

# 2020 Surveys and Anatomic Pathology Education Programs



PERFORMANCE YOU CAN MEASURE. ACCURACY YOU CAN TRUST.

# Together, we move forward to achieve better patient care.

Laboratory medicine is forever changing—more rapidly than ever before. Our comprehensive range of laboratory quality solutions constantly evolves to keep in step with these changes, enabling you more time for what matters most—accuracy in the laboratory.

Year over year the CAP innovates, drawing on the collective knowledge of thousands of experts in laboratory medicine to help laboratories navigate the changes they face. Much of this innovation comes from integrated solutions that include accreditation and proficiency testing (PT). Leveraging this knowledge helps you stay ahead of new technologies, changing testing requirements, and emerging diseases that contribute to the rapid evolution of clinical laboratory medicine.

CAP PT programs give you confidence in your results by allowing you to compare your performance against the largest peer groups. And our accreditation peer inspection model allows participants to develop meaningful connections and share best practices.

The CAP strives to improve every aspect of PT and accreditation, including:

- Expanding our broad range of PT with new testing programs—39 new Surveys in 2019 and 2020 for microbiology, anatomic pathology, molecular pathology, and many other disciplines
- Annually updating our 21 discipline-specific accreditation checklists—simplifying the compliance process and providing a roadmap for running a high-quality laboratory

And we are never done moving forward. The CAP continues to innovate and improve our laboratory quality solutions, providing better ways to serve you. After all, achieving the highest quality service and best patient care possible is the primary goal for all of us.



# **Table of Contents** 2020 Surveys and Anatomic Pathology Education Programs

1 Continuing Education ...... 7–20 2 Competency Assessment Program ...... 15 Quality Management Tools ...... 21–38 3 Quality Cross Check ...... 39–50 4 Point-of-Care Programs ...... 51–54 5 **General Chemistry and Therapeutic** 6 Drug Monitoring ...... 55–80 General Chemistry and Therapeutic Drug Monitoring ..... 56 Urine Chemistry ..... 68 Special Chemistry ..... 71 7 Blood Gas, Critical Care, 8 9 10 Accuracy-Based Programs ...... 111–116 Accuracy-Based Programs ..... 112 Validated Materials ..... 116 11 Instrumentation Verification Tools ...... 117–134 Calibration Verification/Linearity ...... 118 Instrumentation Quality Management Programs ..... 132 12 Hematology and Clinical Microscopy ..... 135–154 Hematology..... 136 Clinical Microscopy ..... 146 13 Reproductive Medicine ...... 155–158 Andrology and Embryology ..... 156 **14 Coagulation** ...... 159–170

15	Microbiology 171–206
	Microbiology 172
	Bacteriology173
	Mycobacteriology188
	Mycology
	Parasitology 192
	Virology
	Multidiscipline Microbiology 201
	Infectious Disease Serology 205
16	Immunology and Flow Cytometry 207–218
	Immunology 208
	Flow Cytometry 215
17	Transfusion Medicine, Viral Markers,
	and Parentage Testing 219–234
	Transfusion Medicine 220
	Viral Markers 230
	Parentage Testing 233
18	Histocompatibility 235–240
18 19	Genetics and Molecular Pathology 241–262
	Genetics and Molecular Pathology 241–262
	Genetics and Molecular Pathology 241–262 Cytogenetics
	Genetics and Molecular Pathology 241–262 Cytogenetics
	Genetics and Molecular Pathology 241–262 Cytogenetics
19	Genetics and Molecular Pathology 241–262 Cytogenetics
19	Genetics and Molecular Pathology 241–262 Cytogenetics
19	Genetics and Molecular Pathology 241–262 Cytogenetics
19	Genetics and Molecular Pathology241–262Cytogenetics242Biochemical and Molecular Genetics245Next-Generation Sequencing254Molecular OncologySolid Tumors258Molecular OncologyHematologic262Anatomic Pathology263–292Surgical Pathology264
19	Genetics and Molecular Pathology241–262Cytogenetics242Biochemical and Molecular Genetics245Next-Generation Sequencing254Molecular Oncology—Solid Tumors258Molecular Oncology—Hematologic262Anatomic Pathology263–292Surgical Pathology264General Immunohistochemistry278
19	Genetics and Molecular Pathology241–262Cytogenetics242Biochemical and Molecular Genetics245Next-Generation Sequencing254Molecular OncologySolid Tumors258Molecular OncologyHematologic262Anatomic Pathology263–292Surgical Pathology264General Immunohistochemistry278Predictive Markers281
19	Genetics and Molecular Pathology241–262Cytogenetics242Biochemical and Molecular Genetics245Next-Generation Sequencing254Molecular Oncology—Solid Tumors258Molecular Oncology—Hematologic262Anatomic Pathology263–292Surgical Pathology264General Immunohistochemistry278Predictive Markers281Specialty Anatomic Pathology283
19	Genetics and Molecular Pathology241–262Cytogenetics242Biochemical and Molecular Genetics245Next-Generation Sequencing254Molecular Oncology—Solid Tumors258Molecular Oncology—Hematologic262Anatomic Pathology263–292Surgical Pathology264General Immunohistochemistry278Predictive Markers281Specialty Anatomic Pathology283Cytopathology285

# 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 proficiency testing 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**



# Immunohistochemistry (IHC) testing is changing at a rapid pace—so is our proficiency testing.

- Evaluate your laboratory's preanalytic processing steps for tissue and slide preparation of melanoma (HQMEL) and gliomas (HQNEU).
- Assess analytic and interpretive steps of IHC testing for the biomarkers c-Myc and Bcl-2 (MYBC).
- Test both pre- and postanalytic steps for IHC of dermatopathology markers (DPIHC).

1

# **New Developments**

Quality Management Tools			
Subsection	Name	Program Code	Page
Q-PROBES™	Technical Competency Assessment of Peripheral Blood Smears	QP201	25
Q-PROBES	Red Blood Cell Utilization: Single and Double Unit Transfusions	QP202	26
Q-PROBES	Inpatient Test Utilization and Volume Benchmarking	QP203	27
Q-PROBES	Turnaround Time for Image–Guided Breast Needle Biopsy Specimens	QP204	28

Quality Cross Check			
Subsection	Name	Program Code	Page
General Chemistry and Therapeutic Drug Monitoring Quality Cross Check—Cardiac Markers		CRTQ	42

General Chemistry and Therapeutic Drug Monitoring				
Subsection Name Program Code Page				
General Chemistry and Therapeutic Drug Monitoring	Quality Cross Check—Cardiac Markers	CRTQ	62	

Microbiology				
Subsection Name Program Code Page				
Bacteriology Routine Microbiology Combination		RMC	176	
Bacteriology Mycoplasma genitalium, Molecular		MGEN	185	
Virology HSV, VZV—Molecular		ID5	198	
Multidiscipline Microbiology	Infectious Disease, Pneumonia Panel	IDPN	203	

Immunology and Flow Cytometry			
Subsection	Program Code	Page	
Flow Cytometry	Flow Cytometry—Post-Immunotherapy Analysis	FL6	216

Transfusion Medicine, Viral Markers, and Parentage Testing				
Subsection Name Program Code Page				
Transfusion Medicine	Antibody Titer—Automated	AABT, AABT1, AABT2, AABT3	224	

Histocompatibility			
Section Name Program Code Pag			
Histocompatibility	Antibody Titer—Automated	AABT, AABT1, AABT2, AABT3	238

Anatomic Pathology					
Subsection Name Program Code Pag					
Surgical Pathology	CAP/NSH HistoQIP Central Nervous System IHC	HQNEU	272		
Surgical Pathology	CAP/NSH HistoQIP In Situ Hybridization (Kappa/Lambda)	HQISH	272		
Surgical Pathology	CAP/NSH HistoQIP Melanoma IHC	HQMEL	273		
General Immunohistochemistry	Dermatopathology Immunohistochemistry	DPIHC	278		
General Immunohistochemistry	c-Myc/Bcl-2 Immunohistochemistry Tissue Microarray	MYBC	279		
Predictive Markers	CAP/ACMG <i>HER2</i> Gene Amplification by FISH, Interpretation Only	СҮНІ	282		

# 2019 New Programs

Name	Program Code	Page
Quality C	ross Check	-
Quality Cross Check—Transfusion Medicine	JATQ	42
General Chemistry and Th	nerapeutic Drug Monit	oring
Plasma Cardiac Markers International	PCARI	65
Fecal Calprotectin	FCAL	75
Endoc	rinology	
MMA and Active B <sub>12</sub>	MMA	82
Toxic	cology	
Novel Opioids and Benzodiazepines	NOB	105
Blood Cannabinoids	THCB	106
Antifungal Drugs Monitoring	AFD	106
Accuracy-Ba	sed Programs	
Accuracy-Based Glucose, Insulin, and C-Peptide	ABGIC	115
Instrumentation	n Validation Tools	
C-Peptide/Insulin Calibration Verification/Linearity	LN46	131
Reproduct	ive Medicine	
Postvasectomy Sperm Count—Automated	PV1	156
Micro	biology	
Carbapenem-resistant Organisms	CRO	180
Molecular Vaginal Panel	MVP	185
Gastrointestinal Panel, 5 Challenge	GIP5	204
Transfusion Medicine, Viral M	larkers, and Parentage	e Testing
Viral Markers—Series 6, Additional Material	VM6X	231
Genetics and Mo	lecular Pathology	
CAP/ACMG Cardiomyopathy Sequencing Panel	CMSP	246
CAP/ACMG Inherited Cancer Sequencing Panel	ICSP	247
Anatomic	Pathology	
HQIP Whole Slide Image Quality Improvement Program	HQWSI	274
CD30 Immunohistochemistry Tissue Microarray	CD30	279
p16 Immunohistochemistry Tissue Microarray	P16	279

# **Continuing Education**



# Simplify your record keeping with Competency Assessment Program.

Be ready for your next inspection:

- Use checklists and courses to document specific actions and dates.
- Meet deadlines with automated scheduled reminders.
- Upload supporting documentation for complete, organized records.
- Offer staff 80+ CE credits from included Competency Assessment courses.

# **Continuing Education**

Continuing Education Programs	8
Competency Assessment Program	5
QM <i>Ed</i> ™ Online Educational Courses	8

2

# **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.



#### 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.



#### credit CE (Continuing Education for Nonphysicians)

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).



credif 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, 88-89	
Blood Gas	AQ, AQ2, AQ3, AQ4	Chemistry	92	
Coagulation—Limited	CGB, CGL, CGDF	Coagulation	160	
Cytogenetics	СҮ, СҮВК	Cytogenetics	242	
Hematology—Basic	HE, HEP	Hematology and Clinical Microscopy	136	
Blood Cell Identification, Photographs	BCP, BCP2	Hematology and Clinical Microscopy	139	
Hematology Automated Differential Series	FH1-FH4, FH6, FH9-10, FH13	Hematology and Clinical Microscopy	136	
Virtual Peripheral Blood Smear	VPBS	Hematology and Clinical Microscopy	143	
Bone Marrow Cell Differential	BMD	Hematology and Clinical Microscopy	139	
CAP/NSH HistoQIP	HQIP	Histology	271	
Immunology	IG, IGX, ANA, ASO, CRP, HCG, IM, RF, RFX, RUB, RUBX, IL, M, OLI, G, LPE, SPE, UBJP, RDS, CCP, S2, S4, S5, AHT	Immunology	74,76, 208-210, 212-214	
Bacteriology	D	Microbiology	173	
Mycology and Aerobic Actinomycetes	F	Microbiology	189	
Limited Bacteriology	D1, D2, D3, D5, D6, D8, MC3, MC4, RMC	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	
Toxicology	DFC, DMPM, SCDD, FTC, UDC, NOB, T	Toxicology	96, 99, 104 105, 107- 108	
Transfusion Medicine	J, J1, JE1, JAT, JATE1, EXM, EXM2	Transfusion Medicine	220-222	

#### 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	,		
QP201 - Technical Competency Assessment of Peripheral Blood Smears NEW	QP201	Data Analysis and Critique	25
QP202 - Red Blood Cell Utilization: Single and Double Unit Transfusions <b>NEW</b>	QP202	Data Analysis and Critique	26
QP203 - Inpatient Test Utilization and Volume Benchmarking <b>NEW</b>	QP203	Data Analysis and Critique	27
QP204 - Turnaround Time for Image-Guided Breast Needle Biopsy Specimens <b>NEW</b>	QP204	Data Analysis and Critique	28
Hematology and Clinical Microscopy			
Blood Cell Identification, Photographs	BCP, BCP2	Participant Summary	139
Bone Marrow Cell Differential	BMD	Participant Summary	139
Extended Virtual Peripheral Blood Smear	EHE1	Participant Summary	144
Hematology Automated Differential Series	FH1–FH13, FH1P–FH13P	Participant Summary	136
Hematology—Basic	HE, HEP	Participant Summary	136
Hemoglobinopathy	HG	Participant Summary	140
Virtual Body Fluid	VBF	Participant Summary	148
Virtual Peripheral Blood Smear	VPBS	Participant Summary	143
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	ТМО	Participant Summary	194
Worm Identification	WID	Participant Summary	194

\*Notes:

• 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.

• 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.

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

	Edu	cation Programs			
Program Name	Program Code	Maximum AMA PRA CME Category 1 Credits <sup>™</sup> Annually	Maximum CE Credits Annually	Format	Catalog Page
Autopsy Pathology	AUP/AUP1	12.5****	NA	Online	283
Clinical Pathology Improvement Program*	CPIP/CPIP1	15****	NA	Online	14
Digital Slide Program— Dermatopathology*	DPATH/DPATH1	15****	NA	Online (DigitalScope®)	267
Digital Slide Program in FNA*	FNA/FNA1	10	10	Online (DigitalScope)	290
Fine-Needle Aspiration Glass Slides	FNAG/FNAG1	10	10	Glass Slides	291
Forensic Pathology	FR/FR1	12.5****	12.5	Online	294
Hematopathology Online Education	HPATH/HPATH1	12.5****	12.5**** 12		145
Nongynecologic Cytopathology Education**	NGC/NGC1	25	25	Glass Slides With Online Cases (DigitalScope)	289
Neuropathology Program	NP/NP1	10****	NA	Online (DigitalScope)	284
Gynecologic Cytopathology PAP Education Program***			8	Glass Slides	286
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	285
Performance Improvement Program in Surgical Pathology	PIP/PIP1	40	NA	Glass Slides	265
Continued on the next page			·		

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

\*\*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.

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

\*\*\*\*SAM credits are included in CME totals for the appropriate programs.

