- IDN Six liquid or swab simulated clinical isolate specimens and two diluents; designed for international laboratories that cannot receive MTB
- Two shipments per year



- \*Legionella pneumophila/Chlamydophila pneumoniae will be included in the following shipments:
  - Shipment A: Chlamydophila pneumoniae
  - Shipment B: Legionella pneumophila

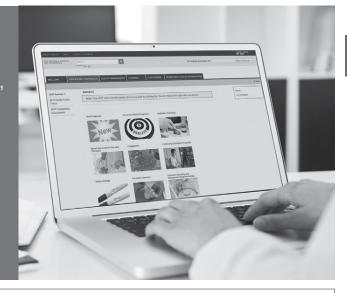
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Meningitis/Encephalitis Panel IDME				
Analyte	Program Code	Challenges per Shipment		
	IDME			
Escherichia coli K1	I	3		
Haemophilus influenzae	I	3		
Listeria monocytogenes	I	3		
Neisseria meningitidis	I	3		
Streptococcus agalactiae	I	3		
Streptococcus pneumoniae	I	3		
Cytomegalovirus (CMV)	I	3		
Enterovirus	I	3		
Herpes simplex virus 1 (HSV-1)	I	3		
Herpes simplex virus 2 (HSV-2)	I	3		
Human herpesvirus 6 (HHV-6)	I	3		
Human parechovirus	I	3		
Varicella-zoster virus (VZV)	I	3		
Cryptococcus neoformans/gattii	I	3		

- Three 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Two shipments per year

Infectious Disease, Respiratory Panel IDR				
Analyte	Program Code	Challenges per Shipment		
	IDR			
Adenovirus		5		
Bocavirus		5		
Bordetella (pertussis, parapertussis, bronchiseptica, holmesii)	ı	5		
Chlamydophila pneumoniae		5		
Coronavirus		5		
Human metapneumovirus		5		
Influenza A		5		
Influenza B		5		
Legionella pneumophila		5		
Mycoplasma pneumoniae		5		
Parainfluenza type 1, 2, 3		5		
Parainfluenza type 4		5		
Respiratory syncytial virus (RSV)		5		
Rhinovirus/Enterovirus		5		

- Five 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Three shipments per year

Gastrointestinal	Panel GIP5, GIP	
Analyte	Challenges p	er Shipment
	Progran	n Code
	GIP5 NEW	GIP
Adenovirus	5	3
Astrovirus	5	3
Campylobacter	5	3
Clostridium difficile, toxin A/B	5	3
Cryptosporidium	5	3
Cyclospora cayetanensis	5	3
Entamoeba histolytica	5	3
Enteroaggregative E. coli (EAEC)	5	3
Enteropathogenic <i>E. coli</i> (EPEC)	5	3
Enterotoxigenic <i>E. coli</i> (ETEC) LT/ST	5	3
Escherichia coli 0157	5	3
Giardia	5	3
Norovirus GI/GII	5	3
Plesiomonas shigelloides	5	3
Rotavirus A	5	3
Salmonella	5	3
Sapovirus	5	3
Shiga-like toxin producing E. coli (STEC) stx1/stx2	5	3
Shigella/Enteroinvasive E. coli (EIEC)	5	3
Shigella	5	3
Vibrio cholerae	5	3
Yersinia enterocolitica	5	3

- · GIP5 Five 1.0-mL simulated stool specimens; three shipments per year
- GIP Three 1.0-mL simulated stool specimens; two shipments per year
- · Designed for molecular multiplex panel users
- · Not available to international customers due to United States export law restrictions

Note: Only GIP5 analytes in bold type will meet CMS requirements for bacteriology and virology identification.

## Test your diagnostic skills as a pathologist with CPIP

Online, hands-on and interactive, the Clinical Pathology Improvement Program (CPIP) enables pathologists to sharpen their diagnostic skills in real time by working through an actual case. Each month, you will receive a new case, including related images and clinical background. As the case unfolds, more information is revealed, just as in the laboratory. Participants who successfully complete the posttest may apply their earned credits to their Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) SAM requirements. Enjoy a full year of CPIP and earn up to 15 CME/SAM credits.

Choose code CPIP/CPIP1 on your Surveys order form.

## **Infectious Disease Serology**

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Infectious Disease Serology VR3, VR3M				
Analyte	Program Code		Challenges per Shipment	
	VR3	VR3M		
Cytomegalovirus (CMV) – IgG, IgM, and total antibodies			1	
Epstein-Barr virus (EBV) – VCA – IgG, IgM EBNA – IgG, IgM, and total antibodies EA – IgG	1		1	
Helicobacter pylori – IgG, IgA, and total antibodies	ı		1	
Herpes simplex virus (HSV) – IgG antibody			1	
Mycoplasma pneumoniae – IgG, IgM, and total antibodies	ı		1	
Mumps – IgG			1	
Rubeola virus (English measles) – IgG antibody			1	
Toxoplasma gondii — IgG, IgM, and total antibodies	ı		1	
Varicella-zoster virus – IgG and total antibodies	ı		1	

#### **Program Information**

- VR3 Eight 0.5-mL lyophilized defibrinated plasma specimens
- VR3M One 0.5-mL lyophilized defibrinated plasma specimen
- Two shipments per year

Tick-Transmitted Diseases TTD			
Analyte	Program Code	Challenges per Shipment	
	TTD		
Antibodies to tick-transmitted disease organisms		3	

- Three 0.4-mL liquid specimens
- Designed for the detection of antibodies to Borrelia burgdorferi, Babesia microti, and Anaplasma phagocytophilum
- Two shipments per year

# 16 Immunology and Flow Cytometry



# The CAP broadens its network of laboratory experts through its collaborations.

Among the organizations with which we partner:

- American Association for Clinical Chemistry (AACC)
- American College of Medical Genetics and Genomics (ACMG)
- Association for Molecular Pathology (AMP)
- •National Society for Histotechnology (NSH)

## Immunology and Flow Cytometry

Immunology	206
Flow Cytometry	213

## **Immunology**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Immunology ANA, ASO, CRP, HCG, IM, RF/RFX, RUB/RUBX, IL									
Analyte		Program Code Challenges pe Shipment				Challenges per Shipment			
	ANA	AS0	CRP	HCG	IM	RF/ RFX	RUB/ RUBX	IL	
Antinuclear antibody (ANA)*								ı	5
ANA dry challenge	I								1
Antistreptolysin 0 (ASO)*		•							5
C-reactive protein, qualitative/quantitative								ı	2
hCG, serum, qualitative/ quantitative								ı	5
Infectious mononucleosis									5
Rheumatoid factor*								ı	5
Rubella (IgG)*								I	5

<sup>\*</sup>ANA, ASO, Rheumatoid factor, and Rubella are regulated analytes and are graded for both qualitative and quantitative methods. Semiquantitative and/or titer results for these analytes are ungraded/educational in this Survey and do not meet regulatory requirements.

#### **Program Information**

- ANA and RUB Five 0.5-mL serum specimens
- ANA Three educational pattern interpretation dry challenges per year
- ASO, HCG, and RF Five 1.0-mL serum specimens
- CRP Two 0.5-mL serum specimens; not appropriate for high-sensitivity CRP (hsCRP) methods
- IM Five 0.6-mL serum specimens
- RFX All Survey RF specimens in duplicate
- RUBX All Survey RUB specimens in duplicate
- IL All immunology specimens except RFX and RUBX
- · Three shipments per year



Immunology, General IG/IGX				
Analyte	Program Code	Challenges per Shipment		
	IG/IGX			
Alpha <sub>1</sub> -antitrypsin		5		
Complement C3		5		
Complement C4		5		
Haptoglobin		5		
IgA		5		
IgE		5		
IgG		5		
IgM		5		
Total kappa/lambda ratio		5		

- IG Ten 1.0-mL serum specimens
- IGX All Survey IG specimens in duplicate
- · Three shipments per year



## Immunology, Special; Immunology Special, Limited; and H. pylori IgG Antibody S2, S4, S5

and III pytori iga Antibody 32, 54, 55						
Analyte	Pro	Program Code		Challenges per Shipment		
	S2	S4	S5	Α	В	С
Anticentromere antibody				1		1
Anti-DNA antibody double-stranded	1	ı		1	1	1
Antiglomerular basement membrane (GBM), IgG antibody					1	1
Antimitochondrial antibody	ı			1	1	1
Antineutrophil cytoplasmic antibody (ANCA, anti-MPO, anti-PR3)				1	1	
Anti-RNP antibody				1	1	1
Anti-Sm antibody	1			1	1	1
Anti-Sm/RNP antibody				1	1	1
Antismooth muscle antibody				1	1	1
Anti-SSA antibody	ı			1	1	1
Anti-SSB antibody	1			1	1	1
Anti-SSA/SSB antibody				1	1	1
Antithyroglobulin antibody	I	ı		1	1	1
Antithyroid microsomal antibody	I	ı		1	1	1
Antithyroid peroxidase antibody		•		1	1	1
Ceruloplasmin		ı		1	1	1
Haptoglobin	ı	ı		1	1	1
Helicobacter pylori, IgG antibody		•		1	1	
			I	2	2	
IgD	I	I		1	1	1
IgG	I	I		1	1	1
IgG subclass proteins				1	1	1
Prealbumin (transthyretin)		•		1	1	1
Total kappa/lambda ratio		•		1	1	1
Transferrin		ı		1	1	1

Survey S2 is not appropriate for antimitochondrial antibody assays that are specific for the M2 antibody. Refer to Survey H on page 208.

#### Infectious Mononucleosis, Waived IMW Analyte **Program Code** Challenges per Shipment IMW 3 Infectious mononucleosis, waived

#### **Program Information**

- S2 A minimum of seven (0.5- to 1.0-mL/vial) serum specimens
- S4 A minimum of three (0.5- to 1.0-mL/vial) serum specimens
- S2 and S4 Three shipments per year
- S5 Two 1.0-mL serum specimens; two shipments per year



- Three 0.6-mL serum specimens
- Two shipments per year

Alpha-2-Macroglobulin A2MG				
Analyte	Program Code	Challenges per Shipment		
	A2MG			
Alpha-2-macroglobulin		3		

**Program Information** • Three 0.5-mL serum specimens

• Two shipments per year

- Three 0.5-mL serum specimens
- Two shipments per year

Antichromatin Antibody ACA				
Analyte	Program Code Challenges per Shipmer			
	ACA			
Antichromatin antibody	ı	3		

Antifilamentous Actin IgG Antibody FCN					
Analyte Program Code Challenges per Shipmen					
FCN					
Antifilamentous actin (f-actin) IgG antibody	ı	3			

## • Three 0.5-mL serum specimens

**Program Information** 

• Two shipments per year

Antihistone Antibody AHT					
Analyte	rte Program Code Challenges per Shipment				
	AHT				
Antihistone antibody	I	3			

Antimitochondrial M2 Antibody H			
Analyte	Program Code	Challenges per Shipment	
	Н		
Antimitochondrial M2 antibody (AMA-M2)	ı	2	

## **Program Information**

**Program Information** • Three 0.5-mL serum specimens

- Two 1.0-mL serum specimens
- Two shipments per year

• Two shipments per year

Autoimmune Gastritis Markers APC				
Analyte	Program Code	Challenges per Shipment		
	APC			
Antiparietal cell antibody	I	2		
Anti-intrinsic factor antibody	ı	2		

- Two 1.0-mL serum specimens
- Two shipments per year

Antiphospholipid Antibody ACL				
Analyte	Program Code	Challenges per Shipment		
	ACL			
Anticardiolipin antibody (polyclonal, lgG, lgM, and lgA)	•	3		
Beta-2-glycoprotein I (polyclonal, lgG, lgM, and lgA)	•	3		

- Three 0.5-mL lyophilized serum specimens
- Two shipments per year

Antiphosphatidylserine Antibody APS			
Analyte	Program Code	Challenges per Shipment	
	APS		
Anticardiolipin antibody (polyclonal, IgG, IgM, and IgA)	ı	3	
Antiphosphatidylserine antibody (IgG, IgM, and IgA)		3	
Beta-2-glycoprotein I (polyclonal, IgG, IgM, and IgA)	ı	3	

#### **Program Information**

- Three 0.5-mL lyophilized serum specimens
- Two shipments per year

Antiribosomal P Antibody ARP		
Analyte Program Code Challenges per Shipmen		
	ARP	
Antiribosomal P antibody		3

#### Anti-Saccharomyces cerevisiae Antibody ASC **Program Code** Challenges per Shipment Analyte **ASC** Anti-Saccharomyces cerevisiae antibody 2 (lgG and lgA)

#### **Program Information**

- Three 0.5-mL serum specimens
- Two shipments per year

- Two 1.0-mL serum specimens
- Two shipments per year

Celiac Serology CES, CESX			
Analyte	Program Code		Challenges per Shipment
	CES	CESX	
Antiendomysial antibody (IgA and IgG)	ı		3
Antiendomysial antibody screen (IgA and IgG)	ı		3
Antigliadin antibody (IgA and IgG)	I	I	3
Antideamidated gliadin peptide (DGP) antibody (IgA and IgG)	I	I	3
Anti-DGP antibody screen (IgA and IgG)	ı	ı	3
Antitissue transglutaminase (tTG) antibody (IgA and IgG)	I	I	3
Anti-DGP and anti-tTG antibody screen (IgA and IgG)	I	I	3

- CES Three 0.3-mL serum specimens
- CESX All Survey CES specimens in triplicate
- Two shipments per year

Cyclic Citrullinated Peptide Antibody (Anti-CCP) CCP			
Analyte Program Code Challenges per Shipment			
	ССР		
Anti-CCP		2	

Program Ir	nformation
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- Two 1.0-mL serum specimens
- Two shipments per year



Cytokines	CTKN	
Analyte	Program Code	Challenges per Shipment
	CTKN	
Interferon (IFN)-gamma		3
Interleukin (IL)-1 beta		3
IL-2		3
IL-6		3
IL-8		3
IL-10		3
Tumor necrosis factor (TNF)-alpha		3
Vascular endothelial growth factor (VEGF)		3

- Nine 2.0- to 3.0-mL lyophilized serum specimens
- Two shipments per year

Diagnostic Allergy SE		
Analyte/Procedure	Program Code	Challenges per Shipment
	SE	
IgE, multiallergen screen, qualitative		5
IgE, total		5
Specific allergens		25

- Five 2.0-mL serum specimens
- Includes common allergens from North America as well as less frequently tested allergens
- Three shipments per year

High-Sensitivity C-Reactive Protein HSCRP		
Analyte Program Code Challenges per Shipmer		
	HSCRP	
High-sensitivity C-reactive protein	ı	3

#### **Program Information**

- Three 0.5-mL liquid serum specimens
- Two shipments per year

Liver-Kidney Microsomal Antibody (Anti-LKM) LKM		
Analyte	Program Code	Challenges per Shipment
	LKM	
Anti-LKM		2

#### **Program Information**

- Two 1.0-mL serum specimens
- · Two shipments per year

M. tuberculosis-Stimulated Infection Detection QF		
Analyte	Program Code	Challenges per Shipment
	QF	
M. tuberculosis		2

#### **Program Information**

- Two 1.0-mL lyophilized serum specimens and one lyophilized mitogen control
- · For use with the QuantiFERON®-TB Gold and Gold Plus methods only
- · Two shipments per year

Rheumatic Disease Special Serologies RDS		
Analyte	Program Code	Challenges per Shipment
	RDS	
Anti-Jo-1 (antihistidyl t-RNA synthetase)	I	1
Anti-Scl-70 (anti-DNA topoisomerase)		1

- Two 1.0-mL serum specimens
- Two shipments per year



Syphilis Serology G		
Analyte	Program Code	Challenges per Shipment
	G	
Syphilis		5

 $Use\ with\ VDRL,\ RPR,\ MHA-TP/TP-PA/PK-TP/TPHA,\ EIA,\ CMIA,\ multiplex\ flow\ immunoassay,\ TP-LIA$ IgG, FTA-ABS, and USR methods. Laboratories performing syphilis serology on CSF specimens may also use this Survey.

## **Program Information**

- Five 1.5-mL serum specimens
- Three shipments per year



Total Hemolytic Complement CH50		
Analyte	Program Code	Challenges per Shipment
	CH50	
Total hemolytic complement, 50% lysis	ı	2
Total hemolytic complement, 100% lysis	ı	2

#### **Program Information**

- Two 0.5-mL lyophilized serum specimens
- Two shipments per year

Viscosity V			
Analyte	Program Code	Challenges per Shipment	
	V		
Viscosity		2	

#### **Program Information**

- Two 10.0-mL serum specimens
- Two shipments per year

Serum Free Light Chains SFLC			
Analyte	Program Code	Challenges per Shipment	
	SFLC		
Kappa serum free light chain	I	3	
Lambda serum free light chain	ı	3	
Kappa/lambda serum free light chain ratio and ratio interpretation	ı	3	

- Three 1.0-mL serum specimens
- Two shipments per year

## Flow Cytometry

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Flow Cytometry FL, FL1, FL2				
Procedure	Program Code			Challenges per Shipment
	FL	FL1	FL2	
DNA content and cell cycle analysis	ı			3
Lymphocyte immunophenotyping	I			3

These Surveys are not appropriate for hematology analyzers with monoclonal antibody analysis.

#### **Program Information**

- FL1 Three 1.5-mL whole blood specimens
- FL2 Three 1.1-mL specimens; two fixed cell line specimens and one calibrator for DNA content and cell cycle analysis
- FL All Survey FL1 and FL2 specimens
- · Three shipments per year

Flow Cytometry—Immunophenotypic Characterization of Leukemia/Lymphoma FL3			
Procedure	Program Code	Challenges per Shipment	
	FL3		
Leukemia/lymphoma		2	

Survey FL3 is appropriate for laboratories that perform technical component-only flow cytometric testing.

#### **Program Information**

- Two 2.5-mL whole blood specimens and/or cell lines simulating leukemia/ lymphoma; images of tissue sections, bone marrow, and/ or peripheral blood smears with clinical histories
- Online, whole slide images powered by DigitalScope® technology
- · Two shipments per year

Flow Cytometry, CD34+ FL4			
Analyte	Program Code	Challenges per Shipment	
	FL4		
CD34+		2	

- Two 1.5-mL stabilized human CD34+ specimens
- · Two shipments per year

Flow Cytometry, Interpretation Only FL5		
Procedure	Program Code	Challenges per Shipment
	FL5	
Flow cytometry, interpretation only of leukemia/lymphoma	ı	3

Survey FL5 is for laboratories that receive flow cytometry analyses from referring laboratories to perform the interpretation of patient results.

#### **Program Information**

- Three cases consisting of gated dot plots, clinical histories, and pertinent laboratory data, as well as images of tissue sections, bone marrow, and/or peripheral blood smears
- Online, whole slide images powered by DigitalScope technology
- Two shipments per year

Flow Cytometry—B-ALL Minimal Residual Disease BALL			
Analyte	Program Code	Challenges per Shipment	
	BALL		
B-ALL minimal residual disease	I	3	

Survey BALL is intended for laboratories that currently or will begin to perform minimal residual disease (MRD) testing (rare event analysis) for B lymphoblastic leukemia/lymphoma. The cases presented will be based on Children's Oncology Group (COG) approved B-ALL MRD method.

#### Minimum Requirements

- For ungated list mode files, each challenge will include 2-3 "virtual tubes" performed by a 6-color method. The participant will download the files from a CAP website and analyze the data on a MAC or PC using standard software, including FlowJo, FACSDiva, Kaluza, Woodlist, etc. The files will be large as each tube will have collected hundreds of thousands of events. Boolean gating will be necessary to see if there is an atypical population.
- Demo list mode files are available for download to determine software compatibility prior to enrollment. Go to fileshare.cap.org (user name: demo-b-all-mrd; password: ProductTest1).

#### **Program Information**

- One case consisting of gated dot plots
- Two cases with ungated list mode files that allow users to examine gating strategies and interpret antibody staining patterns; files are in standard format (see Minimum Requirements)
- · Two shipments per year

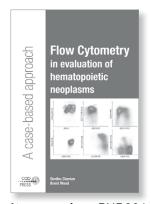
## Rely on this reference for a rapidly growing field

Flow Cytometry in Evaluation of Hematopoietic Neoplasms: A Case-Based Approach is a practical, case-based guide to flow cytometric analysis in the workup of hematopoietic neoplasms presenting in the peripheral blood, marrow, lymphoid tissue, and extranodal sites.

# Available in print and ebook formats. View sample pages and order online:

• printed books at estore.cap.org

· ebooks at ebooks.cap.org



**Item number:** PUB221 Hardcover; 176 pages; 2012

Flow Cytometry—Plasma Cell Neoplasms PCNEO			
Analyte Program Code Challenges per Shipment			
	PCNEO		
Plasma cell neoplasms	I	3	

Survey PCNEO is especially helpful for laboratories that have leukemia/lymphoma assays that target plasma cell neoplasms, including cytoplasmic light chain staining.

#### **Program Information**

- One 2.5-mL whole blood specimen and/or cell line simulating a plasma cell neoplasm with clinical history and pertinent laboratory data
- · Two cases consisting of gated dot plots, clinical histories, and pertinent laboratory data
- Each challenge includes images of tissue sections, bone marrow, and/or peripheral blood smears
- Online, whole slide images powered by DigitalScope technology
- Two shipments per year

## Flow Cytometry—Immunophenotypic Characterization of Paroxysmal Nocturnal Hemoglobinuria PNH

Analyte	Program Code	Challenges per Shipment
	PNH	
PNH RBC analysis	I	2
PNH WBC analysis	I	2

#### **Additional Information**

- The PNH Survey complies with the recommendations from the Guidelines for the Diagnosis and Monitoring of Paroxysmal Nocturnal Hemoglobinuria and Related Disorders by Flow Cytometry for RBC and WBC analysis. Due to the unique nature of these human, donor-based materials, the shipping dates are subject to change. If this should occur, the CAP will provide notification prior to the originally scheduled shipping date.
- This Survey is appropriate for high-sensitivity testing (≤0.01% PNH type clone in red cells and/or granulocytes).

- Two 0.5-mL whole blood specimens for RBC and WBC analysis
- · Two shipments per year

Fetal Red Cell Detection HBF			
Procedure	Program Code	Challenges per Shipment	
	HBF		
Kleihauer-Betke and flow cytometry	I	2	
Rosette fetal screen	I	2	
Acid elution whole slide image	I	1	

#### **Program Information**

- Two 1.2-mL liquid whole blood specimens
- Not designed for F cell quantitation
- Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope® technology
- Two shipments per year

Rare Flow Antigen Validation RFAV1, RFAV2			
Analyte	Program Code Challenges per Shipment		
	RFAV1	RFAV2	
CD1a	ı		1
CD103			1

Surveys RFAV1 and RFAV2 do not meet the regulatory requirements for proficiency testing.

#### **Additional Information**

These Surveys meet the CAP Accreditation Checklist item FLO.23737, which requires semiannual testing of antigens.

ZAP-70/CD49d Analysis by Flow Cytometry ZAP70			
Analyte	Program Code	Challenges per Shipment	
	ZAP70		
Zeta chain-associated protein kinase 70	I	3	
CD49d	I	3	

#### **Additional Information**

- This Survey tests for intracellular ZAP-70 staining of a cell line. It allows for assessment of the laboratory's staining techniques and the antibody clone used for ZAP-70 detection.
- CD49d is an important prognostic marker for CLL by flow cytometry. This Survey allows assessment of the laboratory's ability to detect CD49d.

#### **Program Information**

- RFAV1 One 4.5-mL cell line specimen
- RFAV2 One 1.0-mL stabilized cell specimen
- · Two shipments per year

- Three 4.5-mL cell line specimens
- · Two shipments per year

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# Transfusion Medicine, Viral Markers, and **Parentage Testing**



#### Confirm all your instruments are in working order.

Monitor performance across multiple instruments between proficiency testing events with Quality Cross Check.

- Gain an early indication of instrument problems.
- Assess comparability across multiple automated and manual methods with the new Quality Cross Check— Transfusion Medicine program (JATQ).

#### Transfusion Medicine, Viral Markers, and Parentage Testing

Viral Markers	228
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New Programs NEW	
Quality Cross Check—Transfusion Medicine (JATQ)	220
Viral Markers—Series 6, Additional Material (VM6X)	

Transfusion Medicine.....

#### **Transfusion Medicine**

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Transfusion Medicine J, J1			
Procedure	Progra	am Code	Challenges per Shipment
	J	J1	
ABO grouping		•	5
Rh typing		•	5
Antibody detection			5
Antibody identification			5
Compatibility testing			5
Red blood cell antigen typing			1

#### **Program Information**

- J Five 2.0-mL 3% red blood cell suspensions; five 3.0-mL corresponding serum specimens; one 2.0-mL donor red blood cell suspension
- J1 Five 2.0-mL 3% red blood cell suspensions; five 3.0-mL corresponding serum specimens
- Three shipments per year



Transfusion Medicine—Educational Challenge JE1		
Procedure	Program Code	Challenges per Shipment
	JE1	
Educational challenge	I	1

- One educational challenge, which may consist of a paper challenge and/or wet specimen for ABO grouping, Rh typing, antibody detection, antibody identification, compatibility testing, antigen typing, and/or direct antiglobulin testing
- Must order in conjunction with Survey J
- Three shipments per year



Electronic Crossmatch EXM			
Procedure Program Code Challenges per Shi			
	EXM		
Electronic crossmatch	I	3	

Survey EXM assists laboratories in monitoring the performance of their electronic crossmatching system.

#### **Program Information**

- · Three simulated, ISBT-128 labeled donor unit challenges and three corresponding red blood cell suspensions
- Must order in conjunction with Survey J
- Two shipments per year



Transfusion Medicine—Automated JAT		
Procedure	Program Code	Challenges per Shipment
	JAT	
ABO grouping		5
Antibody detection		5
Antibody identification	I	5
Compatibility testing		5
Rh typing		5

#### **Transfusion Medicine—Automated Education Challenge JATE1** Procedure **Program Code** Challenges per Shipment JATE1 ı 1 Eduational challenge

#### **Program Information**

- · Five bar-coded 4.0-mL 18%-22% whole blood specimens and one 4.0-mL 18%-22% whole blood specimen for compatibility testing
- · Three shipments per year



- · One educational challenge, which may consist of a paper challenge and/or wet specimen for ABO grouping, Rh typing, antibody detection, antibody identification, and/or compatibility testing
- Must order in conjunction with Survey JAT
- Three shipments per year



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Quality Cross Check—Transfusion  Medicine JATQ			
Procedure	Program Code	Challenges per Shipment	
	JATQ		
ABO grouping	I	3	
Antibody detection	I	3	
Rh typing	I	3	

This program does not meet regulatory requirements for proficiency testing; see Survey JAT on page 219. For additional information about the Quality Cross Check program, see page 40.

#### **Program Information**

- Three 7.0-mL 13-17% whole blood specimens
- · May be used with automated and manual procedures
- Two shipments per year

Electronic Crossmatch, Automated EXM2			
Procedure	Program Code Challenges per Shipment		
	EXM2		
Electronic crossmatch	I	3	

Survey EXM2 assists laboratories in monitoring the performance of their electronic crossmatching system.

#### **Program Information**

- · Three simulated, ISBT-128 labeled donor unit challenges and three corresponding red blood cell suspensions
- Must order in conjunction with Survey JAT
- · Two shipments per year



ABO Subgroup Typing ABOSG			
Procedure Program Code Challenges per Shipmer			
	ABOSG		
ABO subgroup typing	I	3	
Rh typing	I	3	

- Three 2.0-mL 3% red blood cell suspensions; three 2.0-mL corresponding serum specimens
- · Two shipments per year

Red Blood Cell Antigen Genotyping RAG				
Procedure Program Code Challenges per Shipme				
RAG				
Red blood cell antigen genotype with predictive phenotype	ı	3		

#### **Program Information**

- · Three 2.0-mL whole blood specimens
- · Two shipments per year

Red Blood Cell Antigen Typing RBCAT				
Procedure Program Code Challenges per Shipmer				
	RBCAT			
Red blood cell antigen typing   2				

#### **Additional Information**

Survey RBCAT is for donor centers and transfusion laboratories performing non-automated/manual red cell phenotyping for the management of patients with complex serology (ie, alloimmunization, sickle cell disease, warm autoimmune hemolytic anemia). Challenges will include antigens such as Rh, Kell, MNSs, Duffy, and Kidd blood group system.

Antibody Titer ABT, ABT1, ABT2, ABT3					
Procedure		Progra	ım Code		Challenges per Shipment
	АВТ	ABT1	ABT2	ABT3	
Anti-A titer	1				1
Anti-B titer				ı	1
Anti-D titer					1

#### **Program Information**

- Two 2.0-mL 2%-4% red blood cell suspensions
- · Two shipments per year

- · ABT One 2.0-mL plasma specimen for anti-A titer with one corresponding titer cell (3%–4% red blood cell suspension); one 2.0-mL plasma specimen for anti-D titer with one corresponding titer cell (3%-4% red blood cell suspension)
- · ABT1- One 2.0-mL plasma specimen for anti-A titer with one corresponding titer cell (3%-4% red blood cell suspension)
- · ABT2 One 2.0-mL plasma specimen for anti-D titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT3 One 2.0-mL plasma specimen for anti-B titer with one corresponding titer cell (3%-4% red blood cell suspension)
- Two shipments per year

Transfusion-Related Cell Count TRC			
Procedure Program Code Challenges per Shipmer			
	TRC		
Platelet count (platelet-rich plasma)	I	5	
WBC count	I	4	
Dry challenge	I	2	

WBC counts must be performed using a Nageotte chamber, fluorescence microscopy, or by flow cytometry.

#### **Program Information**

- Five 1.2-mL suspensions of platelet-rich plasma
- Two 1.0-mL vials leukocytereduced platelet material
- Two 1.0-mL vials leukocytereduced red blood cells
- Three shipments per year

Direct Antiglobulin Testing DAT					
Procedure	Program Code Challenges per Shipment				
DAT					
Direct antiglobulin testing	I	3			

Procedure	Program Code	Challenges per Shipment
	DAT	
Direct antiglobulin testing	I	3

Eluate Survey ELU					
Procedure Program Code Challenges per Shipm					
ELU					
Antibody elution   2					

Fetal Red Cell Detection HBF			
Procedure Program Code Challenges per Shipme			
	HBF		
Kleihauer-Betke and flow cytometry	I	2	
Rosette fetal screen	1	2	
Acid elution whole slide image	I	1	

#### **Program Information**

- Three 2.0-mL 3% red blood cell suspensions
- · For use with manual method
- · Two shipments per year

#### **Program Information**

- Two 2.0-mL 50% red blood cell suspensions
- Two shipments per year

- Two 1.2-mL liquid whole blood specimens
- Not designed for F cell quantitation
- · Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope® technology
- · Two shipments per year

Platelet Serology PS			
Procedure Program Code Challenges per Shipmer			
	PS		
Antibody detection	1	3	
Platelet crossmatch	I	3	
Platelet antibody identification	I	3	

A low concentration of sodium azide may be present in the specimens and may affect lymphocytotoxicity methods.

#### **Program Information**

- Three 3.0-mL plasma specimens
- For use with solid-phase red cell adherence, flow cytometry, and EIA/ELISA methods
- Two shipments per year

Transfusion Medicine Comprehensive—Competency Assessment TMCA				
Procedure Program Code Challenges per Shipment				
	TMCA			
ABO grouping	I	2		
Antibody detection	1	2		
Antibody identification	1	2		
Compatibility testing	1	2		
Rh typing 2				

Survey TMCA does not meet the regulatory requirements for proficiency testing.

#### **Program Information**

- Two 2.0-mL 3% red blood cell suspensions
- Two 3.0-mL corresponding serum specimens
- One 2.0-mL donor 3% red blood cell suspension
- Three shipments per year; order shipments individually or for an entire year

Direct Antiglobulin Test—Competency Assessment TMCAD				
Procedure Program Code Challenges per Shipment				
TMCAD				
Direct antiglobulin testing   2				

Survey TMCAD does not meet the regulatory requirements for proficiency testing.

#### **Program Information**

- Two 2.0-mL 3% red blood cell suspensions
- Two shipments per year; order shipments individually or for an entire year

#### Test your diagnostic skills as a pathologist with CPIP

Online, hands-on and interactive, the Clinical Pathology Improvement Program (CPIP) enables pathologists to sharpen their diagnostic skills in real time by working through an actual case. Each month, you will receive a new case, including related images and clinical background. As the case unfolds, more information is revealed, just as in the laboratory. Participants who successfully complete the posttest may apply their earned credits to their Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) SAM requirements. Enjoy a full year of CPIP and earn up to 15 CME/SAM credits.

Choose code CPIP/CPIP1 on your Surveys order form.

Eluate Competency Assessment TMCAE		
Procedure Program Code		
TMCAE		
I	2	
	Program Code	

Survey TMCAE does not meet the regulatory requirements for proficiency testing.

#### **Program Information**

- Two 2.0-mL 50% red blood cell suspensions
- Two shipments per year; order shipments individually or for an entire year

Fetal Red Cell Quantitation—Competency Assessment TMCAF				
Procedure Program Code Challenges per Shipment				
TMCAF				
Kleihauer-Betke, flow cytometry	-Betke, flow cytometry   2			
Rosette fetal screen   2				
Acid elution whole slide image				

Survey TMCAF does not meet the regulatory requirements for proficiency testing.

#### **Program Information**

- Two 1.2-mL whole blood specimens
- Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope technology
- Two shipments per year; order shipments individually or for an entire year

#### Have you created or updated your CAP Profile?

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- Business affiliations
- Certifications
- Contact preferences
- Inspector-related information
- Personal contact information
- · Specialties and skills
- Addresses

To create or update your profile, visit cap.org, log in, and click on UPDATE MY PROFILE.



Procedure	Program Code		Challenges per Shipment
	СВТ	SCP	
Absolute CD3		ı	2
Absolute CD34	ı	•	2
Absolute CD45			2
Bacterial culture		•	2
%CD3+		•	2
%CD34+		•	2
%CD45+		ı	2
BFU-E		ı	2
CFU-E		ı	2
CFU-GEMM		•	2
CFU-GM		•	2
Total CFC		•	2
Fungal culture		•	2
Hematocrit		ı	2
Hemoglobin		ı	2
Mononuclear cell count		ı	2
Nucleated red cells		•	2
Number of CD34 positive events	1		2
Number of CD45 positive events	1		2
Total nucleated cells	ı		2
Viability	ı		2
WBC count		ı	2

**₩** 

- · Because these materials are human donor-based, the ship date is subject to change. If this should occur, notification will be provided prior to the scheduled date. In some instances, the program may ship in two installments.
- Due to material stability, no replacements will be available.
- See International Shipping information section in the Ordering Information Supplement regarding additional dangerous goods shipping fees.