Education Programs continued									
Program Name	Program Code	Maximum AMA PRA CME Category 1 Credits™ Annually	Maximum CE Credits Annually	Format	Catalog Page				
Online Performance Improvement Program in Surgical Pathology*	PIPW/PIPW1	40	NA	Online (DigitalScope)	264				
Nongynecologic Cytopathology Intraoperative Touch Imprint/ Crush Preparation Program*	TICP/TICP1	10****	10	Online (DigitalScope)	288				
Variant Interpretation Only Program	VIP/VIP1	3	3	Online	252				
Virtual Biopsy Program*	VBP/VBP1	25****	NA	Online (DigitalScope)	266				

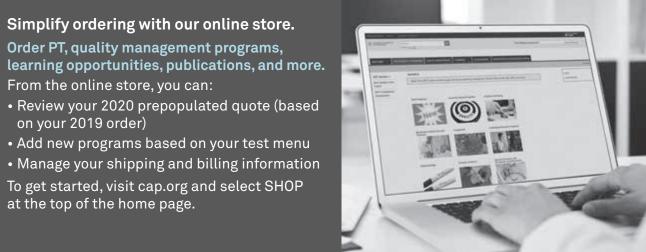
\*Program is available for purchase online. Go to cap.org and choose the Learning tab.

\*\*\*\*SAM credits are included in CME totals for the appropriate programs.

#### 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.



#### Clinical Pathology Improvement Programs (CPIP/CPIP1)

CPIP supports pathologists who principally practice clinical pathology as well as those who primarily practice anatomic pathology but cover clinical pathology. A diverse portfolio of real-life case scenarios, including images and clinical background, helps pathologists to stay abreast of issues and advances in the lab.

Designed for pathologists, by pathologists. Each case is developed and peer-reviewed ensuring what you learn is practical and easily applied to your work. Thought provoking questions with feedback and a multiple-choice post-test allow you to assess and confirm your diagnostic skills. Participants who earn a passing score on the post-test may apply their earned credits to the ABP's CC requirements.

# Clinical Pathology Improvement Program CPIP/CPIP1

Program Name	Program Code	Cases/Year
	CPIP/CPIP1	
Online cases in clinical pathology	I	12 (One per month. See below.)

#### Additional Information

Consider the CPIP program if you are a:

- Medical director seeking to continuously improve the clinical pathology knowledge and collective skills of your pathology team.
- Pathologist with clinical and/or laboratory management responsibilities.
- Pathologist seeking CME/SAM or CC credits in clinical pathology.
- Subspecialty clinical pathologist who needs to keep current.

To learn more visit www.cap.org and search CPIP.

Discipline	ipline Case Schedule (subject to change)	
Lab Management	How to retire a test	January
Toxicology	Non-cancer pain management	February
Hematology	Molecular approach to myeloid neoplasms	March
Chemistry	Growth hormone testing	April
Transfusion Medicine	Blood bank education for clinical staff	Мау
Hematology	Neutrophilia	June
Microbiology	Automation in clinical microbiology	July
Transfusion Medicine	Utilization of platelets and plasma	August
Hematology	Flow/lymphocytosis	September
Molecular Pathology	Cell-free and/or circulating tumor cell DNA testing for solid tumors	October
Chemistry	Adrenal function testing	November
Lab Management	Physician wellness	December

#### **Program Information**

- CPIP One online clinical laboratory case per month
- CPIP1 Reporting option with CME/SAM credit for each additional pathologist (within the same institution); must order in conjunction with CPIP
- Earn a maximum of 15 CME/ SAM credits (AMA PRA Category 1 Credits<sup>™</sup>) 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.
- 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 Laboratory Professionals Learning Programs 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

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

\*\*Safety & Compliance Course subscriptions require a standard Competency Assessment Program subscription.

Assessment Course Schedule							
Discipline	January 2020 Release	July 2020 Release					
Blood Banking/Transfusion Medicine—Generalist	Direct antiglobulin test	ABO typing discrepancies					
Blood Banking/Transfusion Medicine—Specialist	Direct antiglobulin test	ABO typing discrepancies					
Chemistry	Clinical toxicology	Electrolytes, acid base, and anion gap					
Hematology and Coagulation	Erythrocyte morphology	White blood cell inclusions					
Histology	Immunohistochemistry—part 2	Histology specimen handling					
Immunology	Monitoring the testing process in immunology	Human chorionic gonadotropin and fetal fibronectin					
Microbiology—Generalist	Genital tract pathogens	The microbiology of wounds					
Microbiology—Specialist	Genital tract pathogens	The microbiology of wounds					
Phlebotomy/Specimen Processing	Professionalism and ethics	Venipuncture					
Point-of-Care Testing	Provider-performed microscopy and limited waived testing	Urine dipstick					
Quality Programs/Management	Document control	New instrument method validation					
Safety	Hazardous chemicals	Laboratory waste and spill management					
Urinalysis/Body fluids	Microscopic urinalysis part 2—crystals and casts	Serous and synovial fluids					

	Pro Course Schedule	
Discipline	January 2020 Release	July 2020 Release
Blood Banking/Transfusion Medicine	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	Immunohistochemistry—part 1
Immunology	Hepatitis testing	Rapid serology kit tests
Microbiology	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

# 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.

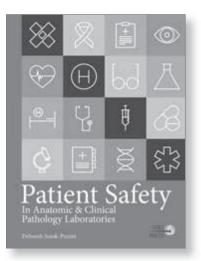
Connect the patient safety culture in your laboratory to the overall mission and goals of your health care enterprise.

- 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

# Add Patient Safety In Anatomic & Clinical Pathology Laboratories (PUB316) to your order.

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

- printed books at estore.cap.org
- ebooks at ebooks.cap.org



**Item number:** PUB316 Softcover; 128 pages; 2017

# QMEd<sup>™</sup> Online Educational Courses

### Tailored education and quality tools developed with pathologist input



#### Quality Management Educational Resources (QMEd) courses will help you:

- Build a quality management system (QMS) one piece at a time that sustains your continuous improvement and Lean efforts.
- Improve your processes and eliminate waste
- Self-assess your current QMS against international quality standards
- 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
- Measure, analyze, and set goals with senior management

#### **Program information**

- Courses are delivered online via a highly interactive user interface that allows you to learn at your own pace.
- Courses are licensed for one year, allow sharing of logins, and include continuing education (CE) credit.

#### 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. Includes a unique Culture Assessment Tool that helps laboratory leadership get a picture of where your organization needs to improve and where it is strong. This tool helps make culture change a reality.

4 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. Includes the RCA Performance and Feedback Toolkit, a set of tools an organization can use to guide and assess root cause analysis projects. 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.

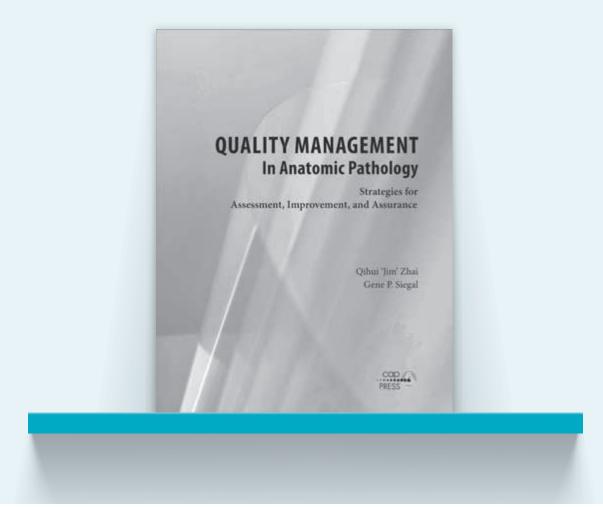
2 CE credits available

Make sure your laboratory team is ready to meet the challenges ahead. Add QMEd courses to your order form.

#### Use code ISOEDAL to add the entire series for a 25% discount.

For more information, visit cap.org and search QMEd.

# 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 and tables; 2017

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# **Quality Management Tools**



### Engage in quality measures with the latest Q-PROBES<sup>™</sup> programs.

- Assess technologist's competency of peripheral blood smears using online whole slide images (QP201).
- Audit your transfusion practices for appropriate use of blood products by assessing single versus double RBC unit transfusions (QP202).
- Benchmark your core laboratory test volume to support your test utilization initiatives (QP203).
- Benchmark your turnaround time for image-guided breast needle biopsy specimens (QP204).

# **Quality Management Tools**

Q-PROBES™	
Q-TRACKS <sup>®</sup>	
Clinical Pathology Monitors	
Anatomic Pathology Monitor	

# New Programs NEW



Technical Competency Assessment of Peripheral Blood Smears (QP201)	25
Red Blood Cell Utilization: Single and Double Unit Transfusions (QP202)	
Inpatient Test Utilization and Volume Benchmarking (QP203)	
Turnaround Time for Image–Guided Breast Needle Biopsy Specimens (QP204)	

# **Discontinued Programs**

Technical Staffing Ratios (QP191) Opioid Drug Testing Stewardship (QP192) Expression Rates in Invasive Breast Carcinoma (QP193) The Impact of Pathologist Review of Peripheral Blood Smears (QP194)

# **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<sup>®</sup> 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.\*

Select Q-PROBES and Q-TRACKS studies to support your quality improvement initiatives.	Preanalytic	Analytic	Postanalytic	Anatomic Pathology	<b>Clinical Pathology</b>	Turnaround Time	Patient Safety	Microbiology	Transfusion Medicine	Chemistry/ Hematology	Customer Satisfaction
Q-PROBES											
Technical Competency Assessment of Peripheral Blood Smears (QP201) <b>NEW</b>					I						
Red Blood Cell Utilization: Single and Double Unit Transfusions (QP202) <b>NEW</b>					I						
Inpatient Test Utilization and Volume Benchmarking (QP203) NEW					I						
Turnaround Time for Image–Guided Breast Needle Biopsy Specimens (QP204) NEW											
Q-TRACKS											
Patient Identification Accuracy (QT1)											
Blood Culture Contamination (QT2)											
Laboratory Specimen Acceptability (QT3)											
In-Date Blood Product Wastage (QT4)											
Gynecologic Cytology Outcomes: Biopsy Correlation Performance (QT5)	I		I								
Satisfaction with Outpatient Specimen Collection (QT7)											
Stat Test Turnaround Time Outliers (QT8)											
Critical Values Reporting (QT10)											
Troponin Turnaround Times (QT15)											
Corrected Results (QT16)											
Outpatient Order Entry Errors (QT17)											

\*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

Q-PROBES <sup>W</sup> 2015: QP151 - Blood Bank Safety Practices Quality Management Report: Individual Report of Results									
Performance Indicator	Your Result				Performance Distribution				ı
ABO mislabeled specimen rate (per 1000 specimens) (n=30)	3.68	0.00	4.04	18.19		5	10	15	]
Performance note: The bar graph ranges from the 10th to 90th percentile. The thick vertical line represents the median value. Lower percentiles (shaded area and lower) represent better relative performance.									
Additional Information		Your Result	All Ins 10th	titutions Pe 50th	rcentiles 90th				
ABO typing result discrepancy rate (per 1000 specimens) (n=29)		2.17	0.00	0.00	1.82				
Estimated annual rate of ABO typing result discrepancies (per 1000 specimens) (n=30)		0.23	0.00	0.00	0.41				
Mislabeled ABO specimen rejection rate (%) (n=15)		100.0	88.9	100.0	100.0				
		·							

• 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 Competency Assessment of Peripheral Blood Smears QP201

#### Introduction

The widespread use of automated white blood cell (WBC) differential counts and computer generated whole slide imaging has decreased the time that the technical staff dedicates to morphological assessment of blood cells. However, technologists must maintain their morphological skills and laboratories are required to provide education and assess competency in this area on a regular basis.

Participation in this Q-PROBES study helps laboratories meet CLIA personnel requirements (Subpart M, 42 CFR §493.1); CAP Laboratory Accreditation Program Checklist statements GEN.55500, Competency Assessment of Testing Personnel; and The Joint Commission Standards HR. 01.05.03, 01.06.01, and 01.07.01 for training and education, competency, and evaluation of hospital personnel.

#### Objectives

This study will help assess the effectiveness of educational and practical experience policies and procedures dedicated to the laboratory's efforts in maintaining technologist skills in the performance of accurate WBC differential counts and other peripheral blood smear morphological assessment. The evaluation provided will assist in the construction of individual educational programs for the technical staff and will highlight areas of improvement to focus on.

#### **Data Collection**

Information will be collected from each site regarding their institution's minimum qualification and experience requirements of their technologists, their ongoing educational programs in peripheral blood smear evaluation, as well as relevant procedures and policies.

A series of online, whole slide images of Wright-Giemsa stained peripheral blood smears using DigitalScope® technology will be available to each participating institution to assess technologists' performance on WBC differential counts and morphology assessment. Participants will also provide information about their competency assessment programs, continuing education, and professional background. Each program ordered provides input forms for use by up to 10 technologists. Laboratories that need forms for more than 10 individuals should order additional programs (available in multiples of 10).

#### **Performance Indicators**

- Individual technologist score (%) based on a standardized competency assessment method to determine a technologist's ability to identify various WBC types, red blood cell morphology, and platelet morphology in normal and abnormal cases
- Overall laboratory score based on the facility's individual technologist performance(s)

A summary of responses to the general questions will be provided to participants.

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

### Red Blood Cell Utilization: Single and Double Unit Transfusions QP202

#### Introduction

The use of lower thresholds for transfusing red blood cells (RBC) has effectively reduced the number of RBC transfusions performed. When healthcare providers order a blood transfusion, they request the number of RBC units that should be transfused. Most orders are for either 1 (single) unit or 2 (double) units of RBC in non-emergent scenarios. This includes inpatient transfusions provided to acute and chronically ill patients, post-operative patients, and patients in intensive care unit settings. However, the need to transfuse 2 RBC units during a transfusion episode has been questioned because a single unit transfusion may sufficiently increase oxygen carrying capacity for most patients.

Enrollment in this study will assist laboratories in meeting the CAP Laboratory Accreditation Program Transfusion Checklist statement TRM.40875, Transfusion Service Medical Director Responsibility, regarding monitoring and auditing transfusion practices, and establishing criteria for transfusion. Use of this study assists laboratories in meeting and applying The Joint Commission Standards QSA.05.01.01 and 05.02.01 requirements for policies and procedures for blood transfusion services.

#### Objectives

This Q-PROBES study will allow participants to assess how frequently single RBC units are ordered and subsequently transfused to hospitalized patients requiring non-emergent transfusions compared to all transfusion events with either single or double RBC units ordered. Additionally, this study will allow participants to evaluate conformance of RBC transfusion practice with their own institutional guidelines.

#### **Data Collection**

Participants will identify up to 50 transfusion events from patients treated and received either 1 or 2 RBC unit(s). This study will be limited to hospital inpatients. Preoperative and intraoperative orders for surgical patients and emergency orders for RBC transfusion will be excluded. Orders for 3 or more RBC units will be excluded as these are often unstable patients requiring urgent transfusion.

For each of the eligible transfusion episodes, participants will record the pre-transfusion and post-transfusion hemoglobin levels and the type of ordering service.

#### **Performance Indicators**

- Percentage of single RBC transfusion events out of all transfusion events administering single or double RBC units during the study period
- Percentage of RBC transfusions in compliance with institutional guidelines during the study period

#### Additional Measure

• Average pre-RBC transfusion hemoglobin value

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

### Inpatient Test Utilization and Volume Benchmarking QP203

#### Introduction

It is well established that test ordering practices vary widely between healthcare providers even when adjusted for similar patient populations and conditions. Similarly, ordering practices vary between healthcare facilities which depend, in part, on certain operational practices and policies. This may involve test menu configuration, ordering protocols, or restriction policies such as use of laboratory formularies. Another method to evaluate potential gaps in utilization practices is to evaluate adjusted volume of specific tests between facilities. This information can be useful to laboratories for prompting evaluation of potential factors associated with differences in the quantity of specific tests performed when compared to peers.

#### Objectives

The purpose of this study is to provide participants with comparative benchmarks involving annual volumes of various inpatient tests and number of inpatient days. The amount of testing performed per inpatient day will be used to adjust for ordering practice variability between facilities.

In addition, associations between standardized test volumes and ordering practices in use by participants, such as test menu design, reflex testing, decision support, standing orders, and order restriction policies, will be evaluated.

#### **Data Collection**

Participants will report the 2019 annual volume for specific inpatient tests including both common high volume tests as well as less commonly ordered low volume tests. Annual inpatient days will also be collected.

Other information such as whether the test is included on a panel will be collected in addition to information about general laboratory stewardship policies and procedures.

#### Performance Indicators

For each inpatient test:

- Annual inpatient test volume standardized by inpatient days
- Index score of standardized inpatient test volume

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

# NEW



## Turnaround Time for Image–Guided Breast Needle Biopsy Specimens QP204

#### Introduction

Needle biopsies are performed increasingly for the primary diagnosis of breast disease, particularly in patients with mammographic or ultrasound abnormalities suspicious for malignancy. In a typical workflow the radiologist incorporates the pathologic findings into the radiology report with correlation, requiring a rapid turnaround time for the pathology report in order to expedite patient care. As the goal of these procedures is to expedite surgical intervention in those patients requiring it, often with the assistance of a nurse navigator, many institutions track the turnaround times for biopsy submission, pathologist and radiologist verification of their respective reports, and time to surgery. Notably, there are no established pathology benchmarks for breast needle biopsy turnaround time.

#### Objectives

The aims of this study are to:

- Determine the average turnaround time for image-guided breast needle biopsy specimens, defined as the time from specimen accessioning in the laboratory to verification and release of the final report by the pathologist
- Identify key elements of processing and reporting that influence the turnaround time, including the American Society of Clinical Oncology/College of American Pathologists guideline for at least six hours of formalin fixation, the relative complexity of establishing benign, atypical/borderline, and malignant diagnoses, and the frequent need for additional studies, including additional deeper sections, immunohistochemistry, and intradepartmental consultation

#### **Data Collection**

Participants will submit data from up to 50 image-guided breast needle biopsy specimens received during the study period, including the time of biopsy (when available), the time the specimen was accessioned in the laboratory, the duration of formalin fixation, and all non-routine studies obtained on the case, as outlined in the objectives above. The final pathologic diagnosis will also be recorded in order to stratify turnaround times with regard to benign, atypical/borderline, and malignant diagnoses, if sufficient data is provided.

#### Performance Indicator

• Time from specimen accessioning in the laboratory to final pathologist report

# **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.

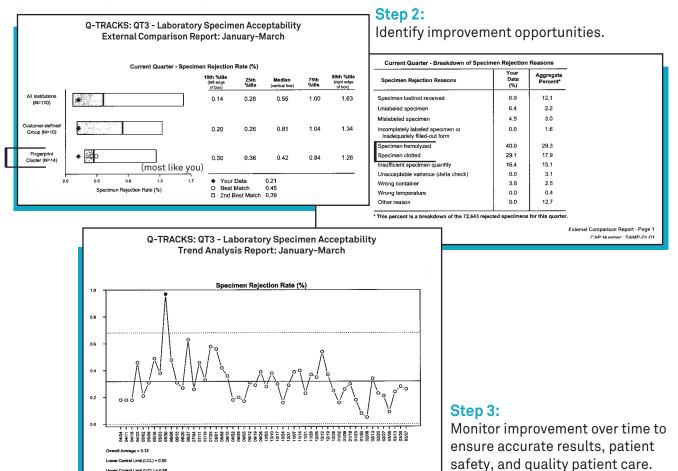
#### **Evaluate quality improvements**

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.

Joper Control Limit (UCL) = 0.68



#### Participants in Q-TRACKS programs 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.

# Laboratory Administration for Pathologists, Second Edition (PUB312)

Laboratory Administration for Pathologists is designed to provide pathologists with an overview of the fundamentals of management and leadership, addressing the specific role and responsibility of the pathologist in directing the laboratory.

- Provides information for both clinical and anatomic pathology practice
- Includes an overview of patient safety not available in the first edition
- Covers financial management of the laboratory and the pathology practice
- Geared for trainees and those entering practice while appropriate for all pathologists

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Item number: PUB312 Hardcover; 296 pages; 2019

# **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

#### Performance Breakdown

• Wristband error rate (%)

• 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 The 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

#### Performance Breakdown

• Specimen rejection rate (%)

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 healthcare system. More ominously, systemic wastage of blood may reflect an environment of care that is out of control and may pose risks to patient safety.

Enrollment in this program assists laboratories in meeting regulatory requirements as follows:

- CAP Laboratory Accreditation Program Checklist statements: TRM.40875 that requires the transfusion service medical director to monitor and audit transfusion practices to ensure the appropriate use of blood; TRM.30800, Disposition Records; and TRM.32275, Component Records, regarding recording the use of each blood or component product from receipt to final disposition.
- The Joint Commission Standards QSA.05.02.01, adequate blood and blood components; QSA.05.03.03, requirements for policies and procedures for returning unused blood products to blood transfusion services; and QSA.05.22.01, records of blood product disposition.
- 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: whole blood (allogeneic), red blood cells (allogeneic), frozen plasma, platelet concentrates, single donor platelets, and cryoprecipitate.

#### Performance Indicators

#### Performance Breakdown

• Overall blood wastage rate (%)

- Breakdown of circumstances of wastage (%)
- Wastage rates by blood component type (%)

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 laboratory service hours, waiting time, comfort level, professionalism and courtesy, and privacy.

#### **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 Waiting time
  - o Patient comfort

- o Professionalism and courtesy
- o Patient privacy
- 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."

#### Objective

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

#### Performance Breakdowns

• Stat test TAT outlier rate (%)

- 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 (National Patient Safety Goal NPSG.02.03.01), 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
- Going Above and Involvement
   Beyond
   Risk Awareness
- Transparency

Includes a unique quality-culture assessment tool that helps make culture change a reality.

#### See p. 18. Add ISOEDCL to your order.



## 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 was 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.

## Objectives

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 and extra test orders, missing test orders and diagnosis codes, 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**

## Performance Breakdown

- Overall outpatient order entry error rate (%)
- Breakdown of error types (%)

• Order entry error rates by type (%)

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

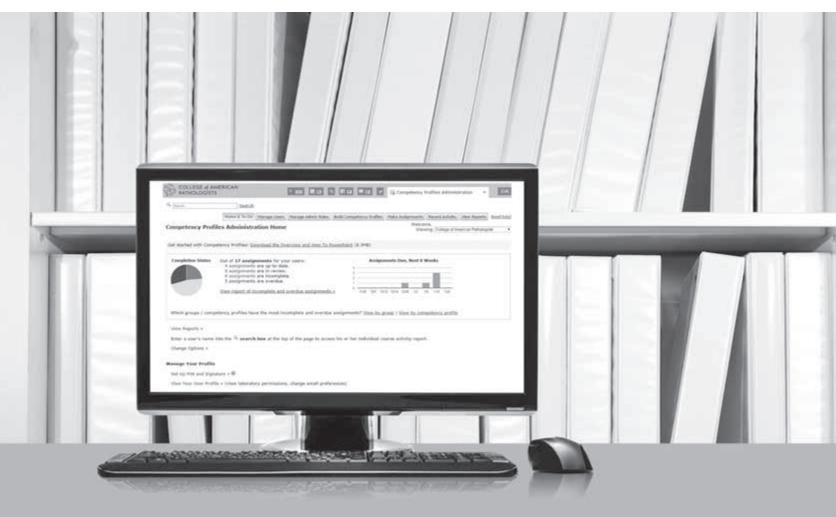
On a monthly basis, participants will record the number of true-positive, false-positive, and false-negative cytology-biopsy correlations. The false-negative correlations will be classified into four error categories: screening errors, interpretive errors, screening and interpretive errors, and adequacy 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.

# Unbind your competency assessment efforts.



Traditionally, documenting competency assessment meant shelves of three-ring binders. No more. With the Competency Assessment Program from the College of American Pathologists, all your documentation is right on your computer, instantly available at any time.

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- Customizable courses and checklists
- Online tools including assignments by team and shift, progress dashboards, and automated reminders

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

## **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 Quality Cross Check—Transfusion Medicine program (JATQ).



4





Quality Cross Check–Cardiac Markers (	CRTQ)
---------------------------------------	-------

4

## 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	I	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 BNPQAnalyteProgram CodeChallenges per ShipmentBNPQBNPQ3BNP13NT-proBNP13

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.

## **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

## Quality Cross Check—Whole Blood Glucose WBGQ

Analyte	Program Code	Challenges per Shipment
	WBGQ	
Glucose	I	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.

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



## Quality Cross Check—Body Fluid Chemistry FLDQ

Program Code	Challenges per Shipment
FLDQ	
I	3
I	3
I	1
I	1
I	3
I	3
I	3
I	3
I	3
I	3
I	3
I	3
I	1
	FLDQ

#### **Program Information**

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

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				
Hemoglobin A <sub>1c</sub>	I	3			

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.

Quality Cross Check-	—Cardiac Markers	
Analyte	Program Code	Challenges per Shipment
	CRTQ	
CK-MB, immunochemical	I	3
Myoglobin	1	3
Troponin I	I	3

This program does not meet regulatory requirements for proficiency testing; see Survey CRT on page 62. For additional information about the Quality Cross Check program, see page 40.

#### **Program Information**

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

- Three 2.0-mL liquid serum specimens
- Report up to three
  instruments
- Two shipments per year

## 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

4

## 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	I	3
Hematocrit, estimated		3
Hemoglobin, total		3
Methemoglobin		3
Oxyhemoglobin	I	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					3
Magnesium, ionized					3
pCO <sub>2</sub>					3
рН					3
pO <sub>2</sub>					3
Potassium					3
Sodium					3
tCO <sub>2</sub>					3
Creatinine					3
Glucose					3
Urea nitrogen (BUN)					3

## **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<sup>®</sup>
- AQ3Q, AQ4Q Three

   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

It is not appropriate to report hemoglobin or hematocrit by co-oximetry in this program.

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.

## Hematology and Clinical Microscopy

## Quality Cross Check—Hematology Series FH3Q, FH4Q, FH6Q, FH9Q

Analyte/Procedure	Program Code			Challenges per Shipment	
	FH3Q	FH4Q	FH6Q	FH9Q	
Hematocrit					3
Hemoglobin					3
Immature granulocyte parameter					3
Immature platelet function (IPF)%					3
Large unstained cells (LUC)					3
MCV, MCH, MCHC					3
MPV					3
Nucleated red blood cell count (nRBC)					3
Platelet count					3
RDW	I				3
Red blood cell count	I				3
WBC differential	I				3
White blood cell count					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	I			3
Coulter GenS, HmX, LH500, LH700, MAXM, STKS, Unicel DxH series				3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100L, XE-5000, XN-series, XT-2000i, XT-4000i			I	3

## These programs do not meet regulatory requirements for proficiency testing; see the RT Series on page 141. 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 138
- 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		3		
Glucose	I	3		
hCG urine, qualitative	I	3		
Ketones		3		
Leukocyte esterase	I	3		
Nitrite	I	3		
Osmolality	I	3		
рН		3		
Protein, qualitative	I	3		
Reducing substances	I	3		
Specific gravity		3		
Urobilinogen	I	3		

#### Program Information

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

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 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.

#### **Program Information**

- Three 2.0-mL simulated fecal specimens
- Report up to three
  instruments
- 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:

- What Did You REALLY Mean...How to Write a "Good" Deficiency
- Identifying Systemic Issues—Critical Role of the Inspection Team Leader
- Inspecting Method Validation/Verification Studies
- Inspecting Personnel Records
- 12 Inspector Tools to Make Your Inspection Go More Smoothly
- Proficiency Testing Referral and Communications

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

## Coagulation

Quality Cross Check	-Coagulation C	GLQ
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	2
Fibrin(ogen) degradation products, plasma	I	1
Fibrin(ogen) degradation products, serum	I	1

#### **Program Information**

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

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.

## So You're Going to Collect a Blood Specimen (PUB225)

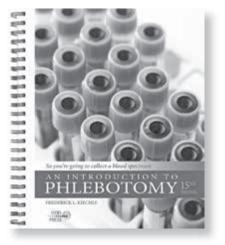
Up to 70% of laboratory errors occur prior to sample analysis and testing. Ensure everyone on your team is equipped to procure a quality blood specimen with this modern update to the classic reference guide.

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

Instrument/Cartridge	Program Code					Challenges per Shipment
	CTQ	CT1Q	CT2Q	CT3Q	CT5Q	
ITC Hemochron <sup>®</sup> 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

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.

#### **Program Information**

- 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

## Ensure your laboratory's information is up-to-date.

The CAP's online Organizational Profile tool ensures your laboratory's information is current to alleviate any issues with your proficiency testing and accreditation procedures. No more mailing forms or experiencing delays in processing—information is recorded in real time.

Log into e-LAB Solutions Suite to review and update your laboratory's information.

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Account	Man

## **Transfusion Medicine**

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

This program does not meet regulatory requirements for proficiency testing; see Survey JAT on page 221. 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

4

## 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:

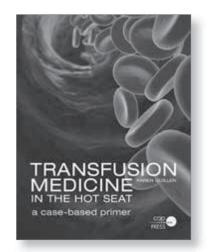
Antibodies • Blood Components • Complications

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

# 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 proficiency testing 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.

# **Point-of-Care Programs**



5

## 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		Progra	Challenges per Shipment		
	POC1	POC2	POC3	POC4	
hCG Competency					10
Glucose Competency					10
Urine Dipstick Competency					10
Strep Screen Competency					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

## Program Information

- 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<sup>®</sup> B, HemoCue 201, and Stanbio HemoPoint<sup>®</sup> 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 POC6, POC7, POC8, POC9

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

5

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## POC Competency Challenges POC10, POC11, POC12

Program Name		Challenges per Shipment		
	POC10			
Blood Gases Competency				10
Blood Gases, i-STAT® Competency		I		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<sup>®</sup> and i-STAT instruments
- Each program provides 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.