#### **Program Information**

- · CBT Two 2.5-mL cord blood specimens; designed for assays required for the production of umbilical cord blood stem cell programs
- SCP Two 3.0-mL peripheral blood specimens; designed for laboratories that process and assess the suitability of stem cells
- · Two shipments per year



Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

Bacterial Detection in Platelets BDP, BDP5			
Procedure	Program Code Challenges per Shipment		
	BDP	BDP5	
Bacterial culture and detection systems			2
Bacterial culture and detection systems			5

- The Centers for Medicare & Medicaid Services (CMS) requires proficiency testing for bacterial detection/identification. Please select the appropriate program for your laboratory based on the information below.
- Survey BDP is designed for donor centers/laboratories that are associated with a CMS-certified microbiology laboratory with the same CLIA number and are participating in an approved proficiency testing program for bacterial detection.
- Survey BDP5 is designed for donor centers/laboratories that are performing bacterial detection for the purposes of platelet unit screening and are not associated with a CMS-certified microbiology laboratory with the same CLIA number.
- See International Shipping information section in the Ordering Information Supplement regarding additional dangerous goods shipping fees.

#### **Program Information**

- BDP Two lyophilized pellet specimens with diluents; two shipments per year
- BDP5 Five lyophilized pellet specimens with diluents; three shipments per year



# Bacterial Detection in Platelets, Rapid BDPV, BDPV5 Procedure Challenges per Shipment Program Code BDPV BDPV5 CMS certified rapid immunoassay 2 5

#### Additional Information

- The Centers for Medicare & Medicaid Services (CMS) requires proficiency testing for bacterial detection in platelets.
- Survey BDPV is designed for donor centers/laboratories that are associated with a CMS-certified microbiology laboratory with the same CLIA number and are participating in an approved proficiency testing program for bacterial detection.
- Survey BDPV5 is designed for donor centers/laboratories that are performing bacterial detection for the purposes of platelet unit screening and are not associated with a CMS-certified microbiology laboratory with the same CLIA number
- See International Shipping information section in the Ordering Information Supplement regarding additional dangerous goods shipping fees.

#### **Program Information**

- BDPV Two frozen specimens; two shipments per year
- BDPV5 Five frozen specimens; three shipments per year
- For use with methods such as Verax Biomedical





Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

Expanded Transfusion Medicine Exercises ETME1				
Procedure Program Code Challenges per Shipment				
ETME1				
Expanded challenges   2				

Survey ETME1 is an educational opportunity that offers:

- More challenging and/or complex antibody identification
- · Comprehensive case studies in transfusion medicine
- Simulated collaboration with other professionals, including those within or outside your institution
- A method for determining the laboratory's ability to recognize and integrate problem solving skills in transfusion medicine

The wet challenge may consist of specimens for ABO grouping, Rh typing, antibody detection, antibody identification, compatibility testing, antigen typing, direct antiglobulin testing, antibody titer, and/or antibody elution.

#### **Program Information**

- One paper challenge and one wet challenge consisting of a serum specimen(s) and/or red blood cell suspensions
- Two shipments per year

#### Make critical transfusion decisions with confidence

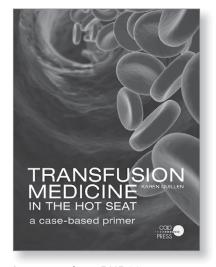
Transfusion Medicine in the Hot Seat is a valuable educational resource for pathology trainees and pathologists practicing transfusion medicine. The text presents a total of 26 realistic transfusion scenarios divided into three sections:

- Antibodies
- Blood Components
- Complications

The short-case format makes the information easily accessible and can serve as the basis for a transfusion medicine curriculum in clinical pathology.

Select Transfusion Medicine in the Hot Seat (PUB224) on your Surveys order form. Or, view sample pages and order online:

- · printed books at estore.cap.org
- · ebooks at ebooks.cap.org



**Item number:** PUB224 Softcover; 123 pages

#### Viral Markers

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Viral Markers—Series 1 VM1			
Analyte	Program Code	Challenges per Shipment	
	VM1		
Anti-HAV (total: IgM and IgG)		5	
Anti-HAV (IgG)		5	
Anti-HBc (total: IgM and IgG)		5	
Anti-HBs		5	
Anti-HBs, quantitative		5	
Anti-HCV		5	
Anti-HIV-1		5	
Anti-HIV-1/2		5	
Anti-HIV-2		5	
HBsAg		5	

Do not use Survey VM1 with rapid anti-HCV, anti-HIV-1, or anti-HIV-1/2 kits. See page 229 for Surveys appropriate for rapid methods.

Viral Markers—Series 2 VM2				
Analyte	Program Code Challenges per Shipment			
VM2				
Anti-HBe		5		
HBeAg	■ 5			

Viral Markers—Series 3 VM3			
Analyte Program Code Challenges per Shipme			
	VM3		
Anti-CMV		3	
Anti-HTLV-I/II	3		
HIV-1 p24 antigen	■ 3		

Viral Markers—Series 4 VM4				
Analyte Program Code Challenges per Shipment				
VM4				
Anti- <i>Trypanosoma cruzi</i> (Chagas disease) ■ 2				

#### **Program Information**

- Five 3.5-mL plasma specimens
- · Three shipments per year

#### **Program Information**

- Five 3.5-mL plasma specimens
- Three shipments per year

#### **Program Information**

- Three 3.5-mL plasma specimens
- Two shipments per year

- Two 1.0-mL plasma specimens
- Two shipments per year

Viral Markers—Series 5 VM5				
Analyte Program Code Challenges per Shipmen				
	VM5			
Anti-HAV (IgM)	I	5		
Anti-HBc (IgM)	HBc (IgM)  ■ 5			

#### **Program Information**

- Five 1.5-mL plasma specimens
- Three shipments per year

Viral Markers—Series 6 VM6, VM6X				
Analyte	Program Code Challenges per Shipme			
	VM6 VM6X NEW			
Anti-HIV-1/2			5	
HIV-1 p24 antigen	•	I	5	

#### **Program Information**

- VM6 Five 0.5-mL plasma specimens
- VM6X All Survey VM6 specimens in duplicate
- For use with methods such as the Abbott ARCHITECT HIV Combo, Bio-Rad GS HIV Combo, and Alere Determine HIV Combo assays
- Three shipments per year

Anti-HIV 1/2 AHIV, AHIVW				
Analyte/Procedure	Progra	m Code	Challenges per Shipment	
	AHIV AHIVW			
Anti-HIV-1, Anti-HIV-2, Anti-HIV-1/2			5	
Anti-HIV-1, Anti-HIV-1/2, waived methods only			2	

#### **Program Information**

- AHIV Five 0.5-mL plasma specimens; three shipments per year
- AHIVW Two 0.5-mL plasma specimens; two shipments per year

Anti-HCV, Rapid M	RHCVW	
Analyte/Procedure	Program Code	Challenges per Shipment
	RHCVW	
Anti-HCV, waived methods only	I	3

- Three 0.5-mL plasma specimens
- Two shipments per year

Nucleic Acid Testing NAT					
Analyte Program Code Challenges per Shipme					
	NAT				
HBV	I	5			
HCV	I	5			
HIV	I	5			
West Nile virus	I	5			

#### Program Information

- Five 6.0-mL plasma specimens
- Designed for blood donor centers performing nucleic acid testing on donor units
- Compatible with HIV, HCV, and HBV multiplex assays
- Three shipments per year

Vector-Borne Disease—Molecular VBDM			
Analyte Program Code Challenges per Shipmen			
	VBDM		
Zika virus	ı	3	

#### **Program Information**

- Three 1.5-mL liquid specimens
- Two shipments per year

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#### **Parentage Testing**

Parentage/Relationship Test—Filter Paper PARF			
Analyte/Procedure	Program Code	Challenges per Shipment	
	PARF		
Calculation challenge (paper challenge)		1	
DNA testing (PCR)		4	

#### **Program Information**

- Three blood-stained filter paper paternity trio specimens; two buccal swabs for a second allegedfather challenge
- Reporting for short tandem repeats (STRs), XSTRs, Y-STRs, as well as the conclusions provided
- · Three shipments per year

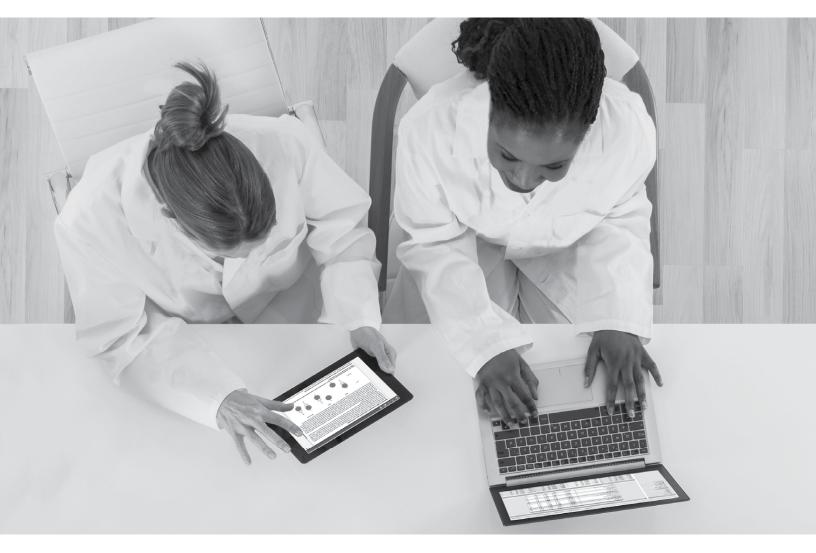
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- Inspecting Personnel Records
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# Histocompatibility

#### 18

# 18 Histocompatibility



#### We live our mission of quality.

- More than 8,000 CAP-accredited laboratories
- More than 4,000 CAP inspections annually
- More than 22,400 laboratory sites using CAP proficiency testing

#### Histocompatibility

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

# HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I) MX1B, MX1C, MX1E

Procedure	Program Code			Challenges per Shipment
	MX1B	MX1C	MX1E	
Crossmatching				6
Antibody screen				3
Antibody identification				3

#### **Additional Information**

Blood donor screening is now a reporting option for antibody screening results. This change covers the use of HLA testing in blood centers/hospital laboratories for the purpose of donor qualification.

#### **Program Information**

- MX1B Three 0.25-mL plasma specimens; two (approximately 1.0 x 10<sup>6</sup> cells) purified peripheral blood lymphocyte specimens
- MX1C Three 0.50-mL plasma specimens; two (approximately 4.0 x 10<sup>6</sup> cells) purified peripheral blood lymphocyte specimens
- MX1E Three 0.30-mL plasma specimens; must be ordered in conjunction with Survey MX1B or MX1C
- · Three shipments per year

# HLA Crossmatching, Antibody Screen, and Antibody Identification (Class II) MX2B, MX2C, MX2E

Procedure	Pro	ogram Co	de	Challenges per Shipment
	MX2B	MX2C	MX2E	
Crossmatching				6
Antibody screen			ı	3
Antibody identification	I	ı	ı	3

#### **Additional Information**

Blood donor screening is now a reporting option for antibody screening results. This change covers the use of HLA testing in blood centers/hospital laboratories for the purpose of donor qualification.

#### **Program Information**

- MX2B Three 0.25-mL plasma specimens; two (approximately 7.2 x 10<sup>6</sup> cells) purified peripheral blood lymphocyte specimens
- MX2C Three 0.50-mL plasma specimens; two (approximately 9.6 x 10<sup>6</sup> cells) purified peripheral blood lymphocyte specimens
- MX2E Three 0.30-mL plasma specimens; must be ordered in conjunction with Survey MX2B or MX2C
- Three shipments per year

For laboratories conducting BOTH Class I and Class II HLA testing, see next page.

#### **HLA Crossmatching, Antibody Screen, and Antibody** Identification (Class I/II) Combinations MXB, MXC

Procedure	Corresponding Survey	Progra	am Code
		MXB	MXC
Crossmatching, antibody screen, and antibody identification (Class I)	MX1B*	•	
Crossmatching, antibody screen, and antibody identification (Class II)	MX2B*	•	
Crossmatching, antibody screen, and antibody identification (Class I)	MX1C*		I
Crossmatching, antibody screen, and antibody identification (Class II)	MX2C*		

<sup>\*</sup>See page 234 for specimen and analyte information.

#### **Program Information**

- MXB Class I: three 0.25-mL plasma specimens, three purified peripheral blood lymphocyte specimens; Class II: three 0.25-mL plasma specimens, three purified peripheral blood lymphocyte specimens
- MXC Class I: three 0.50-mL plasma specimens, three purified peripheral blood lymphocyte specimens; Class II: three 0.50-mL plasma specimens, three purified peripheral blood lymphocyte specimens
- Three shipments per year

Class I & II HLA Molecular Typing DML				
Procedure Program Code Challenges per Shipment				
	DML			
Molecular HLA-A, -B, and -C typing (Class I)	I	5		
Molecular HLA-DR, -DQ, and -DP typing (Class II)	ı	5		

Class I & II HLA Molecular Typing DML			
Procedure	Program Code	Challenges per Shipment	
	DML		
Molecular HLA-A, -B, and -C typing (Class I)	I	5	
Molecular HLA-DR, -DQ, and -DP typing (Class II)	1	5	

#### **Program Information**

- Ten approximately 1.0-mL whole blood specimens in CPD-A
- · Serologic equivalents and MICA reporting available
- Three shipments per year

HLA-B27 Typing B27					
Procedure	Program Code	Challenges per Shipment			
	B27				
HLA-B27 typing	■ 5				

- Five 2.0-mL whole blood specimens in CPD-A
- Two shipments per year

Antibody Titer ABT, ABT1, ABT2, ABT3					
Procedure		Program Code Challenges per Shipme			
	ABT	ABT1	ABT2	ABT3	
Anti-A titer		I			1
Anti-B titer				ı	1
Anti-D titer	•		ı		1

#### **Program Information**

- ABT One 2.0-mL plasma specimen for anti-A titer with one corresponding titer cell (3%-4% red blood cell suspension); one 2.0-mL plasma specimen for anti-D titer with one corresponding titer cell (3%-4% red blood cell suspension)
- ABT1- One 2.0-mL plasma specimen for anti-A titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT2 One 2.0-mL plasma specimen for anti-D titer with one corresponding titer cell (3%-4% red blood cell suspension)
- ABT3 One 2.0-mL plasma specimen for anti-B titer with one corresponding titer cell (3%–4% red blood cell suspension)
- Two shipments per year

Monitoring Engraftment ME					
Procedure	Program Code Challenges per Shipme				
	ME				
Stem cell monitoring engraftment		3			

- Five 1.0-mL whole blood specimens
- Designed for laboratories supporting stem cell transplant and laboratories monitoring chimerism after organ transplantation
- Three shipments per year

ecific arugs.			
	DADR2		_

#### HLA-DRB1\*15:02 3 DQA1\*02 3 DQA1\*03 3 DQA1\*05 3 DQB1\*02:01 3 DQB1\*02:02 **Additional Information** These Surveys will challenge the laboratory to accurately identify the presence or absence of alleles associated with a variety of disease states (listed below) and/or the adverse reactions to specific drugs

HLA Disease Association-Drug Risk DADR1, DADR2

DADR1

**Program Code** 

DADR2

Challenges per Shipment

3

3

3

3

3

3

3 3

3

3

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3

3

3 3

3 3

3 3

3

3

3

#### DADR1

Analyte

HLA-A\*31:01

HLA-B\*13:01

HLA-B\*15:02

HLA-B\*57:01

HLA-B\*58:01

HLA-A\*29:01

HLA-A\*29:02

HLA-DQA1\*04:01 HLA-DQA1\*05:01

HLA-DQB1\*03:02

HLA-DQB1\*06:02

HLA-DRB1\*03:01

HLA-DRB1\*03:02

HLA-DRB1\*04:02

HLA-DRB1\*04:03 HLA-DRB1\*04:06

HLA-DRB1\*08:02

HLA-DRB1\*08:04

HLA-DRB1\*14:04 HLA-DRB1\*14:05

HLA-DRB1\*14:08

HLA-DRB1\*15:01

- O Carbamezepine induced Stevens-Johnson syndrome (CSJ)
- O Allopurinol Stevens-Johnson syndrome (ASJ)
- o Hypersensitivity to abacavir (HA)
- o Dapsone hypersensitivity (DH)

- O Celiac disease (CD)
- O Narcolepsy (N)
- o Pemphigus vulgaris (PV)
- O Psoriasis (P)
- o Antiglomerular basement membrane disease (ABM)
- o Birdshot retinochoroidopathy (BR)
- o Idiopathic myopathy (IM)

- Three 0.1-mL specimens, each containing 200 µg/mL of human DNA in media
- · Two shipments per year

#### **Atlas of Transplant Pathology (PUB124)**

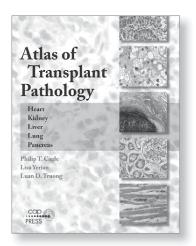
This atlas serves as a handy resource for practical interpretation of solid organ transplant biopsies and other specimens by general pathologists as well as subspecialists.

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Item number: PUB124 254 pages; 2015

# **Genetics and Molecular Pathology**

#### 19

# Genetics and Molecular Pathology



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#### Genetics and Molecular Pathology

Cytogenetics	240
Biochemical and Molecular Genetics	243
Next-Generation Sequencing	252
Molecular Oncology—Solid Tumors	
Molecular Oncology—Hematologic	
e, e	

### New Programs NEW



CAP/ACMG Cardiomyopathy Sequencing Panel (CMSP)	244
CAP/ACMG Inherited Cancer Sequencing Panel (ICSP).	245

#### Cytogenetics

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

CAP/ACMG Cytogenetics CY, CYBK				
Analyte/Procedure	Program Code Challenges per Shipment			
	CY	СҮВК		
Chromosome abnormality	ı		6	
Karyotype nomenclature			6	
Educational challenge, ungraded			1 per year	

#### **Additional Information**

Each challenge includes a case history and images of metaphase cells that are representative of each case. Each mailing will include three constitutional and three neoplastic challenges.

#### **Program Information**

- CY Online images of metaphase cells; delivered two times a year; your CAP shipping contact will be notified via email when the activity is available
- CYBK Prints of metaphase cells; two shipments per year





CAP/ACMG Fluorescence In Situ Hybridization CYF, CYI				
Disease/Procedure Program Code Challenges per Ship				
	CYF	CYI	Α	В
Constitutional and Hematologic Disorders				
FISH for constitutional disorder - slides	1		1	1
FISH for constitutional disorder - paper/photograph challenge	ı		2	2
FISH for hematologic disorder - slides	ı		1	1
FISH for hematologic disorder - paper/photograph challenge	ı		2	2
Urothelial Carcinoma				
FISH for urothelial carcinoma		ı	2	2

#### Additional Information

• CYF 2019-A:

Constitutional disorder - Prenatal aneuploidy probes (two slides)

Constitutional disorder - (two paper/photograph challenges)

Hematologic disorder - 20q deletion (two slides)

Hematologic disorder - (two paper/photograph challenges)

• CYF 2019-B:

Constitutional disorder - SRY (two slides)

Constitutional disorder - (two paper/photograph challenges)

Hematologic disorder - 7q deletion (two slides)

Hematologic disorder - (two paper/photograph challenges)

• CYF is prepared from cell suspension samples. For FISH in paraffin-embedded tissues, see page 241.

- CYF Four slides and four paper/photograph challenges
- CYI Two 250-µL cell samples suspended in ethanol from two different specimens; participants use FISH to detect chromosome abnormalities
- · Two shipments per year



#### **CAP/ACMG Fluorescence In Situ Hybridization** for Paraffin-Embedded Tissue CYH, CYJ, CYK, CYL

Analyte/Procedure	F	Program Code		Challenges per Shipment		
	CYH	CYJ	CYK	CYL	Α	В
Breast Cancer						
HER2 gene amplification	•				10	10
Brain/Glioma Tissue						
1p/19q					1	1
Solid Tumor						
MDM2 gene amplification			•		1	
ROS1 gene rearrangement			•			1
Lymphoma Tissue						
MYC gene rearrangement					1	
BCL6 gene rearrangement				ı		1

#### **Program Information**

- · CYH Two unstained, fivecore tissue microarray slides equivalent to 10 paraffinembedded breast tissue specimens; two H&E stained tissue microarray slides will also be provided
- CYJ Four unstained slides; one H&E stained slide
- · CYK, CYL Two unstained slides; one H&E stained slide
- · All CYJ, CYK, CYL specimens will be 4.0-micron tissue sections mounted on positively charged glass
- Two shipments per year



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Proudly display the mark. It distinguishes you as one of more than 8,000 laboratories worldwide that have attained CAP accreditation, the most respected and recognized laboratory accreditation in the world.

CAP/ACMG Constitutional Microarray CYCGH					
Procedure Program Code Challenges per Shipm					
	CYCGH				
Cytogenomic microarray analysis for constitutional abnormality	ı	2			
Educational paper/photograph challenge for constitutional abnormality	ı	1			

#### **Program Information**

- Two 3.0-µg DNA specimens; one paper/photograph challenge
- Two shipments per year



#### **Additional Information**

Participants will identify and characterize gains or losses and the cytogenetic location of abnormalities detected.

This Survey is not appropriate for low resolution arrays that are designed to detect only aneuploidy.

CAP/ACMG Oncology Microarray CYCMA				
Procedure	Program Code	Challenges per Shipment		
	CYCMA			
Cytogenomic microarray analysis for oncologic abnormality	ı	1		
Educational paper/photograph challenge for oncologic abnormality	ı	1		

#### **Program Information**

- One 3.0-ug DNA specimen; one paper/photograph challenge
- Two shipments per year



#### **Additional Information**

Participants will identify and characterize gains or losses and the cytogenetic location of abnormalities detected.

#### **Biochemical and Molecular Genetics**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

CAP/ACMG Biochemical Genetics BGL, BGL1				
Analyte/Procedure	Progra	m Code	Challenges per Shipment	
	BGL	BGL1		
Acylcarnitines, qualitative and quantitative			1	
Amino acids, qualitative and quantitative			1	
Carnitine, qualitative and quantitative		ı	3	
Glycosaminoglycans (mucopolysaccharides), qualitative and quantitative	•		1	
Organic acids, qualitative and quantitative			1	
Educational challenge			1	

#### **Program Information**

• BGL -

Acylcarnitines: One 0.1-mL plasma specimen

Amino acids: One 1.0-mL plasma or 2.0-mL urine specimen

Glycosaminoglycans (mucopolysaccharides): One 2.0-mL urine specimen

Organic acids: One 7.5-mL urine specimen

Educational challenge: Will consist of any one of the BGL analytes

- BGL1 Three 0.3-mL serum specimens
- Two shipments per year



CAP/ACMG Alpha-1 Antitrypsin Genotyping AAT					
Analyte/Procedure	Program Code Challenges per Shipme				
	AAT				
Alpha-1 antitrypsin (SERPINA1) genotyping	ı	3			

This Survey will test for the M, S, and Z alleles.

CAP/ACMG Apolipoprotein E Genotyping APOE					
Analyte/Procedure Program Code Challenges per Shipment					
APOE					
Apolipoprotein E (APOE) genotyping ■ 3					

This Survey is designed for laboratories utilizing APOE testing for hyperlipoproteinemia type III and Alzheimer diseases and will test for APOE e2, APOE e3, and APOE e4.

#### **Program Information**

- Three 10.0-µg extracted **DNA** specimens
- · Two shipments per year



- Three 10.0-µg extracted **DNA** specimens
- · Two shipments per year



CAP/ACMG BRCA1/2 Sequencing BRCA			
Analyte/Procedure	Program Code	Challenges per Shipment	
	BRCA		
BRCA1/2 DNA sequencing and variant interpretation	ı	3	
BRCA1/2 duplication/deletion analysis	ı	3	

- Test your skill at reporting and interpreting DNA sequence variants for BRCA1/2 using standard nomenclature.
- · Receive a summary and discussion of responses, including comments on the variant nomenclature and known or expected outcomes from identified variants.
- Primers are not included; laboratories are expected to utilize the primers used in routine clinical testing.

#### **Program Information**

- Three 10.0-µg extracted DNA specimens
- · Two shipments per year



CAP/ACMG Cardi Sequencing Pai	NEW	
Analyte/Procedure	Program Code	Challenges per Shipment
Cardiomyopathy sequencing panel	3	

#### **Additional Information**

- This proficiency challenge is for laboratories performing gene panels, exome sequencing, and whole genome sequencing to detect germline variants associated with inherited forms of cardiomyopathy.
- Participants will be asked to identify variants in the following genes: MYBPC3, MYH7, TNNI3, TNNT2, and TPM1.

- Three 80.0-µL purified extracted DNA specimens (50 ng/µL)
- · Two shipments per year



CAP/ACMG Hemoglobinopathies Genotyping HGM						
Analyte/Procedure Program Code Challenges per Shipment						
НСМ						
Alpha-thalassemia		3				
Beta-thalassemia ■ 3						
Hemoglobin S/C ■ 3						

#### **Program Information**

- Three 50.0-µg extracted DNA specimens
- Two shipments per year



CAP/ACMG Inher Sequencing Pa	NEW	
Analyte/Procedure	Program Code	Challenges per Shipment
Inherited cancer sequencing panel	•	3

- This proficiency challenge is for laboratories performing gene panels, exome sequencing, and whole genome sequencing to detect germline variants associated with inherited forms of cancer.
- Participants will be asked to identify variants in the following genes: *BRCA1*, *BRCA2*, *CDKN2A*, *MLH1*, *MSH2*, *MSH6*, and *PMS2*.

#### **Program Information**

- Three 80.0-μL purified extracted DNA specimens (50 ng/μL)
- Two shipments per year



#### **Bone Marrow Benchtop Reference Guide**

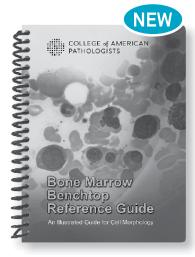
Bone Marrow Benchtop Reference Guide is an illustrated guide to common and rare cells. With more than 60 different identifications and a detailed description for each cell morphology, it's an affordable, convenient way to identify various cell types quickly and confidently. Its rugged construction is well suited for heavy use at the workbench.

Select Bone Marrow Benchtop Reference Guide (BMBRG) on your Surveys order form.

#### Or, view sample pages and order online:

- printed books at estore.cap.org
- · ebooks at ebooks.cap.org

Additional Information



Item number: BMBRG Spiral bound; 2018

#### **CAP/ACMG Molecular Genetics** MGL1, MGL2, MGL3, MGL4, MGL5 **Program Code** Challenges per Disease/Gene Shipment MGL1 MGL2 MGL3 MGL4 MGL5 Bloom syndrome 3 BRCA1/2 3 Canavan 3 Connexin 26 Cystic fibrosis ı ı 3/2(MGL5) DMD/Becker ı 3 Factor V Leiden 3 ı Familial dysautonomia 3 ı Fanconi anemia complementation 3 group C Fragile X ı 3 Friedreich ataxia ı 3 Gaucher ı 3 Glycogen storage disease type IA ı 3 Hemochromatosis i 3 Hemoglobin S/C 3 Huntington 3 Methylene tetrahydrofolate reductase (MTHFR) c.665C>T (677C>T) and ı 3 c.1286A>C (1298A>C) Mucolipidosis IV 3 Multiple endocrine neoplasia 3 type 2 (MEN2) Myotonic dystrophy 3 3 Niemann-Pick type A/B Plasminogen activator inhibitor (PAI)-1 3 Prader-Willi/Angelman syndrome 3

#### Additional Information

Continued on the next page

- The BRCA1/2 program (module MGL3) is designed for laboratories testing for the three Ashkenazi Jewish founder mutations.
- The cystic fibrosis programs (modules MGL2 and MGL5) are designed for laboratories that are testing for the minimum mutation panel for population-based carrier screening (ie, the ACMG-23 mutation panel) from the ACMG Technical Standards and Guidelines for CFTR Mutation Testing, expanded panels, PolyT variant analysis, and/or full gene sequencing.
- Module MGL4 is designed for laboratories testing for diseases/disorders related to Ashkenazi Jewish ancestry.
- The Prader-Willi/Angelman syndrome program is designed for laboratories using methylation techniques for analysis.

- MGL1, MGL2, MGL3, MGL4 - Three 50.0-µg extracted DNA specimens
- MGL5 Two 50.0-μg extracted DNA specimens
- · Two shipments per year



#### **CAP/ACMG Molecular Genetics** MGL1, MGL2, MGL3, MGL4, MGL5 continued **Program Code** Challenges per Disease/Gene Shipment MGL1 MGL2 MGL3 MGL4 MGL5 Prothrombin 3 RhD 3 Spinal muscular atrophy ı 3 Spinocerebellar ataxia 3 Tay-Sachs

#### Additional Information

- The BRCA1/2 program (module MGL3) is designed for laboratories testing for the three Ashkenazi Jewish founder mutations.
- The cystic fibrosis programs (modules MGL2 and MGL5) are designed for laboratories that are testing for the minimum mutation panel for population-based carrier screening (ie, the ACMG-23 mutation panel) from the ACMG Technical Standards and Guidelines for CFTR Mutation Testing, expanded panels, PolyT variant analysis, and/or full gene sequencing.
- Module MGL4 is designed for laboratories testing for diseases/disorders related to Ashkenazi Jewish ancestry.
- The Prader-Willi/Angelman syndrome program is designed for laboratories using methylation techniques for analysis.

CAP/ACMG Inherited Metabolic Diseases IMD1, IMD2, IMD3				
Analyte/Procedure	Program Code Challenges per Shipmen			Challenges per Shipment
	IMD1	IMD2	IMD3	
Mitochondrial DNA deletion syndromes				3
MCAD				3
Mitochondrial cytopathies* ■ 3				

<sup>\*</sup>Includes disorders/diseases such as Leber hereditary optic neuropathy and myoclonus epilepsy with ragged red fibers (MERRF).

#### **Program Information**

- MGL1, MGL2, MGL3, MGL4 - Three 50.0-µg extracted DNA specimens
- MGL5 Two 50.0-μg extracted DNA specimens
- · Two shipments per year



- IMD1 Three 50.0-μL DNA specimens (50.0 ng/ μL DNA PCR product that encompasses the entire mitochondrial genome)
- IMD2, IMD3 Three 50.0-μg extracted DNA specimens
- · Two shipments per year



CAP/ACMG Molecular Genetics Sequencing SEC, SEC1				
Procedure	Program Code Challenges per Shipmer			
	SEC	SEC1		
DNA sequencing interpretation challenge	ı		3	
NA sequencing 3				

- Test your skill at interpreting and reporting DNA sequence variants for inherited diseases using standard nomenclature.
- Receive a summary and discussion of responses, including comments on nomenclature, known or expected outcomes from identified variants, and teaching points about genes/disorders represented.
- Results for both programs (SEC, SEC1) must be submitted online through e-LAB Solutions Suite.

#### **Program Information**

- SEC DNA sequence
   electropherogram files with
   a range of variants, suitable
   for base-calling and analysis
   using a range of commercial
   or public domain software
   programs; also includes
   nomenclature/variant
   references. Two online
   acitivities per year; your CAP
   shipping contact will be
   notified via email when the
   activity is available
- SEC1 Three 10.0-µg extracted DNA specimens; forward and reverse lyophilized primers are provided. Two shipments per year



#### Give the CAP's complimentary Sample Exchange Registry service a try!

Sign up for this unique and complimentary service for those rare analytes for which proficiency testing is not yet available. This service now includes all clinical laboratory disciplines.

- The CAP connects labs performing testing for which no formal proficiency testing is available.
- There is no charge for this service.
- Participate at any time, no contract required.
- A minimum of three labs performing the same analyte test must participate before the CAP can facilitate the sample exchange.
- Each individual laboratory will receive its own results along with an anonymized summary report for all participants.

Register today! Visit cap.org and from the Laboratory Improvement tab, choose Proficiency Testing > Sample Exchange Registry.

# **Genetics and Molecular Pathology**

Pharmacogenetics	PGX,	PGX1	, PGX	2, PG	X3
Analyte/Procedure		Program Code			Challenges per Shipment
	PGX	PGX1	PGX2	PGX3	
CYP2C19	ı				3
CYP2C9	ı				3
CYP2D6	ı				3
CYP3A4	ı				3
CYP3A5	ı				3
SLC01B1 (rs4149056)	ı				3
VKORC1	ı				3
IL28B (rs12979860)		ı			3
HLA-B*15:02			I		3
HLA-B*57:01			I		3
DPYD				I	3
TPMT				ı	3
UGT1A1				ı	3

#### **Additional Information**

- UGT1A1 (PGX3 Survey) tests the laboratory's ability to detect variants in the TATA repeat sequence in the UGT1A1 promotor (eg, UGT1A1\*28 with seven TA repeats). The ability to detect variants in other regions of the UGT1A1 gene is not part of this program.
- Survey PGX2 is designed for laboratories that provide HLA-B\*57:01 testing to identify risk of hypersensitivity to abacavir and HLA-B\*15:02 testing to identify risk of hypersensitivity to carbamazepine. The intended response is qualitative (presence/absence of the allele). This Survey is not appropriate for laboratories that perform molecular HLA typing. For HLA typing proficiency testing, please consult the HLA Molecular Typing (DML) Survey.

CAP/ACMG Rett Syndrome (MECP2) RETT				
Analyte/Procedure Program Code Challenges per Shipme				
RETT				
MECP2 genotyping	I	3		
MECP2 duplication/deletion analysis	I	3		

#### **Program Information**

- Three 25.0-µg extracted DNA specimens
- · Includes allele detection (genotyping) and/or interpretive challenges
- · Two shipments per year

- Three 10.0-µg extracted DNA specimens
- · Two shipments per year



CAP/ACMG Thrombophilia Mutations TPM				
Analyte/Procedure Program Code Challenges per Shipmen				
	ТРМ			
Factor II	I	3		
Factor V	I	3		

This Survey is designed for the Cepheid GeneXpert factor II and factor V assays. DNA extraction for other assays/methods is NOT recommended.