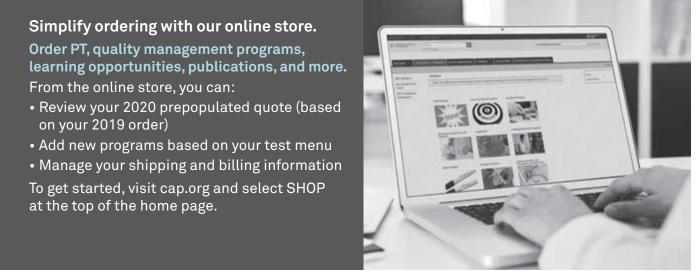


## POC Competency Challenges POC14, POC15, POC16

Program Name		Challenges per Shipment		
	POC14	POC15	POC16	
Medtronic ACT/ACT, i-STAT Competency	I			5
Hemochron Jr IL GEM PCL ACT-LR Competency		I		5
Hemochron Jr Signature IL GEM PCL ACT Competency			I	5

- POC14 Five abnormal

   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+
- Each program provides material to test up to five staff
- Shipments available upon request



# General Chemistry and Therapeutic Drug Monitoring



6

Monitor performance of cardiac marker testing across multiple instruments with Quality Cross Check—Cardiac Markers (CRTQ).

- Test multiple instruments at one time—Quality Cross Check is not PT and not subject to CMS restrictions.
- Simplify biannual instrument comparability studies receive customized reports that include peer group evaluations and instrument comparability statistics.

## General Chemistry and Therapeutic Drug Monitoring

General Chemistry and Therapeutic Drug Monitoring	56
Urine Chemistry	
Special Chemistry	71



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Quality Cross Check—Cardiac Markers (	

## **Discontinued Programs**

Sweat Analysis Series (SW3)

## **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

Analyte	Program Code					Challenges per Shipment
	C1	C3/C3X	C4	CZ/CZX/ CZ2X	z	
Alanine aminotransferase (ALT/SGPT)						5
Albumin						5
Alkaline phosphatase						5
Amylase						5
Aspartate aminotransferase (AST/SGOT)				I		5
Bilirubin, direct						5
Bilirubin, total*						5
Calcium						5
Chloride						5
Cholesterol, total						5
Cortisol						5
Creatine kinase (CK)						5
Creatinine						5
Glucose						5
HDL cholesterol						5
Human chorionic gonadotropin (hCG), quantitative						5
Iron						5
Lactate dehydrogenase (LD)						5
LDL cholesterol, measured						5
Lipoprotein (a)						5
Magnesium						5
Pancreatic amylase						5
Potassium						5
Protein, total						5
Sodium						5
Triiodothyronine (T3), free						5
Triiodothyronine (T3), total						5
T3, uptake and related tests						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 58



## General Chemistry and Therapeutic Drugs C1, C3/C3X, C4, CZ/CZX/CZ2X, Z continued

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

#### **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 58



6

## General Chemistry and Therapeutic Drugs C1, C3/C3X, C4, CZ/CZX/CZ2X, Z continued

Analyte		Program Code			Challenges per Shipment	
	C1	C3/C3X	C4	CZ/CZX/ CZ2X	z	
Ethosuximide				•		5
Gentamicin						5
Lidocaine						5
Methotrexate						5
N-acetylprocainamide (NAPA)						5
Phenobarbital						5
Phenytoin						5
Phenytoin, free						5
Primidone						5
Procainamide						5
Quinidine						5
Salicylate						5
Theophylline						5
Tobramycin						5
Valproic acid						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, below



## Quality Cross Check—Chemistry and Therapeutic Drug Monitoring CZQ

Analyte	Program Code	Challenges per Shipment
	CZQ	
See Survey CZ analytes on pages 56-58	I	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.

- 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

Harmonized Thyroid ABTH			
Analyte	Program Code	Challenges per Shipment	
	ABTH		
Triiodothyronine (T3), free	I	3	
Triiodothyronine (T3), total	I	3	
Thyroxine (T4), free	I	3	
Thyroxine (T4), total	I	3	
Thyroid-stimulating hormone (TSH)		3	

#### **Program Information**

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

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6

#### 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.

## CAP/AACC Immunosuppressive Drugs CS

Analyte	Program Code	Challenges per Shipment
	CS	
Cyclosporine	I	3
Sirolimus (rapamycin)	I	3
Tacrolimus	I	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 Dru	AFD	
Procedure	Program Code	Challenges per Shipment
	AFD	
Fluconazole	I	3
Itraconazole	I	3
Posaconazole	•	3
Voriconazole	1	3

- Three 2.0-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		3	

#### **Program Information**

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

Mycophenolic Acid MPA				
Analyte	Program Code	Challenges per Shipment		
	MPA			
Mycophenolic acid	I	3		

#### **Program Information**

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

Zonisamide

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

## **Program Information**

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

## Therapeutic Drug Monitoring—Special ZT

E.

Analyte	Program Code	Challenges per Shipment
	ZT	
Amitriptyline	I	3
Desipramine	I	3
Imipramine	I	3
Nortriptyline	I	3
Tricyclics, total (qualitative/ quantitative)	B	3

## **Program Information**

3

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

Accuracy-Based Lipids ABL			
Program Code	Challenges per Shipment		
ABL			
I	3		
I	3		
I	3		
I	3		
I	3		
I	3		
I	3		
I	3		
	Program Code		

\*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 Shipmen					
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

## Cardiac Markers CRT, CRTI, TNT, TNT5

Analyte	Program Code			Challenges per Shipment	
	CRT	CRTI	TNT	TNT5	
CK-MB, immunochemical					5
<b>CK isoenzymes</b> (CK-BB, <b>CK-MB</b> , CK-MM), electrophoretic		I			5
LD1, LD2, LD3, LD4, LD5, electrophoretic		I			5
LD1/LD2 ratio calculation and interpretation		I			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.

#### **Program Information**

- 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

Quality	<pre>Cross Check—Card</pre>	ine Markore	CDTO
guality	UIUSS UIIEUK—Ualu	iac iviai keis	

Analyte	Program Code	Challenges per Shipment
	CRTQ	
CK-MB, immunochemical	I	3
Myoglobin	I	3
Troponin I	I	3

This program does not meet regulatory requirements for proficiency testing; see Survey CRT 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 2.0-mL liquid serum specimens
- Report up to three instruments
- Two shipments per year

6

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  $\rm A_{1c}$  to complete 15 PT challenges per year.
- For second instrument reporting options, see the Quality Cross Check program, GHQ, below.

## Quality Cross Check—Hemoglobin A<sub>1c</sub> GHQ

Analyte	Program Code	Challenges per Shipment
	GHQ	
Hemoglobin A <sub>1c</sub>	I	3

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:

- 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.

Hemoglobin A <sub>1c</sub> GH5I			
Analyte Program Code Challenges per Shipmer			
	GH5I		
Hemoglobin A <sub>1c</sub>	I	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**

- 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

 Report up to three instruments

triplicate

• Two shipments per year

6

- 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	I	3			

#### **Program Information**

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

## High-Sensitivity C-Reactive Protein HSCRP

Analyte	Program Code	Challenges per Shipment
	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	I	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		2	

#### **Program Information**

- Two 2.0-mL serum specimens
- For semi-quantitative 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	I	3	
Triglycerides		3	

- Three 3.0-mL liquid serum specimens
- For use with waived methods such as the Cholestech LDX<sup>®</sup> and Roche ACCU-CHEK<sup>®</sup> 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 Shipment		
	PCARM	PCARMX	PCARI	
BNP				5
СК-МВ	I			5
D-dimer	•			2
Myoglobin				2
Troponin I				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 0.29-mL liquid plasma specimens for use with Quidel Triage Cardio 2, Cardio 3, and Troponin I panels
- Three shipments per year

Whole Blood Analyzer/Method	Analyte	Compatible Survey Programs	Page	
Hemocue®	Glucose	HCC	66	
Roche Reflotron®	Cholesterol	C1, C4	56-57	
	Glucose	01,04	56-57	
Cholestech LDX®	Total cholesterol		64	
	HDL cholesterol	LCW	64	
	Triglycerides		64	
	Glucose		64	
Whole blood cholesterol meters	Cholesterol	C1, C4, LCW	56-57,64	
Whole blood glucose meters	Glucose	HCC2, WBGQ	66, 67	
Nova StatSensor®/ StatSensor Xpress™	Creatinine	WBCR	66	

## Whole Blood Chemistry Compatibility Matrix

## Waived Combination HCC, HCC2

Analyte	Program Code		Challenges per Shipment
	HCC	HCC2	
Hematocrit		I	2
Hemoglobin	I	I	2
Urinalysis/urine hCG		I	2
Whole blood glucose	I	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		5		

- Five 4.0-mL whole blood specimens
- For use with the Nova StatSensor/StatSensor Xpress
- Three shipments per year

## Quality Cross Check—Whole Blood Glucose WBGQ

Analyte	Program Code	Challenges per Shipment
	WBGQ	
Glucose	I	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**

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



## Program Information

• Five 5.0-mL liquid serum specimens

## **Urine Chemistry**

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

Urine Chemistry—General U			
Analyte	Program Code	Challenges per Shipment	
	U		
Amylase	I	3	
Calcium	I	3	
Chloride	I	3	
Creatinine	I	3	
Glucose	I	3	
Magnesium	I	3	
Nitrogen, total	I	3	
Osmolality	I	3	
Phosphorus	I	3	
Potassium	I	3	
Protein, total	I	3	
Sodium	I	3	
Urea nitrogen	I	3	
Uric acid	I	3	
Urine albumin, quantitative	I	3	
Urine albumin:creatinine ratio	I	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	1	3
Creatinine	1	3
Protein, total	I	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 Stone R	lisk Assessment	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 Chemis	try—Special N,	NX
Analyte	Program Code	Challenges per Shipment
	N, NX	
3-methoxytyramines	I	3
5-hydroxyindoleacetic acid	I	3
17-hydroxycorticosteroids	I	3
17-ketosteroids		3
Aldosterone	I	3
Coproporphyrins	I	3
Cortisol, urinary free		3
Dopamine	I	3
Epinephrine	I	3
Homovanillic acid	I	3
Metanephrine	I	3
Norepinephrine	I	3
Normetanephrine	I	3
Uroporphyrin	I	3
Vanillylmandelic acid	I	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	I	2	

## **Program Information**

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

6

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

# 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

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

#### **Program Information**

- Six 15.0-mL urine specimens
- One mailing per year will include an additional specimen for uric acid testing

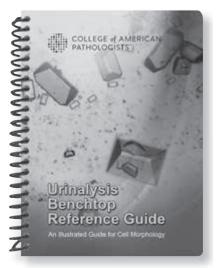
## Urinalysis Benchtop Reference Guide (UABRG)

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

6

# **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 Shipmer			
	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 Shipment
	ACE	
Angiotensin converting enzyme, quantitative	I	2

#### **Program Information**

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

# Ensure your laboratory's information is up-to-date.

The CAP's online Organizational Profile tool ensures your laboratory's information is current to alleviate any issues with your proficiency testing and accreditation procedures. No more mailing forms or experiencing delays in processing—information is recorded in real time.

Log into e-LAB Solutions Suite to review and update your laboratory's information.

	COLLEGE of AMERICAN PATHOLOGISTS
ORGA	NIZATION PROFILE
CAP # 1	234567   City Hospital   1234 Main Street
Demogr	aphics
Basic De	tails >>
	tails >> es and Phones >>
	es and Phones >>

6

Body Fluid Chemistry FLD			
Analyte	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	I	3	
Protein, total	I	3	
Triglycerides	I	3	
Urea nitrogen	I	1	

- 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.

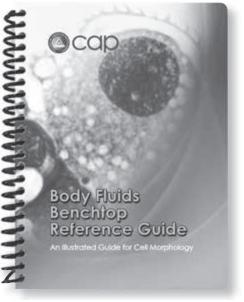
# **Body Fluids Benchtop Reference Guide (BFBRG)**

- 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
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  - Lymphoid Series
  - Myeloid Series
  - Mononuclear Phagocytic Series
  - Lining Cells
  - Miscellaneous Cells
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**Item number:** BFBRG Spiral bound; 42 pages; 36 images; 2013

# Quality Cross Check—Body Fluid Chemistry FLDQ

Program Code	Challenges per Shipment
FLDQ	
I	3
I	3
I	1
I	1
I	3
I	3
I	3
1	3
I	3
I	3
I	3
I	3
1	1
	FLDQ I I I I I I I I I I I I

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	Program Code	Challenges per Shipment	
	FLD2		
Alkaline phosphatase	I	3	
Bilirubin	I	3	
Calcium	I	3	
Chloride	I	3	
Lipase	I	3	
Potassium	I	3	
Sodium	I	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).

# General Chemistry and Therapeutic Drug Monitoring **O**

## Cerebrospinal Fluid Chemistry and Oligoclonal Bands M, OLI

Analyte	Program Code		Challenges per Shipment
	М	OLI	
Albumin, quantitative			3
Electrophoresis (albumin and gamma globulin)	I	I	3
Glucose			3
lgG, quantitative			3
Lactate			3
Lactate dehydrogenase (LD)			3
Protein, total			3
Oligoclonal bands			3

#### 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

#### **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; one educational pattern interpretation dry challenge and three educational activities to calculate CSF IgG index and synthesis rate each mailing
- Two shipments per year



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

Cystatin C CYS			
Analyte Program Code Challenges per Sh			
	CYS		
Cystatin C	I	2	

Fecal Calprotectin FCAL		
Analyte	Program Code Challenges per Shipme	
	FCAL	
Fecal calprotectin		3

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

Fecal Fat FCFS			
Analyte Program Code Challenges per Shipm			
	FCFS		
Fecal fat, qualitative	I	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

Fructosamine FT			
Analyte Program Code Challenges per Shipment			
	FT		
Fructosamine		2	

#### **Program Information**

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

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

#### **Program Information**

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

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

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

LPE, SPE, UBJP				
Analyte	Pro	Program Code		Challenges per Shipment
	LPE	SPE	UBJP	
Lipoprotein electrophoresis				2
lgA, quantitation				2
lgG, quantitation				2
IgM, quantitation				2
M-protein (Paraprotein) identification				2
Protein, total				2
Protein electrophoresis				2
Protein electrophoresis pattern interpretation				2
Urine Bence Jones protein				2

**Lipoprotein and Protein Electrophoresis** 

#### **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	I	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	I	2	

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

Procalcitonin PCT		
Analyte	Program Code	Challenges per Shipment
	PCT	
Procalcitonin	l	3

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

Pseudocholinesterase C7				
Analyte Program Code Challenges per Shipment				
C7				
Pseudocholinesterase 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	I	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		3
Cortisol		3
Estradiol		3
Follicle-stimulating hormone (FSH)		3
Luteinizing hormone (LH)	I	3
Sex hormone-binding globulin (SHBG)	I	3
Testosterone	I	3
Thyroid-stimulating hormone (TSH)	I	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	

- Three 5.0-mL liquid serum specimens
- Two 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		2	
Cobalt	I	2	
Copper	I	2	
Lead		2	
Manganese	I	2	
Mercury	I	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		
	ТМШВ			
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

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

#### **Program Information**

- SW1, SW2, SW4 Three 5.0-mL simulated liquid human sweat specimens
- Two shipments per year

For method compatibility, see chart below.

#### Sweat Analysis Series Compatibility Matrix

Method/Procedure	Program Code			Materials Included
	SW1	SW2	SW4	
Orion direct electrode	I			Precut 2-cm diameter Whatman filter papers
Wescor Macroduct <sup>™</sup> and Nanoduct <sup>®</sup> Systems		I		22-gauge blunt-tipped needles
All other methodologies			I	No additional materials provided

Viscosity V				
Analyte Program Code Challenges per Shipm				
V				
Viscosity 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	• Three 5.0-m
Cerebrospinal Fluid	MVM	Μ	74	liquid spina

#### **Program Information**

• Three 5.0-mL simulated liquid spinal fluid specimens

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6

# Endocrinology



# Be confident in the accuracy of your C-peptide and insulin testing.

- Test your results against reference method targets with the Accuracy-Based Glucose, Insulin, and C-Peptide (ABGIC) program.
- Identify instrument issues *before* they impact patient results with the C-Peptide/Insulin Calibration Verification/Linearity (LN46) program.

7

# New Analyte Additions

# 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 Code		Challenges per Shipment
	K, KK	K2	
Alpha-fetoprotein (AFP)	1		5
CEA	I.	I	3
Cortisol			5
Ferritin		•	3
Folate, serum			3
hCG, quantitative			5
Immunoglobulin E (IgE)			5
Prostate-specific antigen (PSA)	I	I	2 (K,KK)/3 (K2)
Prostate-specific antigen, complexed (cPSA)	I		2
Prostate-specific antigen, free			2
Prostatic acid phosphatase (PAP)			3
Triiodothyronine (T3), free			3
Triiodothyronine (T3), total	•		5
T3 uptake and related tests	I.		5
Thyroxine (T4), free			5
Thyroxine (T4), total			5
Thyroid-stimulating hormone (TSH)	1		5
Vitamin B <sub>12</sub>		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 and Active B <sub>12</sub> MMA				
Analyte/Procedure	Program Code	Challenges per Shipment		
	MMA			
Active vitamin B <sub>12</sub>	I	3		
Methylmalonic acid		3		

- Three 1.0-mL lyophilized 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<sup>®</sup>, 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**

- 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

7

- Three 1.5-mL liquid specimens
- Report up to three
  instruments
- Conventional and International System of Units (SI) reporting offered
- 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	I		3		
Estradiol			3		
Estriol, unconjugated (uE3)			3		
Follicle-stimulating hormone (FSH)			3		
Growth hormone (GH)			3		
IGF-1 (somatomedin C)			3		
Luteinizing hormone (LH)			3		
Progesterone			3		
Prolactin			3		
Testosterone			3		
Testosterone, bioavailable (measured)			3		
Testosterone, free (measured)			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 YY
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year



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

#### **Program Information**

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

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

- 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 Shipment
	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 Shipr					
	ABVD				
25-OH vitamin D (D2 and D3)	I	3			
Calcium NEW	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)	I	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

7

- 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

Analyte	Program Code				Challenges per Shipment		
	BMV1	BMV2	BMV3	BMV4	BMV5	BMV6	
1,25 dihydroxy vitamin D							3
Bone-specific alkaline phosphatase		B					3
Vitamin A							3
Vitamin E (alpha tocopherol, gamma tocopherol)				B			3
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

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		

#### **Program Information**

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

#### **Program Information**

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

#### Additional Information

- Target values are based upon the isotope-dilution gas chromatography-mass spectrometry reference measurement procedure for glucose performed by the CDC Reference Laboratory, Division of Laboratory Sciences, Centers for Disease Control and Prevention (Atlanta, GA).
- Target values for C-peptide are established by isotope-dilution mass spectrometry, performed at the University of Missouri, Diabetes Diagnostic Laboratory.

7

# 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.

# 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)	I	5
Estriol, unconjugated (uE3)	I	5
Human chorionic gonadotropin (hCG), quantitative	I	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.

#### **Program Information**

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

#### 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

## First Trimester Maternal Screening FP1T, FP1B

Analyte	Progra	m Code	Challenges per Shipment
	FP1T FP1B		
Total hCG			5
Free beta hCG			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.

#### **Program Information**

800-323-4040 | 847-832-7000 Option 1 | cap.org

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

7

Noninvasive Prenatal Testing NIF	T
----------------------------------	---

Analyte	Program Code	Challenges per Shipment
	NIPT	
Cell-free DNA screening for fetal aneuploidy	I	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.

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

#### Program Information

- Three maternal plasma samples
- Two shipments per year

#### **Program Information**

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



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

#### **Program Information**

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

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

- 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 Shipn				
	RAP			
Aldosterone	I	3		
Renin		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 Shipn				
	TM, TMX				
Adrenocorticotropic hormone (ACTH)	I	3			
Beta-2 microglobulin	I	3			
CA 15-3	I	3			
CA 19-9	I	3			
CA 27.29	I	3			
CA 72-4	I	3			
CA 125	I	3			
Calcitonin	I	3			
Thyroglobulin		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 Shipme					
HUEP					
Human epididymis protein 4	I	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.

## Program Information

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

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

Validated Material	Program Code	Corresponding Survey	Page
Ligand—General	KVM	К	82
Ligand—Special	YVM	Y	84

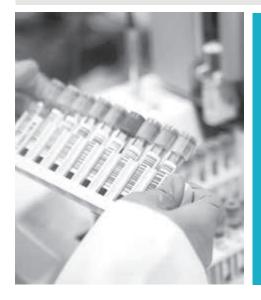
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- Inspecting Method Validation/Verification Studies
- Inspecting Personnel Records
- 12 Inspector Tools to Make Your Inspection Go More Smoothly
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# Blood Gas, Critical Care, and Oximetry



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- Gain confidence in your results by comparing performance against the largest peer groups.

8

# 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		Progra	m Code		Challenges per Shipment
	AQ	AQ2	AQ3	AQ4	
Calcium, ionized				1	2
Chloride				I	5
Hematocrit				I	5
Hemoglobin, estimated					5
Lactate					2
Magnesium, ionized					2
pCO <sub>2</sub>					5
рН				I	5
pO <sub>2</sub>				I	5
Potassium					5
Sodium					5
tCO <sub>2</sub>				I	5
Creatinine					5
Glucose				I	5
Urea nitrogen (BUN)		I		I	5

#### **Program Information**

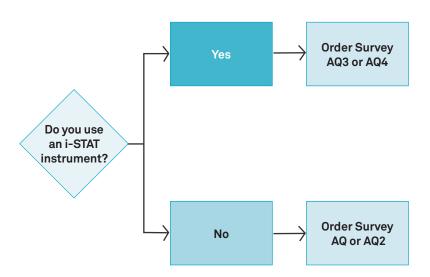
- AQ, AQ2 Five 2.5-mL aqueous specimens in duplicate and five 2.5-mL specimens for hematocrit testing in duplicate; appropriate for all methods except i-STAT<sup>®</sup>
- AQ3, AQ4 Five 2.5-mL specimens in duplicate for i-STAT methods only
- Conventional and International System of Units (SI) reporting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



 Urea nitrogen (BUN)
 I
 I
 5

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

It is not appropriate to report hemoglobin and hematocrit results by co-oximetry in this Survey.



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

- 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<sup>®</sup>
- 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

It is not appropriate to report hemoglobin or hematocrit by co-oximetry in this program.

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.

8

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

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

#### 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.

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

#### **Program Information**

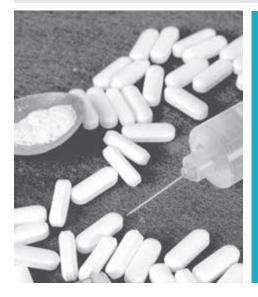
- Three 1.2-mL liquid specimens in triplicate
- Report up to three
  instruments
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

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.

# Toxicology



# Toxicology testing is changing at a rapid pace—so is our proficiency testing.

Introducing new programs for forensic toxicology and toxicology laboratories that perform:

- Qualitative and/or quantitative analysis of synthetic opioids and benzodiazepines in whole blood (NOB)
- Qualitative and/or quantitative analysis of cannabinoids in whole blood (THCB)

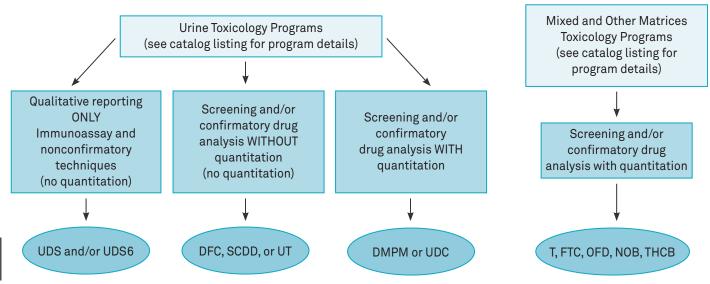
# New Analyte/Drug Additions

96
100

# 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.



9

Toxicology T		
Analyte	Challenges per Shipment	
	т	
See drug listing on next page	I	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



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

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

## T and UT Programs Drug Listing

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

6-acetylmorphine (6-AM) 7-aminoclonazepam 7-aminoflunitrazepam Acetaminophen Alpha-hydroxyalprazolam Alprazolam Amitriptyline Amphetamine Amphetamine group Aripiprazole Atenolol Atropine Barbiturate group Benzodiazepine group Benzoylecgonine Brompheniramine **Buprenorphine** Bupropion **Butalbital** Cannabinoids Carbamazepine Carbamazepine-10, 11-epoxide Carisoprodol Chlordiazepoxide Chlorpheniramine Citalopram Clomipramine Clonazepam Clozapine Cocaethylene Cocaine Codeine Cotinine Cyclobenzaprine

Delta-9-THC (serum only) Delta-9-THC-COOH Demoxepam **NEW** Desipramine Desmethylclomipramine Desmethylcyclobenzaprine\* Desmethylsertraline Dextromethorphan Diazepam Dihydrocodeine Diltiazem Diphenhydramine Doxepin Doxylamine Duloxetine Ecgonine ethyl ester Ecgonine methyl ester Ephedrine Fentanyl Flunitrazepam Fluoxetine Gabapentin Hydrocodone Hydromorphone Hydroxybupropion Hydroxyzine Ibuprofen Imipramine Ketamine Lamotrigine Levetiracetam Lidocaine Lorazepam Lysergic acid diethylamide (LSD) Meperidine

Mephedrone Meprobamate Methadone Methadone metabolite (EDDP) Methamphetamine Methylenedioxyamphetamine (MDA) Methylenedioxymethamphetamine (MDMA) Methylenedioxypyrovalerone (MDPV) Methylphenidate Metoprolol Mirtazapine Morphine N-desmethyltramadol Naproxen Nicotine Norbuprenorphine Norchlordiazepoxide Norclomipramine Norcodeine Norcyclobenzaprine\* Nordiazepam Nordoxepin Norfentanyl Norfluoxetine Norketamine Normeperidine Noroxycodone Norpropoxyphene Norsertraline Nortrimipramine Nortriptyline Norverapamil

O-desmethyltramadol Olanzapine Opiate group Oxazepam Oxycodone Oxymorphone Paroxetine Pentobarbital Phencyclidine Phenethylamine Pheniramine Phenobarbital Phentermine Phenylephrine Phenytoin Pregabalin Propoxyphene Propranolol Pseudoephedrine Quetiapine Quinidine Quinine Ranitidine Salicylates Sertraline Strychnine Temazepam Topiramate Tramadol Trazodone Tricyclic group Trimipramine Valproic acid Venlafaxine Verapamil Zolpidem

\*Same compound

9

## CAP/AACC Urine Drug Testing, Screening UDS, UDS6

Analyte	Progra	m Code
	Challenges per Shipment	
	UDS	UDS6 Limited
Acetaminophen	5	3
Amphetamine	5	3
Amphetamine/methamphetamine group	5	3
Barbiturate group	5	3
Benzodiazepine group	5	3
Benzoylecgonine/cocaine metabolites	5	3
Buprenorphine and metabolites	5	3
Delta-9-THC-COOH	5	3
Ethanol	5	3
Fentanyl	5	3
Lysergic acid diethylamide (LSD)	5	3
Meprobamate/Carisoprodol NEW	5	3
Methadone	5	3
Methadone metabolite (EDDP)	5	3
Methamphetamine	5	3
Methaqualone	5	3
Methylenedioxymethamphetamine (MDMA)	5	3
Opiate group	5	3
Oxycodone	5	3
Phencyclidine	5	3
Propoxyphene	5	3
Tramadol NEW	5	3
Tricyclic group	5	3

#### **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 Challenges per Analyte **Program Code** Shipment DAI 3 Creatinine 3 Glutaraldehyde 3 Nitrite Oxidants 3 3 pН 3 Specific gravity

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

# CAP/AACC Forensic Urine Drug Testing, Confirmatory UDC

Commi		
Analyte	Program Code	Challenges per Shipment
	UDC	
6-acetylmorphine (6-AM)	I	10
Alpha-hydroxyalprazolam	E E	10
Amphetamine	I	10
Benzoylecgonine	I	10
Buprenorphine	I	10
Butalbital		10
Codeine	I	10
Delta-9-THC-COOH	I	10
Fentanyl NEW	I	10
Hydrocodone	I	10
Hydromorphone	I	10
Lorazepam		10
Methadone		10
Methadone metabolite (EDDP)	I	10
Methamphetamine		10
Methaqualone	l	10
Methylenedioxyamphetamine (MDA)	l	10
Methylenedioxyethylamphetamine (MDEA)	I	10
Methylenedioxymethamphetamine (MDMA)	I	10
Morphine		10
Norbuprenorphine	l	10
Nordiazepam	l	10
Norfentanyl NEW	l	10
Norpropoxyphene	l	10
Oxazepam		10
Oxycodone	l	10
Oxymorphone		10
Phencyclidine	l	10
Phenobarbital	l	10
Propoxyphene	l	10
Secobarbital		10
Temazepam	I	10
Adulterant/Integrity Indicator	1	1
Creatinine		10
pH	l	10
Specific gravity		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	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)	I	5
Methylenedioxymethamphetamine (MDMA)	I	5
Benzodiazepine Group	I	5
Alprazolam	I	5
Diazepam	I	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	I	5
Cocaine	I	5
Cannabinoids	I	5
Delta-9-THC	I	5
Delta-9-THC-COOH	I	5
Fentanyl and/or metabolite NEW	I	5
Fentanyl NEW	I	5
Norfentanyl NEW	I	5
Methadone		5
Opiate Group	I	5
6-acetylmorphine (6-AM)	I	5
Codeine		5
Hydrocodone	I	5
Hydromorphone	I	5
Morphine		5
Oxycodone		5
Oxymorphone	I	5
Phencyclidine (PCP)		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	I.	3	
Glucose	I.	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	I	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	I.	5
Isopropanol, quantitative	I		5
Methanol, quantitative	I		5