Red Blood Cell Antigen Genotyping RAG				
Procedure	Program Code	Challenges per Shipment		
RAG				
Red blood cell antigen genotype with predictive phenotype	I	3		

Variant Interpretation Only Program VIP/VIP1					
Analyte/Procedure	Program Code	Challenges per Shipment			
VIP/VIP1					
Variant interpretation online case review	1	3			

#### **Additional Information**

VIP is an educational acitivity for pathologists, PhDs, genetic counselors, technologists, and any other laboratory staff with an interest in germline variant interpretation to assess and improve their diagnostic skills. All cases will comply with the 2015 ACMG standards and guidelines for the interpretation of sequence variants and will include:

- · A clinical history with relevant laboratory data
- · Results of ancillary studies, where appropriate
- · Case discussion and discussion of interpretive criteria
- · A variety of germline variants, diseases, and disorders

#### **Program Information**

- Three 250.0-µL synthetic whole blood specimens
- · Two shipments per year



#### **Program Information**

- Three 2.0-mL whole blood specimens
- · Two shipments per year

- VIP Three germline diagnostic challenges; reporting with CME/CE credit is available for one pathologist, MD, PhD, technologist, or genetic counselor
- VIP1 Reporting option with CME/CE credit for each additional pathologist, MD, PhD, technologist, or genetic counselor (within the same institution); must order in conjunction with Survey VIP
- Earn a maximum of 3 CME credits (AMA PRA Category 1 Credits™) per pathologist/ MD/PhD and a maximum of 3 CE credits per technologist/ genetic counselor for completion of an entire year
- One online educational activity per year; your CAP shipping contact will be notified via email when the activity is available



Noninvasive Prenatal Testing NIPT		
Analyte	Challenges per Shipment	
	NIPT	
Cell-free DNA screening for fetal aneuploidy	ı	3

Noninvasive prenatal testing is an exercise and is not considered proficiency testing. This exercise may be used to meet the requirements for alternative assessment

#### **Program Information**

- Three maternal plasma samples
- Two shipments per year

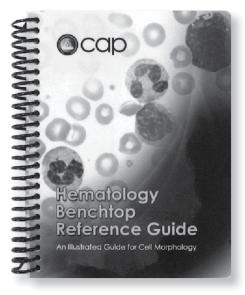
### **Hematology Benchtop Reference Guide (HBRG)**

- More than 50 different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- · Six tabbed sections for easy reference
  - o Erythrocytes
  - o Erythrocyte Inclusions
  - o Granulocytic (Myeloid) and Monocytic Cells
  - Lymphocytic Cells
  - Platelets and Megakaryocytic Cells
  - o Microorganisms and Artifacts
- A durable and water-resistant format to withstand years of benchtop use—5" x 6½"

#### Select it on your Surveys order form.

#### Or, view sample pages and order online:

- · printed books at estore.cap.org
- · ebooks at ebooks.cap.org



Item number: HBRG Spiral bound; 60 pages; 50+ images; 2012

### **Next-Generation Sequencing**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

All laboratories subject to US Clinical Laboratory Improvement Amendments (CLIA) Regulations: Proficiency testing (PT) challenges must NOT be referred to another laboratory for any portion of NGS testing, even if this is how patient testing is routinely performed. For PT challenges, any referral is strictly prohibited by CMS.

Next-Generation Sequencing—Germline NGS			
Procedure	Program Code Challenges per Shipment		
	NGS		
Next-generation sequencing	I	1	

#### Additional Information

Laboratories will have the ability to analyze up to 200 preselected chromosomal positions within various genes; for a full list of genes in this program, please go to cap. org. Under the Laboratory Improvement tab, click on Catalog and Ordering Information. The list is located under the PT Order Supplements header.

#### **Program Information**

- One 10.0-µg extracted DNA specimen
- Methods-based challenge for germline variants for laboratories using gene panels, exome, and whole genome sequencing
- Results for this program must be submitted online through e-LAB Solutions Suite
- Two shipments per year

Next-Generation Sequencing—Solid Tumor NGSST			
Procedure	Program Code Challenges per Shipment		
	NGSST		
Next-generation sequencing	I	3	

#### Additional Information

- This is a methods-based proficiency challenge for laboratories performing targeted next-generation sequencing of cancer genes or mutation hotspots in solid tumors. Laboratories will be asked to identify somatic single nucleotide variants and small insertions or deletions in the following genes: AKT1, ALK, APC, ATM, BRAF, CDH1, CTNNB1, EGFR, ERBB2, FBXW7, FGFR2, GNAQ, GNAS, HRAS, IDH1, KIT, KRAS, MET, NRAS, PDGFRA, PIK3CA, PTEN, SMAD4, SMARCB1, SMO, SRC, STK11, TP53.
- This Survey includes variants present with a variant allele fraction (VAF) potentially as low as 5%.

- Three 1.0-μg DNA (50 ng/μL) specimens
- · Two shipments per year

#### 

#### **Additional Information**

- This is a methods-based proficiency challenge for laboratories performing targeted next-generation sequencing of genes or mutation hotspots in hematologic malignancies. Laboratories will be asked to identify somatic single nucleotide variants and small insertions or deletions in the following genes: ASXL1, ATM, BRAF, CALR, CEBPA, CREBBP, CSF3R, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KMT2D, MPL, MYD88, NOTCH1, NPM1, SF3B1, SRSF2, TET2, TP53, U2AF1.
- This Survey includes variants present with a variant allele fraction (VAF) potentially as low as 5%.

#### **Program Information**

- Three 1.0-μg DNA (50 ng/μL) specimens
- · Two shipments per year

# Next-Generation Sequencing Bioinformatics NGSB1, NGSB2

Procedure	Program Code		Challenges per Shipment
	NGSB1	NGSB2	
Illumina TruSeq Amplicon Cancer Panel	I		1
Ion Torrent AmpliSeq Cancer Hotspot v2			1

#### **Additional Information**

- This in silico bioinformatics program is designed to complement and augment somatic variant wet bench NGS proficiency testing programs by testing a greater diversity of variants at a greater range of variant allele fractions.
- The BAM and/or FASTQ files are platform-specific and may not be compatible with other instruments/software.
- Laboratories will be asked to identify somatic single nucelotide variants and small insertions/deletions/indels in the following genes: ABL1, AKT1, ALK, APC, ATM, BRAF, CDH1, CDKN2A, CSF1R, CTNNB1, EGFR, ERBB2, ERBB4, FBXW7, FGFR1, FGFR2, FGFR3, GNA11, GNAQ, GNAS, HNF1A, HRAS, IDH1, JAK3, KDR, KIT, KRAS, MET, MLH1, MPL, NOTCH1, NPM1, NRAS, PDGFRA, PIK3CA, PTEN, PTPN11, RB1, RET, SMAD4, SMARCB1, SMO, SRC, STK11, TP53, VHL.
- This Survey includes variants present with a variant allele fraction (VAF) potentially as low as 5%.

- Sequencing files containing somatic variants to be downloaded into your laboratory bioinformatics pipeline for analysis and reporting; file sizes range from 100MB to 1GB
- NGSB1 FASTQ file format for the Illumina TruSeq Amplicon Cancer Panel
- NGSB2 BAM and FASTQfile formats for the Ion Torrent AmpliSeq Cancer Hotspot v2 Panel
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available

Next-Generation Sequencing Undiagnosed Disorders—Exome NGSE			
Analyte/Procedure	Program Code Challenges per Shipment		
	NGSE		
Exome analysis for germline undiagnosed disorders	I	1	

#### Additional Information/Minimum Requirements

- This in silico based Survey will assess the ability of the laboratory to identify
  germline variants responsible for a provided clinic phenotype as is encountered in
  an undiagnosed disease scenario. In addition to analyzing the in silico mutagenized
  file to identify a genetic diagnosis for the provided clinical scenario, pathogenic or
  likely pathogenic ACMG secondary findings may also be reported.
- Laboratories must provide an exome sequencing data file that has been generated
  using one of the following sources: a specimen from the NGS Survey program (see
  page 252) or from one of the NIST Reference Material cell lines: RM 8398 (NA12878),
  RM 8391, RM 8392, or RM 8393. Specimens from the NGSST and NGSHM Surveys
  cannot be used for this program.
- FASTQs or unaligned BAMs must be submitted along with a BED file describing the regions targeted and interrogated by your laboratory. Additionally, >90% of exons targeted and interrogated by your laboratory must have a minimum read coverage of 10X.
- Laboratories can transfer and download files from most modern browsers/ operating systems:
  - o Internet Explorer (IE) 11
  - o Safari The two latest, released versions on Mac OS X and iOS
  - o Firefox The two latest, released versions
  - o Chrome The two latest, released versions
  - o Windows 7 (32-bit and 64-bit), 8 (64-bit), and 10 (32-bit and 64-bit)
- Due to the extremely large file sizes, a minimum allowable transfer speed
  of 20Mbps will be needed to ensure the successful transfer of sequencing
  files between laboratories and CAP; however, 40 Mbps and higher is strongly
  recommended. Note: Laboratories should check with their technology department
  for allowable transfer speeds to determine estimated transfer time and browser/
  operating system access.
- Laboratories must comply with all of the above requirements to participate in this program. Additional information regarding how and where to provide your laboratory's exome file will be sent closer to the ship date.

- One exome sequencing data file, originating from your laboratory and provided to the CAP, for in silico mutagenesis. The mutagenized exome sequencing data file is to be downloaded and analyzed by your bioinformatics pipeline
- The mutagenized exome sequencing file will be accompanied by a clinical history, relevant laboratory data, and results of ancillary studies, where appropriate
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available

Next-Generation Sequencing Bioinformatics Somatic Validated Materials NGSBV			
Analyte/Procedure	Program Code Challenges per Shipment		
	NGSBV		
Somatic in silico mutagenized sequencing file	ı	1	

#### Additional Information/Minimum Requirements

- This in silico program is designed to optimize bioinformatics pipelines, augment validations, and assist with pipeline verification after changes to NGS/ bioinformatics processes. This is not traditional proficiency testing and no results will be returned to the CAP; information regarding the variants introduced will be sent along with the mutagenized file.
- Laboratories must provide a gene panel or exome sequencing data file that has been generated using one of the following sources: a specimen from the NGS Survey program (see page 252) or from one of the following NIST Reference Material cell lines: RM 8398 (NA12878), RM 8391, RM 8392, or RM 8393. Specimens from the NGSST and NGSHM Surveys cannot be used for this program.
- FASTQs or unaligned BAMs must be submitted along with a BED file describing the regions targeted and interrogated by your laboratory.
- The mutagenized sequencing file will contain up to 75 somatic variants (depending on the size of the panel/exome provided) at allele fractions from 3% to 99% (higher allele fractions to mimic loss of heterozygosity or homozygosity) and will include:
  - o Single nucleotide variants
  - o Insertions, deletions, delins, and/or duplications ranging from 1-100bp (1-15bp, 15-50bp, 51-100bp)
  - Copy number variants of single exons, partial or whole genes, and/or partial or whole chromosomes
  - o DNA fusions (if a laboratory indicates that they detect such structural rearrangements, if the rearrangements are specified and submitted in the BED file, and there is appropriate intronic coverage)
  - o Microsatellite instability at mono nucleotide tracts included in the submitted capture design
  - o Simulated artifactual sequence

All variants will be modeled based on actual somatic mutations from the COSMIC and/or cBIOPORTAL databases.

- Laboratories can transfer and download files from most modern browsers/ operating systems:
  - o Internet Explorer (IE) 11
  - o Safari The two latest, released versions on Mac OS X and iOS
  - o Firefox The two latest, released versions
  - o Chrome The two latest, released versions
  - o Windows 7 (32-bit and 64-bit), 8 (64-bit), and 10 (32-bit and 64-bit)
- Due to the extremely large file sizes, a minimum allowable transfer speed of 20Mbps will be needed to ensure the successful transfer of sequencing files between laboratories and CAP; however, 40 Mbps and higher is strongly recommended. Note: Laboratories should check with their technology department for allowable transfer speeds to determine estimated transfer time and browser/operating system access.
- Laboratories must comply with all of the above requirements to participate in this program. Additional information regarding how and where to provide your laboratory's sequencing file will be sent closer to the ship date.

- One panel or exome sequencing data file, originating from your laboratory and provided to the CAP, for in silico mutagenesis
- The mutagenized panel or exome sequencing data file is to be downloaded and analyzed by your laboratory bioinformatics pipeline and compared with the variant information provided by CAP
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available

### Molecular Oncology—Solid Tumors

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Microsatellite Instability (HNPCC) MSI		
Procedure Program Code Challenges per Shipmen		
	MSI	
Microsatellite instability testing (DNA amplification)	I	3
MLH1 promoter methylation analysis		1

Laboratories performing DNA mismatch repair assessment by immunohistochemistry methods should see Survey MMR on page 272.

#### **Program Information**

- Two 10.0-micron unstained paraffin section slides and one H&E slide; two photograph challenges
- For laboratories performing molecular testing using PCR
- Two shipments per year

IGHV Mutation Analysis IGHV			
Analyte/Procedure	Program Code Challenges per Shipmen		
	IGHV		
IGHV	<b>I</b> 3		

#### **Additional Information**

- Sequence analysis of the clonal immunoglobulin heavy chain V gene (IGHV) to determine somatic hypermutation (SHM) status.
- · Any sequencing method may be used.
- Report V-gene allele, percent similarity and mutation status (SHM).

In Situ Hybridization ISH, ISH2			
Analyte/Procedure	Program Code Challenges per Shipment		Challenges per Shipment
	ISH	ISH2	
Epstein-Barr virus (EBV)			4
Human papillomavirus (HPV)			4
Kappa/Lambda (IGK/IGL)			4
HER2 (ERBB2) gene amplification (brightfield)		•	10

Laboratories performing FISH for interphase chromosomal targets in paraffin sections refer to the Cytogenetics Surveys, page 241.

#### **Program Information**

- Three 20-μg DNA specimens (200 ng/μL)
- · Two shipments per year

- ISH
  - EBV, HPV: Three 4-core tissue microarray slides and one H&E slide (each)
  - Kappa/Lambda: Four 4-core tissue microarray slides and one H&E slide
- ISH2 Two 5-core tissue microarray slides in duplicate
- · Two shipments per year

DNA Extraction & Amplification FFPE MH05				
Procedure Program Code Challenges per Shipmen				
	MH05			
DNA purification	I	1		

Methods-based proficiency challenge to examine DNA purification from formalin-fixed, paraffin-embedded tissues (FFPET). Laboratories will be able to purify DNA from FFPET sections and amplify control targets using laboratory-provided reagents.

Neoplastic Cellularity NEO		
Procedure Program Code Challenges per Shipm		
	NEO	
Online assessment of percent neoplastic cellularity	1	10

#### Sarcoma Translocation SARC Gene **Program Code** Challenges per Shipment SARC Sarcoma translocation\* (RT-PCR) 3

Laboratories performing FISH for sarcoma translocation refer to the Cytogenetics Surveys, page 241.

#### **Program Information**

- Three 10.0-micron paraffin sections
- · Two shipments per year

#### **Program Information**

- Ten Regions of Interests (ROIs) using online, whole slide images
- A method-based preanalytic Survey to assess competency for determining percent neoplastic cellularity
- Powered by DigitalScope® technology
- Individual reporting fields for up to five pathologists are available
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available

#### **Program Information**

- Three snap-frozen cell pellets from which approximately 5.0-µg of RNA can be extracted
- · Two shipments per year

### **Sarcoma Translocation Listing**

COL1A1/PDGFB, t(17;22)	EWSR1/FLI1 or EWSR1/ERG	PAX3/F0X01 or PAX7/F0X01
ETV6-NTRK3, t(12;15)	EWSR1/WT1, t(11;22)	SS18/SSX1, t(X;18)
EWSR1/ATF1, t(12;22)	FUS/DDIT3, t(12;16)	SS18/SSX2, t(X;18)
EWSR1/ERG, t(21;22)	PAX3/FOXO1, t(2;13)	SS18/SSX1 or SS18/SSX2
EWSR1/FLI1, t(11;22)	PAX7/FOX01, t(1;13)	

<sup>\*</sup>See translocation listing below.

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Cell-free DNA CFDNA				
Analyte/Procedure	Program Code	Challenges per Shipment		
	CFDNA			
cfDNA	I	3		

- DNA fragments stabilized in simulated plasma.
- This is not intended for laboratories that perform circulating tumor cell (CTC) analysis.
- Potential targets included in this Survey are BRAF V600E, EGFR T790M, IDH1 R132C, KRAS G12C, KRAS G12D, and NRAS Q61R, all within a range of 0.1 to 1.0%.

#### **Program Information**

- Three 125-ng DNA (25 ng/µL) specimens
- · Two shipments per year

Fusion RNA	Sequencing RI	NA
Analyte/Procedure	Program Code	Challenges per Shipment
	RNA	
RNA	•	3

#### Additional Information

- Total RNA from a cell line engineered to contain desired fusion RNA.
- This is for laboratories using RNAseq to detect gene fusion transcripts.
- This is not intended to replace the current Survey (SARC) for reverse transcription (RT)-PCR based detection (see page 257).
- Potential fusion variants include: CD74-ROS1, EML4-ALK, ETV6-NTRK3, FGFR3-TACC3, PAX8-PPARG, SLC45A3-BRAF.

Solid Tumor—Other BRAF, EGFR, KRAS, KIT						
Analyte		Program Code Challenges per Shipment				
		BRAF	EGFR	KRAS		
BRAF						3
EGFR						3
KRAS						3
KIT					ı	3
PDGFRA					I	3

#### **Program Information**

- Three 500-ng RNA (20 ng/µL) specimens
- · Two shipments per year

- · BRAF, EGFR, KRAS -Paraffin-embedded sections or shavings
- KIT/PDGFRA Four 10.0-micron unstained paraffin section slides and one H&E slide, for each specimen
- For laboratories performing molecular testing using PCR
- · Two shipments per year

Multigene Tumor Panel MTP					
Analyte	Program Code	Challenges per Shipment			
	MTP				
BRAF	I	3			
EGFR	I	3			
HER2 (ERBB2)	I	3			
KIT	I	3			
KRAS	I	3			
NRAS	I	3			
PDGFRA	I	3			
PIK3CA	ı	3			

BRAF, EGFR, and KRAS are required analytes. Laboratories that perform testing for the detection of somatic single nucleotide variants, insertions, and deletions in these genes are required to enroll in either MTP or the respective single gene Surveys. This includes laboratories that perform NGS-based assays, non-NGS-based multiplexed assays, and nonmultiplexed assays (eg, Sanger sequencing). Laboratories that perform NGS-based testing are encouraged to also enroll in NGSST (on page 252), as this proficiency testing program provides challenges with lower variant allele fractions as well as challenges in other genes commonly included in NGS-based panels for the identification of somatic variants in solid tumors.

Glioma GLI				
Analyte Program Code Challenges per Shipment				
	GLI			
MGMT	I	2		
IDH1, IDH2	I	3		
10q (PTEN) deletion	ı	1		

#### **Program Information**

- Three 2.0-µg gDNA (50 ng/µL) specimens for laboratories performing molecular testing on multiple targets
- Two shipments per year

- Two 2.0-μg gDNA (50 ng/μL) specimens
- · One specimen containing four 10.0-micron unstained paraffin section slides and one H&E slide
- For laboratories performing molecular testing using PCR
- · Two shipments per year

### Molecular Oncology—Hematologic

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Molecular Hematologic Oncology MHO, MHO1, MHO2, MHO3, MHO5				
Procedure/Gene		Program Code		Challenges per Shipment
	мно, мно1	MH02, MH03	MH05	
Lymphoid malignancy genotyp	ing			
IGH				3
IGH/BCL2 major				3
IGH/BCL2 minor				3
IGH/CCND1				3
IGK	I			3
TRB				3
TRG				3
Myeloid malignancy genotypin	g			
BCR/ABL1 p190				3
BCR/ABL1 p210				3
CALR				3
CBFB/MYH11				3
FLT3 ITD				3
FLT3 TKD				3
JAK2 c.1849G>T(p.V617F)				3
MLL-PTD (KMT2A-PTD)		•		3
NPM1				3
PML/RARA				3
RUNX1/RUNX1T1		I		3
DNA extraction and amplification from formalin-fixed, paraffin-embedded (FFPE) tissue			ı	1

#### **Program Information**

- MHO One sample vial containing purified DNA (200 µg/mL per vial) for each specimen
- MH01 MH0 specimens in duplicate for additional DNA testing
- MHO2 Two sample vials; one with purified DNA containing 200 µg/mL and one with purified RNA containing 400 µg/mL
- MH03 MH02 specimen in duplicate for additional DNA and RNA testing
- MH05 Three 10.0-micron paraffin sections; extraction and amplification from FFPE tissue will be assessed by a method-based challenge
- Two shipments per year; ships on dry ice (dry ice does not apply to MHO5 or international shipments)

Minimal Residual Disease MRD, MRD1, MRD2					
Analyte	1	Program Code		Challenges per Shipment	
	MRD	MRD1	MRD2		
BCR/ABL1 p190				3	
BCR/ABL1 p210	I			3	
PML/RARA				3	

- Three RNA specimens in sterile water
- For laboratories diagnosing and monitoring leukemia tumor burden by measuring the quantity of BCR/ABL1 or PML/RARA fusion transcripts
- Two shipments per year; ships on dry ice

# Realize a better experience with our online anatomic pathology education programs.

Move away from the limitations of glass slides.

- Online Performance Improvement Program in Surgical Pathology (PIPW/PIPW1)
- Hematopathology Online Education (HPATH/HPATH1)
- Digital Slide Program in Fine-Needle Aspiration (FNA/FNA1)
- Touch Imprint/Crush Preparation (TICP/TICP1)

### **Anatomic Pathology**

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### **Discontinued Programs**

Cancer Staging Improvement Program (PCSP/PCSP1)

### **Surgical Pathology**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Online Performance Improvement Program in Surgical Pathology PIPW/PIPW1				
Program Code Challenges per Shipment				
PIPW/PIPW1				
Surgical pathology case review				

#### **Additional Information**

PIPW educates pathologists in general surgical pathology.

- Pathologists can assess their diagnostic skills and compare their performance with that of their peers.
- Included PIPW case selections feature:
  - o A variety of neoplastic and nonneoplastic lesions
  - o Inflammatory and infectious diseases
  - O Various sites, encompassing a variety of organ systems
- · See system requirements on page 13.

- PIPW Ten diagnostic challenges/whole slide H&E images with clinical history; reporting with CME credit is available for one pathologist; for each additional pathologist, order PIPW1
- PIPW1 Reporting option with CME credit for each additional pathologist (within the same institution); must order in conjunction with Survey PIPW
- Earn a maximum of 40 CME credits (AMA PRA Category 1 Credits™) per pathologist for completion of an entire year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Powered by DigitalScope® technology
- Four online activities per year; your CAP shipping contact will be notified <u>via</u> <u>email</u> when the activity is available



Performance Improvement Program in Surgical Pathology PIP/PIP1				
Program Code Challenges per Shipment				
PIP/PIP1				
Surgical pathology case review	ı	10		

PIP educates pathologists in general surgical pathology. This program:

- Provides a practical approach to continuing education
- Gives pathologists a method to assess their diagnostic skills and compare their performance with that of their peers
- · Features PIP case selections that include:
  - O A variety of neoplastic and nonneoplastic lesions
  - o Inflammatory and infectious diseases
  - Various sites, encompassing a variety of organ systems

#### **Program Information**

- PIP Ten diagnostic challenges/H&E stained glass slides with clinical history; reporting with CME credit is available for one pathologist; for each additional pathologist, order PIP1
- PIP1 Reporting option with CME credit for each additional pathologist (within the same institution); must order in conjunction with Survey PIP
- Earn a maximum of 40 CME credits (AMA PRA Category 1 Credits™) per pathologist for completion of an entire year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- · Four shipments per year



### Test your diagnostic skills as a pathologist with CPIP

Online, hands-on and interactive, the Clinical Pathology Improvement Program (CPIP) enables pathologists to sharpen their diagnostic skills in real time by working through an actual case. Each month, you will receive a new case, including related images and clinical background. As the case unfolds, more information is revealed, just as in the laboratory. Participants who successfully complete the posttest may apply their earned credits to their Continuing Certification (CC), formerly known as Maintenance of Certification (MOC) SAM requirements. Enjoy a full year of CPIP and earn up to 15 CME/SAM credits.

Choose code CPIP/CPIP1 on your Surveys order form.

Virtual Biopsy Program VBP/VBP1			
Program	Program Code Challenges per Shipment		
	VBP/VBP1		
Online biopsy case review	ı	5	

VBP educates pathologists to assess and improve their diagnostic skills in surgical pathology.

- Cases may include gross, radiographic, or endoscopic images.
- Cases are from selected organ systems and may include a variety of specimen types (eg, core biopsies, endoscopic biopsies, curettings, aspirate smears). Activities with their corresponding topics are:
  - o 2019-A Head and Neck Biopsy
  - o 2019-B GYN Biopsy
  - o 2019-C Lung Biopsy
  - o 2019-D Surgical Pathology Biopsy (various sites)
- See system requirements on page 13.

#### **Program Information**

- VBP Five diagnostic challenges/whole slide images with clinical history; reporting with CME/SAM credit is available for one pathologist; for each additional pathologist, order VBP1
- VBP1 Reporting option with CME/SAM credit for each additional pathologist (within the same institution); must order in conjunction with Survey VBP
- Earn a maximum of 25 CME/SAM credits (AMA PRA Category 1 Credits™) per pathologist for completion of an entire year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Powered by DigitalScope technology
- Four online activities per year; your CAP shipping contact will be notified <u>via</u> <u>email</u> when the activity is available





20

Digital Slide Program—Dermatopathology DPATH/DPATH1				
Program Code Challenges per Shipmen				
DPATH/DPATH1				
Online dermatopathology case review   6				

DPATH educates pathologists, dermatopathologists, and dermatologists to assess and improve their diagnostic skills in dermatopathology.

- · Cases include static images.
- See system requirements on page 13.

#### **Program Information**

- DPATH Six diagnostic challenges/whole slide images with clinical history; reporting with CME/SAM credit is available for one pathologist; for each additional pathologist, order DPATH1
- DPATH1 Reporting option with CME/SAM credit for each additional pathologist (within the same institution); must order in conjunction with Survey DPATH
- · Earn a maximum of 15 CME/SAM credits (AMA PRA Category 1 Credits<sup>™</sup>) per pathologist for completion of an entire year
- · This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- · Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



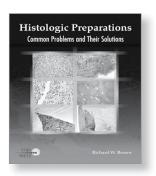


### Learn the secret to good slide technique

Histologic Preparations: Common Problems and Their Solutions is a how-to guide to good slide preparation. Building on data and images from the CAP/NSH HistoQIP program, the book presents photographic examples of well-prepared slides followed by numerous examples of associated problems and their solutions. The text contains troubleshooting techniques for the most common artifacts and problems incurred in routine histologic preparations, including fixation and processing; microtomy; frozen sections; hematoxylin-eosin, trichrome, reticulin, elastin, basement membrane, mucin, amyloid, immunohistochemical, and Gram stains; and mycobacteria, Helicobacter pylori, sprirochetes, and fungi.

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Hematopathology Online Education HPATH/HPATH1				
Program Code Challenges per Shipmen				
HPATH/HPATH1				
Hematopathology online case review 5				

HPATH educates pathologists, hematolopathologists, and hematologists with an interest in hematopathology to assess and improve their diagnostic skills in hematopathology.

- All cases have been specially selected to highlight important changes in the 2016 revision of the WHO Classification.
- · Clinical history and relevant laboratory data.
- At least one online whole slide image of peripheral blood, bone marrow, spleen, lymph node, or other tissue.
- Results of ancillary studies such as immunohistochemistry, flow cytometry, FISH, karyotyping, and molecular studies, where appropriate.
- · Case discussion and discussion of differential diagnoses.
- · Five SAM questions per case.
- See system requirements on page 13.

- · HPATH Five diagnostic challenges/online whole slide images with clinical history; reporting with CME/SAM credit is available for one pathologist/ hematologist. For additional pathologist/hematologist, order HPATH1
- HPATH1 Reporting option with CME/SAM credit for each additional pathologist and hematologist (within the same institution); must order in conjunction with Survey HPATH
- Earn a maximum of 12.5 CME/SAM credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 12.5 CE credits per hematologist for completion of an entire year
- · This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- · Powered by DigitalScope technology
- · Two online activities per year; your CAP shipping contact will be notified via email when the activity is available





Touch Imprint/Crush Preparation TICP/TICP1			
Procedure Program Code Challenges per Si			
	TICP/TICP1		
Online slide and image program in rapid assessment case review	ı	4	

- The TICP Program is designed to familiarize surgical pathologists, cytopathologists, and cytotechnologists with the cytomorphologic features of pathologic processes and tumors in touch imprints and crush or scrape preparations. These specimens are prepared either for intraoperative consultation (frozen section) or rapid on-site evaluation (ROSE) of tissue biopsies for adequacy and/or interpretation. Participants will learn to make an immediate adequacy assessment, assign the process to a general category, and triage the specimen to appropriate ancillary studies. Participants will review digital whole slides of the TICP preparations (hematoxylin & eosin, modified Wright-Giemsa, and/or Papanicolaou stains), static images of the preparation and ancillary studies, and clinical history/radiographic findings to reach a diagnosis. Each case has a complete description of entities in the differential diagnosis along with a discussion of the correct interpretation.
- Participants will receive immediate feedback on interpretations, ancillary studies, and case-related adequate assessment.
- The cases will be comprised of specimens from the bone and retroperitoneal/liver.
- May include rarely captured cases that may not be available on the glass slide.
- See system requirements on page 13.

#### **Program Information**

- · TICP Four online assessment challenges with clinical history; TICP provides CME/SAM/CE credit for one pathologist or cytotechnologist; for each additional pathologist or cytotechnologist, order TICP1
- TICP1 Reporting option with CME/SAM/CE credit for each additional pathologist/ technologist (within the same institution); must order in conjunction with Survey TICP
- · Earn a maximum of 10 CME/SAM credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 10 CE credits per cytotechnologist for completion of an entire year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Online, whole slide images powered by DigitalScope technology
- · Two online activities per year; your CAP shipping contact will be notified via email when the activity is available





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CAP/NSH HistoQIP HQIP			
Stain/Tissue	Program Code		iges per ment
	HQIP	Α	В
H&E - Breast resection	ı	1	
H&E - Uterus resection		1	
IHC - GATA 3 (breast resection)		1	
IHC - ER (uterus resection)		1	
Special Stain - GMS on control material		1	
H&E - Kidney resection			1
H&E - Liver resection			1
IHC - PAX-8 (kidney resection)			1
IHC - HepPar1 (liver resection)	•		1
Special Stain - Trichrome, liver needle core biopsy	•		1

#### **Program Information**

- Participant laboratories may submit up to five stained coverslipped glass slides (one from each category) per mailing
- Includes photographs and online learning assessment questions
- · Two shipments per year





#### **Additional Information**

HistoQIP improves the preparation of histologic slides in all anatomic pathology laboratories. In this educational program, participants will receive an evaluation specific to their laboratory, an education critique, and a Participant Summary that includes peer comparison data, evaluators' comments, and performance benchmarking data. An expert panel of pathologists, histotechnologists, and histotechnicians will evaluate submitted slides for histologic technique using uniform grading criteria.

HQIP Whole Slide Image Improvement Program			NEW
Stain/Tissue	Program Code		iges per ment
	HQWSI	Α	В
H&E - Breast resection	•	1	
H&E - Lung resection	I	1	
H&E - Breast needle core biopsy	•	1	
H&E - Prostate needle core biopsy	•	1	
H&E - Colon resection	•		1
H&E - Kidney resection	•		1
H&E - Colon biopsy	•		1
H&E - Skin punch biopsy			1

#### **Program Information**

- Participant laboratories may submit up to four stained coverslipped glass slides and upload their scanned whole slide images per mailing
- · Two shipments per year



These general immunohistochemistry Surveys assess analytic and postanalytic (interpretive) steps. For Surveys focusing on preanalytic steps, see the HistoQIP IHC programs on pages 269-270.

CAP/NSH HistoQIP—IHC HQIHC			
Stain/Tissue	Program Code		nges per ment
	HQIHC	Α	В
IHC – CK20 (bladder biopsy)		1	
IHC – Progesterone receptor (cervical biopsy)		1	
IHC – CD34 (skin, punch biopsy)		1	
IHC – CD138 (stomach biopsy)		1	
IHC – CD3 (colon biopsy)			1
IHC – EMA (endometrium)			1
IHC – S100 (skin, excisional biopsy)	•		1
IHC – p504s (prostate biopsy with carcinoma)	•		1

#### **Program Information**

- · Participants may submit up to four IHC stained and coverslipped glass slides (one from each category) per mailing
- · Two shipments per year



#### **Additional Information**

HistoQIP – IHC improves the preparation of immunohistochemistry slides in all anatomic laboratories involved in the handling of gastrointestinal, dermatologic, and urological tract biopsies. Participants will receive an evaluation specific to their laboratory and a Participant Summary. An expert panel of pathologists, histotechnologists, and histotechnicians will evaluate submitted slides for histologic technique using uniform grading criteria.

CAP/NSH HistoQIP Mismatch Repair IHC HQMMR			
Stain/Tissue	ain/Tissue Program Code Challenges per Shipment		
	HQMMR	Α	В
H&E – Colon adenocarcinoma		1	
IHC – MLH1 (colon adenocarcinoma)		1	
IHC – MSH2 (colon adenocarcinoma)		1	
IHC – MSH6 (colon adenocarcinoma)		1	
IHC – PMS2 (colon adenocarcinoma)		1	
H&E – Endometrial adenocarcinoma			1
IHC – MLH1 (endometrial adenocarcinoma)			1
IHC – MSH2 (endometrial adenocarcinoma)			1
IHC – MSH6 (endometrial adenocarcinoma)			1
IHC – PMS2 (endometrial adenocarcinoma)			1

#### **Additional Information**

This program augments efforts to improve the preparation of H&E and immunohistochemical slides in all anatomic pathology laboratories involved in the handling of colonic and endometrial tumors performing mismatch repair IHC.

- · Participants may submit up to four IHC and one H&E stained coverslipped glass slides (one from each category) per mailing
- · Two shipments per year



CAP/NSH HistoQIP Non-small Cell Lung Carcinoma IHC HQNSC			
Stain/Tissue	Program Code	Challenges p	er Shipment
	HQNSC	Α	В
H&E – Lung adenocarcinoma		1	
IHC – TTF-1 (lung adenocarcinoma)		1	
IHC – Napsin-A (lung adenocarcinoma)		1	
H&E – ALK (positive lung adenocarcinoma)		1	
IHC – ALK (positive lung adenocarcinoma)	•	1	
H&E – Lung squamous cell carcinoma			1
IHC – p40/p63 (lung squamous cell carcinoma)			1
IHC – CK5/6 (lung squamous cell carcinoma)			1
H&E – PD-L1 (positive lung squamous cell carcinoma)			1
IHC – PD-L1 (positive lung squamous cell carcinoma)	I		1

#### **Program Information**

- Participants may submit up to four IHC and one H&E stained coverslipped glass slides (one from each category) per mailing
- · Two shipments per year



#### **Additional Information**

This program augments efforts to improve the preparation of H&E and immunohistochemical slides in all anatomic pathology laboratories involved in the handling of non-small cell lung carcinoma.

CAP/NSH HistoQIP Biopsy Series HQIPBX				
Stain/Tissue	Program Code	Challenges per Shipment		
	HQIPBX	Α	В	
H&E – Bladder biopsy		1		
H&E – Cervical biopsy	I	1		
H&E – Skin punch biopsy	I	1		
H&E – Stomach biopsy	I	1		
H&E – Colon biopsy	I		1	
H&E – Endometrial biopsy	I		1	
H&E – Prostate needle biopsy	•		1	
H&E – Breast core biopsy	I		1	

#### Additional Information

The HistoQIP Biopsy Series is an additional program to improve the preparation of histologic slides in all anatomic pathology laboratories. Participants will receive an evaluation specific to their laboratory and a Participant Summary. An expert panel of pathologists, histotechnologists, and histotechnicians will evaluate submitted slides for histologic technique using uniform grading criteria.

- Participants may submit up to four H&E stained and coverslipped glass slides (one from each category) per mailing
- · Two shipments per year



#### **CAP/NSH HistoQIP Specialty Series** HQBX1, HQBX2, HQBX3, HQBX4 Challenges per Stain/Tissue **Program Code Shipment** HQBX1 HQBX2 HQBX3 HQBX4 Gastrointestinal Biopsy Module H&E - Colon biopsy 1 1 H&E - Esophageal biopsy 1 1 H&E - Small intestinal biopsy 1 1 H&E - Stomach biopsy 1 1 Dermatologic Biopsy Module 1 H&E - Alopecia ı 1 H&E – Skin excisional biopsy 1 1 (large excision) 1 1 H&E - Skin punch biopsy H&E - Skin shave biopsy 1 1 Urogenital Tract Biopsy Module H&E - Bladder biopsy 1 1 (nonneoplastic) H&E - Bladder biopsy (with 1 1 carcinoma) H&E - Prostate needle biopsy 1 1 (nonneoplastic) H&E - Prostate needle biopsy ı 1 1 (with carcinoma) Gynecological Biopsy H&E - Cervical biopsy 1 1 H&E - Endometrial biopsy 1 1 H&E - Cone/Leep biopsy 1 1

#### Additional Information

H&E - Vagina biopsy

The HistoQIP Specialty Series includes modules to improve the preparation of histologic slides in all anatomic pathology laboratories involved in the handling of gastrointestinal, dermatologic, gynecologic, and urogenital tract biopsies. Participants will receive an evaluation specific to their laboratory and a Participant Summary. An expert panel of pathologists, histotechnologists, and histotechnicians will evaluate submitted slides for histologic technique using uniform grading criteria.

- · HQBX1, HQBX2, HQBX3, HQBX4 - Participants may submit up to four H&E stained and coverslipped glass slides (one from each category) per mailing
- Two shipments per year



### **General Immunohistochemistry**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Immunohistochemistry MK				
Procedure Program Code Challenges per Shipn				
MK				
Immunohistochemistry		16		

The MK program allows laboratories to compare their assay methodology and results with all participating laboratories.

#### **Program Information**

- Seven glass slides with unstained tissue sections from four separate cases; additional slides provided for an H&E stain and negative control
- Two shipments per year

BRAF V600E BRAFV				
Procedure Program Code Challenges per Shipment				
BRAFV				
BRAF V600E		10		

#### **Program Information**

- One 10-core tissue microarray slide
- One shipment per year

DNA Mismatch Repair MMR		
Procedure	Program Code	Challenges per Shipment
	MMR	
DNA mismatch repair by immunohistochemistry	ı	1

If your laboratory performs DNA mismatch repair by molecular methods, see the MSI program on page 256.

Droarom	Information
riugiaii	Information

- Four 4.0-micron unstained paraffin section slides and one H&E slide for the immunohistochemical analysis of DNA mismatch repair proteins MLH1, MSH2, MSH6, and PMS2
- · Two shipments per year

PD-L1 PDL1		
Procedure	Program Code	Challenges per Shipment
	PDL1	
PD-L1	I	10

#### **Program Information**

- One 10-core tissue microarray slide; additional slides provided for H&E and PD-L1 control
- · One shipment per year

These general immunohistochemistry Surveys assess analytic and postanalytic (interpretive) steps. For Surveys focusing on preanalytic steps, see the HistoQIP IHC programs on pages 269-270.

CD117, CD20 Immunohistochemistry Tissue Microarray PM1, PM3			
Analyte	Program Code Challenges per Shipmen		Challenges per Shipment
	PM1	PM3	
CD117			10
CD20		ı	10

For ER/PgR testing, see the PM2 program on page 274.

#### **Program Information**

- One 10-core tissue microarray slide per predictive marker
- One shipment per year

CD30 Immunohistochemistry Tissue Microarray CD30		y
Analyte	Program Code	Challenges per Shipment
	CD30	
CD30	I	10

p16 Immunoh Tissue Micr	NEW	
Analyte	Program Code	Challenges per Shipment
	P16	
p16		10

Immunohistochemistry Tissue Microarray Series PM5		
Analyte Program Code Challenges per Shipment		
	PM5	
Glypican-3	I	10
Мус	I	10

#### **Additional Information**

Each year, the PM5 program will feature two different markers for immunohistochemistry laboratories to evaluate assay performance on a variety of tissue and/or tumor types.

Highly Sensitive Anaplastic Lymphoma Kinase IHC PM6		
Procedure	Program Code	Challenges per Shipment
	PM6	
Highly sensitive anaplastic lymphoma kinase IHC (ALK)	ı	10

#### **Program Information**

- One 10-core tissue microarray slide
- Two shipments per year

#### **Program Information**

- One 10-core tissue microarray slide
- Two shipments per year

#### **Program Information**

- Two 10-core tissue microarray slides, one for Glypican-3 and one for Myc
- · One shipment per year

- One 10-core tissue microarray slide
- One shipment per year

### **Predictive Markers**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

HER2 Immunohistochemistry HER2		
Analyte	Program Code	Challenges per Shipment
	HER2	
HER2	I	20

#### **Program Information**

- Two 10-core tissue microarray slides
- · Two shipments per year

#### **Additional Information**

The HER2 program fulfills the proficiency testing requirement stated in the ASCO/CAP HER2 Testing Guideline. Due to the unique nature of these human, donor-based materials, the shipping date is subject to change. If this should occur, the CAP will provide notification prior to the originally scheduled shipping date.

Gastric HER2 GHER2		
Analyte	Program Code	Challenges per Shipment
	GHER2	
HER2		10

#### **Program Information**

- One 10-core tissue microarray slide
- · Two shipments per year

#### **Additional Information**

The interpretive criteria for HER2 immunohistochemistry performed on gastroesophageal adenocarcinomas differs significantly from breast carcinoma. The GHER2 program will help participating laboratories understand these differences.

ER/PgR Immunohistochemistry Tissue Microarray PM2		
Analyte	Program Code	Challenges per Shipment
	PM2	
Estrogen receptor (ER)	ı	20
Progesterone receptor (PgR)		20

### Program Information

- Four 10-core microarray slides, two for ER and two for PgR
- · Two shipments per year

#### Additional Information

The PM2 program fulfills the proficiency testing requirement stated in the ASCO/CAP ER/PgR Testing Guideline. Due to the unique nature of these human, donor-based materials, the shipping date is subject to change. If this should occur, the CAP will provide notification prior to the originally scheduled shipping date.

### **Specialty Anatomic Pathology**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Autopsy Pathology AUP/AUP1		
Procedure	Program Code Challenges per Shipment	
	AUP/AUP1	
Autopsy online case analysis	I	5

Each case includes case description, gross and/or microscopic images, and case discussion with sample death certificate, key teaching points, and current references.

#### **Program Information**

- AUP Online activity providing five cases; reporting with CME/SAM credit is available for one pathologist; for each additional pathologist, order AUP1
- Includes the option to download program content
- AUP1 Reporting option with CME/SAM credit for each additional pathologist (within the same institution); must order in conjunction with Survey AUP
- Earn a maximum of 12.5 CME/SAM credits (AMA PRA Category 1 Credits<sup>™</sup>) per pathologist
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- · Two online activities per year





### Let the CAP connect you to the IHC samples you need

### CAP Immunohistochemistry (IHC) Validation Program

- The CAP will facilitate the exchange of tissue samples once a sufficient number of laboratories performing the same marker are identified.
- Samples will be exchanged twice a year based on availability.
- Each laboratory will receive its own individual results along with an anonymized summary report for all participants.

Sign up for this complimentary service to access those hard-to-obtain specimens.

To get started, visit cap.org and from the Laboratory Improvement tab, choose Proficiency Testing > Sample Exchange Registry to learn more and download a Contact Information Form.

Neuropathology Program NP/NP1					
Program Code Challenges per Shipment					
	NP/NP1				
Neuropathology online case review	uropathology online case review				

The Neuropathology program helps anatomic pathologists, neuropathologists, and trainees assess and improve their diagnostic skills and learn about new developments in neuropathology. Each shipment of this educational program includes eight cases that cover the spectrum of neoplastic and nonneoplastic disorders affecting the central and peripheral nervous systems, including infectious, degenerative, developmental, demyelinating, traumatic, toxic-metabolic, vascular, and neuromuscular diseases. In addition, each mailing will include a mini-symposium that focuses on a specific problem area in neuropathology, which relates to four of the eight cases.

#### **Program Information**

- NP Online activity providing eight cases and a minisymposium; reporting with CME/SAM credit is available for one pathologist; for each additional pathologist, order NP1
- Includes option to download program content
- NP1 Reporting option with CME/SAM credit for each additional pathologist (within the same institution); must order in conjunction with Survey NP
- Earn a maximum of 10 CME/SAM credits (AMA PRA Category 1 Credits™) per pathologist
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Powered by DigitalScope technology
- Two online activities per year





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### Cytopathology

Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Glass Slide Gynecologic Cytopatholog	y PT
Program with Glass Slide PAP Education	PAP PT

Slide Type	Program Code				Challenge	es per Year	
	PAPCPT	PAPKPT	PAPMPT	PAPLPT	PAPJPT	Proficiency Testing	Education
Conventional					I		
SurePath				•			
ThinPrep				ı		10	10
Individual Participant Response Form	APAPCPT	APAPKPT	APAPMPT	APAPLPT	APAPJPT		

#### **Ordering Information**

You will receive one shipment for proficiency testing (10 slides) and two additional shipments for your education (five slides each).

#### Follow these steps to order your PAP Proficiency Testing and PAP Education:

- 1. Choose the following:
  - a. Slide Type program code (refer to table above)
  - b. PAP Education series shipment dates (choose one)
    - Series 1
      - o A mailing ships February
      - O B mailing ships August
    - Series 2
      - O A mailing ships May
      - o B mailing ships November
  - c. Add the PAP Education series number after the slide type program code (eg, PAPCPT1, PAPCPT2).
- Order one Individual Participant Response Form code for each participating pathologist/cytotechnologist. Also include the PAP Education Series number after the program code (eg, APAPCPT1).
- 3. Select primary testing session option with two alternative date options using the Gynecologic Cytology Proficiency Testing Order Details Form.
- 4. Order PPTENR only if you are a laboratory possessing a CLIA license to perform gynecologic cytology where all personnel are performing proficiency testing at another CLIA location.

#### **Additional Information**

- Participants can receive laboratory reference interpretations and performance for the PAP Education slides within 20 minutes by fax.
- The PAP Education component meets the CAP Laboratory Accreditation Program requirement for participation in a peer educational program.

- Ten glass slides for proficiency testing and ten glass slides for education
- APAPCPT/APAPKPT/
   APAPMPT/APAPLPT/
   APAPJPT Reporting option
   with CME/CE credit for each
   pathologist/cytotechnologist
   (within the same institution);
   must order in conjunction
   with Survey PAPCPT/PAPKPT/
   PAPMPT/PAPLPT/PAPJPT
- Earn a maximum of 8 CME credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 8 CE credits per cytotechnologist for completing all challenges
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Three shipments per year; one shipment for proficiency testing (10 slides) and two shipments for education (five slides each)



## Cytopathology Glass Slide Education Program PAPCE, PAPJE, PAPKE, PAPLE, PAPME Series 1 or 2

Slide Type	Program Code					Education Challenges per Year
	PAPCE	PAPKE	PAPME	PAPLE	PAPJE	
Conventional	ı					
SurePath						
ThinPrep						10
Individual Participant Response Form	APAPCE	APAPKE	APAPME	APAPLE	APAPJE	10

#### **Ordering Information**

#### Follow these steps to order your PAP Education:

- 1. Choose the following:
  - a. Slide Type program code (refer to table above)
  - b. PAP Education series shipment dates (choose one)
    - Series 1
      - O A mailing ships February
      - OB mailing ships August
    - Series 2
      - O A mailing ships May
      - OB mailing ships November
  - c. Add the PAP Education series number after the slide type program code (eg, PAPCE1, PAPCE2)
- 2. Order one Individual Participant Response Form code for each participating pathologist/cytotechnologist. Also include the PAP Education series number after the program code (eg, APAPCE1).

#### **Additional Information**

- Participants can receive laboratory reference interpretations and performance for the PAP Education slides within 20 minutes by fax.
- The PAP Education component meets the CAP Laboratory Accreditation Program requirement for participation in a peer educational program.

- Ten glass slides for education
- APAPCE/APAPJE/APAPKE/ APAPLE/APAPME - Reporting option with CME/CE credit for each pathologist/ cytotechnologist (within the same institution); must order in conjunction with Survey PAPCE/PAPJE/PAPKE/ PAPLE/PAPME
- Earn a maximum of 8 CME credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 8 CE credits per cytotechnologist for completing all challenges
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Two shipments (five slides each)



### Human Papillomavirus (High Risk) for Cytopathology CHPVD, CHPVM, CHPVK, CHPVJ

Analyte/Procedure		Program Code			Challenges per Shipment
	CHPVD	СНРУМ	CHPVK	CHPVJ	
HPV		ı	I	I	5
High-risk HPV genotyping (optional)					5

#### Additional Information

- Each laboratory should choose the Survey that best reflects the transport media received in its facility. For Survey CHPVJ, participants must provide results for all three media types. If your laboratory receives two types of media, order the Survey that is most appropriate for your specific laboratory (CHPVD, CHPVM, or CHPVK).
- For laboratories that perform HPV genotyping using ThinPrep PreservCyt Transport medium on site, Survey CHPVM and select samples of Survey CHPVJ provide an opportunity to report specific HPV genotypes.
- The CAP does not report genotyping responses to the CMS.

#### **Program Information**

- · Five simulated cervical specimens
- CHPVD Digene® Specimen Transport Medium<sup>™</sup> (STM)
- CHPVM ThinPrep PreservCyt® Transport Medium
- · CHPVK SurePath Preservative Fluid Transport Medium and corresponding vial of diluent
- · CHPVJ Combination of Digene, ThinPrep PreservCyt, and SurePath transport mediums
- · Three shipments per year

### Practice Management Resources

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> – 2017 Practice Management Fundamentals Workshop participant



Touch Imprint/Crush Preparation TICP/TICP1					
Procedure Program Code Challenges per Ship					
	TICP/TICP1				
Online slide and image program in rapid assessment case review		4			

- The TICP Program is designed to familiarize surgical pathologists, cytopathologists, and cytotechnologists with the cytomorphologic features of pathologic processes and tumors in touch imprints and crush or scrape preparations. These specimens are prepared either for intraoperative consultation (frozen section) or rapid on-site evaluation (ROSE) of tissue biopsies for adequacy and/or interpretation. Participants will learn to make an immediate adequacy assessment, assign the process to a general category, and triage the specimen to appropriate ancillary studies. Participants will review digital whole slides of the TICP preparations (hematoxylin & eosin, modified Wright-Giemsa, and/or Papanicolaou stains), static images of the preparation and ancillary studies, and clinical history/radiographic findings to reach a diagnosis. Each case has a complete description of entities in the differential diagnosis along with a discussion of the correct interpretation.
- Participants will receive immediate feedback on interpretations, ancillary studies, and case-related adequate assessment.
- The cases will be comprised of specimens from the bone and retroperitoneal/liver.
- May include rarely captured cases that may not be available on the glass slide.
- See system requirements on page 13.

- TICP Four online
   assessment challenges
   with clinical history; TICP
   provides CME/SAM/CE
   credit for one pathologist or
   cytotechnologist; for each
   additional pathologist or
   cytotechnologist, order TICP1
- TICP1 Reporting option with CME/SAM/CE credit for each additional pathologist/ technologist (within the same institution); must order in conjunction with Survey TICP
- Earn a maximum of 10 CME/SAM credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 10 CE credits per cytotechnologist for completion of an entire year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Online, whole slide images powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available





20

Nongynecologic Cytopathology Education Program NGC/NGC1					
Procedure Program Code Challenges per Shipment					
	NGC/NGC1				
Nongynecologic cytopathology case review – glass slides	ı	5			
Nongynecologic cytopathology case review — online	ı	5 per year			

#### Additional Information

- The Nongynecologic Cytopathology Education (NGC) program is an interlaboratory educational opportunity to assess participants' screening and interpretive skills. The NGC program is unsuitable for proficiency testing as these cases are chosen for their educational value. Cases may incorporate static online images that incorporate radiology and multiple aspects of pathology to enhance the interpretation.
- Participants can access laboratory reference interpretations and performance for the glass slides within 20 minutes by fax, providing rapid educational feedback, peer comparison, and additional review time.
- Additional online advanced education cases provide immediate feedback on interpretation selection, follow-up recommendations, and case-related educational questions.
- See system requirements on page 13.

#### **Program Information**

- · NGC Five glass slides; five online advanced education cases; one laboratory response form and two individual response forms
- · NGC1 Reporting option with CME/CE credit for each additional pathologist/ cytotechnologist (within the same institution); must order in conjunction with Survey NGC
- · Earn a maximum of 25 CME credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 25 CE credits per cytotechnologist for completing the glass slides and online cases
- · This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Online, whole slide images powered by DigitalScope technology
- · Four shipments per year



### Have you created or updated your CAP Profile?

Each laboratory staff member should have their own profile. Your profile is transferrable when you leave your current position. Use it to maintain information about yourself, including:

- Business affiliations
- Certifications
- Contact preferences
- Inspector-related information
- Personal contact information
- Specialties and skills
- Addresses

To create or update your profile, visit cap.org, log in, and click on UPDATE MY PROFILE.



Digital Slide Program in Fine-Needle Aspiration FNA/FNA1					
Procedure Program Code Challenges per Shipmen					
	FNA/FNA1				
Online program in fine-needle	1	5			

- This program focuses on FNA diagnostic dilemmas in practice. Online cases, which
  consist of whole slide images and static images, provide immediate feedback on
  interpretation selection, ancillary studies selection, and case-related educational
  questions.
- Cases will focus on lymph node and subcutaneous topics.
- May include rarely captured cases that may not be available on the glass slide.
- See system requirements on page 13.

- FNA Five online diagnostic challenges; FNA provides CME/CE credit for one pathologist or cytotechnologist; for each additional pathologist or cytotechnologist, order FNA1
- FNA1 Reporting option with CME/CE credit for each additional pathologist/ cytotechnologist (within the same institution); must order in conjuction with Survey FNA
- Earn a maximum of 10 CME credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 10 CE credits per cytotechnologist
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Online, whole slide images powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



Fine-Needle Aspiration Glass Slide FNAG/FNAG1				
Procedure	Program Code	Challenges per Shipment		
	FNAG/FNAG1			
Fine-needle aspiration glass slide case review	ı	5		

- The Fine-Needle Aspiration Glass Slide Education program is an interlaboratory educational opportunity to assess participants' screening and interpretive skills. FNAG cases may include more than one slide of varying stains and/or preparations used on fine-needle aspirations.
- Cases may include static online images that incorporate radiology and multiple aspects of pathology to support the interpretation.
- Participants can access laboratory reference interpretations and performance for the glass slides within 20 minutes by fax, providing rapid educational feedback, peer comparison, and additional review time.

#### **Program Information**

- FNAG Five cases consisting of glass slides and selected online images, representing a variety of conditions; one laboratory response form and two individual response forms
- FNAG1 Reporting option with CME/CE credit for each additional pathologist/ cytotechnologist (within the same institution); must order in conjunction with Survey **FNAG**
- · Earn a maximum of 10 CME credits (AMA PRA Category 1 Credits<sup>™</sup>) per pathologist/ resident and a maximum of 10 CE credits per cytotechnologist
- · This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- · Two shipments per year



### **Ultrasound Features of Superficial** and Palpable Lesions

This ruggedly constructed guide is the ideal reference tool for clinicians to use while performing ultrasound-guided fine-needle aspiration (USFNA). Compact and easy-to-follow, it includes hundreds of comparative images and concise descriptions covering normal anatomy and abnormalities of superficial body sites. Helpful clinical hints are offered throughout the book.

#### Order Ultrasound Features of Superficial and Palpable Lesions (PUB128)

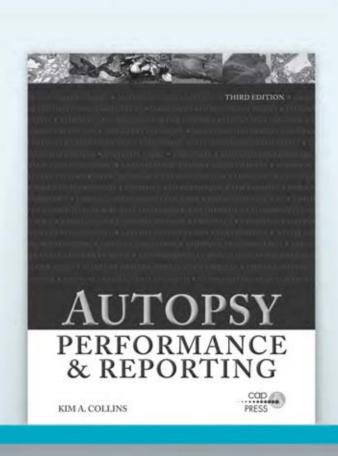
#### View sample pages and order online:

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Item number: PUB128 Spiral bound; 200 pages; 375 images and illustrations; 2018

# Take a modern approach to autopsy pathology



With more than 1,000 high-quality color images, the third edition of *Autopsy Performance & Reporting* includes:

- Numerous tables and checklists for fast, thorough reference
- Role of new technology, including molecular pathology, ancillary laboratory studies, and 3-D radiography
- Detailed autopsy procedures for specific organ systems and patient populations
- Guidelines for autopsy reporting and quality assurance

## Autopsy Performance & Reporting

Item number: PUB126

Hardcover; 472 pages; 1,000+ color

images and tables; 2017

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# Meet your certification and licensure requirements for Forensic Pathology.

Our Forensic Pathology (FR/FR1) program is designed to meet the educational needs of pathologists, residents, fellows, medical examiners, coroners, investigators, and analysts.

- Earn up to 12.5 CME or 12.5 CE credits.
- New in 2019—Earn up to 12.5 SAM credits.

### **Discontinued Programs**

Forensic Identity, Nuclear DNA Analysis (FID)

### **Forensic Sciences**

Analytes/procedures in bold type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Forensic Pathology FR/FR1				
Procedure Program Code Challenges per Shipmen				
	FR/FR1			
Forensic pathology cases	■ 5			

#### **Additional Information**

- Cases may include or reflect anthropologic materials, ballistics, dental identification, DNA identification, environmental pathology, forensic evidence, injury pattern, medicolegal issues, toxicology, and trace evidence.
- FR/FR1 is for hospital-based pathologists, forensic pathologists, residents, fellows, and medical examiners/coroners. This educational program is also designed for investigators, analysts, and technicians/technologists.

- FR Online activity containing five case studies illustrating gross and/or microscopic slides and questions related to medicolegal decision making; CME/SAM or CE credit is available for one pathologist or investigator. For each additional pathologist/investigator, order FR1
- FR1 Additional pathologist or investigator (within the same institution) reporting option with CME/SAM or CE credit; must order in conjunction with Survey FR
- Includes option to download program content
- Earn a maximum of 12.5 CME/SAM credits (AMA PRA Category 1 Credits™) per pathologist and a maximum of 12.5 CE credits per investigator for completion of an entire year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Two online activities per year





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Vitreous Fluid, Postmortem VF						
Analyte	Program Code	Challenges per Shipment				
	VF					
Acetone	•	3				
Chloride	I	3				
Creatinine	I	3				
Ethanol	I	3				
Glucose	I	3				
Potassium	•	3				
Sodium	I	3				
Vitreous urea nitrogen	•	3				

#### **Program Information**

- Three 5.0-mL synthetic vitreous fluid specimens
- For forensic and other toxicology laboratories that perform quantitative analysis of vitreous fluid
- · Conventional and International System of Units (SI) reporting offered
- · Two shipments per year

# Find a practical guide to toxicology laboratory operations with this resource

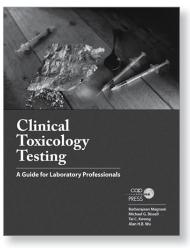
### **Clinical Toxicology Testing** A Guide for Laboratory Professionals (PUB220)

Complex issues face the laboratory director or pathologist who offers toxicology services. This thorough reference book will guide both experienced physicians and those in training through the pharmacological principles, testing menus, and methodologies for toxicology testing.

#### Available in print and ebook formats.

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- · printed books at estore.cap.org
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Item number: PUB220 Softcover; 304 pages; 2012

Forensic Toxicology, Criminalistics FTC						
Analyte	nalyte Program Code Challenges per Shipmen					
	FTC					
See drug listing below	I	4				

The American Society of Crime Laboratory Directors/Laboratory Accreditation Board Proficiency Review Committee (ASCLD/LAB PRC) has approved Survey FTC.

#### **Program Information**

- Three 20.0-mL whole blood specimens and one 20.0-mL synthetic urine specimen
- For crime and hospital laboratories that have forensic toxicology divisions performing qualitative and quantitative analysis of drugs in whole blood specimens along with a urine qualitative challenge
- · Two shipments per year

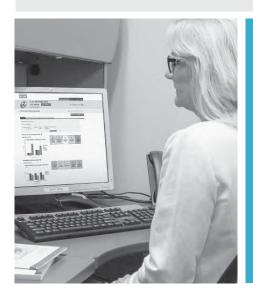
# **FTC Program Drug Listing**

Challenges will include a mix of drugs from the list below.

6-acetylmorphine (6-AM)	Ecgonine ethyl ester	Norfluoxetine
7-aminoclonazepam	Ecgonine methyl ester	Norketamine
7-aminoflunitrazepam	Ephedrine	Norpropoxyphene
Acetaminophen	Fentanyl*	Norsertraline
Alpha-hydroxyalprazolam	Fluoxetine	Nortriptyline
Alprazolam	Flurazepam*	Oxazepam
Amitriptyline	Gamma-hydroxybutyrate (GHB)	Oxycodone
Amphetamine	Hydrocodone	Oxymorphone
Benzoylecgonine	Hydromorphone	Paroxetine
Brompheniramine	Imipramine	Phencyclidine
Butalbital	Ketamine	Phenethylamine
Carisoprodol	Lorazepam	Phenobarbital
Chlorpheniramine	Lysergic acid diethylamide (LSD)	Phentermine
Clonazepam	Meperidine*	Phenytoin
Cocaethylene	Meprobamate	Propoxyphene
Cocaine	Methadone	Pseudoephedrine
Codeine	Methadone metabolite (EDDP)	Salicylate
Cyclobenzaprine*	Methamphetamine	Secobarbital
Delta-9-THC	Methylenedioxyamphetamine (MDA)	Sertraline
Delta-9-THC-COOH	Methylenedioxymethamphetamine	Temazepam
Desipramine	(MDMA)	Tramadol*
Desmethylcyclobenzaprine	Morphine*	Trazodone
Dextromethorphan	N-desmethyltramadol	Zolpidem
Diazepam	Nordiazepam	
Diphenhydramine	Nordoxepin	
Doxepin	Norfentanyl	*and/or metabolite(s)

Refer to Section 9, Toxicology, for a more comprehensive selection of toxicology offerings.

# 22 Analyte/Procedure Index



# Simplify analysis and reporting of PT and accreditation performance using the Performance Analytics Dashboard.

The complimentary dashboard helps you manage your CAP PT and accreditation performance.

- Quickly identify trends to mitigate risk by accessing up to three years or three accreditation cycles of data.
- Benchmark your laboratory against your peers and CAP-wide performance.
- Consolidate multiple CAP numbers to view a single dashboard for an entire system.

# **Analyte/Procedure Index**

The following Analyte/Procedure Index is a comprehensive listing of analytes and corresponding CAP program options.

Analytes/procedures in **bold type** whose corresponding program codes are **bold** are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Laboratories must perform five challenges three times per year (as noted by boldface) for analytes that are regulated by the CMS.

The **X** in the LAP ENR column denotes the CAP programs that can be used to fulfill the proficiency testing enrollment requirements for CAP-accredited laboratories. Refer to program descriptions in this catalog to determine compatibility with your specific methodologies.

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
1,5-anhydroglucitol		AG	1,5-Anhydroglucitol	71
1,25 dihydroxy vitamin D		BMV1	Bone Markers and Vitamins	86
3-methoxytyramines		N/NX	Urine Chemistry, Special	69
4-hydroxytriazolam		DFC	Drug-Facilitated Crime	108
5-hydroxyindoleacetic acid, qualitative		N/NX	Urine Chemistry, Special	69
5-hydroxyindoleacetic acid, quantitative	Х	N/NX	Urine Chemistry, Special	69
6-acetylmorphine (6-AM)		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
7-aminoclonazepam		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
7-aminoflunitrazepam		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
10q ( <i>PTEN</i> ) deletion		GLI	Glioma	259
11-deoxycortisol		Y/YY	Ligand Assay, Special	84
11-hydroxy-THC		THCB	Blood Cannabinoids	105
17-hydroxycorticosteroids		N/NX	Urine Chemistry, Special	69
17-hydroxyprogesterone	Χ	Y/YY	Ligand Assay, Special	84
17-ketosteroids		N/NX	Urine Chemistry, Special	69
25-OH vitamin D	Х	ABVD	Accuracy-Based Vitamin D	85
		LN40	Vitamin D Cal Ver/Lin	129

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
25-OH vitamin D (cont.)	Χ	VITD	25-OH Vitamin D	84
50:50 mixing study, APTT		CGE/CGEX	Coagulation, Extended	161
		CGS1	Coag Special, Series 1	162- 163
50:50 mixing study, PT		CGE/CGEX	Coagulation, Extended	161
		CGS1	Coag Special, Series 1	162- 163
ABO grouping	X	J, J1	Transfusion Medicine	218
	Х	JAT	Transfusion Medicine, Automated	219
		JATE1	Transfusion Medicine, Automated, Educational	219
		JATQ	Quality Cross Check, Transfusion Medicine	49
		TMCA	Transfusion Medicine, Competency Assessment	223
ABO subgroup typing		ABOSG	ABO Subgroup Typing	220
Acetaminophen	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FTC	Forensic Toxicology, Criminalistics	104
		LN3	TDM Cal Ver/Lin	121
	Х	SDS	Serum Drug Screen	101
		T	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Acetone	X	AL1	Whole Blood Alcohol/ Volatiles	101
	Х	AL2	Serum Alcohol/Volatiles	101
		SDS	Serum Drug Screen	101
		VF	Vitreous Fluid, Post- mortem	101
Acid-fast smear	Х	Е	Mycobacteriology	188
	Х	E1	Mycobacteriology, Ltd	188
Acid phosphatase	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58

Analyte/Procedure	LAP	Program	Description	Pg
Anatyte/Frocedure	ENR		Description	гg
Acid phosphatase (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41
Activated clotting time	Х	CT, CT1, CT2, CT3, CT5	ACT	164
		CTQ, CT1Q, CT2Q, CT3Q, CT5Q	Quality Cross Check, ACT	48
		POC14, POC15, POC16	Competency Activated Clotting Time	54
Activated partial thromboplastin time	Х	CGB	Basic Coagulation	160
		CGE/CGEX	Coagulation, Extended	161
	Х	CGL	Coagulation, Limited	160
		CGLQ	Quality Cross Check, Coagulation, Limited	47
		CGS1	Coag Special, Series 1	162- 163
		CGS3	Coag Special, Series 3	162- 163
		CGS4	Coag Special, Series 4	162- 163
		DBGN	Anticoagulant Monitoring, Dabigatran	163
		FNPX	Anticoagulant Monitoring, Fondaparinux	163
		RVBN	Anticoagulant Monitoring, Rivaroxaban	163
Activated protein C resistance		CGE/CGEX	Coagulation, Extended	161
		CGS2	Coag Special, Series 2	162- 163
Active vitamin B12		MMA	MMA and Active Vitamin B12	82
Acylcarnitine		BGL	Biochemical Genetics	243
ADAMTS-13		CGS7	ADAMTS-13	162- 163
Adenovirus		GIP	Gastrointestinal Panel	203
	X	GIP5	Gastrointestinal Panel	203
		ID2	Nucleic Acid Amp, Respiratory	198
	Х	IDR	Infectious Disease Respiratory Panel	202
		VLS2	Viral Load	199
	Х	VR1	Virology Culture	196
	Χ	VR2	Viral Antigen by DFA	196
	Х	VR4	Viral Antigen by EIA and Latex	196
Adenovirus 40/41		SP, SPN	Stool Pathogen	184
Adjustable micropipette Cal V/L		I	Instrumentation	131
Adrenocorticotropic hormone (ACTH)	Х	TM/TMX	Tumor Markers	89

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Alanine aminotrans- ferase (ALT/SGPT)	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Albumin	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		SPE	Protein Electrophoresis	76
Albumin, CSF	Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Albumin, urine		ABU	Accuracy-Based Urine	113
		LN20	Urine Albumin	126
	X	U	Urine Chemistry, General	68
Albumin: creatinine ratio		ABU	Accuracy-Based Urine	113
		LN20	Urine Albumin Cal Ver/ Lin	126
		U	Urine Chemistry, General	68
		UMC	Urine Albumin Creatinine	153
Alcohol, serum	X	AL2	Serum Alcohol/Volatiles	101
		LN11	Serum Ethanol Cal Ver/ Lin	124
Alcohol, whole blood	Х	AL1	Whole Blood Alcohol/ Volatiles	101
Aldolase		ADL	Aldolase	71
Aldosterone, serum	Χ	RAP	Renin and Aldosterone	89
Aldosterone, urine	X	N/NX	Urine Chemistry, Special	69
Alkaline phosphatase (ALP)	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Alkaline phosphatase (ALP) (cont.)		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Allergens (specific)		SE	Diagnostic Allergy	211
Alpha-1 antitrypsin	Χ	IG/IGX	Immunology, General	206
		LN7	Immunology Cal Ver/Lin	123
Alpha-1 antitrypsin genotyping	X	AAT	Alpha-1 Antitrypsin Genotyping	243
Alpha-1 globulin		SPE	Protein Electrophoresis	76
Alpha-2 globulin		SPE	Protein Electrophoresis	76
Alpha-2-antiplasmin		CGE/CGEX	Coagulation, Extended	161
Alpha-2-macroglobulin		A2MG	Alpha-2-Macroglobulin	208
Alpha-fetoprotein (AFP), amniotic fluid	Х	FP/FPX	Maternal Screen	87
Alpha-fetoprotein (AFP), serum	X	FP/FPX	Maternal Screen	87
	Χ	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121- 122
Alpha-hydroxyalprazolam		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Alpha-thalassemia		HGM	Hemoglobinopathies, Molecular Methods	245
Alprazolam		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		OFD	Oral Fluid for Drugs of Abuse	100
		UT	Urine Toxicology	96
Aluminum	Χ	R	Trace Metals	78
		TMU	Trace Metals, Urine	103
Aluminum, whole blood		TMWB	Trace Metals, Whole Blood	103
Amikacin	X	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Amikacin (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
Amino acids, qualitative	Х	BGL	Biochemical Genetics	243
Amino acids, quantitative		BGL	Biochemical Genetics	243
Amitriptyline		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
	Х	ZT	TDM, Special	60
Ammonia		C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN32	Ammonia Cal Ver/Lin	128
Amniotic fluid leakage (nitrazine)		AFL	Amniotic Fluid Leakage	148
Amobarbital		DFC	Drug-Facilitated Crime	108
Amphetamine		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
		UTC0	Urine Toxicology Carryover	133
Amphetamine group		DMPM	Drug Monitoring for Pain Management	107
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Amylase	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120