\*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	Program Code Challenges per Shipme		
	ETB		
Ethyl glucuronide (EtG), qualitative and quantitative	I	3	
Ethyl sulfate (EtS), quantitative	I	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



#### **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

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

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

Nicotine and Tobacco Alkaloids NTA			
Analyte Program Code Challenges per Shipr			
NTA			
Anabasine	I	3	
Cotinine	I	3	
Nicotine	I	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		2
Cobalt	I	2
Copper	I	2
Lead		2
Manganese		2
Mercury		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
	ТМШВ	
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) 7-aminoclonazepam 7-aminoflunitrazepam Acetaminophen Alpha-hydroxyalprazolam Alprazolam Amitriptyline Amphetamine Benzoylecgonine Brompheniramine Butalbital Carisoprodol Chlorpheniramine Clonazepam Cocaethylene Cocaine Codeine Cyclobenzaprine\* Delta-9-THC Delta-9-THC-COOH Desipramine Desmethylcyclobenzaprine Dextromethorphan Diazepam Diphenhydramine Doxepin Ecgonine ethyl ester

Ecgonine methyl ester Ephedrine Fentanyl\* Fluoxetine Flurazepam\* Gamma-hydroxybutyrate (GHB) Hydrocodone Hydromorphone Imipramine Ketamine Lorazepam Lysergic acid diethylamide (LSD) Meperidine\* Meprobamate Methadone Methadone metabolite (EDDP) Methamphetamine Methylenedioxyamphetamine (MDA) Methylenedioxymethamphetamine (MDMA) Morphine\* N-desmethyltramadol Nordiazepam Nordoxepin Norfentanyl Norfluoxetine

Norketamine

Norpropoxyphene Norsertraline Nortriptyline O-desmethyltramadol NEW Oxazepam Oxycodone Oxymorphone Paroxetine Pentobarbital NEW Phencyclidine Phenethylamine Phenobarbital Phentermine Phenytoin Propoxyphene Pseudoephedrine Salicylate Secobarbital Sertraline Temazepam Tramadol Trazodone Zolpidem

\*and/or metabolite(s)

Synthetic Cannabinoid/Designer Drugs SCDD		
Analyte	Program Code	Challenges per Shipment

	SCDD	
Synthetic cannabinoid/designer drugs	I	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 10.0-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. Under the Laboratory Improvement tab, click on Catalog and Ordering Information. The list is located under the PT Order Supplements header.

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

#### **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



# NOB Program Drug Listing

Challenges will include a mix of drugs.

For the most current list of drugs, 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.

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

- 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		AFD
Analyte	Program Code	Challenges per Shipment
	AFD	
Fluconazole	I	3
Itraconazole	I	3
Posaconazole	I	3
Voriconazole	I	3

#### **Program Information**

- Three 2.0-mL serum specimens
- For laboratories performing quantitative analysis of antifungal agents
- Two shipments per year

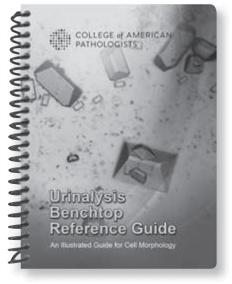
# Urinalysis Benchtop Reference Guide (UABRG)

- Thirty-four different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- Eight tabbed sections for easy reference
  - Urinary Cells
  - Urinary Casts
  - Urinary Crystals
    - At Acid pH
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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	l	3

#### Program Information

- 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



Toxicology

# DMPM Program Drug Listing

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

Amphetamine group 6-acetylmorphine (6-AM) 7-aminoclonazepam Alpha-hydroxyalprazolam Alprazolam Amphetamine Barbiturate group Benzodiazepine group Benzoylecgonine Buprenorphine Buprenorphine and/or metabolites **Butalbital** Cannabinoids Carisoprodol Carisoprodol and/or metabolites Clonazepam Cocaine Cocaine and/or metabolites Codeine Delta-9-THC-COOH Diazepam

Fentanyl Fentanyl and/or metabolites Gabapentin Hydrocodone Hydromorphone *I*-Amphetamine I-Methamphetamine Lorazepam Lorazepam glucuronide Meperidine Meperidine and/or metabolites Meprobamate Methadone Methadone metabolite (EDDP) Methamphetamine Methylenedioxyamphetamine (MDA) Methylenedioxymethamphetamine (MDMA) Morphine N-desmethyltramadol Norbuprenorphine

Nordiazepam Norhydrocodone **NEW** Norfentanyl Normeperidine Noroxycodone Noroxymorphone Norpropoxyphene O-desmethyltramadol Opiate group Oxazepam Oxycodone Oxymorphone Phenobarbital Pregabalin Propoxyphene Propoxyphene and/or metabolites **Tapentadol** Tapentadol-O-sulfate Temazepam Tramadol Tramadol and/or metabolites

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

#### Program Information

- 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



Norvenlafaxine NEW
O-desmethyltramadol NEW
Oxazepam
Oxycodone
Oxymorphone
Paroxetine
Pentobarbital
Phencyclidine (PCP)
Phenobarbital
Phenytoin
Propoxyphene
Quetiapine NEW
Scopolamine
Secobarbital
Sertraline
Tapentadol NEW
Temazepam
Tetrahydrozoline
Topiramate NEW
Tramadol
Trazodone metabolite (m-CPP) <b>NEW</b>
Valproic Acid
Zaleplon
Ziprasidone
Zolpidem
Zopiclone/Eszopiclone

# **DFC Program Drug Listing**

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

Fluoxetine

4-hydroxytriazolam 7-aminoclonazepam 7-aminoflunitazepam Alpha-hydroxyalprazolam Amitriptyline Amobarbital Amphetamine Benzoylecgonine Bromazepam NEW Brompheniramine **Butalbital** Carisoprodol Chlorpheniramine Citalopram/escitalopram Clobazam **NEW** Clonidine Codeine Cyclobenzaprine Delta-9-THC-COOH Desipramine Dextromethorphan Diphenhydramine Doxepin Doxylamine Estazolam NEW Fentanyl

Gabapentin **NEW** Gamma hydroxybutyrate (GHB) Hydrocodone Hydromorphone Hydroxyzine **NEW** Imipramine Ketamine Lorazepam Meperidine Meprobamate Methadone Methadone metabolite (EDDP) Methamphetamine Methylenedioxyamphetamine (MDA) Methylenedioxymethamphetamine (MDMA) Midazolam **NEW** Morphine Norbuprenorphine **NEW** Nordoxepin Norfluoxetine Norketamine Normeperidine Norpropoxyphene Norsertraline Nortriptyline

#### 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.

## Toxicology, Validated Material

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

#### **Program Information**

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

# Clinical Toxicology Testing: A Guide for Laboratory Professionals, Second Edition (PUB227)

This book is a practical guide, written for pathologists, to directing hospital toxicology laboratory operations. This new edition features expanded sections on testing in the clinical setting, methodologies, and more user-friendly information on specific analytes. It provides the reader with a comprehensive view of what is needed—and expected—when offering a clinical toxicology service.

#### Contents include:

- Toxicology testing in the clinical setting, including new chapters on pediatric testing and chronic opioid therapy
- Toxicokinetics and methodologies, with new and expanded information on laboratory-developed tests, screening assays, targeted tests, and oral fluids and alternative matrices
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Item number: PUB227 Softcover; 2019

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#### **CARA focuses on:**

- Facilitating an in-depth understanding of CAP requirements as they apply to your laboratory
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- Delivering on-site education when you're ready for it

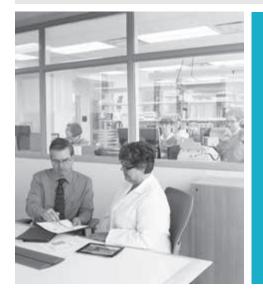
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"The Readiness Assessment [CARA] helped our lab immediately spot potential problems before our inspection. Our CAP inspection went like clockwork."

- Laboratory Director

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# **10** Accuracy-Based Programs



# Gain more value from your accreditation program.

CAP accreditation is more than "something to check off your list." It is an opportunity to help keep your laboratory operating at peak performance.

- The CAP offers educational material and support, including highly-trained medical technologists who are available to answer questions.
- The peer inspection model helps participants develop meaningful connections, learn from each other, and share best practices.

# Accuracy-Based Programs

Accuracy-Based Programs	2
Validated Materials116	3

# New Analyte Additions

Accuracy-Based Vitamin D (ABVD)	
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# **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*	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

#### **Program Information**

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

\*This analyte will be evaluated against the reference method.

# Accuracy-Based Vitamin D ABVDAnalyteProgram CodeChallenges per ShipmentABVDABVD325-OH vitamin D (D2 and D3)33Calcium NEW33

- 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

# Accuracy-Based Testosterone, Estradiol ABS

Analyte	Program Code	Challenges per Shipment
	ABS	
Albumin	I	3
Cortisol		3
Estradiol	I	3
Follicle-stimulating hormone (FSH)	I	3
Luteinizing hormone (LH)		3
Sex hormone-binding globulin (SHBG)	I	3
Testosterone	I	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.

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.

#### **Program Information**

- 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	I	0.6-4.0 mg/dL
Estimated glomerular filtration rate (eGFR)	I	

View your expedited linearity evaluations within two business days by logging into

#### 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	
Triiodothyronine (T3), free	I	3
Triiodothyronine (T3), total	I	3
Thyroxine (T4), free		3
Thyroxine (T4), total	1	3
Thyroid-stimulating hormone (TSH)	l	3

#### **Program Information**

**Program Information** 

specimens

Six 1.0-mL human serum

Two shipments per year

- Three 1.0-mL frozen human serum 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.

# Hemoglobin A<sub>1c</sub> Accuracy Calibration Verification/Linearity LN15

Analyte	Program Code	
	LN15	LN15 Target Range
Hemoglobin A <sub>1c</sub>	I	5%-12%

CAP-assigned target values derived from Hemoglobin  $A_{1c}$  measurements assayed by National Glycohemoglobin Standardization Program (NGSP) secondary reference laboratories.

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

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

**Program Information** 

per year

per year

 GH2 - Three 0.8-mL liquid human whole blood specimens; two shipments

• GH5 - Five 0.8-mL liquid human whole blood

specimens; three shipments

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  $\rm A_{1c}$  to complete 15 PT challenges per year.
- For second instrument reporting options, see the Quality Cross Check program, GHQ, on page 63.

## Accuracy-Based Glucose, Insulin, and C-Peptide ABGIC

Analyte	Program Code	Challenges per Shipment
	ABGIC	
C-peptide	I	3
Glucose	I	3
Insulin		3

#### **Program Information**

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

#### Additional Information

- Target values are based upon the isotope-dilution gas chromatography-mass spectrometry reference measurement procedure for glucose performed by the CDC Reference Laboratory, Division of Laboratory Sciences, Centers for Disease Control and Prevention (Atlanta, GA).
- Target values for C-peptide are established by isotope-dilution mass spectrometry, performed at the University of Missouri, Diabetes Diagnostic Laboratory.

10

# 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 instrument calibration by using peer group data for a broader view beyond your laboratory.
- **Customized report package**—Let our team of biostatisticians perform the statistical analysis of your results so you do not have to.
- **Expedited results**—View your linearity evaluation for most CVL programs within two business days of data submission.

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

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

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

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

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

# **1** Instrumentation Verification Tools



# Access your expedited linearity results.

- Expedited linearity evaluations are complimentary and available for most Calibration Verification/ Linearity programs.
- You can view your linearity evaluations within two business days by logging into e-LAB Solutions Suite.

# Instrumentation Verification Tools

Calibration Verification/Linearity	
Instrumentation Quality Management Programs132	

# **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
  - Calibration Verification Evaluation
  - Linearity Evaluation
    - Rapid result turnaround is complimentary for most CVL programs. View your linearity evaluations within two business days of submission 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 into 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

Your Total Calibration Verification/Linearity (CVL) Solution				
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	208	
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		200	
LN12E - C-Reactive Protein, Extended CVL	124	CRP	208	
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	141	
LN20 - Urine Albumin CVL	126	U	68	
LN21 - High-Sensitivity C-Reactive Protein CVL	126	HSCRP	64	
LN22 - Flow Cytometry CVL	126	FL	215	
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	128	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	129	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	130	VLS, VLS2	199	
LN39 - HIV Viral Load CVL	130	HIVG, HV2	199	
LN40 - Vitamin D CVL	130	VITD	84	
LN41 - Procalcitonin CVL	130	PCT	77	
LN42 - D-Dimer CVL	131	CGL, CGDF	160	
LN43 - Lamellar Body Count CVL	131	LBC	151	
LN44 - Fibrinogen CVL	131	CGL	160	
LN45 - HCV Viral Load CVL	130	HCV2	198	
LN46 - C-Peptide/Insulin CVL	131	ING	86	

All CVL Surveys provide individual evaluation reports by analytes, an executive summary, and graphical plots for linearity and calibration verification.

# Chemistry, Lipid, Enzyme Calibration Verification/Linearity LN2, LN2BV

			····,		
Analyte	Program Code	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>			7–42		mmol/L
Creatinine			0.8-34.0		mg/dL
Glucose			20-750		mg/dL
Iron			10-950		µg/dL
Magnesium			0.3-9.0		mg/dL
Osmolality			200-600		mOsm/kg H <sub>2</sub> O
Phosphorus			0.5-22.0		mg/dL
Potassium			1.5–13.0		mmol/L
Protein			1.5-12.0		g/dL
Sodium			65–195		mmol/L
Urea nitrogen/Urea			5–170		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
HDL		7–120			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

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

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.

# Therapeutic Drug Monitoring Calibration Verification/Linearity LN3

outbration vermeation/Emeancy			
Program Code			
LN3	LN3 Target Ranges		
•	20–450 μg/mL		
•	2–45 μg/mL		
1	2–18 μg/mL		
1	0.5–4.4 ng/mL		
1	1–11 μg/mL		
1	1–10 μg/mL		
1	0.3–4.0 mmol/L		
1	2–25 μg/mL		
1	8–70 μg/mL		
1	5–35 μg/mL		
1	1–22 μg/mL		
1	2–18 μg/mL		
1	0.4–7.0 μg/mL		
1	7–90 mg/dL		
I	5–35 μg/mL		
I	1–12 μg/mL		
I	15–140 μg/mL		
1	7–90 μg/mL		
	Program Code           LN3           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I           I		

#### **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

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

# Ligand Calibration Verification/Linearity LN5, LN5S

0			
Analyte	Program Code	Target Ranges	
	LN5, LN5S*	LN5 Target Ranges	LN5S Target Ranges
AFP		1.0-900	.0 ng/mL
CEA		0.5–750.0 ng/mL	0.6-90.0 ng/mL
Cortisol	I	1-65 μg/dL	
Ferritin		2–1,100 ng/mL	
Folate		1.3–20 ng/mL	
Human chorionic gonadotropin (hCG)	I	5–14,000 mIU/mL	
Triidothyronine (T3), total		0.5–7.0 ng/mL	
Thyroxine (T4), total		1–80 µg/dL	
Continued on the next page			

#### **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

**1** Instrumentation Verification Tools

values than the ranges listed.