Analyte/Procedure	LAP	Program	Description	Pg
	ENR	Code		
Amylase (cont.)		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Amylase, pancreatic	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Amylase, urine		LN6	Urine Chemistry Cal Ver/Lin	122
	Х	U	Urine Chemistry, General	68
Anabasine		NTA	Nicotine and Tobacco Alkaloids	102
Analytical balance		I	Instrumentation	131
Anaplasma phagocytophilum		TTD	Antibody Detection- Tick-Transmitted Diseases	204
Anaplastic lymphoma kinase		PM6	Anaplastic Lymphoma Kinase IHC	273
Androstenedione	Х	Y/YY	Ligand Assay, Special	84
Angiotensin converting enzyme		ACE	Angiotensin Converting Enzyme	71
Anti-A titer		ABT, ABT1	Antibody Titer	221
Anti-B titer		ABT3	Antibody Titer	221
Anti-beta-2-glycoprotein		CGE/CGEX	Coagulation, Extended	161
Antibody detection	Х	J, JAT	Transfusion Medicine	218- 219
		JATE1	Transfusion Medicine, Automated, Educational	219
		JATQ	Quality Cross Check, Transfusion Medicine	49
	X	PS	Platelet Serology	223
		TMCA	Transfusion Medicine, Competency Assessment	223
Antibody detection/ identification (HLA)	X	MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	234- 235
	Х	MX2B, MX2C, MX2E, MXB, MXC	HLA Analysis, Class II	234- 235
Antibody identification		ETME1	Expanded Transfusion Medicine Exercises	227
	Х	J, JAT	Transfusion Medicine	218- 219
		JATE1	Transfusion Medicine, Automated, Educational	219
		TMCA	Transfusion Medicine, Competency Assessment	223
Antibody screen (HLA)		MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	234– 235

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Antibody screen (HLA) (cont.)		MX2B, MX2C, MX2E, MXB, MXC	HLA Analysis, Class II	234– 235
Anticardiolipin IgA, qualitative		ACL, APS	Antiphospholipid Antibody	209
Anticardiolipin IgA, quantitative		ACL, APS	Antiphospholipid Antibody	209
Anticardiolipin IgG, IgM, polyclonal; qualitative	Х	ACL, APS	Antiphospholipid Antibody	209
Anticardiolipin IgG, IgM, polyclonal; quantitative		ACL, APS	Antiphospholipid Antibody	209
Anti-CCP		CCP	Cyclic Citrullinated Peptide Antibody	210
Anticentromere antibody		S2	Immunology, Special	207
Antichromatin antibody		ACA	Antichromatin Antibody	208
Anti-CMV, total	Х	VM3	Viral Markers-Series 3	228
	Х	VR3	Infectious Disease Serology	204
Anti-CMV, IgG, IgM	Х	VR3	Infectious Disease Serology	204
Anti-D titer		ABT, ABT2	Antibody Titer	221
Anti-DNA (ds) antibody, qualitative	Х	S2, S4	Immunology, Special	207
Anti-DNA (ds) antibody, quantitative		S2, S4	Immunology, Special	207
Anti-DNA topoisomerase (Scl-70)		RDS	Rheumatic Disease Special Serologies	211
Antideamidated gliadin peptide antibody, IgA, IgG; qualitative	X	CES, CESX	Celiac Serology	210
Antideamidated gliadin peptide antibody, IgA, IgG; quantitative		CES, CESX	Celiac Serology	210
Antideamidated gliadin peptide antibody screen, IgA, IgG		CES, CESX	Celiac Serology	210
Antideamidated gliadin peptide/tissue transglutaminase antibody screen, IgA, IgG		CES, CESX	Celiac Serology	210
Antiendomysial antibody IgA, qualitative		CES, CESX	Celiac Serology	210
Antiendomysial antibody IgA, quantitative		CES, CESX	Celiac Serology	210
Antiendomysial antibody IgG, qualitative		CES, CESX	Celiac Serology	210
Antiendomysial antibody IgG, quantitative		CES, CESX	Celiac Serology	210
Antifilamentous actin IgG antibody		FCN	Antifilamentous Actin Antibody	208
Antifungal drugs monitoring		AFD	Antifungal Drugs Monitoring	106
Antifungal susceptibility testing	Х	F	Mycology and Aerobic Actinomycetes	189

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
	LIVIX	Code		
Antifungal susceptibility testing (cont.)	Χ	F1	Yeast	189
Antigen detection, bacterial		CDF2	Clostridium difficile Detection	181
	Х	CDF5	Clostridium difficile Detection	182
	Χ	D	Bacteriology	173
	Χ	D4	Bacteriology, Limited	176
	Χ	D6	Rapid Group A Strep	178
	Χ	D8	Group B Strep	179
	Х	D9	Rapid Group A Strep, Waived	178
	Χ	HC1	C. trachomatis by DFA	182
	Χ	HC3	C. trachomatis by EIA	182
		LBAS	Legionella pneumophila	179
	Х	MC1	Microbiology Combination	176
	Х	MC2	Microbiology Combination	176
	Χ	MC4	Urine Colony Count Combination	177
	Х	MC5	Throat Culture/Rapid Strep Combination	177
		POC4	POC Strep Screen Competency	52
		SBAS	Streptococcus pneumoniae	179
	Χ	vs	Vaginitis Screen	185
Antigen detection, viral	Χ	HC2	HSV by DFA	197
	Х	VR2	Viral Antigen Detection by DFA	196
	Х	VR4	Viral Antigen Detection by EIA and Latex	196
Antigliadin antibody IgA, IgG, qualitative		CES, CESX	Celiac Serology	210
Antigliadin antibody IgA, IgG, quantitative		CES, CESX	Celiac Serology	210
Antiglomerular basement membrane, qualitative	Х	S2	Immunology, Special	207
Antiglomerular basement membrane, quantitative		S2	Immunology, Special	207
Anti-HAV, IgM	Χ	VM5	Viral Markers-Series 5	229
Anti-HAV, IgG	Χ	VM1	Viral Markers-Series 1	228
Anti-HAV, total		VM1	Viral Markers-Series 1	228
Anti-HBc, IgM	Χ	VM5	Viral Markers-Series 5	229
Anti-HBc, total	Χ	VM1	Viral Markers-Series 1	228
Anti-HBe	Χ	VM2	Viral Markers-Series 2	228
Anti-HBs, qualitative	Χ	VM1	Viral Markers-Series 1	228
Anti-HBs, quantitative		VM1	Viral Markers-Series 1	228
Anti-HCV	X	RHCVW	Anti-HCV, Rapid Methods, Waived	229

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Anti-HCV (cont.)	Х	VM1	Viral Markers-Series 1	228
Antihistidyl t-RNA synthetase (Jo-1)		RDS	Rheumatic Disease Special Serologies	211
Antihistone antibody		AHT	Antihistone Antibody	208
Anti-HIV-1	Х	AHIV	Anti-HIV Rapid Methods	229
	Х	AHIVW	Anti-HIV Rapid Methods	229
	Х	VM1	Viral Markers-Series 1	228
Anti-HIV-2	Х	VM1	Viral Markers-Series 1	228
	Х	AHIV	Anti-HIV Rapid Methods	229
Anti-HIV-1/2	Х	AHIV	Anti-HIV Rapid Methods	229
	Х	AHIVW	Anti-HIV Rapid Methods	229
	Х	VM1	Viral Markers-Series 1	228
Anti-HIV-1/2, HIV-1 p24 antigen	Х	VM6, VM6X	Viral Markers-Series 6	229
Anti-HTLV-I/II		VM3	Viral Markers-Series 3	228
Anti-Jo-1 (antihistidyl t-RNA synthetase)		RDS	Rheumatic Disease Special Serologies	211
Anti-LKM		LKM	Liver-Kidney Microsomal Antibody	211
Antimicrobial susceptibility testing	Х	D	Bacteriology	173
	Х	D2	Urine Cultures	175
	Х	D4	Bacteriology, Limited	176
	Х	D7	Throat, Urine Cultures	175
		MBT	Microbiology Bench Tools Competency	174
	Х	MC1	Microbiology Combination with GC	176
	Х	MC2	Microbiology Combination	176
	Х	MC5	Throat Culture/Rapid Strep	177
Antimitochondrial antibody, qualitative	Х	S2	Immunology, Special	207
Antimitochondrial antibody, quantitative		S2	Immunology, Special	207
Antimitochondrial M2 antibody		Н	Antimitochondrial M2 Antibody	208
Anti-MP0		S2	Immunology, Special	207
Antimüllerian hormone	Х	AMH	Antimüllerian Hormone	84
Antimycobacterial susceptibility testing	Х	E	Mycobacteriology	188
		MTBR	Molecular MTB Detection and Resistance	188
Antineutrophil cytoplasmic antibody (ANCA)		S2	Immunology, Special	207
Antinuclear antibody (ANA)	Х	ANA, IL	Immunology	206
Antiparietal cell antibody		APC	Autoimmune Gastritis Markers	208

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Antiphospholipid antibody		ACL	Antiphospholipid Antibody	209
Antiphosphatidylserine antibodies (IgG, IgM, and IgA)		APS	Antiphosphatidylserine Antibodies	209
Anti-PR3		S2	Immunology, Special	207
Antiribosomal P antibody		ARP	Antiribosomal P Antibody	209
Anti-RNP antibody, qualitative	Х	S2	Immunology, Special	207
Anti-RNP antibody, quantitative		S2	Immunology, Special	207
Anti-Saccharomyces cerevisiae antibody		ASC	Anti-Saccharomyces cerevisiae Antibody	209
Anti-Scl-70 (anti-DNA topoisomerase)		RDS	Rheumatic Disease Special Serologies	211
Anti-Sm antibody, qualitative	Х	S2	Immunology, Special	207
Anti-Sm antibody, quantitative		S2	Immunology, Special	207
Anti-Sm/RNP antibody, qualitative	Х	S2	Immunology, Special	207
Anti-Sm/RNP antibody, quantitative		S2	Immunology, Special	207
Antismooth muscle antibody, qualitative	Х	S2	Immunology, Special	207
Antismooth muscle antibody, quantitative		S2	Immunology, Special	207
Antisperm antibody IgG		ASA	Semen Analysis	156
Anti-SSA antibody, qualitative	Х	S2	Immunology, Special	207
Anti-SSA antibody, quantitative		S2	Immunology, Special	207
Anti-SSB antibody, qualitative	Х	S2	Immunology, Special	207
Anti-SSB antibody, quantitative		S2	Immunology, Special	207
Anti-SSA/SSB antibody, qualitative	X	S2	Immunology, Special	207
Anti-SSA/SSB antibody, quantitative		S2	Immunology, Special	207
Antistreptolysin 0 (ASO)	Х	ASO, IL	Immunology	206
Antithrombin (activity, Ag)		CGE/CGEX	Coagulation, Extended	161
		CGS2	Coag Special, Series 2	162- 163
		LN35	Thrombophilia Cal Ver/ Lin	129
Antithyroglobulin antibody, qualitative	Х	S2, S4	Immunology, Special	207
Antithyroglobulin antibody, quantitative		S2, S4	Immunology, Special	207
Antithyroid microsomal, qualitative	Х	S2, S4	Immunology, Special	207

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Antithyroid microsomal, quantitative		S2, S4	Immunology, Special	207
Antithyroid peroxidase, qualitative	Х	S2, S4	Immunology, Special	207
Antithyroid peroxidase, quantitative		S2, S4	Immunology, Special	207
Antitissue transglutaminase antibody IgA, qualitative	X	CES, CESX	Celiac Serology	210
Antitissue transglutaminase antibody IgA, quantitative		CES, CESX	Celiac Serology	210
Antitissue transglutaminase antibody IgG, qualitative		CES, CESX	Celiac Serology	210
Antitissue transglutaminase antibody IgG, quantitative		CES, CESX	Celiac Serology	210
Anti-Trypanosoma cruzi		VM4	Viral Markers-Series 4	228
Apixaban		APXBN	Anticoagulant Monitoring, Apixaban	163
Apolipoprotein A1	Х	ABL	Accuracy-Based Lipids	112
	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Apolipoprotein B	Χ	ABL	Accuracy-Based Lipids	112
	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Apolipoprotein E (APOE) genotyping	Х	APOE	Apolipoprotein E (APOE) genotyping	243
Aripiprazole		T	Toxicology	96
		UT	Urine Toxicology	96
Arsenic, urine		TMU	Trace Metals, Urine	103
Arsenic, whole blood		TMWB	Trace Metals, Whole Blood	103
Arthropod identification		TMO	Ticks, Mites, and Other Arthropods	193
Aspartate aminotransferase (AST/ SGOT)	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120

Analyte/Procedure	LAP	Program	Description	Pg
	ENR	Code		
Aspirin assay		PIA, PIAX	Drug-Specific Platelet Aggregation	167
Astrovirus		GIP	Gastrointestinal Panel	203
	Χ	GIP5	Gastrointestinal Panel	203
Atenolol		T	Toxicology	96
		UT	Urine Toxicology	96
Atropine		T	Toxicology	96
		UT	Urine Toxicology	96
Automated WBC differential	X	FH1-FH4, FH6, FH9, FH10, FH13, FH1P-FH4P, FH6P, FH9P, FH10P, FH13P	Hematology Automated Differential	136
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
Autopsy pathology		AUP/AUP1	Autopsy Pathology	275
B-ALL		BALL	B-ALL Minimal Residual Disease	214
B-type natriuretic peptides	Х	BNP	B-Type Natriuretic Peptides, 2 Chall	61
	Х	BNP5	B-Type Natriuretic Peptides, 5 Chall	61
		BNPQ	Quality Cross Check, B-Type Natriuretic Peptides	41
		LN30	B-Type Natriuretic Peptides Cal Ver/Lin	127
	X	PCARI, PCARM, PCARMX	Plasma Cardiac Markers	65
		POC12	Competency Plasma Cardiac Markers	53
Babesia microti		TTD	Antibody Detection of Tick-Transmitted Diseases	204
Bacterial antigen detection		CDF2	Clostridium difficile Detection	181
	Х	CDF5	Clostridium difficile Detection	182
	Х	D	Bacteriology	173
	Х	D4	Bacteriology, Limited	176
	X	D6	Rapid Group A Strep	178
	Χ	HC1	C. trachomatis by DFA	182
	X	HC3	C. trachomatis by EIA	182
		LBAS	Legionella pneumophila Antigen Detection	179
	Х	MC1	Microbiology Combination	176
	X	MC2	Microbiology Combination	176

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Bacterial antigen detection (cont.)	Х	MC4	Urine Colony Count Combination	177
	Х	MC5	Throat Culture/Rapid Strep Combination	177
		POC4	POC Strep Screen Competency	52
		SBAS	S. pneumoniae Antigen Detection	179
	Х	VS	Vaginitis Screen	185
Bacterial detection in platelets		BDP, BDPV	Bacterial Detection, Platelets	226
	Х	BDP5, BDPV5	Bacterial Detection, Platelets	226
Bacterial identification	Х	D	Bacteriology	173
	Х	D1, D2, D3, D7	Throat, Urine, GC Cultures	175
	X	D4	Bacteriology, Limited	176
	X	D8	Group B Strep	179
		DEX	Expanded Bacteriology	174
	X	HC6/HC6X	C. trachomatis/GC by Nucleic Acid Amp	186
	X	НС7	C. trachomatis/GC DNA by NAA	186
	X	IDR	Infectious Disease, Respiratory Panel	202
	Х	MC1	Microbiology Combination with GC	176
	Х	MC2	Microbiology Combination	176
	Х	MC4	Urine Colony Count Combination	177
	Х	MC5	Throat Culture/Rapid Strep	177
		MBT	Microbiology Bench Tools Competency	174
		MRS	Methicillin-resistant Staphylococcus aureus Screen	183
		MRS2M	MRSA Screen Molecular, 2 Challenge	183
	Х	MRS5	Methicillin-resistant Staphylococcus aureus Screen	183
	Х	MRS5M	MRSA Screen, Molecular, 5 Challenge	183
Bacterial strain typing		BSTS	Bacterial Strain Typing- Staphylococcus	179
Bacterial vaginosis screen		BV	Bacterial Vaginosis	185
		MVP	Molecular Vaginal Panel	186
		VS2	Vaginitis Screen, Virtual Gram Stain	186
Barbiturate group		DMPM	Drug Monitoring for Pain Management	107

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Barbiturate group (cont.)		SDS	Serum Drug Screen	101
		T	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
BCR/ABL1 p190		MH02, MH03	Molecular Hematologic Oncology	260
		MRD1	Minimal Residual Disease	260
BCR/ABL1 p210		MH02, MH03	Molecular Hematologic Oncology	260
		MRD	Minimal Residual Disease	260
Bence Jones protein		UBJP	Urinary Bence Jones Protein	76
Benzodiazepine group		DMPM	Drug Monitoring for Pain Management	107
		OFD	Oral Fluid for Drugs of Abuse	100
		SDS	Serum Drug Screen	101
		T	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Benzoylecgonine		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
		UTCO	Urine Toxicology Carryover	133
Beta-2-glycoprotein I		ACL, APS	Antiphospholipid Antibody	209
Beta-2-microglobulin, serum	Х	TM/TMX	Tumor Markers	89
Beta-2-microglobulin, urine		CD	Cadmium	102
Beta-hydroxybutyrate	Х	KET	Ketones	64
Beta globulin		SPE	Serum Electrophoresis	76
Beta-thalassemia		HGM	Hemoglobinopathies, Molecular Methods	245
Bile crystal identification		BCR	Bile Crystals	149
Bilirubin, confirmatory urine		DSC	Dipstick Confirmatory	149
Bilirubin, direct	Х	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Bilirubin, direct (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
	Χ	NB, NB2	Neonatal Bilirubin	65
Bilirubin, total	X	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
	Х	NB, NB2	Neonatal Bilirubin	65
Bilirubin, urine	X	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
		DSC	Dipstick Confirmatory	149
	Х	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	52
Bioavailable testosterone		DY	Ligand Assay, Special	84
Biochemical genetics		BGL, BGL1	Biochemical Genetics	243
Bioterrorism agents		LPX	Laboratory Preparedness Exercise	184
BK virus		ID1T	Nucleic Acid Amp, JC and BK	197
		VLS, VLS2	Viral Load	199
Blood cannabinoids		THCB	Blood Cannabinoids	105
Blood cell identification	Х	BCP, BCP2	Blood Cell Identification	140
		EHE1	Expanded Virtual Peripheral Blood Smear	144
	X	FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
	Χ	HEP	Basic Hematology	136
		VPBS	Virtual Peripheral Blood Smear	144
		VBF	Virtual Body Fluid	148
Blood culture	Χ	BCS	Blood Culture	179

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Blood culture (cont.)		GNBC	Gram-Negative Blood Culture Panel	180
		GPBC	Gram-Positive Blood Culture Panel	180
Blood culture Staphylococcus aureus		BCS1	Blood Culture Staphylococcus aureus	180
Blood parasite	Χ	BP	Blood Parasite	193
	Χ	Р	Parasitology	192
Blood parasite, rapid		RMAL	Rapid Malaria	193
Bloom syndrome	Х	MGL4	Molecular Genetics	246- 247
Bocavirus		IDR	Infectious Disease Respiratory Panel	202
Body fluid case studies		VBF	Virtual Body Fluid	148
Body fluid (cell count)		ABF1, ABF2, ABF3	Automated Body Fluid	148
Body fluid (cell count)	Χ	HFC, HFCI	Hemocytometer Fluid Count	150- 151
Body fluid cell identification		CMP/CMP1	Clinical Microscopy	146
Body fluid (chemistry)		FLD, FLD2	Body Fluid	72-73
Body fluid crystal identification		BFC	Crystals	149
Body fluid photographs		CMP, CMP1	Clinical Microscopy	146
Bone marrow cell differential		BMD	Bone Marrow Cell Differential	140
Bone marrow cell identification		BMD	Bone Marrow Cell Differential	140
Bone specific alkaline phosphatase		BMV2	Bone Markers and Vitamins	86
Bordetella holmesii	X	IDR	Nucleic Acid Amp, Organisms	202
Bordetella parapertussis		BOR	Bordetella pertussis/ parapertussis, Molecular	181
		IDN, IDO	Nucleic Acid Amp, Organisms	201
	Х	IDR	Infectious Disease Respiratory Panel	202
Bordetella pertussis		BOR	Bordetella pertussis/ parapertussis, Molecular	181
		IDN, IDO	Nucleic Acid Amp, Organisms	201
	Х	IDR	Infectious Disease Respiratory Panel	202
Borrelia burgdorferi		TTD	Antibody Detection of Tick-Transmitted Diseases	204
BRAF	Χ	BRAF	Mutation Testing	258
	Χ	MTP	Multigene Tumor Panel	259
BRAF V600E		BRAFV	BRAF V600E	272
BRCA1/2	Χ	MGL3	Molecular Genetics	246- 247

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
BRCA1/2 sequencing	Х	BRCA	BRCA1/2 Sequencing	244
BRCA1/2 duplication/ deletion analysis		BRCA	BRCA1/2 Sequencing	244
Brain tissue by FISH		CYJ	Fluorescence In Situ Hybrid, Brain/Glioma Tissue	241
Brightfield in situ hybridization	Х	ISH2	In Situ Hybridization	256
Brompheniramine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Buprenorphine		DMPM	Drug Monitoring for Pain Management	107
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Bupropion		T	Toxicology	96
		UT	Urine Toxicology	96
Butalbital		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
C. difficile antigen		CDF2	Clostridium difficile Detection	181
	X	CDF5	Clostridium difficile Detection	182
	X	D	Bacteriology, Antigen Detection	173
		SP, SPN	Stool Pathogens-Rapid and Molecular	184
C. difficile toxin		CDF2	Clostridum difficile Detection	181
		CDF5	Clostridum difficile Detection	182
		D	Bacteriology-Antigen Detection	173
		GIP	Gastrointestinal Panel	203
		GIP5	Gastrointestinal Panel	203
		SP, SPN	Stool Pathogens-Rapid and Molecular	184
CA 15-3		LN34	Tumor Markers Cal Ver/ Lin	128
	Х	TM/TMX	Tumor Markers	89

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
CA 19-9		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		LN34	Tumor Markers Cal Ver/ Lin	128
	X	TM/TMX	Tumor Markers	89
CA 27.29	X	TM/TMX	Tumor Markers	89
CA 72-4		TM/TMX	Tumor Markers	89
CA 125		LN34	Tumor Markers Cal Ver/ Lin	128
	X	TM/TMX	Tumor Markers	89
Cadmium, urine	X	CD	Cadmium	102
Cadmium, whole blood	X	CD	Cadmium	102
Caffeine	X	CZ2X, CZX, CZ, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Calcitonin	X	TM/TMX	Tumor Markers	89
Calcium		ABS	Accuracy-Based Testosterone and Estradiol	113
	X	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Calcium, urine		ABU	Accuracy-Based Urine	113
		LN6	Urine Chemistry Cal Ver/Lin	122
	X	U	Urine Chemistry, General	68
Calcium, ionized	X	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN13C	Blood Gas Cal Ver/Lin	124- 125
		POC10, POC11	POC Competency Blood Gases	53
Calcofluor white		FSM	Fungal Smear	191
Campylobacter		CAMP	Campylobacter	181

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Campylobacter (cont.)		GIP	Gastrointestinal Panel	203
	Х	GIP5	Gastrointestinal Panel	203
Canavan disease	Х	MGL4	Molecular Genetics	246- 247
Candida culture	Х	F3	Candida Culture	190
Candida glabrata vaginal, molecular		MVP	Molecular Vaginal Panel	186
Candida krusei vaginal, molecular		MVP	Molecular Vaginal Panel	186
Candida sp., DNA probe	X	VS	Vaginitis Screen	185
Candida sp. group, vaginal, molecular		MVP	Molecular Vaginal Panel	186
Cannabinoids			See Delta-9-THC-COOH and Delta-9-THC	100
Carbamazepine	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
		Т	Toxicology	96
		UT	Urine Toxicology	96
Carbamazepine-10,11- epoxide		Т	Toxicology	96
		UT	Urine Toxicology	96
Carbamazepine, free	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Carbapenem-resistant organisms		CRO	Carbapenem-resistant Organisms	181
Carboxyhemoglobin	X	S0	Blood Oximetry	94
		SOQ	Quality Cross Check, Blood Oximetry	44
Cardiomyopathy sequencing panel		CMSP	Cardiomyopathy Sequencing Panel	244
Carisoprodol		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Carnitine	X	BGL1	Biochemical Genetics	243
Casts, urine, semiquantitative		UAA, UAA1	Automated Urinalysis	149
CD1a		RFAV1	Rare Flow Antigen Validation CD1a	216
CD3	Х	FL, FL1	Lymphocyte Subset Immunophenotyping	213
		LN22	Flow Cytometry Cal Ver/Lin	126
		SCP	Stem Cell Processing	225

Analyte/Procedure	LAP	Program	Description	Pg
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CD4	Х	FL, FL1	Lymphocyte Subset Immunophenotyping	213
		LN22	Flow Cytometry Cal Ver/Lin	126
CD8	Х	FL, FL1	Lymphocyte Subset Immunophenotyping	213
		LN22	Flow Cytometry Cal Ver/Lin	126
CD20		PM3	Immunohistochemistry	273
CD30		CD30	CD30 Immunohistochemistry	273
CD34		CBT	Cord Blood Testing	225
	Х	FL4	Flow Cytometry CD34+	213
		SCP	Stem Cell Processing	225
CD45		CBT	Cord Blood Testing	225
	Х	FL, FL1	Lymphocyte Subset Immunophenotyping	213
		FL4	Flow Cytometry CD34+	213
		SCP	Stem Cell Processing	225
CD49d		ZAP70	ZAP-70 Analysis by Flow Cytometry	216
CD103		RFAV2	Rare Flow Antigen Validation, CD103	216
CD117 (c-kit)		PM1	Immunohistochemistry	273
CEA		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
	X	K, KK, K2	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
Cell free DNA		CFDNA	Cell Free DNA	258
		NIPT	Noninvasive Prenatal Testing	87
Ceruloplasmin	Х	S2, S4	Immunology, Special	207
CFU-GM		SCP	Stem Cell Processing	225
CH50		CH50	Total Hemolytic Complement	212
CH100		CH50	CH100	212
Chlamydia trachomatis	Х	HC1	C. trachomatis by DFA	182
	Х	HC3	C. trachomatis by EIA	182
	Х	HC6, HC6X	C. trachomatis/GC by Nucleic Acid Amp	186
	Х	HC7	C. trachomatis/GC DNA by NAA	186
		VR1	Virology Culture	196
Chlamydophila pneumoniae		IDN, IDO	Nucleic Acid Amp, Organisms	201
	Х	IDR	Infectious Disease, Respiratory Panel	202
Chlordiazepoxide		T	Toxicology	96
		UT	Urine Toxicology	96

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Chloride	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		LN13C	Blood Gas Cal Ver/Lin	124- 125
		POC10, POC11	POC Competency Blood Gases	53
Chloride, sweat	Х	SW1, SW2, SW3, SW4	Sweat Analysis Series	79
Chloride, urine		LN6	Urine Chemistry Cal Ver/Lin	122
	Х	U	Urine Chemistry, General	68
Chloride, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
Chlorpheniramine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Cholesterol		ABL	Accuracy-Based Lipids	112
	X	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
	Х	LCW	Ltd Chem, Waived	65
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Chromium	Х	R	Trace Metals	78
Chromium, whole blood		TMWB	Trace Metals, Whole Blood	103

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Chromium, urine		TMU	Trace Metals, Urine	103
Chromosomal abnormalities	Х	CY, CYBK	Cytogenetics	240
Citalopram		DFC	Drug-Facilitated Crime	108
		Т	Toxicology	96
		UT	Urine Toxicology	96
Citrate		KSA	Kidney Stone Risk Assessment	69
CK isoenzymes	X	CRTI	Cardiac Markers	62
CK-MB (immunochemical)	Х	CRT, CRTI	Cardiac Markers	62
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
	X	PCARI, PCARM, PCARMX	Plasma Cardiac Markers	65
		POC12	Competency Plasma Cardiac Markers	53
CK2 (MB)		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Clinical pathology improvement program		CPIP/CPIP1	Quality Management, Education	14
Clomipramine		Т	Toxicology	96
		UT	Urine Toxicology	96
Clonazepam		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Clonidine		DFC	Drug-Facilitated Crime	108
Clostidium difficile antigen		CDF2	C. diff, 2 Challenge	181
	Х	CDF5	C. diff, 5 Challenge	182
	X	D	Bacteriology-Antigen Detection	173
		SP, SPN	Stool Pathogens-Rapid and Molecular	184
Clostridium difficile toxin		CDF2	Clostridum difficile Detection	181
		CDF5	Clostridum difficile Detection	182
		D	Bacteriology-Antigen Detection	173

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Clostridium difficile toxin (cont.)		GIP	Gastrointestinal Panel	203
		GIP5	Gastrointestinal Panel	203
		SP, SPN	Stool Pathogens-Rapid and Molecular	184
Clozapine		Т	Toxicology	96
		UT	Urine Toxicology	96
		ZE	Therapeutic Drug Monitoring, Extended	60
CMV		ID1	Nucleic Acid Amp, Viruses	197
		LN38	CMV Viral Load Cal Ver/Lin	129
		VLS, VLS2	Viral Load	199
	X	VM3	Viral Markers-Series 3	228
	X	VR1	Virology Culture	196
	X	VR2	Viral Antigen Detection by DFA	196
	Х	VR3	Infectious Disease Serology	204
CO <sub>2</sub>	X	C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Cobalt		TMU	Trace Metals, Urine	103
Cobalt, whole blood		TMWB	Trace Metals, Whole Blood	103
Cocaethylene		FTC	Forensic Toxicology, Criminalistics	104
-		T	Toxicology	96
		UT	Urine Toxicology	96
Cocaine		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Codeine		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Codeine (cont.)		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Compatibility testing	Х	J, JAT	Transfusion Medicine	218- 219
		JATE1	Transfusion Medicine, Automated, Educational	219
		TMCA	Transfusion Medicine, Competency Assessment	223
Complement C3	Х	IG/IGX	Immunology, General	206
		LN7	Immunology Cal Ver/Lin	123
Complement C4	Х	IG/IGX	Immunology, General	206
		LN7	Immunology Cal Ver/Lin	123
Complexed PSA	Х	K/KK	Ligand Assay, General	82
Conductivity, sweat	X	SW1, SW2, SW3, SW4	Sweat Analysis Series	79
Connexin 26	Х	MGL3	Molecular Genetics	246- 247
Copper	Х	R	Trace Metals	78
Copper, urine		TMU	Trace Metals, Urine	103
Copper, whole blood		TMWB	Trace Metals, Whole Blood	103
Coproporphyrins	Х	N/NX	Urine Chemistry, Special	69
Coronavirus		ID2	Nucleic Acid Amp, Respiratory	198
		IDR	Infectious Disease, Respiratory Panel	202
Cortisol		ABS	Accuracy-Based Testosterone and Estradiol	113
	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Χ	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
Cortisol, salivary		SALC	Salivary Cortisol	77
Cortisol, urinary free	Χ	N/NX	Urine Chemistry, Special	69
Cotinine		NTA	Nicotine and Tobacco Alkaloids	102
		T	Toxicology	96
		UT	Urine Toxicology	96
C-peptide		ABGIC	Accuracy-Based Glucose, Insulin, and C-Peptide	115

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
C-peptide (cont.)	Х	ING	Insulin, Gastrin, C-Peptide, PTH	86
		LN46	C-Peptide/Insulin Cal Ver/Lin	130
C-reactive protein (CRP)	Х	CRP, IL	Immunology	206
		LN12, LN12E	C-Reactive Protein Cal Ver/Lin	124
C-reactive protein, high- sensitivity (hsCRP)	Х	HSCRP	High-Sensitivity C-Reactive Protein	64
		LN21	High-Sensitivity C-Reactive Protein Cal Ver/Lin	126
Creatine kinase (CK)	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Creatinine	X	AQ2, AQ4	Aqueous Blood Gas	92
		AQ2Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	Х	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		LN24	Creatinine Accuracy Cal Ver/Lin	127
		SCO	Serum Carryover	133
Creatinine, urine		ABU	Accuracy-Based Urine	113
	Х	BU	Bone and Mineral, Urine	85
	X	CD	Cadmium	102
		DAI	Urine Drug Adulterant/ Integrity Testing	98
		LN6	Urine Chemistry Cal Ver/Lin	122