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

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

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

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **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

#### **Program Information**

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

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

Urine Chemistry Calibration Verification/Linearity LN6

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

11

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.

# Immunology Calibration Verification/Linearity

LIN /			
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	
lgG	I	150-3,000 mg/dL	
IgM	I	25-450 mg/dL	
Transferrin	I	38-950 mg/dL	

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

## 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	I	3–315 ng/mL
Testosterone	I	20–1,500 ng/dL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

# Hematology Calibration Verification/Linearity

Analyte	Program Code	
	LN9	LN9 Target Ranges
Hemoglobin	I	1.0-22.5 g/dL
Platelet count	I	10-4,200 x 10 <sup>9</sup> /L
RBC count	I	0.3-7.5 x 10 <sup>12</sup> /L
WBC count	I	0.5-350.0 x 10 <sup>9</sup> /L

# View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

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.

#### **Program Information**

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

#### **Program Information**

**Program Information** 

specimens

• Twenty 3.0-mL liquid

· Two shipments per year

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

# Serum Ethanol Calibration Verification/Linearity LN11

Analyte	Program Code	
	LN11	LN11 Target Range
Serum ethanol		15–550 mg/dL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

## 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		6–320 mg/L

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

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

#### Program Information

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

#### **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

#### **Program Information**

- LN13, LN13C Ten 2.5mL ampules of aqueous specimens
- Two shipments per year

	Blood G	Gas/Critical C	Care	
Calibration Verification/Linearity LN13, LN13C				
Analyte	Program Code		Program Code	
	1 N12	LN13	1.1120	LN13C

	LN13	LN13 Target Ranges	LN13C	LN13C Target Ranges
pCO <sub>2</sub>	I	12–91 mm Hg		12–91 mm Hg
рН	I	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			

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.

	Blood Gas/Critical Care Calibration					
Verification/Linearity LN13, LN13C continued						
		Program			Program	

Analyte	Code		Code	
	LN13	LN13 Target Ranges	LN13C	LN13C Target Ranges
Potassium				0.5–10.7 mmol/L
Sodium				83–172 mmol/L

#### **Program Information**

- LN13, LN13C Ten 2.5mL 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>	I	5%-12%

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

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

# Homocysteine Calibration Verification/Linearity LN16

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

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

Whole Blood Glucose Calibration Verification/Linearity LN17

Analyte	Program Code	
	LN17	LN17 Target Range
Whole blood glucose		50-400 mg/dL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

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

#### **Program Information**

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

#### **Program Information**

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

11

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.

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			I	0.3%-27.0%	
All other instruments		0.3%-24.0%			

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

# Urine Albumin Calibration Verification/LinearityLN20AnalyteProgram CodeLN20LN20 Target RangesUrine albuminI10-350 mg/LUrine creatinineI20-500 mg/dL

#### **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

#### **Program Information**

- 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 Range
High-sensitivity C-reactive protein	I	0.5–18.0 mg/L

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### Flow Cytometry Calibration Verification/Linearity LN22 Analyte **Program Code** LN22 **LN22 Target Ranges** CD3+ 50%-70% positive CD3+T lymphocytes absolute 350-4,000 cells/µL CD3+/CD4+ 1%-40% positive CD3+/CD4+ T lymphocytes absolute 6-2,000 cells/µL CD3+/CD8+ 25%-40% positive

#### **Program Information**

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

#### **Program Information**

- Seven 1.0-mL liquid whole blood 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.

250-1,600 cells/µL

CD3+/CD8+ T lymphocytes absolute

# Prostate-Specific Antigen Calibration Verification/Linearity LN23

Analyte	Program Code	
	LN23	LN23 Target Range
Prostate-specific antigen		0.1–90.0 ng/mL

#### **Program Information**

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

# Creatinine Accuracy Calibration Verification/Linearity LN24 Analyte Program Code LN24 LN24 Target Range Creatinine I Estimated glomerular filtration rate (eGFR) I

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### 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	I	0.05-60.00 ng/mL		
Troponin T				0.1–27.00 ng/mL

For LN27, view your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **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

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.

# B-Type Natriuretic Peptides Calibration Verification/Linearity LN30

Analyte	Program Code	
	LN30	LN30 Target Ranges
BNP	I	30-6,500 pg/mL
NT-proBNP	I	50-50,000 pg/mL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

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

## Program Information

- Seven 2.0-mL liquid whole blood hemolysate specimens
- Two shipments per year

# Immunosuppressive Drugs Calibration Verification/Linearity LN31

Analyte	Program Code	
	LN31	LN31 Target Ranges
Cyclosporine	I	60–1,200 ng/mL
Tacrolimus	I	1.5-30.0 ng/mL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

Analyte

Myoglobin

# Ammonia Calibration Verification/Linearity LN32

Analyte	Program Code	
	LN32	LN32 Target Range
Ammonia	I	13–900 μmol/L

Serum Myoglobin Calibration Verification/Linearity

**LN33** 

**Program Code** 

LN33

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

- Seven 2.0-mL aqueous specimens
- Two shipments per year

#### Program Information

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

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

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.

LN33 Target Range

25-900 ng/mL

# Tumor Markers Calibration Verification/Linearity LN34

Analyte	Program Code	
	LN34	LN34 Target Ranges
CA 125	I	1–1,000 U/mL
CA 15-3	I	2–190 U/mL
CA 19-9	I	10-900 U/mL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### Coagulation Calibration Verification/Linearity LN35, LN36, LN37

Analyte	Program Code		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.

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### Program Information

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

#### **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

11

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.

## Viral Load Calibration Verification/Linearity LN38, LN39, LN45

Analyte	Program Code		de	
	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

\*The biohazard warning applies to Survey LN38.

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **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	LN40 Target Range
25-OH vitamin D, total	I	4–140 ng/mL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

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

11

Procalcitonin Calibration	
Verification/Linearity LN41	

Analyte	Program Code	
	LN41	LN41 Target Range
Procalcitonin	I	0.3–190 ng/mL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

- Six 1.0-mL frozen serum specimens
- Two shipments per year; ships on dry ice

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.

D-Dimer Calibration Verification/Linearity LN42			
Analyte	Program Code		
LN42		LN42 Target Range	
D-dimer	I	220-5,500 ng/mL FEU	

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

## Lamellar Body Count Calibration Verification/Linearity LN43

Analyte	Program Code		
	LN43	LN43 Target Range	
Lamellar body count	I	5–200 particles x 10 <sup>9</sup> /L	

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

- Six 1.0-mL plasma specimens
- Two shipments per year

#### **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

#### **Program Information**

- Six 1.0-mL frozen plasma specimens
- Two shipments per year; ships on dry ice

Instrumentation Verification Tools

# Fibrinogen Calibration Verification/Linearity LN44

Analyte	Program Code			
	LN44	LN44 Target Range		
Fibrinogen	I	80-900 mg/dL		

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

## C-Peptide/Insulin Calibration Verification/Linearity LN46

Analyte	Program Code	
	LN46	LN46 Target Ranges
C-Peptide	I	0.1-35.0 ng/mL
Insulin		0.8–800 μIU/mL

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **Program Information**

- Seven 2.0-mL frozen serum 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.

# Instrumentation Quality Management Programs

Instrumentation I				
Challenges	Program Code			
		I		
	A Shipment	B Shipment	C Shipment	
Adjustable micropipette calibration verification/linearity	I		I	
Analytical balance check				
Gravimetric pipette calibration				
Microtiter plate linearity				
Refractometer calibration				
Spectrophotometer (stray light check)				
Absorbance check – UV wavelength		I		
Fluorescent intensity check – fluorescent microscopes				
Ocular micrometer calibration		I		
Osmometer study		I		
Peak absorbance measurement		I		
pH meter check		I		
Photometric calibration – visible wavelength		I		

#### **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

WARNING: The Instrumentation (I) Survey specimens may contain corrosive or toxic substances, environmental hazards, or irritants.

Interfering Substance IFS				
Analyte	Program Code			
	IFS			
	Bilirubin Interferent	Hemoglobin Interferent	Lipid Interferent	
Alanine aminotransferase (ALT/SGPT)	I	I	I	
Albumin	I		I	
Alkaline phosphatase	I		I	
Amylase	I		I	
Aspartate aminotransferase (AST/SGOT)	I	I	I	
Calcium	I		I	
Chloride	I	I	I	
CK2 (MB) mass				
Creatine kinase (CK)				
Creatinine			I	
Gamma glutamyl transferase (GGT)				
Glucose	I		I	
Iron	I		I	
Lactate dehydrogenase (LD)				
Lipase				
Magnesium	I	I		
Osmolality	I	I		
Phosphorus	I	I	I	
Potassium	I	I	I	
Protein, total	I	I		
Sodium	I	I		
Urea nitrogen (BUN)	I	I		
Uric acid	I		I	
he material expires December 1, 2020	<u>.</u>	1		

#### **Program Information**

- 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

The material expires December 1, 2020.

Serum Carryover SCO			
Analyte	Program Code		
	SCO		
Creatinine			
hCG			
Lactate dehydrogenase (LD)			
Phenytoin			

#### **Program Information**

- One 10.0-mL liquid serum specimen (low level) and one 5.0-mL liquid serum specimen (high level)
- Designed to screen for instrument sample probe carryover
- One shipment per year

Urine Toxicology Carryover UTCO		
Analyte	Program Code	
	UTCO	
Benzoylecgonine	I	
Delta-9-THC-COOH	I	
Opiates	I	
Amphetamine		

#### **Program Information**

- Two 40.0-mL urine specimens (low and high levels)
- Designed to screen for instrument sample probe carryover
- One shipment per year

# Color Atlas of Hematology, Second Edition (PUB222)

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Item number: PUB222 Hardcover; 480 pages; 2019

# **12** Hematology and Clinical Microscopy



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

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- 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.

# Hematology and Clinical Microscopy

136 Iematology	j
Clinical Microscopy	,

# **Discontinued Programs**

Hematology Automated Differential (FH14, FH14P)

# 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	Progra	am Code	Challenges per Shipment
	HE	HEP	
Blood cell identification		I	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		Challenges per Shipment	
	FH1- FH10	FH1P- FH10P	FH13	FH13P	
Blood cell identification					10
Hematocrit				I	5
Hemoglobin					5
Immature granulocyte parameter (IG)	I				5 (FH9 only)
Immature platelet fraction (IPF)/ Reticulated platelet (RP)	I				5 (FH9 only)
Large unstained cell (LUC)					5 (FH4 only)
MCV, MCH, and MCHC					5
MPV					5
Nucleated red blood cell count (nRBC)	I			I	5 (FH3, FH9, and FH13)
Platelet count					5
RDW				I	5
Red blood cell count					5
White blood cell count					5
WBC differential					5

#### **Program Information**

- 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 138
- Three shipments per year



For second instrument reporting options, see the Quality Cross Check programs, FH3Q, FH4Q, FH6Q, and FH9Q, on page 137.

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					

#### Program Information

- Five 0.6-mL whole blood specimens
- For use with QBC instruments; not intended for spun hematocrit methods
- Three shipments per year

# Quality Cross Check—Hematology Series FH3Q, FH4Q, FH6Q, FH9Q

Analyte/Procedure		Progra	Challenges per Shipment		
	FH3Q	FH4Q	FH6Q	FH9Q	
Hematocrit		I			3
Hemoglobin		I			3
Immature granulocyte parameter					3
Immature platelet function (IPF)%					3
Large unstained cells (LUC)					3
MCV, MCH, MCHC					3
MPV					3
Nucleated red blood cell count (nRBC)					3
Platelet count					3
RDW					3
Red blood cell count					3
WBC differential	I				3
White blood cell count					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.

#### 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 138
- Two shipments per year

#### Hematology Automated Differential Series, Instrument Matrix

Instrument				I	FH and F	HQ Series	6			
	FH1	FH2	FH3/ FH3Q	FH4/ FH4Q	FH6	FH6Q	FH9/ FH9Q	FH10	FH13	FH15
Abbott Cell-Dyn® 1200, 1400, 1600, 1700, Emerald™										
Horiba ABX 9000+, 9018+, 9020+										
Sysmex K-series, KCP-1, KX-21/21N, pocH-100i, XP-series										
CDS/Medonic M-series			_							
Coulter® AcT™, MD 2/8/10/16, ONYX™, S880, S-plus V, ST, STKR, T-series		B								
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, 3500, 3700, 4000, Ruby™, Sapphire™			I							
Biosystems SA (HA3/HA5)										
Cell-DYN Emerald 22/AL										
Coulter DxH 500 series										
Drew Scientific Excell 22, 2280										
Orphee Mythic 18, 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)							I			
Coulter AcT 5 diff (AL, CP, OV)										
DIRUI BF series										
Horiba ABX Pentra 60, 80, 120										
Coulter LH750, LH755, LH780, LH785, Unicel DxH series (except DxH500)										
QBC										

# Blood Cell Identification, Photographs BCP, BCP2

Procedure	Progra	m Code	Challenges per Shipment
	BCP	BCP2	
Blood cell identification		I	5
Educational challenge(s)		I	5 (BCP)/1 (BCP2)

#### Program Information

- 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 Shipn						
	BP					
Thin/thick blood film sets*		5				

\*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 BMDProcedureProgram CodeChallenges per ShipmentBone marrow differentialBMD1Bone marrow cell identification15

#### 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.

#### **Program Information**

- One online bone marrow aspirate whole slide image that includes five annotated cells for identification
- Powered by DigitalScope<sup>®</sup> 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			e	Challenges per Shipment
	ESR	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

#### **Program Information**

- 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 St							
	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<sup>®</sup> technology
- Two shipments per year

#### Hemoglobinopathy HG Procedure **Program Code Challenges per Shipment** HG Hemoglobin identification and 4 quantification "Dry lab" educational challenges 2 Hemoglobin A<sub>2</sub> quantitation 4 1 Hemoglobin F quantitation 4 Sickling test, qualitative I.

#### **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	I	5

#### **Program Information**

- 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	F	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	I				3
Abbott Cell-Dyn 3200, 3500, 3700, Ruby					3
Coulter GenS, HmX, LH500, LH700 series, MAXM, STKS, Unicel DxH series			I		3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-series, XT-2000i, XT-4000i				I	3
Pierceable caps					3

#### Program Information

- 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
- 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, MAXM, STKS, Unicel DxH series				3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100L, XE-5000, XN-series, XT-2000i, XT-4000i			I	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.