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Creatinine, urine (cont.)		LN20	Urine Albumin Cal Ver/ Lin	126
	Х	U	Urine Chemistry, General	68
		UDC	Forensic Urine Drug Testing, Confirmatory	99
	Х	UMC	Urine Albumin/ Creatinine	153
Creatinine, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
Creatinine, whole blood	X	WBCR	Whole Blood Creatinine	66
Crossmatching		EXM, EXM2	Electronic Crossmatch	219- 220
	Х	J, JAT	Transfusion Medicine	218- 219
	Х	MX1B, MX1C, MXB, MXC	HLA Analysis, Class I	234- 235
	Х	MX2B, MX2C, MXB, MXC	HLA Analysis Class II	234- 235
		TMCA	Transfusion Medicine, Competency Assessment	223
Cryptococcal antigen detection	Х	CRYP	Cryptococcal Antigen Detection	190
		F	Mycology and Aerobic Actinomycetes	189
		F1	Yeast	189
Cryptococcus neoformans/gatti		IDME	Meningitis/Encephalitis Panel	202
Cryptosporidium		GIP	Gastrointestinal Panel	203
		GIP5	Gastrointestinal Panel	203
Cryptosporidium immunoassay, preserved specimen	X	P, P3, P4, P5	Parasitology	192
Crystals, urine (semiquantitative)		UAA	Automated Urinalysis	149
Crystal identification (bile)		BCR	Bile crystals	149
Crystal identification (body fluid)		BFC	Body Fluid Crystals	149
Crystal identification (body fluid, urine and bile)		BFC	Body Fluid Crystals	149
Crystal identification (urine)		URC	Urine Crystals	149
CSF antigen detection	Х	D	Bacteriology	173
C-telopeptide (CTX)		BMV5	Bone Markers and Vitamin	86
		BU	Bone and Mineral, Urine	85
Cyclic citrullinated peptide antibody		CCP	Anti-cyclic Citrullinated Peptide Antibody	210
Cyclobenzaprine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Cyclobenzaprine (cont.)		T	Toxicology	96
		UT	Urine Toxicology	96
Cyclospora cayatanensis		GIP	Gastrointestinal Panel	203
		GIP5	Gastrointestinal Panel	203
Cyclosporine	Х	CS	Immunosuppressive Drugs	59
		LN31	Immunosuppressive Drugs Cal Ver/Lin	128
CYP2C9		PGX	Pharmacogenetics	249
CYP2C19		PGX	Pharmacogenetics	249
CYP2D6		PGX	Pharmacogenetics	249
CYP3A4		PGX	Pharmacogenetics	249
CYP3A5		PGX	Pharmacogenetics	249
Cystatin C		CYS	Cystatin C	74
Cystic fibrosis	Х	MGL2, MGL5	Molecular Genetics	246- 247
Cystine		KSA	Kidney Stone Risk Assessment	69
Cytogenomic microarray		CYCGH	Constitutional Microarray Analysis	242
		CYCMA	Cytogenomic Microarray Analysis for Oncologic Abnormality	242
Cytology proficiency testing			See Cytopathology GYN proficiency testing	277
Cytomegalovirus (CMV)		ID1	Nucleic Acid Amp, Viruses	197
		IDME	Meningitis/Encephalitis Panel	202
		LN38	CMV Viral Load Cal Ver/ Lin	129
		VLS, VLS2	Viral Load	199
	Х	VM3	Viral Markers-Series 3	228
	Χ	VR1	Virology Culture	196
	Х	VR2	Virology by DFA	196
	X	VR3	Infectious Disease Serology	204
Cytopathology GYN education		PAPCE1	PAP Edu, Conventional	278
		PAPJE1	PAP Edu, All Technologies	278
		PAPKE1	PAP Edu, SurePath	278
		PAPME1	PAP Edu, ThinPrep	278
Cytopathology GYN proficiency testing		PAPCPT	PAP PT, Conventional	277
		PAPJPT	PAP PT, Combination	277
		PAPKPT	PAP PT, SurePath	277
		PAPLPT	PAP PT, Combination	277
		PAPMPT	PAP PT, ThinPrep	277
Cytopathology, nongynecologic		FNA/FNA1	Fine-Needle Aspiration- Online	282
		FNAG/FNAG1	Fine-Needle Aspiration- Glass	283

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Cytopathology, nongynecologic (cont.)		NGC/NGC1	Nongynecologic Cytopath Edu Prgm	281
Cytopreparation differential		HFC	Hemocytometer Fluid Count	150
Dabigatran		DBGN	Anticoagulant Monitoring, Dabigatran	163
D-dimer, qualitative		CGDF	Coagulation, D-dimer/ FDP	160
		CGL	Coagulation, Limited	160
D-dimer, quantitative	X	CGDF	Coagulation, D-dimer/ FDP	160
	Х	CGL	Coagulation, Limited	160
		CGLQ	Quality Cross Check, Coagulation, Limited	47
		LN42	D-dimer Cal Ver/Lin	130
	Х	PCARM, PCARMX	Plasma Cardiac Markers	65
		POC12	Competency Plasma Cardiac Markers	53
Delta-9-THC		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		THCB	Blood Cannabinoids	105
		UT	Urine Toxicology	96
Delta-9-THC-COOH		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		THCB	Blood Cannabinoids	105
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
		UTCO	Urine Toxicology Carryover	133
Deoxypyridinoline (DPD)		BU	Bone and Mineral, Urine	85
Dermatopathology		DPATH/ DPATH1	Online Digital Slide Program	265
Dermatophyte identification	Х	F	Mycology and Aerobic Actinomycetes	189
Desipramine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
	X	ZT	TDM, Special	60
Desmethylclomipramine		Т	Toxicology	96

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Desmethylclomipramine (cont.)		UT	Urine Toxicology	96
Desmethylcycloben- zaprine		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Desmethylsertraline		Т	Toxicology	96
		UT	Urine Toxicology	96
Dextromethorphan		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
DHEA sulfate	X	Y/YY	Ligand Assay, Special	84
DIA (Dimeric inhibin A)	X	FP/FPX	Maternal Screen	87
Diazepam		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UT	Urine Toxicology	96
Differential, automated	X	FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P-FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
Differential (fluid), manual		HFC, HFCI	Hemocytometer Fluid Count	150- 151
Differential (blood), manual		EHE1	Expanded Virtual Peripheral Blood Smear	144
		VPBS	Virtual Peripheral Blood Smear	144
Differential (bone marrow), manual		BMD	Bone Marrow Cell Differential	140
Digital slide program in fine-needle aspiration, online		FNA/FNA1	Online Digital Slide Program	282
Digoxin	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
Digoxin, free	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Dihydrocodeine		Т	Toxicology	96
		UT	Urine Toxicology	96
Diltiazem		T	Toxicology	96
		UT	Urine Toxicology	96
Dilute prothrombin time		CGE/CGEX	Coagulation, Extended	161
Dilute Russell's viper venom time		CGS1	Coag Special, Series 1	162- 163
Dimeric inhibin A (DIA)	Х	FP, FPX	Maternal Screen	87
Diphenhydramine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Diphenylhydantoin			See Phenytoin	
Direct antiglobulin testing	Х	DAT	Direct Antiglobulin Testing	222
		TMCAD	Transfusion Medicine, Competency Assessment	223
Direct bilirubin	Х	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
	Х	NB, NB2	Neonatal Bilirubin	65
Disease association/ drug risk		DADR1, DADR2	Disease Association/ Drug Risk	237
Disopyramide	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
DMD/Becker	Х	MGL2	Molecular Genetics	246- 247
DNA analysis	Х	DML	HLA Molecular Typing	235
		МНО	Molecular Oncology	260
	Х	PARF	Parentage/Relationship	231
DNA content/cell cycle analysis		FL, FL2	Flow Cytometry	213
DNA extraction and amplification		MH05	Molecular Oncology Hematologic	257, 260
DNA fingerprinting		IDN, IDO	Nucelic Acid Amp, Organisms	201
DNA mismatch repair		HQMMR	HistoQIP Mismatch Repair IHC	269
		MMR	DNA Mismatch Repair	272
DNA sequencing		SEC, SEC1	DNA Sequencing	248
Dopamine	X	N/NX	Urine Chemistry, Special	69

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Doxepin		DFC	Drug-Facilitated Crime	108
2.5.5		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Doxylamine		DFC	Drug-Facilitated Crime	108
		Т	Toxicology	96
		UT	Urine Toxicology	96
DPYD		PGX3	Pharmacogenetics	249
Duloxetine		Т	Toxicology	96
		UT	Urine Toxicology	96
Ecgonine ethyl ester		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Ecgonine methyl ester		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
E. coli 0157		GIP	Gastrointestinal Panel	203
EGFR-Epidermal growth factor receptor	Х	EGFR	Mutation Testing	258
	Х	MTP	Multigene Tumor Panel	259
eGFR		LN24	Creatinine Accuracy CalVer/Lin	127
Electronic crossmatch		EXM, EXM2	Electronic Crossmatch	219- 220
Electrophoresis	Χ	HG	Hemoglobinopathy	141
		LPE	Lipoprotein Electrophoresis	76
	Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74
		SPE	Protein Electrophoresis	76
		UBJP	Urinary Bence Jones Proteins	76
Elution, antibody		ELU	Eluate	222
		TMCAE	Eluate Competency Assessment	224
Embryology		EMB	Embryology	157
Enteroaggregative <i>E. coli</i> (EAEC)		GIP	Gastrointestinal Panel	203
	Χ	GIP5	Gastrointestinal Panel	203
Enteropathogenic <i>E. coli</i> (EPEC)		GIP	Gastrointestinal Panel	203
	Χ	GIP5	Gastrointestinal Panel	203
Enterotoxigenic <i>E.</i> coli (ETEC)		GIP	Gastrointestinal Panel	203
	Χ	GIP5	Gastrointestinal Panel	203
Enterovirus		ID1	Nucleic Acid Amp, Viruses	197
		IDME	Meningitis/Encephalitis Panel	202

Analyta (Duana duus	LAP	Duantus	Description	D-
Analyte/Procedure	ENR	Program Code	Description	Pg
Enterovirus (cont.)	Х	IDR	Infectious Disease, Respiratory Panel	202
	Х	VR1	Virology Culture	196
Eosinophils, urine		SCM2	Special Clinical Microscopy	152
Ephedrine		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Epidermal growth factor receptor (EGFR)	Х	EGFR	Mutation Testing	258
	Х	MTP	Multigene Tumor Panel	259
Epinephrine		N/NX	Urine Chemistry, Special	69
Epithelial cells, urine, semiquantitative		UAA1	Automated Urinalysis	149
Epstein-Barr virus (EBV)		ID1	Nucleic Acid Amp, Viruses	197
		ISH	In Situ Hybridization	256
		VLS, VLS2	Viral Load	199
		VR3	Antibody Detection- Infectious Disease Serology	204
ER, PgR by immunohistochemistry	X	PM2	ER, PgR by Immunohistochemistry	274
Erythrocyte sedimentation rate		ESR, ESR1, ESR2, ESR3	Erythrocyte Sedimentation Rate	141
Erythropoietin		EP0	Erythropoietin	86
Escherichia coli K1		IDME	Meningitis/Encephalitis Panel	202
Escherichia coli 0157		GIP	Gastrointestinal Panel	203
	Х	GIP5	Gastrointestinal Panel	203
Estradiol		ABS	Accuracy-Based Testosterone and Estradiol	113
		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
	Χ	Y/YY	Ligand Assay, Special	84
Estriol, unconjugated (uE3)	Х	FP/FPX	Maternal Screen	87
	Х	Y/YY	Ligand Assay, Special	84
Estrogen receptors by immunohistochemistry	Х	PM2	ER, PgR by Immunohistochemistry	274
Ethanol	Х	AL1	Whole Blood Alcohol/ Volatiles	101
	Χ	AL2	Serum Alcohol/Volatiles	101
		LN11	Serum Ethanol Cal Ver/ Lin	124
Ethanol, urine		UDS, UDS6	Urine Drug Screen	98
Ethanol, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
Ethosuximide	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Ethosuximide (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41
Ethylene glycol		AL1	Whole Blood Alcohol/ Volatiles	101
		AL2	Serum Alcohol/Volatiles	101
Ethyl glucuronide (EtG)		ETB	Ethanol Biomarkers	102
Ethyl sulfate (EtS)		ETB	Ethanol Biomarkers	102
Everolimus		EV	Everolimus	60
Factor II		CGE/CGEX	Coagulation, Extended	161
Factor II mutation	X	TPM	Thrombophilia Mutations	250
	Х	MGL1	Molecular Genetics	246- 247
Factor V		CGE/CGEX	Coagulation, Extended	161
Factor V Leiden mutation	X	MGL1	Molecular Genetics	246- 247
	Х	TPM	Thrombophilia Mutations	250
Factor VII		CGE/CGEX	Coagulation, Extended	161
Factor VIII	Х	CGE/CGEX	Coagulation, Extended	161
	X	CGS3	Coag Special, Series 3	162- 163
Factor VIII inhibitor		CGS3	Coag Special, Series 3	162- 163
Factor IX		CGE/CGEX	Coagulation, Extended	161
Factor X		CGE/CGEX	Coagulation, Extended	161
Factor XI		CGE/CGEX	Coagulation, Extended	161
Factor XII		CGE/CGEX	Coagulation, Extended	161
Factor XIII		CGE/CGEX	Coagulation, Extended	161
Familial dysautonomia	X	MGL4	Molecular Genetics	246- 247
Fanconi anemia, complementation grp. C	Х	MGL4	Molecular Genetics	246- 247
Fecal calprotectin		FCAL	Fecal Calprotectin	75
Fecal fat, qualitative		FCFS	Fecal Fat	75
Fecal lactoferrin		FLAC	Fecal Lactoferrin	182
Fentanyl		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Fern test (vaginal)	X	СММР	Clinical Microscopy, Misc	147
Ferritin	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K, KK, K2	Ligand Assay, General	82

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Ferritin (cont.)		LN5	Ligand Assay Cal Ver/Lin	121-
		11150		122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
Fetal fibronectin	Х	FF	Fetal Fibronectin	86
Fetal hemoglobin (gastric fluid)		APT	Fetal Hemoglobin	150
Fetal hemoglobin identification	Х	HG	Hemoglobinopathy	141
Fetal membrane rupture		ROM1	Rupture of Fetal Membrane	152
Fetal red cell quantitation	Х	HBF	Fetal Red Cell Detection	222
		TMCAF	Transfusion Medicine, Competency Assessment	224
Fetal screen (Rosette testing)	Х	HBF	Fetal Red Cell Detection	222
		TMCAF	Transfusion Medicine, Competency Assessment	224
Fibrin monomer		CGS3	Coag Special, Series 3	162- 163
Fibrinogen	Χ	CGL	Coagulation, Limited	160
		CGLQ	Quality Cross Check,	47
		LN44	Coagulation, Limited Fibrinogen, Cal Ver/Lin	130
Fibrinogen antigen		CGE/CGEX	Coagulation, Extended	161
Fibrinogen degradation products, plasma		CGDF	Coagulation, D-dimer/ FDP	160
		CGL	Coagulation, Limited	160
		CGLQ	Quality Cross Check, Coagulation, Limited	47
Fibrinogen degradation products, serum		CGDF	Coagulation, D-dimer/ FDP	160
		CGL	Coagulation, Limited	160
		CGLQ	Quality Cross Check, Coagulation, Limited	47
Fine-needle aspiration, digital slide program		FNA/FNA1	Online Digital Slide Program	282
Fine-needle aspiration, glass slides		FNAG/FNAG1	Fine-Needle Aspiration	283
FISH for breast carcinoma hybridization and interpretation on site (HER2 gene amplification)	X	СҮН	Fluorescence In Situ Hybridization, Breast Cancer	241
FISH for brain/glioma		CYJ	Fluorescence In Situ Hybridization, Brain/ Glioma Tissue	241
FISH for constitutional and hematologic disorders		CYF	Fluorescence In Situ Hybridization	240

Analyte/Procedure		Program Code	Description	Pg
FISH for lymphoma		CYL	Fluorescence In Situ Hybridization, Lymphoma	241
FISH for paraffin- embedded tissue		СҮН	Fluorescence In Situ Hybridization, Breast Cancer	241
		CYJ	Fluorescence In Situ Hybridization, Brain/ Glioma Tissue	241
		СҮК	Fluorescence In Situ Hybridization, Sarcoma Tissue or Pediatric Neoplasm	241
		CYL	Fluorescence In Situ Hybridization, Lymphoma	241
FISH for sarcoma		СҮК	Fluorescence In Situ Hybridization, Sarcoma Tissue or Pediatric Neoplasm	241
FISH for urothelial carcinoma hybridization and interpretation on-site	X	CYI	Fluorescence In Situ Hybridization, Urothelial Carcinoma	240
Fluconazole		AFD	Antifungal Drugs Monitoring	106
Flunitrazepam		T	Toxicology	96
		UT	Urine Toxicology	96
Fluorescent microscope check		I	Instrumentation	131
Fluoxetine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
Flurazepam		FTC	Forensic Toxicology, Criminalistics	104
Folate, RBC	Х	FOL	RBC Folate	88
Folate, serum	Х	K, KK, K2	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
Follicle-stimulating hormone (FSH)		ABS	Accuracy-Based Testosterone, Estradiol	113
		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
	Х	Y/YY	Ligand Assay, Special	84
Fondaparinux		FNPX	Anticoagulant Monitoring, Fondaparinux	163
Forensic pathology		FR/FR1	Forensic Pathology	286
Forensic toxicology		FTC	Forensic Toxicology, Criminalistics	104
Fragile X	Х	MGL1	Molecular Genetics	246- 247

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Free beta hCG		FP1B	First Trimester Maternal Screening, Free Beta	87
Free testosterone	Х	DY	Ligand Assay, Special	84
Friedreich ataxia	Х	MGL2	Molecular Genetics	246- 247
Fructosamine		FT	Fructosamine	75
Fungal culture		CBT	Cord Blood Testing	225
		SCP	Stem Cell Processing	225
Fungal serology		FSER	Fungal Serology	190
Fungus identification	Χ	F	Mycology and Aerobic Actinomycetes	189
	Х	F1	Yeast	189
	Х	F3	Candida culture	190
Gabapentin		DMPM	Drug Monitoring for Pain Management	107
		T	Toxicology	96
		UT	Urine Toxicology	96
		ZE	Therapeutic Drug Monitoring, Extended	60
Galactomannan		FGAL	Galactomannan	190
Gamma globulin		M, OL1	CSF Chemistry	74
		SPE	Serum Electrophoresis	76
Gamma glutamyl transferase (GGT)	X	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Gamma hydroxybutyrate		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
Gardnerella vaginalis, DNA probe	Х	VS	Vaginitis Screen	185
Gastric occult blood		GOCB	Gastric Occult Blood	150
Gastric pH		GOCB	Gastric Occult Blood	150
Gastrin	Х	ING	Insulin, Gastrin, C-Peptide, PTH	86
Gaucher disease	Х	MGL4	Molecular Genetics	246- 247
Genomic copy number array		CYCGH	Constitutional Microarray Analysis	242
Gentamicin	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
Giardia		GIP	Gastrointestinal Panel	203
		GIP5	Gastrointestinal Panel	203

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Giardia immunoassay, preserved specimen	Х	P, P3, P4, P5	Parasitology	192
Giemsa stain	Х	BP	Blood Parasite	193
	Х	Р	Parasitology	192
Glioma by FISH		CYJ	Fluorescence In Situ Hybridization, Brain/ Glioma Tissue	241
Glucose		ABGIC	Accuracy-Based Glucose, Insulin, and C-Peptide	115
	X	AQ2, AQ4	Aqueous Blood Gas	92
		AQ2Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		LN13C	Blood Gas Cal Ver/Lin	124- 125
Glucose, CSF	Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Glucose, urine	X	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
	X	HCC2	Waived Combination	66
		LN6	Urine Chemistry Cal Ver/Lin	122
		POC3	POC Urine Dipstick Competency	52
	Х	U	Urine Chemistry, General	68
Glucose, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
Glucose, whole blood	Х	HCC	Waived Combination	66
		HCC2	Waived Combination	66
	X	LCW	Ltd Chem, Waived	65
		LN17	Whole Blood Glucose Cal Ver/Lin	125
		POC2	POC Glucose Competency	52

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Glucose, whole blood (cont.)		POC7	POC/Waived Glucose and Hemoglobin Competency	52
		WBGQ	Quality Cross Check, Whole Blood Glucose	41
Glucose-6-phosphate dehydrogenase (qualitative and quantitative)		G6PDS	Glucose-6 Phosphate Dehydrogenase	75
Glutaraldehyde, urine		DAI	Urine Drug Adulterant/ Integrity Testing	98
Glycated serum albumin		GSA	Glycated Serum Albumin	64
Glycogen storage disease type 1A	Х	MGL4	Molecular Genetics	246- 247
Glycohemoglobin	Х	GH2, GH5, GH5I	Hemoglobin A <sub>1c</sub>	63- 64
		GHQ	Quality Cross Check, Hemoglobin A <sub>1c</sub>	42
		LN15	Hemoglobin A <sub>1c</sub> Cal Ver/Lin	125
Glycosaminoglycans (mucopolysaccharides)		BGL	Biochemical Genetics	243
Gram stain	Х	D	Bacteriology	173
	Х	D2, D3, D7	Throat, Urine, GC Cultures	175
	Х	D4	Bacteriology, Ltd	176
	Х	D5	Gram Stain	177
	Х	MC1	Microbiology Combination with GC	176
	Х	MC2	Microbiology Combination	176
	Х	MC5	Throat Culture/Rapid Strep	177
		VGS1	Virtual Gram Stain Basic	178
		VGS2	Virtual Gram Stain Advanced	178
		VS2	Vaginitis Screen, Virtual Gram stain	186
Group A Streptococcus antigen detection	Х	D	Bacteriology	173
	Χ	D4	Bacteriology, Limited	176
	Χ	D6	Rapid Group A Strep	178
	Х	D9	Rapid Group A Strep, Waived	178
	Х	MC1	Microbiology Combination with GC	176
	Х	MC2	Microbiology Combination	176
	Х	MC4	Urine Colony Count Combination	177
	Х	MC5	Throat Culture/Rapid Strep	177

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Group A Streptococcus antigen detection (cont.)		POC4	POC Strep Screen Competency	52
Group B Streptococcus	Χ	D8	Group B Strep	179
Growth hormone	Χ	Y/YY	Ligand Assay, Special	84
Gyn cytopathology			See Cytopathology GYN Proficiency Testing	
Gyn cytopathology education			See Cytopathology GYN Education	
Haemophilus influenzae		IDME	Meningitis/Encephalitis Panel	202
Haptoglobin	Х	IG/IGX	Immunology, General	206
	Х	S2/S4	Immunology, Special	207
HBeAg	Х	VM2	Viral Markers-Series 2	228
HBsAg	Χ	VM1	Viral Markers-Series 1	228
HBV	Х	HBVL, HBVL5	Hepatitis Viral Load	198
	Х	NAT	Nucleic Acid Testing	230
HCV	X	HCV2	Hepatitis Viral Load, Genotyping and Qualitative	198
		LN45	HCV Viral Load Cal Ver/ Lin	129
	Χ	NAT	Nucleic Acid Testing	230
HDL cholesterol		ABL	Accuracy-Based Lipid	112
	X	C1, C3, C3X, C4, CZ, CZ3X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Χ	LCW	Ltd Chem, Waived	65
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Helicobacter pylori	Х	HPS	H. pylori Antigen, Stool	182
	Х	S2, S4	H. pylori IgG Antibody	207
	Х	S5	H. pylori IgG Antibody	207
	Х	VR3	H. pylori IgG Antibody	204
Hematocrit	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		CBT	Cord Blood Testing	225
	X	FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137

			B 1 1 1 1	
Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Hematocrit (cont.)		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
	Х	FH15	Centrifugal Hematology	137
	Х	HCC2	Waived Combination	66
	Χ	HE, HEP	Basic Hematology	136
		POC10, POC11	POC Competency Blood Gases	53
		SCP	Stem Cell Processing	225
	Χ	S0	Blood Oximetry	94
		SOQ	Quality Cross Check, Blood Oximetry	44
Hematology case studies		EHE1	Expanded Virtual Peripheral Blood Smear	144
		BMD	Bone Marrow Cell Differential	140
		VPBS	Virtual Periperal Blood Smear	144
Hematopathology online education		HPATH, HPATH1	Hematopathology Online Education	145
Hemochromatosis	Х	MGL1	Molecular Genetics	246- 247
Hemocytometer fluid count	Χ	HFC, HFCI	Hemocytometer Fluid Count	150- 151
Hemoglobin		CBT	Cord Blood Testing	225
	X	FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
	Χ	FH15	Centrifugal Hematology	137
	Χ	HCC	Waived Combination	66
	Χ	HCC2	Waived Combination	66
	Χ	HE, HEP	Basic Hematology	136
		LN9	Hematology Cal Ver/Lin	123
		POC7	POC/Waived Glucose and Hemoglobin Competency	52
		SCP	Stem Cell Processing	225
	Χ	S0	Blood Oximetry	94
		SOQ	Quality Cross Check, Blood Oximetry	44
Hemoglobin electrophoresis	Х	HG	Hemoglobinopathy	141
Hemoglobin, estimated	X	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Hemoglobin, estimated (cont.)		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		POC10, POC11	POC Competency Blood Gases	53
Hemoglobin, plasma		PHG	Plasma Hemoglobin	76
Hemoglobin, urine	X	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
	X	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	52
Hemoglobin A <sub>1c</sub>	Х	GH2, GH5, GH5I	Hemoglobin A <sub>1c</sub>	63- 64
		GHQ	Quality Cross Check, Hemoglobin A <sub>1c</sub>	42
		LN15	Hemoglobin A <sub>1c</sub> Cal Ver/Lin	125
Hemoglobin A2 quantitation	Х	HG	Hemoglobinopathy	141
Hemoglobin F quantitation	Х	HG	Hemoglobinopathy	141
Hemoglobin S/C	Х	HGM	Hemoglobinopathies Genotyping	245
	Х	MGL2	Molecular Genetics	246- 247
Hemolytic complement, total		CH50	Total Hemolytic Complement	212
Hemosiderin, urine		SCM1	Special Clinical Microscopy	152
Heparin assay		CGS4	Coag Special, Series 4	162- 163
Heparin-induced thrombocytopenia		CGE/CGEX	Coagulation, Extended	161
		CGS5	Coag Special, HIT	162- 163
		CGS6	Coagulation Special	162- 163
		CGS8	Coag Special, HIT	162- 163
Heparin, low molecular weight		LN36	Heparin Cal Ver/Lin	129
Heparin, unfractionated		LN36	Heparin Cal/Ver Lin	129
Heparin/platelet Factor IV		CGS5	Coag Special, HIT	162- 163
		CGS6	Coagulation Special	162- 163
Hepatitis B virus	Х	HBVL, HBVL5	Hepatitis Viral Load	198
Hepatitis C virus	Х	HCV2	Hepatitis Viral Load, Genotyping and Qualitative	198
		LN45	HCV Viral Load Cal Ver/ Lin	129
HER2, gastric		GHER2	Gastric HER2	274

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
HER2 gene amplification by ISH	Х	ISH2	In Situ Hybridization	256
HER2 gene amplification by FISH, hybridization and interpretation on site	Х	СҮН	Fluorescence In Situ Hybridization, Breast Cancer	241
HER2 by immunohistochemistry	Χ	HER2	HER2 by Immunohistochemistry	274
HER2 by molecular testing		MTP	Multigene Tumor Panel	259
Herpes simplex virus (HSV)	Х	HC2	HSV by DFA	197
	Х	HC4	HSV Culture	197
		ID1	Nucleic Acid Amp, Viruses	197
		IDME	Meningitis/Encephalitis Panel	202
	Х	VR1	Virology Culture	196
	Х	VR2	Viral Antigen by DFA	196
	Х	VR3	Antibody Detection- Infectious Disease Serology	204
HHV6		ID1	Nucleic Acid Amp, Viruses	197
		IDME	Meningitis/Encephalitis Panel	202
		VLS2	Viral Load	199
HHV8		ID1	Nucleic Acid Amp, Viruses	197
High-sensitivity C-reactive protein	Х	HSCRP	hsCRP	64
		LN21	High-Sensitivity C-Reactive Protein Cal Ver/Lin	126
Histotechnology quality improvement		HQIP, HQIPBX, HQBX1, HQBX2, HQBX3, HQBX4, HQIHC, HQMMR, HQNSC, HQWSI	HistoQIP	268– 271
HIV	Х	HIVG, HV2	HIV Viral Load	199
		LN39	HIV Viral Load Cal Ver/ Lin	129
	Х	NAT	Nucleic Acid Testing	230
HIV genotyping		HIVG	HIV Viral Genotyping	199
HIV-1 p24 antigen	Х	VM3	Viral Markers-Series 3	228
HIV-1 p24 antigen, Anti	Х	VM6, VM6X	Viral Markers-Series 6	229
HLA-A, -B, -C antibody identification	Х	MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	234– 235

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
HLA-A, -B, -C antibody identification (cont.)	Х	MX2B, MX2C, MX2E, MXB, MXC	HLA Analysis, Class II	234- 235
HLA-(Class I/II) crossmatching	Х	MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	234- 235
	Х	MX2B, MX2C, MX2E, MXB, MXC	HLA Analysis, Class II	234- 235
HLA-(Class I/II) antibody screen		MX1B, MX1C, MX1E, MX2B, MX2C, MX2E, MXB, MXC	HLA Analysis, Class I/II	234- 235
HLA-B*1502		PGX2	Pharmacogenetics	249
HLA-B27 typing	Χ	B27	HLA-B27 Typing	235
HLA-B*5701		PGX2	Pharmacogenetics	249
		DADR1	Disease Association, Drug Risk	237
HLA-B*57:01		DADR1	Disease Association, Drug Risk	237
HLA-B*58:01		DADR1	Disease Association, Drug Risk	237
HLA-DQA1*03/ DQB1*03:02		DADR2	Disease Association, Drug Risk	237
HLA-DQA1*05/DQB1*02		DADR2	Disease Association, Drug Risk	237
HLA molecular typing	Χ	DML	HLA Molecular Typing	235
Homocysteine	Χ	HMS	Homocysteine	64
		LN16	Homocysteine Cal Ver/ Lin	125
Homovanillic acid	Χ	N/NX	Urine Chemistry, Special	69
HPV (cytopathology), high-risk	Х	CHPVD	Digene Specimen Transport Medium	279
	Х	CHPVJ	Mixed Medium	279
	X	СНРVК	SurePath Preservative Fluid Transport Medium	279
	Х	СНРУМ	ThinPrep PreservCyt Transport Medium	279
		HPV	Digene Hybrid Capture Technology Only	197
		ISH	In Situ Hybridization	256
HSV	Х	HC2	HSV by DFA	197
	Χ	HC4	HSV Culture	197
		ID1	Nucleic Acid Amp, Viruses	197
-	Х	VR1	Virology Culture	196
	Χ	VR2	Viral Antigen by DFA	196
	Х	VR3	Antibody Detection- Infectious Disease Serology	204
Human chorionic gonadotropin (hCG), serum	Х	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Human chorionic gonadotropin (hCG), serum (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	FP/FPX, FP1T	Maternal Screen	87
	Х	HCG, IL	Immunology	206
	Х	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
		SCO	Serum Carryover	133
Human chorionic gonadotropin (hCG), urine (qualitatitve)	X	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
	Х	HCC2	Waived Combination	66
		POC1	POC hCG Competency	52
		POC3	POC Urine Dipstick Competency	52
	Х	UHCG	Urine HCG	152
Human epididymis protein 4		HUEP	Human Epididymis Protein 4	89
Human herpesvirus 6		ID1	Nucleic Acid Amp, Viruses	197
		IDME	Meningitis/Encephalitis Panel	202
		VLS2	Viral Load	199
Human herpesvirus 8		ID1	Nucleic Acid Amp, Viruses	197
Human immuno- deficiency virus (HIV)	X	HIVG, HV2	HIV Viral Load	199
		HIVG	HIV Genotyping	199
		LN39	HIV Viral Load Cal Ver/ Lin	129
Human metapneumovirus		ID2	Nucleic Acid Amp, Respiratory	198
	Х	IDR	Infectious Disease, Respiratory Panel	202
Human papillomavirus (cytology) high-risk	Х	CHPVD	Digene Specimen Transport Medium	279
	Χ	CHPVJ	Mixed Medium	279
	Х	CHPVK	SurePath Preservative Fluid Transport Medium	279
	Х	СНРУМ	ThinPrep PreservCyt Transport Medium	279
		HPV	Digene Hybrid Capture Technology Only	197
		ISH	In Situ Hybridization	256

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Human papillomavirus (cytology) high-risk genotyping		CHPVJ	Mixed Medium	279
		CHPVM	ThinPrep PreservCyt Transport Medium	279
Human parechovirus		IDME	Meningitis/Encephalitis Panel	202
Huntington disease	Х	MGL2	Molecular Genetics	246- 247
Hydrocodone		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Hydromorphone		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Hydroxybupropion		T	Toxicology	96
Hydroxyzine		Т	Toxicology	96
		UT	Urine Toxicology	96
Ibuprofen		Т	Toxicology	96
		UT	Urine Toxicology	96
IDH1		GLI	Glioma	259
IDH2		GLI	Glioma	259
IgA	Х	IG/IGX	Immunology, General	206
		LN7	Immunology Cal Ver/Lin	123
IgA, electrophoresis	Х	SPE	Protein Electrophoresis	76
IgD		S2, S4	Immunology, Special	207
IgE	Х	IG/IGX	Immunology, General	206
	X	K/KK	Ligand Assay, General	82
LE II	Х	SE	Diagnostic Allergy	211
IgE allergen-specific, quantitative		SE	Diagnostic Allergy	211
IgE multi-allergen screen	Χ	SE	Diagnostic Allergy	211
IGF-1 (somatomedin C)	Χ	BGS	Bone and Growth	85
	X	Y/YY	Ligand Assay, Special	84
IgG	Х	IG/IGX	Immunology, General	206
		LN7	Immunology Cal Ver/Lin	123

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
IgG (cont.)		S2, S4	Immunology, Special	207
IgG, electrophoresis	Х	SPE	Protein Electrophoresis	76
IgG, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
IgG subclass proteins		S2, S4	Immunology, Special	207
IGHV		IGHV	Mutation Analysis	256
IgM	Х	IG/IGX	Immunology, General	206
		LN7	Immunology Cal Ver/Lin	123
IgM, electrophoresis	Х	SPE	Protein Electrophoresis	76
IL-2		CTKN	Cytokines	210
IL-6		CTKN	Cytokines	210
IL-8		CTKN	Cytokines	210
IL-10		CTKN	Cytokines	210
IL28B		PGX1	Pharmacogenetics	249
Imipramine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
	Х	ZT	TDM, Special	60
Immature granulocyte parameter		FH9, FH9P	Hematology, Auto Diff	136
Immunohistochemistry		BRAFV	BRAF V600E	272
·		CD30	CD30	273
			Immunohistochemistry	
		GHER2	Gastric HER2	274
	X	HER2	HER2 by Immunohistochemistry	274
		MK	Immunohistochemistry	272
		MMR	DNA Mismatch Repair	272
		PDL1	PDL1	272
		PM1	CD117 by Immunohistochemistry	273
	X	PM2	ER, PR by Immunohistochemistry	274
		PM3	CD20 by Immunohistochemistry	273
		PM5	Immunohistochemistry TMA	273
		PM6	Anaplastic Lymphoma Kinase IHC	273
India ink		IND	India Ink	191
Infectious mononucleosis (IM)	X	IL, IM	Immunology	206
	X	IMW	Infectious Mononucleosis, Waived	207
Influenza virus		ID2	Nucleic Acid Amp, Resp	198
	Х	ID3	Influenza A, Influenza B, RSV by NAA	198
	Х	IDR	Infectious Disease, Respiratory Panel	202
		POC8	POC Influenza A/B Ag	52

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Influenza virus (cont.)	Χ	VR1	Virology Culture	196
	Х	VR2	Viral Antigen Detection by DFA	196
	Х	VR4	Viral Antigen Detection by EIA and Latex	196
Inherited cancer sequencing panel		ICSP	Inherited Cancer Sequencing Panel	245
In situ hybridization	Χ	ISH	In Situ Hybridization	256
	Х	ISH2	In Situ Hybridization HER2	256
Instrument function		1	Instrumentation	131
Instrument linearity		I	Instrumentation	131
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		LN3	TDM Cal Ver/Lin	121
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
		LN6	Urine Chemistry Cal Ver/Lin	122
		LN7	Immunology Cal Ver/Lin	123
		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
		LN9	Hematology Cal Ver/Lin	123
		LN11	Serum Ethanol Cal Ver/ Lin	124
		LN12, LN12E	C-Reactive Protein Cal Ver/Lin	124
		LN13	Blood Gas Cal Ver/Lin	124- 125
		LN13C	Blood Gas Cal Ver/Lin	124- 125
		LN15	Hemoglobin A <sub>1c</sub> Cal Ver/Lin	125
		LN16	Homocysteine Cal Ver/ Lin	125
		LN17	Whole Blood Glucose Cal Ver/Lin	125
		LN18, LN19	Reticulocyte Cal Ver/Lin	126
		LN20	Urine Albumin Cal Ver/ Lin	126
		LN21	High-Sensitivity C-Reactive Protein Cal Ver/Lin	126
		LN22	Flow Cytometry Cal Ver/Lin	126
		LN23	PSA Cal Ver/Lin	127

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Instrument linearity (cont.)		LN24	Creatinine Accuracy Cal Ver/Lin	127
		LN25	Troponin I Cal Ver/Lin	127
		LN27	Troponin T Cal Ver/Lin	127
		LN30	BNP Cal Ver/Lin	127
		LN31	Immunosuppressive Drugs Cal Ver/Lin	128
		LN32	Ammonia Cal Ver/Lin	128
		LN33	Serum Myoglobin Cal Ver/Lin	128
		LN34	Tumor Markers Cal Ver/ Lin	128
		LN35	Thrombophilia Cal Ver/ Lin	129
		LN36	Heparin Cal Ver/Lin	129
		LN37	von Willebrand Factor Ag Cal Ver/Lin	129
		LN38	CMV Viral Load Cal Ver/ Lin	129
		LN39	HIV Viral Load Cal Ver/ Lin	129
		LN40	Vitamin D Cal Ver/Lin	129
		LN41	Procalcitonin Cal Ver/ Lin	130
		LN42	D-Dimer Cal Ver/Lin	130
		LN43	Lamellar Body Count Cal Ver/Lin	130
		LN44	Fibrinogen Cal Ver/Lin	130
		LN45	HCV Viral Load Cal Ver/ Lin	129
		LN46	C-Peptide/Insulin Cal Ver/Lin	130
Insulin		ABGIC	Accuracy-Based Glucose, Insulin, and C-Peptide	115
	Х	ING	Insulin, Gastrin, C-Peptide, PTH	86
		LN46	C-Peptide/Insulin Cal Ver/Lin	130
Interferon (IFN) gamma		CTKN	Cytokines	210
Interleukin (IL)-1 beta		CTKN	Cytokines	210
International normalized ratio (INR)	X	CGB	Basic Coagulation	160
	Х	CGL	Coagulation, Limited	160
		CGLQ	Quality Cross Check, Coagulation, Limited	47
		CGS1	Coag Special, Series 1	162- 163
		CGS4	Coag Special, Series 4	162- 163
		POC6	POC PT/INR, CoaguChek XS Plus	52

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
International normalized ratio (INR) (cont.)	Х	WP3, WP4, WP6, WP9	Whole Blood Coagulation	168
1400 (1111) (00111)		WP10	Whole Blood Coagulation	168
lonized calcium	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	Х	C3, CZ, CZX	Chemistry and TDM	56-58
		P0C10, P0C11	POC Competency Blood Gases	53
Iron	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Isopropanol	Х	AL1	Whole Blood Alcohol/ Volatiles	101
	Х	AL2	Serum Alcohol/Volatiles	101
Itraconazole		AFD	Antifungal Drugs Monitoring	106
JC virus		ID1T	Nucleic Acid Amp, JC and BK	197
Jo-1 (antihistidyl t-RNA synthetase)		RDS	Rheumatic Disease Special	211
Kaolin-activated CT		CGE/CGEX	Coagluation, Extended	161
Kappa/Lambda	Х	ISH	In Situ Hybridization	256
Kappa/Lambda ratio		IG/IGX	Immunology, General	206
		S2, S4	Immunology, Special	207
Free Kappa/Lambda ratio		SFLC	Serum Free Light Chains	212
Karyotype nomenclature	Х	CY, CYBK	Cytogenetics	240
Ketamine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
l		UT	Urine Toxicology	96
Ketones, serum		KET	Ketones	64
Ketones, urine	Х	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
	X	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	52
Kidney stone assessment		KSA	Kidney Stone Assessment	69

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
KIT		KIT	KIT/PDGFRA	258
		MTP	Multigene Tumor Panel	259
KOH prep (skin or vaginal)	Х	СММР	Clinical Microscopy, Misc	147
	Х	FSM	Fungal Smear	191
KRAS	Х	KRAS	Colorectal Cancer Mutation	258
	X	MTP	Multigene Tumor Panel	259
Laboratory preparedness exercise		LPX	Laboratory Preparedness Exercise	184
Lacosamide		ZE	Therapeutic Drug Monitoring, Extended	60
Lactate	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		POC10, POC11	POC Competency Blood Gases	53
		LN13C	Blood Gas Cal Ver/Lin	124- 125
Lactate, CSF	Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Lactate dehydrogenase (LD)	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		SC0	Serum Carryover	133
Lactate dehydrogenase (LD), CSF	X	M, OLI	CSF Chemistry and Oligclonal Bands	74
Lamellar body count		LBC	Lamellar Body Count	151
		LN43	Lamellar Body Count Cal Ver/Lin	130
Lamotrigine		Т	Toxicology	96
		UT	Urine Toxicology	96

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Lamotrigine (cont.)		ZE	Therapeutic Drug Monitoring, Extended	60
Large unclassified cells (LUC)		FH4, FH14, FH4P, FH14P	Hematology, Auto Diff	137
LD isoenzymes	Χ	CRTI	Cardiac Markers	62
LD1/LD2 ratio	Х	CRTI	Cardiac Markers	62
LDL cholesterol	Χ	ABL	Accuracy-Based Lipid	112
LDL cholesterol, measured	X	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
LDL cholesterol, waived	Χ	LCW	Ltd Chem, Waived	65
Lead (blood)	Χ	BL	Blood Lead	102
Lead, urine		TMU	Trace Metals, Urine	103
Legionella		LBAS	Legionella Ag	179
Legionella pneumophila		IDN, IDO	Nucleic Acid Amp, Organisms	201
	Х	IDR	Infectious Disease, Respiratory Panel	202
Leukemia/lymphoma immunophenotype		FL3	Flow Cytometry	213
Leukemia/lymphoma interpretation only		FL5	Flow Cytometry Interpretation Only	214
Leukocyte esterase, urine	Χ	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
	Χ	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	52
Leukocyte-reduced platelets		TRC	Transfusion-Related Cell Count	222
Leukocyte-reduced RBC		TRC	Transfusion-Related Cell Count	222
Leukocyte, stool, Wright- Giemsa	Х	CMMP	Clinical Microscopy, Misc	147
Levetiracetam		Т	Toxicology	96
		UT	Urine Toxicology	96
		ZE	Therapeutic Drug Monitoring, Extended	60
Lidocaine	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
		Т	Toxicology	96
		UT	Urine Toxicology	96
Lipase	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Lipase (cont.)		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Lipids		ABL	Accuracy-Based Lipid	112
	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Lipoprotein (a)	Χ	ABL	Accuracy-Based Lipid	112
	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Lipoprotein-associated phospholipase		PLA	Lp-PLA <sub>2</sub>	75
Lipoprotein electrophoresis		LPE	Lipoprotein Electrophoresis	76
Listeria monocytogenes		IDME	Meningitis/Encephalitis Panel	202
Lithium	X	C1, C3, C3X, CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
Liver-kidney microsomal antibody		LKM	Liver-Kidney Microsomal Antibody	211
Lorazepam		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Lorazepam glucuronide		DMPM	Drug Monitoring for Pain Management	107
Lupus anticoagulant (screen, conf)		CGS1	Coag Special, Series 1	162- 163
Luteinizing hormone (LH)		ABS	Accuracy-Based Testosterone, Estradiol	113

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Luteinizing hormone (LH) (cont.)		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
	X	Y/YY	Ligand Assay, Special	84
Lyme disease		TTD	Tick-Transmitted Disease	204
Lymphocyte immunophenotyping	Х	FL, FL1	Flow Cytometry	213
Lymphoma by FISH		CYL	Fluorescence In Situ Hybridization, Lymphoma	241
Lysergic acid diethylamide (LSD)		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Magnesium	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Magnesium, ionized	Х	AQ, AQ2	Aqueous Blood Gas	92
		AQQ, AQ2Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		POC10, POC11	POC Competency Blood Gases	53
Magnesium, urine	Х	U	Urine Chemistry, General	68
Malaria		RMAL	Rapid Malaria	193
Manganese		R	Trace Metals	78
		TMU	Trace Metals, Urine	103
Manganese, whole blood		TMWB	Trace Metals, Whole Blood	103
MCAD	X	IMD2	MCAD	247
МСН		FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
		HE, HEP	Basic Hematology	136

Analyte/Procedure	LAP	Drogram	Description	Da
Analyte/Procedure	ENR	Program Code	Description	Pg
мснс		FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
		HE, HEP	Basic Hematology	136
MCV		FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
		HE, HEP	Basic Hematology	136
MECP2 deletion/ duplication analysis		RETT	RETT Syndrome Genotyping	249
MECP2 genotyping	Х	RETT	RETT Syndrome Genotyping	249
MEN2	Х	MGL3	Molecular Genetics	246- 247
Meperidine		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Mephedrone		T	Toxicology	96
		UT	Urine Toxicology	96
Meprobamate		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Mercury, urine		TMU	Trace Metals, Urine	103
Mercury, whole blood		TMWB	Trace Metals, Whole Blood	103
Metabolic disease testing		BGL	Biochemical Genetics	243
Metanephrine	Х	N/NX	Urine Chemistry, Special	69
Methadone		DFC	Drug-Facilitated Crime	108

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Methadone (cont.)		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Methadone metabolite (EDDP)		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Methamphetamine		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Methanol	X	AL1	Whole Blood Alcohol/ Volatiles	101
	Χ	AL2	Serum Alcohol/Volatiles	101
Methaqualone		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
Methemoglobin	X	SO SO	Blood Oximetry	94
		SOQ	Quality Cross Check, Blood Oximetry	44
Methicillin-resistant Staphylococcus aureus (MRSA)		BCS1	Blood Culture Staphylococcus aureus	180
		IDN, IDO	Nucleic Acid Amp, Organisms	201
		MRS	Methicillin-resistant S. aureus	183
		MRS2M	MRSA Screen, Molecular, 2 Challenge	183

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Methicillin-resistant Staphylococcus aureus (MRSA) (cont.)	Х	MRS5	Methicillin-resistant S. aureus	183
	X	MRS5M	MRSA Screen, Molecular, 5 Challenge	183
Methotrexate	X	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Methylenedioxy- amphetamine (MDA)		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Methylenedioxyethyl- amphetamine (MDEA)		OFD	Oral Fluid for Drugs of Abuse	100
		UDC	Forensic Urine Drug Testing, Confirmatory	99
Methylenedioxymeth- amphetamine (MDMA)		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Methylenedioxy- pyrovalerone (MDPV)		Т	Toxicology	96
		UT	Urine Toxicology	96
Methylenetetra- hydrofolate reductase (MTHFR)	Х	MGL1	Molecular Genetics	246- 247
Methylmalonic acid		MMA	MMA and Active B12	82
Methylphenidate		T	Toxicology	96
		UT	Urine Toxicology	96
Metoprolol		T	Toxicology	96
		UT	Urine Toxicology	96
MGMT		GLI	Glioma	259
Microalbumin, urine		LN20	Urine AlbuminCal Ver/ Lin	126
	Х	U	Urine Chemistry	68

Analyte/Procedure	LAP ENR	•	Description	Pg
Microalbumin, urine (cont.)	Х	UMC	Urine Albumin (Microalbumin)/ Creatinine	153
Microsatellite instability		MSI	Microsatellite Instability	256
Microtiter plate reader linearity		1	Instrumentation	131
Minimal residual disease		BALL	B-ALL Minimal Residual Disease	214
		MRD	Minimal Residual Disease, BCR/ABL1 p210	260
		MRD1	Minimal Residual Disease, <i>BCR/ABL1</i> p190	260
		MRD2	Minimal Residual Disease, PML/RARA	260
Mirtazapine		Т	Toxicology	96
		UT	Urine Toxicology	96
Mite identification		ТМО	Ticks, Mites, and Other Arthropods	193
Mitochondrial cytopathies	X	IMD3	Mitochondrial Cytopathies	247
Mitochondrial DNA deletion syndromes	Х	IMD1	Mitochondrial DNA Deletion Syndromes	247
Mixing studies, PT		CGE/CGEX	Coagulation, Extended	161
Mixing studies, APTT		CGE/CGEX	Coagulation, Extended	161
		CGS1	Coag Special, Series 1	162- 163
MLH1 promoter methylation analysis		MSI	Defective DNA Mismatch Repair/ Hereditary Nonpolyposis Colorectal Cancer (HNPCC)	256
Modified acid-fast stain	X	P, P3, P4, P5	Parasitology	192
Mold identification	X	F	Mycology and Aerobic Actinomycetes	189
Molecular genetics	X	MGL1, MGL2, MGL3, MGL4, MGL5	Molecular Genetics	246- 247
Molecular HLA typing	X	DML	HLA Molecular Typing	235
Molecular hematologic oncology		MHO, MHO1, MHO2, MHO3, MHO5	Molecular Hematologic Oncology	257, 260
Molecular typing		IDN, IDO	Nucleic Acid Amp, Organisms	201
Monitoring engraftment	Х	ME	Monitoring Engraftment	236
Mononuclear cell count		CBT	Cord Blood Testing	225
		SCP	Stem Cell Processing	225
Morphine		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Morphine (cont.)		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
-		UT	Urine Toxicology	96
M-protein (paraprotein) identification	Х	SPE	Protein Electrophoresis	76
MPV		FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
		HE, HEP	Basic Hematology	136
MRSA		BCS1	Blood Culture Staphylococcus aureus	180
		IDN, IDO	Nucleic Acid Amp, Organisms	201
		MRS	Methicillin-resistant S. aureus	183
		MRS2M	MRSA Screen, Molecular, 2 Challenge	183
	Х	MRS5	Methicillin-resistant S. aureus	183
	Х	MRS5M	MRSA Screen, Molecular, 5 Challenge	183
Mucolipidosis IV	Х	MGL4	Molecular Genetics	246- 247
Mucopolysaccharide (Glycosaminoglycan)	Х	BGL	Biochemical Genetics	243
Multiple endocrine neoplasia type 2 (MEN2)	Х	MGL3	Molecular Genetics	246- 247
Mumps-IgG		VR3M	Virology	204
Mycobacterial culture	X	E1	Mycobacteriology, Ltd	188
Mycobacterial identification	Х	E	Mycobacteriology	188
Mycobacterium tuberculosis		IDO	Nucleic Acid Amp, Organisms	201
Mycobacterium tuberculosis antibody detection		QF	M. tuberculosis Infection Detection	211
Mycobacterium tuberculosis identification and resistance detection		MTBR	Molecular MTB Identification and Resistance Detection	188
Mycophenolic acid	X	MPA	Mycophenolic Acid	60
Mycoplasma pneumoniae		IDN, IDO	Nucleic Acid Amp, Organisms	201

Analyte/Procedure	LAP	Program	Description	Pg
	ENR			0
Mycoplasma pneumoniae (cont.)	Χ	IDR	Infectious Disease, Respiratory Panel	202
		VR3	Antibody Detection- Infectious Disease Serology	204
Myoglobin	Х	CRT, CRTI	Cardiac Markers	62
		LN33	Serum Myoglobin Cal Ver/Lin	128
	Х	PCARM, PCARMX	Plasma Cardiac Markers	65
		POC12	Competency Plasma Cardiac Markers	53
Myoglobin, urine		MYG	Myoglobin, Urine	69
Myotonic dystrophy	Х	MGL2	Molecular Genetics	246- 247
N-acetylprocainamide (NAPA)	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
N-desmethyltramadol		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Naproxen		Т	Toxicology	96
		UT	Urine Toxicology	96
Nasal smears, eosinophil	Х	СММР	Clinical Microscopy, Misc	147
Neisseria gonorrhoeae	Х	D3	GC Cultures	175
	Х	D4	Bacteriology, Limited	176
	Х	HC6/HC6X	C. trachomatis/GC by Nucleic Acid Amp	186
	X	HC7	C. trachomatis/GC DNA by NAA	186
	Х	MC1	Microbiology Combination with GC	176
Neisseria meningitidis		IDME	Meningitis/Encephalitis Panel	202
Neoplastic cellularity		NEO	Neoplastic Cellularity	257
Neoplastic disorder by FISH		CYF	Fluorescence In Situ Hybridization	240
Neuropathology		NP/NP1	Neuropathology Program	276
Neutral fats		FCFS	Fecal Fat	75
Next-generation sequencing		NGS	Next-Generation Sequencing	252
		NGSB1	NGS Bioinformatics for Illumina Platforms	253
		NGSB2	NGS Bioinformations for Ion Torrent Platforms	253

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Next-generation sequencing (cont.)		NGSBV	NGS Bioinformatics Somatic Validated Materials	255
		NGSE	NGS Undiagnosed Disorders-Exome	254
		NGSST	Next Generation Sequencing, Solid Tumor	252
		NGSHM	Next Generation Sequencing, Hematologic Malignancies	253
Nicotine		NTA	Nicotine and Tobacco Alkaloids	102
		Т	Toxicology	96
		UT	Urine Toxicology	96
Niemann-Pick type A/B	X	MGL4	Molecular Genetics	246-
NIPT		NIPT	Noninvasive Prenatal Testing	87
Nitrite, urine	Х	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
		DAI	Urine Drug Adulterant/ Integrity Testing	98
	Х	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	52
Nitrogen, total, urine		U	Urine Chemistry, General	68
Nongynecologic cytopathology		FNA/FNA1	Fine-Needle Aspiration- Digital	282
		FNAG/FNAG1	Fine-Needle Aspiration- Glass	283
		NGC/NGC1	Nongynecologic Cytopathology Education Program	281
Noninvasive prenatal testing		NIPT	Noninvasive Prenatal Testing	87
Norbuprenorphine		DMPM	Drug Monitoring for Pain Management	107
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Norchlordiazepoxide		Т	Toxicology	96
		UT	Urine Toxicology	96
Norclomipramine		Т	Toxicology	96
		UT	Urine Toxicology	96
Norcodeine		Т	Toxicology	96
		UT	Urine Toxicology	96
Norcyclobenzaprine		Т	Toxicology	96

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Norcyclobenzaprine (cont.)		UT	Urine Toxicology	96
Nordiazepam		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Nordoxepin		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Norepinephrine	X	N/NX	Urine Chemistry, Special	69
Norfentanyl		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Norfluoxetine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Norketamine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Normeperidine		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		Т	Toxicology	96
		UT	Urine Toxicology	96
Normetanephrine	X	N/NX	Urine Chemistry Special	69
Norovirus		GIP	Gastrointestinal Panel	203
	х	GIP5	Gastrointestinal Panel	203
		SP1	Stool Pathogens	184
Noroxycodone		DMPM	Drug Monitoring for Pain Management	107
		T	Toxicology	96
		UT	Urine Toxicology	96
Noroxymorphone		DMPM	Drug Monitoring for Pain Management	107
Norpropoxyphene		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107

Analyta/Procedure	LAP	Drogram	Description	Da
Analyte/Procedure	ENR	Program Code	Description	Pg
Norpropoxyphene (cont.)		FTC	Forensic Toxicology,	104
			Criminalistics	
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Norsertraline		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
Nortrimipramine		Т	Toxicology	96
		UT	Urine Toxicology	96
Nortriptyline		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
	Х	ZT	TDM, Special	60
Norverapamil		Т	Toxicology	96
		UT	Urine Toxicology	96
Novel opioids and benzodiazepines		NOB	Novel Opioids and Benzodiazepines	105
NRAS		MTP	Multigene Tumor Panel	259
nRBC		FH3, FH3P, FH9, FH9P, FH13, FH13P	Hematology, Auto Diff	136
NT-pro B-type natriuretic peptides	Х	BNP	B-Type Natriuretic Peptides, 2 Chall	61
	Х	BNP5	B-Type Natriuretic Peptides, 5 Chall	61
		BNPQ	Quality Cross Check, B-Type Natriuretic Peptides	41
		LN30	BNP Cal Ver/Lin	127
N-telopeptide (NTX)		BMV6	Bone Markers and Vitamin	86
	Χ	BU	Bone and Mineral, Urine	85
Nucleated cells, total		CBT	Cord Blood Testing	225
		SCP	Stem Cell Processing	225
Nucleated red cells, total		ABF3	Automated Body Fluid	148
		CBT	Cord Blood Testing	225
		SCP	Stem Cell Processing	225
Nucleated red blood cell count		FH3, FH3P, FH9, FH9P, FH13, FH13P, FH14, FH14P	Hematology, Auto Diff	136– 137
Nucleic acid amplification		BSTS	Bacterial Strain Typing Staphylococcus	179
	Х	HBVL, HBVL5, HCV2	Hepatitis Viral Load	198
	Х	HC6/HC6X	C. trachomatis/GC by Nucleic Acid Amp	186

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Nucleic acid amplification (cont.)	Х	HC7	C. trachomatis/GC DNA by NAA	186
	Х	HIVG, HV2	HIV Viral Load	199
		IDN, IDO	Nucleic Acid Amp, Organisms	201
		ID1, ID1T	Nucleic Acid Amp, Viruses	197
		ID2	Nucleic Acid Amp, Respiratory	198
		ID3	Influenza A, Influenza B, RSV by NAA	198
		MRS2M	MRSA Screen, Molecular, 2 Challenge	183
	Х	MRS5M	MRSA Screen, Molecular, 5 Challenge	183
		SP, SPN, SP1	Stool Pathogens	184
		VLS, VLS2	Viral Load	199
		VRE	Vancomycin-Resistant Enterococcus	187
Nucleic acid testing	Х	NAT	Nucleic Acid Testing	230
O-desmethyltramadol		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Occult blood		OCB	Occult Blood	151
		OCBQ	Quality Cross Check, Occult Blood	46
		POC9	POC Fecal Occult Blood	52
Occult blood, gastric		GOCB	Gastric Occult Blood	150
Ocular micrometer check		I	Instrumentation	131
Olanzapine		T	Toxicology	96
		UT	Urine Toxicology	96
Oligoclonal bands Opiate group		OLI DMPM	Oligoclonal Bands  Drug Monitoring for Pain	74 107
			Management	
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
		UTCO	Urine Toxicology Carryover	133
Organic acids, urine qualitative	Х	BGL	Biochemical Genetics	243
Organic acids, urine quantitative		BGL	Biochemical Genetics	243
Osmolality, measured	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Osmolality, measured (cont.)		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Osmolality, urine	Χ	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
		LN6	Urine Chemistry Cal Ver/Lin	122
		POC3	POC Urine Dipstick Competency	52
	Х	U	Urine Chemistry, General	68
Osmometer check		I	Instrumentation	131
Osteocalcin		BGS	Bone and Growth	85
Oxalate		KSA	Kidney Stone Risk Assessment	69
Oxazepam		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Oxcarbazepine metabolite		ZE	Therapeutic Drug Monitoring, Extended	60
Oxidants, urine		DAI	Urine Drug Adulterant/ Integrity Testing	98
Oxycodone		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Oxyhemoglobin	Χ	S0	Blood Oximetry	94
		SOQ	Quality Cross Check, Blood Oximetry	44
Oxymorphone		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Oxymorphone (cont.)		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		Т	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
p16		P16	P16 Immunohistochemistry TMA	273
Pancreatic amylase	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
PAPP-A		FP1B	First Trimester Maternal Screening, Free Beta	87
		FP1T	First Trimester Maternal Screening, Total hCG	87
Parainfluenza virus		ID2	Nucleic Acid Amp, Respiratory	198
	Х	IDR	Infectious Disease, Respiratory Panel	202
	Х	VR1	Virology Culture	196
	Х	VR2	Viral Antigen Detection by DFA	196
Paraprotein identification	Х	SPE	Protein Electrophoresis	76
Parasite identification	X	BP	Blood Parasite	193
	Х	P, P3, P4, P5	Parasitology	192
		PEX	Expanded Parasitology	193
Parathyroid hormone (PTH)	X	ING	Insulin, Gastrin, C-Peptide, PTH	86
		PTHQ	Quality Cross Check, PTH	43
Parentage/relationship testing	Х	PARF	Parentage/Relationship	231
Paroxetine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
-		UT	Urine Toxicology	96
Parvovirus B19		ID1	Nucleic Acid Amp, Viruses	197
PC02	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		POC10, POC11	POC Competency Blood Gases	53

Analyta (Dunandous	LAD	Due store or	Description	D.
Analyte/Procedure	LAP ENR	Program Code	Description	Pg
PCO2 (cont.)		LN13, LN13C	Blood Gas Cal Ver/Lin	124-
				125
PDGFRA		KIT	KIT/PDGFRA	258
		MTP	Multigene Tumor Panel	259
PDL1		PDL1	PDL1	272
Pentobarbital		DFC T	Drug-Facilitated Crime	108
		UT	Toxicology Urine Toxicology	96
Performance		PIP/PIP1,	Performance	262-
improvement program in surgical pathology		PIPW/PIPW1	Improvement Program in Surgical Pathology	263
Peripheral blood smear, virtual		VPBS	Virtual Peripheral Blood Smear	144
pH		AFL	Amniotic Fluid Leakage	148
	X	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		GOCB	Gastric Occult Blood	150
		POC10, POC11	POC Competency Blood Gases	53
		LN13, LN13C	Blood Gas Cal Ver/Lin	124- 125
pH, gastric		GOCB	Gastric Occult Blood	150
pH, urine	X	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
		DAI	Urine Drug Adulterant/ Integrity Testing	98
	X	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	52
		UDC	Forensic Urine Drug Testing, Confirmatory	99
pH meters		I	Instrumentation	131
Phencyclidine		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Phenethylamine		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Pheniramine		Т	Toxicology	96
		UT	Urine Toxicology	96
Phenobarbital	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		LN3	TDM Cal Ver/Lin	121
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Phentermine		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Phenylephrine		T	Toxicology	96
		UT	Urine Toxicology	96
Phenytoin	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		LN3	TDM Cal Ver/Lin	121
		SC0	Serum Carryover	133
		T	Toxicology	96
		UT	Urine Toxicology	96
Phenytoin, free	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Phosphorus	Х	C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Phosphorus, urine		LN6	Urine Chemistry Cal Ver/Lin	122
	Х	U	Urine Chemistry, General	68
PIK3CA		MTP	Multigene Tumor Panel	259

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Pinworm prep	Х	СММР	Clinical Microscopy, Misc	147
Pipette calibration- gravimetric		1	Instrumentation	131
Plasma cell neoplasms		PCNEO	Flow Cytometry, Plasma Cell Neoplasms	215
Plasma hemogloblin		PHG	Plasma Hemoglobin	76
Plasminogen antigen		CGE/CGEX	Coagulation, Extended	161
Plasminogen activator inhibitor		CGE/CGEX	Coagulation, Extended	161
Plasminogen activator inhibitor (PAI)-1		MGL1	Molecular Genetics	246- 247
Platelet aggregation		PF	Platelet Function	166
Platelet antibody detection	Χ	PS	Platelet Serology	223
Platelet calculator		TRC	Transfusion-Related Cell Count	222
Platelet count	X	FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
	Χ	FH15	Centrifugal Hematology	137
	Х	HE, HEP	Basic Hematology	136
		LN9	Hematology Cal Ver/Lin	123
Platelet count (platelet- rich plasma)	Х	TRC	Transfusion-Related Cell Count	222
Platelet crossmatch		PS	Platelet Serology	223
Platelet count (estimated)		EHE1	Expanded Virtual Peripheral Blood Smear	144
		VPBS	Virtual Peripheral Blood Smear	144
Platelet function		PF1	Platelet Function	166
Platelet mapping		PLTM	Platelet Mapping	169
Plesiomonas shigelloides		GIP	Gastrointestinal Panel	203
	Х	GIP5	Gastrointestinal Panel	203
PML/RARA		MH02, MH03	Molecular Hematologic Oncology	260
		MRD2	Minimal Residual Disease	260
PNA FISH- Staphylococcus		PNA1	PNA FISH for Staphylococcus	180
PNA FISH-yeast		PNA2	PNA FISH for Yeast	180
Pneumocystis detection		PCP1	Pneumocystis jiroveci, Calcofluor White Stain	191
		PCP2	Pneumocystis jiroveci, DFA Stain	191

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Pneumocystis detection (cont.)		PCP4	Pneumocystis jiroveci, GMS Stain	191
PNH immunophenotype		PNH	Paroxysmal Nocturnal Hemoglobinuria, RBC	215
P02	X	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		LN13, LN13C	Blood Gas Cal Ver/Lin	124- 125
		POC10, POC11	POC Competency Blood Gases	53
Porphobilinogen, urine		UPBG	Porphobilinogen, Urine	70
Posaconazole		AFD	Antifungal Drugs Monitoring	106
Postanalytical DNA sequencing		SEC	DNA Sequencing Count	248
Postvasectomy sperm count, manual	Х	PV	Postvasectomy Sperm Count	156
Postvasectomy sperm count, automated		PV1	Postvasectomy Sperm Count	156
Potassium	X	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C1, C3, C3X, C4, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		LN13C	Blood Gas Cal Ver/Lin	124- 125
		POC10, POC11	POC Competency Blood Gases	53
Potassium, urine		LN6	Urine Chemistry Cal Ver/Lin	122
	Х	U	Urine Chemistry, General	68
Potassium, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
PRA		MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	234- 235

PRA (cont.)	Analyte/Procedure	LAP	Program	Description	Pg
MX2E, MXB, MXC		ENR			
Syndrome	PRA (cont.)		MX2E, MXB,	HLA Analysis, Class II	
(transthyretin)         CZX, CZ2X           CZQ         Quality Cross Check, Chemistry and TDM           N         S2, S4         Immunology, Special         207           Pregabalin         DMPM         Drug Monitoring for Pain Management         107           T         Toxicology         96           UT         Urine Toxicology         96           Prekallikrein         CGE/CGEX         Coagulation, Extended         161           Predictive markers by immunohistochemistry         HER2         HER2 by Immunohistochemistry         274           PM1         CD117 by Immunohistochemistry         273           PM1         CD117 by Immunohistochemistry         273           PM3         CD20 by Immunohistochemistry         273           PM3         CD20 by Immunohistochemistry         273           PM5         Immunohistochemistry         273           PM6         Immunohistochemistry         273           PM7         CZCZX, Chemistry and TDM         56-58           CZQ         Quality Cross Check, Chemistry and TDM         56-58           CZQ         Quality Cross Check, Chemistry and TDM         61           Probationamide         X         BNP5         B-Type Natriuretic Peptides, 5 Chall	•	X	MGL1	Molecular Genetics	
Chemistry and TDM   X   S2, S4   Immunology, Special   207		X		Chemistry and TDM	56-58
DMPM			CZQ	, ,	41
Management   T   Toxicology   96		Х	S2, S4	Immunology, Special	207
UT Urine Toxicology 96  ZE Therapeutic Drug Monitoring, Extended Prekallikrein CGE/CGEX Coagulation, Extended 161 Predictive markers by immunohistochemistry GHER2 Gastric HER2 274  PM1 CD117 by Immunohistochemistry  X PM2 ER, PgR by Immunohistochemistry  PM3 CD20 by Immunohistochemistry  PM5 Immunohistochemistry  PM6 Immunohistochemistry  PM7 Immunohistochemistry  PM8 CD20 by Immunohistochemistry  PM8 CD20 by Immunohistochemistry  PM9 Immunohistochemistry  PM9 Immunohistochemistry  PM8 CD20 by Immunohistochemistry  PM9 Immunohistochemistry  PM8 CD20 by Immunohistochemistry  PM9 Immunohistochemistry  PM8 Immunohistochemistry  PM9 Immunohistochemistry  PM9 Immunohistochemistry  PM8 Immunohistochemistry  PM9 Immun	Pregabalin		DMPM		107
ZE			T	Toxicology	96
Prekallikrein  CGE/CGEX  Coagulation, Extended  161  Predictive markers by immunohistochemistry  GHER2  GBER2  GBER2  PM1  CD117 by Immunohistochemistry  X PM2  ER, PgR by Immunohistochemistry  ER, PgR by Immunohistochemistry  PM3  CD20 by 273  Immunohistochemistry  PM5  Immunohistochemistry  PM6  PM7  CD20 by 273  Immunohistochemistry  PM8  CD20 by 273  Immunohistochemistry  PM8  CD20 by 273  Immunohistochemistry  PM8  CD20 by 273  Immunohistochemistry  PM9  Immunohistochemistry  PM9  CD20 by 273  Immunohistochemistry  PM9  Immunohistochemistry  CZ20 Quality Cross Check, Chemistry and TDM  LN3  TDM Cal Ver/Lin  121  Pro B-type natriuretic  peptides  X BNP9  B-Type Natriuretic  Peptides, 2 Chall  BNPQ  Quality Cross Check, 41  Entire Peptides  Procainamide  X CZ, CZX, Chemistry and TDM  S6-58  CZ20, Quality Cross Check, 41  BNPQ  Quality Cross Check, Chemistry and TDM  S6-58  CZQ  Quality Cross Check, Chemistry and TDM  IN3  TDM Cal Ver/Lin  121  Procalcitonin  LN3  TDM Cal Ver/Lin  121  Procalcitonin Cal Ver/ Lin  Progesterone  LN8  Reproductive  Endocrinology Cal Ver/ Lin  LN8  Reproductive  Endocrinology Cal Ver/ Lin			UT	Urine Toxicology	96
Prekallikrein       CGE/CGEX       Coagulation, Extended       161         Predictive markers by immunohistochemistry       X       HER2       HER2 by Immunohistochemistry       274         BHER2       Gastric HER2       274         PM1       CD117 by Immunohistochemistry       273         Immunohistochemistry       274         PM3       CD20 by Immunohistochemistry       273         Immunohistochemistry       273         PM5       Immunohistochemistry       273         TMA       CD20 by Immunohistochemistry       273         Endury       26-58         BND       CEQ CZQ       Quality Cross Check, Check, Chenistry and TDM       61 <tr< td=""><td></td><td></td><td>ZE</td><td>  1</td><td>60</td></tr<>			ZE	1	60
Predictive markers by immunohistochemistry  GHER2  GHER2  Gastric HER2  PM1  CD117 by 273  Immunohistochemistry  X PM2  ER, PgR by 1 274  Immunohistochemistry  PM3  CD20 by 1 273  Immunohistochemistry  PM5  Immunohistochemistry  PM5  Immunohistochemistry  PM6  Immunohistochemistry  PM7  PM8  CD20 by 1 273  Immunohistochemistry  PM8  Primidone  X CZ, CZX, CZX, Chemistry and TDM  CC22X,Z  CZQ  Quality Cross Check, Chemistry and TDM  LN3  TDM Cal Ver/Lin  121  Pro B-type natriuretic Peptides  X BNP5  B-Type Natriuretic Peptides, 5 Chall  BNPQ  Quality Cross Check, B-Type Natriuretic Peptides  Procainamide  X CZ, CZX, Chemistry and TDM  S6-58  CZQ  Quality Cross Check, B-Type Natriuretic Peptides  Procainamide  X CZ, CZX, Chemistry and TDM  S6-58  CZQ  Quality Cross Check, B-Type Natriuretic Peptides  Procainamide  X CZ, CZX, Chemistry and TDM  S6-58  CZQ  Quality Cross Check, Chemistry and TDM  LN3  TDM Cal Ver/Lin  121  Procalcitonin  LN41  Procalcitonin Cal Ver/ Lin  Procalcitonin Cal Ver/ Lin  Progesterone  LN8  Reproductive Endocrinology Cal Ver/ Lin  LN8  Reproductive Endocrinology Cal Ver/ Lin  Procalcitonin 123				_	
immunohistochemistry       Immunohistochemistry         GHER2       Gastric HER2       274         PM1       CD117 by Immunohistochemistry       273         Immunohistochemistry       274         PM3       CD20 by Immunohistochemistry       273         Immunohistochemistry       273         Immunohistochemistry       273         TMA       CD20 by Immunohistochemistry       273         Immunohistochemistry       273         TMA       Chemistry and TDM       56–58         CZQ       Quality Cross Check, Chemistry and TDM       41         LN3       TDM Cal Ver/Lin       121         Pro B-type natriuretic peptides       BNP       B-Type Natriuretic Peptides, 2 Chall       61         BNPS       B-Type Natriuretic Peptides, 5 Chall       61         BNPQ       Quality Cross Check, B-Type Natriuretic Peptides       41         Procainamide       X       CZ, CZX, CALL       Chemistry and TDM       56–58         Procainamide       X       CZ, CZX, CALL       Chemistry and TDM       56–58         Procainamide       X       CZ, CZX, CALL       Chemistry and TDM       56–58         Procainamide       X       CZ, CZX, CALL       Chemistry and TDM       56–58					
PM1 CD117 by Immunohistochemistry 273 Immunohistochemistry 274 Immunohistochemistry 274 Immunohistochemistry 274 Immunohistochemistry 273 Immunohistochemistry 273 Immunohistochemistry 273 TMA  Primidone X CZ, CZX, Chemistry and TDM 56–58 CZZX, Z CZZX, Z CZZX, Z CZZX, Chemistry and TDM 121 Pro B-type natriuretic Peptides	•	X	HER2	Immunohistochemistry	274
Immunohistochemistry   X   PM2   ER, PgR by   274   Immunohistochemistry   273   Immunohistochemistry   273   Immunohistochemistry   273   Immunohistochemistry   273   TMA   273   TMA   274   275			GHER2	Gastric HER2	274
Immunohistochemistry			PM1	,	273
Immunohistochemistry   PM5   Immunohistochemistry   273   TMA   Primidone   X   CZ, CZX,   Chemistry and TDM   56–58   CZQ   Quality Cross Check,   Chemistry and TDM   LN3   TDM Cal Ver/Lin   121   Pro B-type natriuretic   BNP   B-Type Natriuretic   Peptides, 2 Chall   Peptides, 5 Chall   BNPQ   Quality Cross Check,   41   BNPQ   Quality Cross Check,   B-Type Natriuretic   Peptides   Forcainamide   X   CZ, CZX,   Chemistry and TDM   CZ2X, Z   CZQ   Quality Cross Check,   Chemistry and TDM   CZ2X, Z   CZQ   Quality Cross Check,   Chemistry and TDM   CZ2X, Z   CZQ   Quality Cross Check,   Chemistry and TDM   CZ2X, Z   CZQ   CZ2X, Z   CZQ   CZ2X, Z   CZQ   CZ2X, Z   CZZX, Z   CZ		X	PM2		274
TMA  Primidone  X CZ, CZX, Chemistry and TDM 56–58  CZQ Quality Cross Check, Chemistry and TDM 56–58  LN3 TDM Cal Ver/Lin 121  Pro B-type natriuretic peptides  BNP B-Type Natriuretic Peptides, 2 Chall B-Type Natriuretic Peptides, 5 Chall B-Type Natriuretic Peptides, 5 Chall BNPQ Quality Cross Check, B-Type Natriuretic Peptides  Procainamide  X CZ, CZX, Chemistry and TDM 56–58  CZQ Quality Cross Check, Chemistry and TDM 56–58  LN3 TDM Cal Ver/Lin 121  Procalcitonin  LN41 Procalcitonin Cal Ver/ Lin  X PCT Procalcitonin 77  Progesterone  LN8 Reproductive Endocrinology Cal Ver/ Lin  123			PM3	,	273
CZ2X,Z  CZQ  Quality Cross Check, Chemistry and TDM  LN3  TDM Cal Ver/Lin  BNP  B-Type Natriuretic Peptides, 2 Chall  BNPO  B-Type Natriuretic Peptides, 5 Chall  BNPQ  Quality Cross Check, 41  BNPQ  Quality Cross Check, 41  B-Type Natriuretic Peptides, 5 Chall  BNPQ  Quality Cross Check, 41  B-Type Natriuretic Peptides  CZ2X,Z  CZ2X,Z  CZ2X,Z  CZQ  Quality Cross Check, 41  Chemistry and TDM  56–58  CAQ  Quality Cross Check, 41  Chemistry and TDM  LN3  TDM Cal Ver/Lin  121  Procalcitonin  X PCT  Procalcitonin  77  Progesterone  LN8  Reproductive Endocrinology Cal Ver/Lin  LN3  Reproductive Endocrinology Cal Ver/Lin  LN8			PM5		273
Chemistry and TDM  LN3 TDM Cal Ver/Lin 121  Pro B-type natriuretic peptides  X BNP B-Type Natriuretic Peptides, 2 Chall  BNPQ B-Type Natriuretic Peptides, 5 Chall  BNPQ Quality Cross Check, B-Type Natriuretic Peptides  Procainamide  X CZ, CZX, CHemistry and TDM 56–58  CZ2X, Z CZX, Chemistry and TDM  LN3 TDM Cal Ver/Lin 121  Procalcitonin  X PCT Procalcitonin 77  Progesterone  Chemistry and TDM 123  Reproductive Endocrinology Cal Ver/Lin  LN8 Reproductive Endocrinology Cal Ver/Lin	Primidone	Х		Chemistry and TDM	56-58
Pro B-type natriuretic peptides  X BNP5 B-Type Natriuretic Peptides, 2 Chall  BNPQ B-Type Natriuretic Peptides, 5 Chall  BNPQ Quality Cross Check, B-Type Natriuretic Peptides  Procainamide  X CZ, CZX, CHemistry and TDM 56–58  CZ2X, Z Quality Cross Check, 41  CZ2X, Z CZX, Chemistry and TDM 56–58  LN3 TDM Cal Ver/Lin 121  Procalcitonin  LN41 Procalcitonin Cal Ver/ Lin  X PCT Procalcitonin 77  Progesterone  LN8 Reproductive Endocrinology Cal Ver/ Lin			CZQ		41
peptides       Peptides, 2 Chall         X       BNP5       B-Type Natriuretic Peptides, 5 Chall         BNPQ       Quality Cross Check, B-Type Natriuretic Peptides       41         Procainamide       X       CZ, CZX, Chemistry and TDM       56–58         CZQ       Quality Cross Check, Chemistry and TDM       41         LN3       TDM Cal Ver/Lin       121         Procalcitonin       LN41       Procalcitonin Cal Ver/ Lin       130         Lin       X       PCT       Procalcitonin       77         Progesterone       LN8       Reproductive Endocrinology Cal Ver/ Lin       123			LN3	TDM Cal Ver/Lin	121
Peptides, 5 Chall  BNPQ Quality Cross Check, B-Type Natriuretic Peptides  Procainamide X CZ, CZX, CZ2X, Z Chemistry and TDM 56–58  CZQ Quality Cross Check, Chemistry and TDM LN3 TDM Cal Ver/Lin 121  Procalcitonin LN41 Procalcitonin Cal Ver/Lin  X PCT Procalcitonin 77  Progesterone LN8 Reproductive Endocrinology Cal Ver/Lin 123	• •		BNP		61
B-Type Natriuretic   Peptides		Х	BNP5		61
CZQX,Z  CZQ Quality Cross Check, Chemistry and TDM  LN3 TDM Cal Ver/Lin 121  Procalcitonin LN41 Procalcitonin Cal Ver/ Lin  X PCT Procalcitonin 77  Progesterone LN8 Reproductive Endocrinology Cal Ver/ Lin			BNPQ	B-Type Natriuretic	41
Chemistry and TDM  LN3 TDM Cal Ver/Lin 121  Procalcitonin LN41 Procalcitonin Cal Ver/ Lin  X PCT Procalcitonin 77  Progesterone LN8 Reproductive Endocrinology Cal Ver/ Lin	Procainamide	Х		Chemistry and TDM	56-58
Procalcitonin     LN41     Procalcitonin Cal Ver/ Lin     130       X     PCT     Procalcitonin     77       Progesterone     LN8     Reproductive Endocrinology Cal Ver/ Lin     123			CZQ	'	41
Lin  X PCT Procalcitonin 77  Progesterone LN8 Reproductive Endocrinology Cal Ver/Lin			LN3	TDM Cal Ver/Lin	121
Progesterone LN8 Reproductive 123 Endocrinology Cal Ver/ Lin	Procalcitonin		LN41		130
Endocrinology Cal Ver/ Lin		Х	PCT	Procalcitonin	77
V V/VV Ligand Appay Special 9/	Progesterone		LN8	Endocrinology Cal Ver/	123
A 1/11 Ligaliu Assay, Special   64		Х	Y/YY	Ligand Assay, Special	84

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Progesterone receptors by immunohistochemistry	Х	PM2	ER, PgR by Immunohistochemistry	274
Prolactin		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
	Χ	Y/YY	Ligand Assay, Special	84
Propoxyphene		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Propranolol		T	Toxicology	96
		UT	Urine Toxicology	96
Prostate-specific antigen (PSA)	Х	K, KK, K2	Ligand Assay, General	82
		LN23	PSA Cal Ver/Lin	127
Prostate-specific antigen, complexed (cPSA)	X	K/KK	Ligand Assay, General	82
Prostate-specific antigen, free (PSA, free)	Х	K/KK	Ligand Assay, General	82
Prostatic acid phosphatase (PAP)	Х	K/KK	Ligand Assay, General	82
Protein electrophoresis, serum, interpretation		SPE	Protein Electrophoresis	76
Protein C		CGE/CGEX	Coagulation, Extended	161
		CGS2	Coag Special, Series 2	162- 163
		LN35	Thrombophilia Cal Ver/ Lin	129
Protein S		CGE/CGEX	Coagulation, Extended	161
		CGS2	Coag Special, Series 2	162- 163
Protein, total	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Protein, total (cont.)		SPE	Lipoprotein and Protein Electrophoresis	76
Protein, CSF	Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Protein, urine	Χ	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
		DSC	Dipstick Confirmatory	149
	Х	HCC2	Waived Combination	66
		LN6	Urine Chemistry Cal Ver/Lin	122
		POC3	POC Urine Dipstick Competency	52
	Х	U	Urine Chemistry, General	68
Prothrombin mutation	Х	MGL1	Molecular Genetics	246- 247
	Х	TPM	Thrombophilia Mutations	250
Prothrombin time	Χ	CGB	Basic Coagulation	160
	Х	CGL	Coagulation, Limited	160
		CGLQ	Quality Cross Check, Coagulation, Limited	47
		CGS1	Coag Special, Series 1	162- 163
		CGS4	Coag Special, Series 4	162- 163
		DBGN	Anticoagulant Monitoring, Dabigatran	163
		FNPX	Anticoagulant Monitoring, Fondaparinux	163
		POC6	POC PT/INR, CoaguChek XS Plus	52
		RVBN	Anticoagulant Monitoring Rivaroxaban	163
	Х	WP3, WP4, WP6, WP9	Whole Blood Coagulation	168
Prothrombin time, dilute		CGE/CGEX	Coagulation, Extended	161
Provider-performed microscopy		СММР	Clinical Microscopy, Misc	147
PRU test		PIA, PIAX	Drug-Specific Platelet Aggregation	167
Pseudocholinesterase	Χ	C7	Pseudocholinesterase	77
Pseudoephedrine		FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96
		UT	Urine Toxicology	96
PTEN		GLI	Glioma	259
Pyridinoline (PYD)		BU	Bone and Mineral, Urine	85
Q-PROBES		QP191	Technical Staffing Ratios	25

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Q-PROBES (cont.)		QP192	Opioid Drug Testing Stewardship	26
		QP193	Expression Rates in Invasive Breast Carcinoma	27
		QP194	The Impact of Pathologist Review on Peripheral Blood Smears	28
Q-TRACKS		QT1	Patient Identification Accuracy	31
		QT2	Blood Culture Contamination	31
		QT3	Laboratory Specimen Acceptability	32
		QT4	In-Date Blood Product Wastage	32
		QT5	Gynecologic Cytology Outcomes - Biopsy Correlation Performance	37
		QT7	Satisfaction with Outpatient Specimen Collection	33
		QT8	State Test TAT Outliers	33
		QT10	Critical Values Reporting	34
		QT15	TATs of Troponin	35
		QT16	Corrected Results	36
		QT17	Outpatient Order Entry Errors	36
Quetiapine		Т	Toxicology	96
		UT	Urine Toxicology	96
Quinidine	X	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
		Т	Toxicology	96
		UT	Urine Toxicology	96
Quinine		T	Toxicology	96
		UT	Urine Toxicology	96
Ranitidine		Т	Toxicology	96
		UT	Urine Toxicology	96
Rapamycin (sirolimus)	X	CS	Immunosuppressive Drugs	59
Rapid group A strep	X	D	Bacteriology	173
	X	D4	Bacteriology, Limited	176
	X	D6	Rapid Group A Strep	178
	Х	D9	Rapid Group A Strep, Waived	178
	Х	MC1	Microbiology Combination with GC	176

Analyte/Procedure	LAP	Program	Description	Pg
	ENR	Code		
Rapid group A strep (cont.)	Х	MC2	Microbiology Combination	176
	Х	MC4	Urine Colony Count Combination	177
	X	MC5	Throat Culture/Rapid Strep	177
RBC count		ABF1, ABF2, ABF3	Automated Body Fluid	148
	X	FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
	Х	HE, HEP	Basic Hematology	136
		LN9	Hematology Cal Ver/Lin	123
RBC count, automated, urine (quantitative)		UAA, UAA1	Automated Urinalysis	149
RBC automated count, fluid		ABF1, ABF2, ABF3	Automated Body Fluid	148
RBC manual count, fluid	X	HFC, HFCI	Hemocytometer Fluid Count	150- 151
RBC folate	X	FOL	RBC Folate	88
RBC morphology		EHE1	Expanded Virtual Peripheral Blood Smear	144
		VPBS	Virtual Peripheral Blood Smear	144
RDW		FH1-FH4, FH6, FH9, FH10, FH13, FH14, FH1P- FH4P, FH6P, FH9P, FH10P, FH13P, FH14P	Hematology Automated Differential	136– 137
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45
		HE, HEP	Basic Hematology	136
Red blood cell antigen detection		J, J1	Transfusion Medicine	218
Red blood cell antigen genotyping		RAG	Red Blood Cell Antigen Genotyping	221
Red blood cell antigen typing		RBCAT	Red Blood Cell Antigen Typing	221
Reducing substance, urine	X	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
	X	HCC2	Waived Combination	66

			5	
Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Paduaing substance		POC3	POC Urine Dipstick	52
Reducing substance, urine (cont.)		P003	Competency	52
Refractometer check		I	Instrumentation	131
Renin	Х	RAP	Renin and Aldosterone	89
Reptilase time		CGE/CGEX	Coagulation, Extended	161
Respiratory syncytial		ID2	Nucleic Acid Amp,	198
virus (RSV)	V	IDO	Respiratory	100
	Х	ID3	Influenza A, Influenza B, RSV by NAA	198
	X	IDR	Infectious Disease, Respiratory Panel	202
	Х	VR1	Virology Culture	196
	Х	VR2	Viral Antigen Detection by DFA	196
	X	VR4	Virology Antigen Detection by EIA and Latex	196
Reticulocyte count, absolute	Х	FH14, FH14P	Hematology Automated Differential	137
	X	RT, RT2, RT3, RT4	Reticulocyte	142
		RTQ, RT3Q, RT4Q	Quality Cross Check, Reticulocyte	45
Reticulocyte count, percent	Х	FH14, FH14P	Hematology Automated Differential	137
·		LN18, LN19	Reticulocyte Cal Ver/Lin	126
	Χ	RT, RT2, RT3, RT4	Reticulocyte	142
		RTQ, RT3Q, RT4Q	Quality Cross Check, Reticulocyte	45
Reticulocyte hemoglobin (RET-He)		FH14, FH14P	Hematology Automated Differential	137
RETT syndrome	X	RETT	RETT Syndrome Genotyping	249
RhD	X	MGL2	Molecular Genetics	246- 247
RhD typing	Χ	J,J1	Transfusion Medicine	218
	Х	JAT	Transfusion Medicine, Automated	219
		JATE1	Transfusion Medicine, Automated, Educational	219
		JATQ	Quality Cross Check, Transfusion Medicine	49
		TMCA	Transfusion Medicine, Competency Assessment	223
Rheumatoid factor	Χ	IL, RF/RFX	Immunology	206
Rhinovirus		ID2	Nucleic Acid Amp, Respiratory	198
	Х	IDR	Infectious Disease, Respiratory Panel	202
RNA sequencing		RNA	RNA Sequencing	258
Rotavirus		GIP	Gastrointestinal Panel	203
	Χ	GIP5	Gastrointestinal Panel	203

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Rotavirus (cont.)		SP, SPN	Stool Pathogens	184
	Х	VR4	Viral Antigen Detection by EIA and Latex	196
RSV		ID2	Nucleic Acid Amp, Respiratory	198
	Х	ID3	Influenza A, Influenza B, RSV by NAA	198
	X	IDR	Infectious Disease, Respiratory Panel	202
	X	VR1	Virology Culture	196
	X	VR2	Viral Antigen Detection by DFA	196
	X	VR4	Viral Antigen Detection by EIA and Latex	196
Rubella antibody, IgG	Х	IL, RUB/ RUBX	Immunology	206
Rubeola antibody (English measles)	Х	VR3	Antibody Detection- Infectious Disease Serology	204
Rufinamide		ZE	Therapeutic Drug Monitoring, Extended	60
Rupture of fetal membranes		ROM1	Rupture of Fetal Membranes	152
Russell's viper venom time, dilute		CGE/CGEX	Coagulation, Extended	161
Salicylate	X	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FTC	Forensic Toxicology, Criminalistics	104
		LN3	TDM Cal Ver/Lin	121
	X	SDS	Serum Drug Screen	101
		T	Toxicology	96
		UT	Urine Toxicology	96
Salmonella		GIP	Gastrointestinal Panel	203
	Х	GIP5	Gastrointestinal Panel	203
Sapovirus (I, II, IV, V)		GIP	Gastrointestinal Panel	203
	X	GIP5	Gastrointestinal Panel	203
Sarcoma by FISH		CYK	Fluorescence In Situ Hybridization	241
Sarcoma translocation		SARC	Sarcoma Translocation	257
Scl-70 (anti-DNA topoisomerase)		RDS	Rheumatic Disease Special	211
Scopolamine		DFC	Drug-Facilitated Crime	108
Secobarbital		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		UDC	Forensic Urine Drug Testing, Confirmatory	99
Selenium	Х	R	Trace Metals	78
Selenium, urine		TMU	Trace Metals, Urine	103

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Selenium, whole blood		TMWB	Trace Metals, Whole Blood	103
Semen analysis	Х	ASA, SC, SV, PV	Semen Analysis	156
		SC1, SM	Semen Analysis	156
		SMCD, SM1CD, SM2CD	Semen Analysis, CD- ROM	156
SERPINA1 genotyping	Х	AAT	Alpah-1 Antitrypsin Genotyping	243
Sertraline		DFC	Drug-Facilitated Crime	108
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Serum free light chains		SFLC	Serum Free Light Chains	212
Sex hormone-binding globulin (SHBG)		ABS	Testosterone and Estradiol Accuracy	113
	X	DY	Ligand Assay, Special	84
Shiga toxin		SP	Stool Pathogens-Rapid and Molecular	184
		ST	Shiga Toxin	185
Shiga-like toxin producing <i>E. coli</i> (STEC)		GIP	Gastrointestinal Panel	203
		GIP5	Gastrointestinal Panel	203
Shigella		GIP	Gastrointestinal Panel	203
	X	GIP5	Gastrointestinal Panel	203
Sickle cell screen, qualitative	X	HG	Hemoglobinopathy	141
	X	SCS	Sickle Cell Screen	143
Sirolimus (Rapamycin)	X	CS	Immunosuppressive Drugs	59
SLC01B1		PGX	Pharmacogenetics	249
Sodium	X	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		LN13C	Blood Gas Cal Ver/Lin	124- 125

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Sodium (cont.)		P0C10,	POC Competency Blood	53
		POC11	Gases	
Sodium, urine		LN6	Urine Chemistry Cal Ver/Lin	122
	Х	U	Urine Chemistry, General	68
Sodium, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
Soluble transferrin receptor		STFR	Soluble Transferrin Receptor	80
Somatomedin C (IGF-1)	Х	Y, YY	Ligand Assay, Special	84
SOX10		PM5	Immunohistochemistry TMA	273
Specific gravity	Х	CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
		DAI	Urine Drug Adulterant/ Integrity Testing	98
	Х	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	52
		UDC	Forensic Urine Drug Testing, Confirmatory	99
Spectrophotometer linearity		I	Instrumentation	131
Sperm count	Х	SMCD	Semen Analysis, CD- ROM	156
Sperm count, automated		SC1, PV1	Semen Analysis	156
Sperm count, manual	Χ	SC	Semen Analysis	156
	Х	PV	Postvasectomy Sperm Count	156
Sperm morphology		SM	Semen Analysis	156
		SM1CD	Semen Analysis, CD- ROM	156
Sperm motility		SMCD	Semen Analysis, CD- ROM	156
Sperm viability		SM2CD	Semen Analysis, CD- ROM	156
	Χ	SV	Semen Analysis	156
Spinal fluid meningitis panel	Х	D	Bacteriology	173
Spinal muscular atrophy	Х	MGL2	Molecular Genetics	246- 247
Spinocerebellar ataxia	Х	MGL2	Molecular Genetics	246- 247
Split fats		FCFS	Fecal Fat	75
Staphylococcus aureus- blood culture		BCS1	Blood Culture Staphylococcus aureus	180
STEC (Shiga-like toxin producing <i>E. coli</i> )		GIP	Gastrointestinal Panel	203
Strep screen		POC4	POC/Waived Strep Screen Competency	52
Streptococcus agalactiae	Х	D8	Group B Strep	179

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Streptococcus agalactiae (cont.)		IDME	Meningitis/Encephalitis Panel	202
Streptococcus pneumoniae		IDME	Meningitis/Encephalitis Panel	202
		SBAS	S. pneumoniae Ag Detection	179
Streptococcus pyogenes	Χ	D	Bacteriology	173
	Х	D1, D7	Throat, Urine Cultures	175
	Х	D4	Bacteriology, Ltd	176
	Х	D6	Rapid Group A Strep	178
	Х	D9	Rapid Group A Strep, Waived	178
	Х	MC1	Microbiology Combination with GC	176
	X	MC2	Microbiology Combination	176
	X	MC4	Urine Colony Count Combination	177
	Χ	MC5	Throat Culture/Rapid Strep	177
Strychnine		Т	Toxicology	96
		UT	Urine Toxicology	96
Sulfate		KSA	Kidney Stone Risk Assessment	69
Sulfosalicylic acid (SSA)		DSC	Dipstick Confirmatory	149
Surgical pathology		DPATH/ DPATH1	Online Digital Slide Program	265
		PIP/PIP1,	Performance	262-
		PIPW/PIPW1	Improvement Program in Surgical Pathology	263
		VBP/VBP1	Online Virtual Biopsies Program	264
Synthetic cannabinoid/ designer drugs		SCDD	Synthetic Cannabinoid/ Designer Drugs	105
Syphilis	Х	G	Syphilis Serology	212
T3, free (triiodothyronine)		ABTH	Harmonized Thyroid	114
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
T3, total (triiodothyronine)		ABTH	Harmonized Thyroid	114
	Х	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Χ	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121- 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
T3, uptake and related tests	Х	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56–58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
T4, free (thyroxine, free)		ABTH	Harmonized Thyroid	114
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
T4, total (thyroxine, total)		ABTH	Harmonized Thyroid	114
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
Tacrolimus	Х	CS	Immunosuppressive Drugs	59
		LN31	Immunosuppressive Drugs Cal Ver/Lin	128
Tapentadol		DMPM	Drug Monitoring for Pain Management	107
Tapentadol-O-sulfate		DMPM	Drug Monitoring for Pain Management	107
Tay Sachs	Х	MGL4	Molecular Genetics	246- 247
tCO <sub>2</sub>		AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		POC10, POC11	POC Competency Blood Gases	53
Temazepam		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		OFD	Oral Fluid for Drugs of Abuse	100
		T	Toxicology	96
		UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96
Teriflunomide		ZE	Therapeutic Drug Monitoring, Extended	60

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Testosterone		ABS	Accuracy-Based Testosterone and Estradiol	113
		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
	Х	Y/YY	Ligand Assay, Special	84
Testosterone, bioavailable		ABS	Testosterone and Estradiol Accuracy	113
		DY	Ligand Assay, Special	84
Testosterone, free		ABS	Testosterone and Estradiol Accuracy	113
	Х	DY	Ligand Assay, Special	84
Tetrahydrozoline		DFC	Drug-Facilitated Crime	108
Thallium, urine		TMU	Trace Metals, Urine	103
Thallium, whole blood		TMWB	Trace Metals, Whole Blood	103
Theophylline	Х	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
Throat culture	Х	D1, D7	Throat, Urine Cultures	175
	Х	D4	Bacteriology, Ltd	176
	Х	MC1	Microbiology Combination with GC	176
	Х	MC2	Microbiology Combination	176
	Х	MC4	Urine Colony Count Combination	177
	Х	MC5	Throat Culture/Rapid Strep	177
Thrombin time		CGE/CGEX	Coagulation, Extended	161
		CGS4	Coag Special, Series 4	162- 163
		DBGN	Dabigatran	163
Thromboelastogram		TEG	Viscoelastometry	166
Thrombophilia mutations	Х	TPM	Thrombophilia Mutations	250
Thyroglobulin	Х	TM/TMX	Tumor Markers	89
Thyroid-stimulating hormone (TSH)		ABS	Accuracy-Based Testosterone and Estradiol	113
		ABTH	Harmonized Thyroid	114
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121- 122

Analyte/Procedure	LAP	Program	Description	Pg
	ENR	Code		
Thyroid-stimulating		LN5S	Ligand Assay, Siemens	121-
hormone (TSH) (cont.)			Cal Ver/Lin	122
Thyroxine, free		ABTH	Harmonized Thyroid	114
	Х	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
Thyroxine, total		ABTH	Harmonized Thyroid	114
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
Tick identification		TMO	Ticks, Mites, and Other Arthropods	193
Tissue parasite identification	Х	ВР	Blood Parasite	193
	Х	P	Parasitology	192
Tobramycin	X	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	121
Topiramate		Т	Toxicology	96
		UT	Urine Toxicology	96
		ZE	Therapeutic Drug Monitoring, Extended	60
Total bile acids		TBLA	Total Bile Acid	78
Total bilirubin	X	C1, C3, C3X, CZ, CZX, C4, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
	Х	NB, NB2	Neonatal Bilirubin	65
Total bilirubin, urine	X	CMP, CMP1	Clinical Microscopy	146
	X	HCC2	Waived Combination	66
		DSC	Dipstick Confirmatory	149
Total free fatty acids		FCFS	Fecal Fat	75

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Total hCG	Х	FP1T	First Trimester Maternal Screening, Total hCG	87
Total hemolytic complement		CH50	Total Hemolytic Complement	212
Total iron binding capacity, measured and % saturation	X	C3, C3X, CZ CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
Total nitrogen, urine		U	Urine Chemistry, General	68
Total nucleated cells		CBT	Cord Blood Testing	225
		SCP	Stem Cell Processing	225
Total nucleated cells manual differential count (body fluid)		HFC/HFCI	Hemocytometer Fluid Count	150- 151
		VBF	Virtual Body Fluid	148
Total nucleated red cells		CBT	Cord Blood Testing	225
		SCP	Stem Cell Processing	225
Total protein	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	132
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
		SPE	Protein Electrophoresis	76
Total protein, CSF	Χ	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Total protein, urine		CMP, CMP1	Clinical Microscopy	146
		CMQ	Quality Cross Check, Urinalysis	46
	Χ	HCC2	Waived Combination	66
		LN6	Urine Chemistry Cal Ver/Lin	122
	X	U	Urine Chemistry, General	68
Total tricyclics	Χ	SDS	Serum Drug Screen	101
	Х	ZT	TDM, Special	60
Touch imprint/crush prep		TICP, TICP1	Touch Imprint/Crush Prep	280
Toxicology, serum, qualitative	Х	SDS	Serum Drug Screen	101
	Χ	T	Toxicology	96
Toxicology, urine, qualitative	X	DMPM	Drug Monitoring for Pain Management	107

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Toxicology, urine, qualitative (cont.)	Х	Т	Toxicology	96
	Χ	UDS, UDS6	Urine Drug Screen	98
	Χ	UT	Urine Toxicology	96
Toxicology, urine, qualitative/quantitative	Х	DMPM	Drug Monitoring for Pain Management	107
	Х	UDC	Forensic Urine Drug Testing, Confirmatory	99
Toxoplasma gondii	X	VR3	Antibody Detection- Infectious Disease Serology	204
TPMT		PGX3	Pharmacogenetics	249
Tramadol		DFC	Drug-Facilitated Crime	108
		DMPM	Drug Monitoring for Pain Management	107
		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96
Transferrin	Х	C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN7	Immunology Cal Ver/Lin	123
	X	S2, S4	Immunology, Special	207
Transfusion medicine		ETME1	Expanded Transfusion Medicine Exercises	227
		EXM, EXM2	Electronic Crossmatch	219- 220
	Х	J, J1	Transfusion Medicine	218
	Х	JAT	Transfusion Medicine, Automated	219
		JATE1	Transfusion Medicine, Automated	219
		JE1	Transfusion Medicine, Education	218
		TMCA	Transfusion Medicine, Competency Assessment	223
		TMCAD	Transfusion Medicine, Competency Assessment	223
		TMCAE	Transfusion Medicine, Competency Assessment	224
		TMCAF	Transfusion Medicine, Competency Assessment	224
	Х	TRC	Transfusion-Related Cell Count	222
Trazodone		FTC	Forensic Toxicology, Criminalistics	104
		T	Toxicology	96
		UT	Urine Toxicology	96

Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Treponema pallidum	Χ	G	Syphilis Serology	212
Trichomonas vaginalis		MVP	Molecular Vaginal Panel	186
		TVAG	Trichomonas vaginalis, Molecular	187
	Х	VS, VS1	Vaginitis Screen	185
Tricyclic group		Т	Toxicology	96
		UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96
Tricyclics, total	X	SDS	Serum Drug Screen	101
	X	ZT	TDM, Special	60
Triglycerides		ABL	Accuracy-Based Lipid	112
	X	C1, C3, C3X, C4, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FCFS	Fecal Fat	75
		FLD	Body Fluid	72
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
	X	LCW	Ltd Chem, Waived	65
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120
Triiodothyronine (T3)		ABTH	Harmonized Thyroid	114
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82
		LN5	Ligand Assay Cal Ver/Lin	121– 122
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121– 122
Triiodothyronine (T3), free		ABTH	Harmonized Thyroid	114
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand Assay, General	82
Trimipramine		Т	Toxicology	96
		UT	Urine Toxicology	96
Troponin I, plasma	X	PCARI, PCARM, PCARMX	Plasma Cardiac Markers	65
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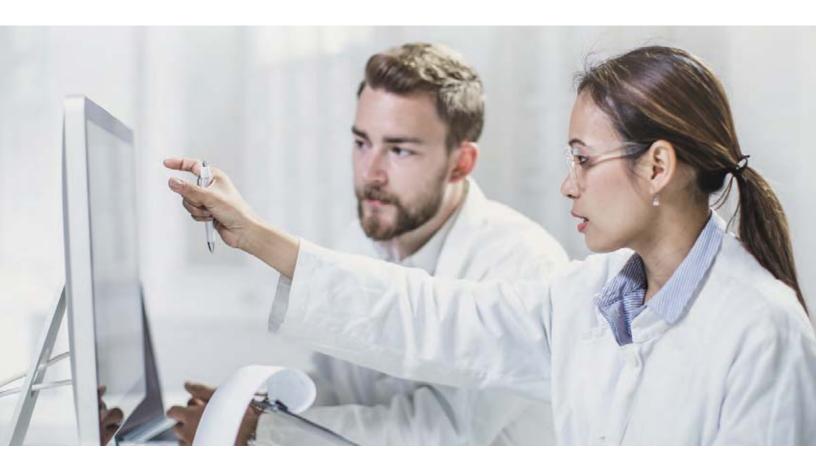
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