#### **Program Information**

- 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

Program	Reticulocyte count, percent	Absolute reticulocyte count	Immature Reticulocyte Fraction (IRF)	Reticulocyte Hemoglobin Concentration (CHr)	Reticulocyte Hemoglobin (RET-He)
RT/RTQ	I	I	I	I	
RT2	I	I			
RT3/RT3Q	I	I	I		
RT4/RT4Q	I	I.	I		

#### Reticulocyte, Matrix

Sickle Cell Screening SCS			
Procedure	Program Code	Challenges per Shipment	
	SCS		
Sickling test, qualitative	I	3	

#### **Program Information**

- Three 1.0-mL stabilized human erythrocyte specimens
- Two shipments per year

# Transfusion-Related Cell Count TRC

Procedure	Program Code	Challenges per Shipment
	TRC	
Platelet count (platelet-rich plasma)	I	5
WBC count	I	4
Dry challenge		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

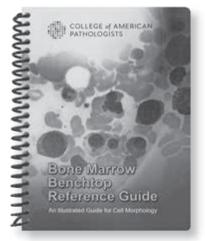
# Bone Marrow Benchtop Reference Guide (BMBRG)

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.

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**Item number:** BMBRG Spiral bound; 2018

### Waived Combination HCC, HCC2

Analyte	Program Code		Challenges per Shipment
	HCC HCC2		
Hematocrit			2
Hemoglobin			2
Urinalysis/Urine hCG			2
Whole blood glucose			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 page 66

Virtual Periphera	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 <u>via email</u> when the activity is available



12

### Expanded Virtual Peripheral Blood Smear EHE1

Procedure	Program Code	Challenges per Shipment
	EHE1	
WBC differential	I	2
Platelet estimate	I	2
RBC morphology	I	2
WBC morphology	I	2
Blood cell identification	I	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 identify red blood cell (RBC) morphology and identify specific white blood cells (WBC) in peripheral blood.
- See system requirements on page 13.

### **Program Information**

- 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 <u>via email</u> when the activity is available

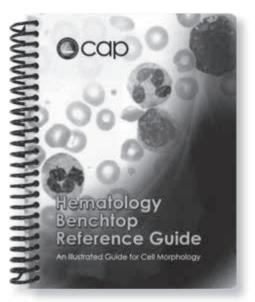
### Hematology Benchtop Reference Guide (HBRG)

- 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
  - $\circ~$  Granulocytic (Myeloid) and Monocytic Cells
  - Lymphocytic Cells
  - Platelets and Megakaryocytic Cells
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**Item number:** HBRG Spiral bound; 60 pages; 50+ images; 2012

144 College of American Pathologists

Hematopathology Online Education HPATH/HPATH1						
Program Program Code Challenges per Shipme						
	HPATH/HPATH1					
Hematopathology online case review	<b>∎</b> 5					

### Additional Information

HPATH educates pathologists, hematolopathologists, and hematologists with an interest in hematopathology to assess and improve their diagnostic skills in hematopathology.

- 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.

### **Program Information**

- 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<sup>™</sup>) 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 <u>via email</u> 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	m Code	Challenges per Shipment
	СМР	CMP1	
Bilirubin			3
Blood or hemoglobin			3
Body fluid photographs			3
Glucose			3
hCG urine, qualitative			3
Ketones			3
Leukocyte esterase			3
Nitrite			3
Osmolality			3
рН			3
Protein, qualitative			3
Reducing substances			3
Specific gravity			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 for urinalysis; 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.

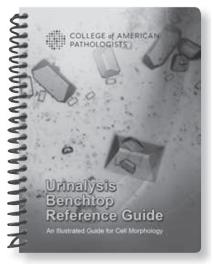
## Urinalysis Benchtop Reference Guide (UABRG)

- Thirty-four different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- Eight tabbed sections for easy reference
- A durable and water-resistant format to withstand years of benchtop use—5" x 6½"

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

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	I	3		
Urobilinogen		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 Shipment
	СММР	
Fern test (vaginal)	I	1
KOH preparation (skin)	I	1
Nasal smear	I	1
Pinworm preparation	I	1
Spermatozoa	I	1
Stool for leukocytes	I	1
Urine sediment photographs	I	3
Vaginal wet preparation photographs (for clue cells, epithelial cells, trichomonas, or yeast)	I	1

### **Program Information**

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

### **Program Information**

- Ten images, each available as photographs and online images
- · Two shipments per year

12

Amniotic Fluid Leakage AFL					
Procedure Program Code Challenges per Shipmen					
AFL					
pH interpretation	3				

- Three 2.0-mL liquid specimens
- For use with nitrazine paper and the Amniotest™

Two 3.0-mL simulated body

• Two shipments per year

**Program Information** 

fluid specimens

Two shipments per year

### Automated Body Fluid Series ABF1, ABF2, ABF3

Procedure	Program Code			Challenges per Shipment
	ABF1	ABF1 ABF2 ABF3		
Red blood cell fluid count				2
White blood cell fluid count	I			2

For method compatibility, see instrument matrix below.

### Automated Body Fluid, Instrument Matrix

Instrument	ABF Series		
	ABF1	ABF2	ABF3
Advanced Instruments GloCyte, Siemens ADVIA 120/2120 series	I		
Coulter LH 700 series, Unicel DxH series		I	
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-series, XN-L series, XT-1800i, XT-2000i, XT-4000i		B	
IRIS iQ <sup>®</sup> 200			

Virtual Body Fluid VBF					
Procedure Program Code Challenges per Shipme					
VBF					
Total nucleated cells differential	I	2			
Body fluid cell identification		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.

### **Program Information**

- 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 <u>via email</u> when the activity is available

12

Automated Urine Microscopy UAA, UAA1				
Analyte	Progra	m Code	Challenges per Shipment	
	UAA	UAA1		
Casts, semiquantitative	I		2	
Crystals, semiquantitative	I		2	
Epithelial cells, semiquantitative			2	
Red blood cells, quantitative	I		2	
White blood cells, quantitative	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 Urine Microscopy, Instrument Matrix

Instrument	UAA, UAA1	
	UAA	UAA1
DIRUI FUS	Х	
IRIS Iq200	Х	
Roche cobas u701	Х	
ARKRAY Auction Hybrid		Х
77 Elektronika		Х
Siemens Atellica UA5800		Х
Sysmex UF 50, 100, 500i, 1000i, 5000		Х
Sysmex UX 2000		Х

Crystals BCR, BFC, URC				
Procedure	Pr	ogram Co	de	Challenges per Shipment
	BCR	BFC	URC	
Bile crystal identification				2
Body fluid crystal identification				2
Urine crystal identification				2

Dipstick Confirmatory

Analyte

### **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

### **Program Information**

- Two 12.0-mL liquid urine specimens
- For use with methods to confirm positive bilirubin and protein dipstick results
- Two shipments per year

	DSC		• Fo
Bilirubin	I	2	cc
Sulfosalicylic acid (SSA)	I	2	pr
			• Tv

**Program Code** 

DSC

**Challenges per Shipment** 

Fecal Fat FCFS		
Analyte	Program Code	Challenges per Shipment
	FCFS	
Fecal fat, qualitative	l	2

- 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 He	emoglobin APT	
Analyte	Program Code	Challenges per Shipment
	APT	
Fetal hemoglobin (gastric fluid)	I	2

### **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	I	3

### **Program Information**

- Three 2.0-mL simulated gastric specimens
- Two shipments per year

Glucose-6-Phospha	se G6PDS	
yte	Program Code	Challenges per Shi

Analyte	Program Code	Challenges per Shipment
	G6PDS	
G6PD, qualitative and quantitative	I	2

### Program Information

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

Hemocytometer Fluid Count HFC		
Procedure	Program Code	Challenges per Shipment
	HFC	
Cytopreparation differential	I	3
Red blood cell fluid count	I	3
White blood cell fluid count	I	3

### **Program Information**

- Three 1.0-mL simulated body fluid specimens
- Two shipments per year

### Hemocytometer Fluid Count, International HFCI

Procedure	Program Code	Challenges per Shipment
	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 Information**

- 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	I	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		
Program Code	Challenges per Shipment	
OCB		
I	3	
	Program Code	

### Additional Information

For second instrument reporting options, see the Quality Cross Check program, OCBQ, on page 152.

### **Program Information**

- Three 2.0-mL simulated fecal specimens
- Two shipments per year

12

Quality Cross Check—Occult Blood OCBQ				
Analyte	Program Code Challenges per Shi			
	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.

Placental Alpha Microglobulin 1 (PAMG-1) ROM1					
Procedure	Program Code Challenges per Shipm				
	ROM1				
Placental Alpha Microglobulin 1 (PAMG-1)	I	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, Clinical Innovations, and PartoSure
- Two shipments per year

Special Clinical Microscopy SCM1, SCM2					
Analyte/Procedure	Program Code Challenges per Shipme				
	SCM1	SCM2			
Urine hemosiderin, Prussian blue	I		3		
Urine eosinophils, Wright stain			3		

### **Program Information**

- 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	I	3				

Urine hCG UHCG						
Procedure	ure Program Code Challenges per Shipme					
	UHCG					
Urine hCG, qualitative	I	5				

### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

### **Program Information**

- Five 1.0-mL urine specimens
- Three shipments per year

12

### Urine Albumin and Creatinine, Semiquant UMC

Analyte/Procedure	Program Code	Challenges per Shipment
	UMC	
Creatinine	I	2
Urine albumin (microalbumin): creatinine ratio	I	2
Urine albumin (microalbumin), semiquantitative	I	2

### Program Information

- Two 3.0-mL liquid urine specimens
- For use with dipstick and semiquantitative methods only
- Two shipments per year

For quantitative reporting, refer to Survey U, page 68.

Worm Identification WID						
Procedure	Program Code Challenges per Shipmen					
	WID					
Worm identification	I	3				

### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

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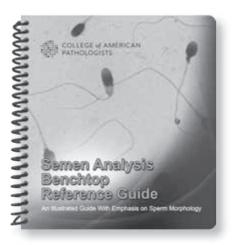


### Semen Analysis Benchtop Reference Guide (SABRG)

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.

## Add Semen Analysis Benchtop Reference Guide (SABRG) to your order.

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- ebooks at ebooks.cap.org



Item number: SABRG Spiral bound; 6½" x 7"; 2018

## **13** Reproductive Medicine



New PV1 program is designed for laboratories using automated analyzers for postvasectomy sperm count.

- Employs the same stabilized sperm specimens as the Postvasectomy for Manual Methods (PV) program, but with an increased volume.
- Allows you to test PV1 specimens using automated analyzers in the same mode used for patient samples, eliminating the need to run PT in manual mode.

### **Reproductive Medicine**

Andrology and Embryology
--------------------------

### 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 ( odo					Challenges per Shipment	
	SC	SC1	PV	PV1	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								2
Postvasectomy sperm count and presence/absence (automated methods)								2
Sperm morphology								2
Sperm viability								2
Antisperm antibody IgG								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



### **Program Information**

- SMCD Online video clips of sperm available for hemocytometer, Makler, and disposable chambers
- SM1CD, SM2CD Two online challenges that may be viewed as whole slide images by DigitalScope<sup>®</sup> technology or as static images
- Two online activites per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



# **Reproductive Medicine**

### Sperm Motility, Morphology, and Viability SMCD, SM1CD, SM2CD

Procedure		Program Code			
	SMCD	SM1CD	SM2CD		
Sperm count				2	
Sperm motility/forward progression	I			2	
Sperm morphology				2	
Sperm viability				2	

Embryology EMB					
rocedure Program Code Challenges per S					
	EMB				
Embryo transfer and quality assessment (three- and five-day-old embryos)	I	4			

- Two online sets of five video clips
- Two online activites per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available

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)			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 YY
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year



Antimüllerian Hormone AMH							
Analyte	Program Code Challenges per Shipmer						
	АМН						
Antimüllerian hormone		3					

### Program Information

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

## Go ahead. Double check.



### Rely on these Benchtop Reference Guides in your laboratory.

### Hematology

Bone Marrow Benchtop Reference Guide (BMBRG)

Hematology Benchtop Reference Guide (HBRG)

Urinalysis Benchtop Reference Guide (UABRG)

Body Fluids Benchtop Reference Guide (BFBRG)

### Microbiology

Mycology Benchtop Reference Guide (MBRG)

Parasitology Benchtop Reference Guide (PBRG)

Arthropod Benchtop Reference Guide (ABRG)

Gram Stain Benchtop Reference Guide (GSBRG)

### **Reproductive Medicine**

Semen Analysis Benchtop Reference Guide (SABRG)

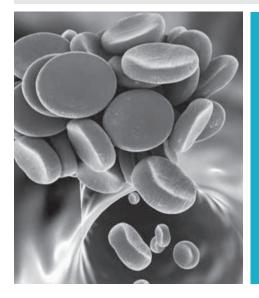
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## **14** Coagulation



## 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).

### **Program Changes**

Coagulation—Limited (CGL, CGDF) Additional analyte	160
Viscoelastometry (TEG) is now Viscoelastic Studies (VES)	166
Coagulation—Limited, Validated Material (CGM) Additional analyte	

### **Discontinued Programs**

Coagulation Special Testing Series (CGS6, CGS8)

### 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	Program Code Challenges pe Shipment					
	CGB	CGL	CGDF			
Activated partial thromboplastin time				5		
Fibrinogen				5		
International normalized ratio (INR)*				5		
Prothrombin time				5		
D-dimer				2		
Fibrin(ogen) degradation products, plasma				1		
Fibrin(ogen) degradation products, serum				1		

\*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.

### **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; two 1.0-mL plasma specimens and one 1.0-mL serum specimen; three shipments per year
- CGDF One 1.0-mL serum specimen; two 1.0-mL lyophilized plasma specimens; three shipments per year



### 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	2
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 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 lyophilized plasma specimens in triplicate, two 1.0-mL plasma specimens, and one 2.0-mL serum specimen
- Report up to three
  instruments
- Two shipments per year

### Coagulation—Extended CGE, CGEX

Analyte	Program Code	Challenges per Shipment
	CGE, CGEX	
See analyte listing below		2

### **Program Information**

- CGE Two 1.0-mL lyophilized plasma specimens (three vials each)
- 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

## Coagulation

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## Coagulation Special Testing Series CGS1, CGS2, CGS3, CGS4, CGS5, CGS7

Module/Analyte	Challenges per Shipment					
		Program Code				
	CGS1	CGS2	CGS3	CGS4	CGS5	CGS7
Activated partial thromboplastin time*	2		2	3		
International normalized ratio (INR)	2			3		
Prothrombin time*	2			3		
Lupus Anticoagulant and Mixing St	udies Mo	odule				
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	ule	1	1		I	
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 Thrombocytopeni	ia Modul	е				
Appropriate with methods such as Gen-Probe Lifecodes PF4 IgG and Gen-Probe Lifecodes PF4 Enhanced® assays					2	
ADAMTS13 Module						
ADAMTS13 (activity, inhibitor screen, titer, and anti ADAMTS13 IgG)						3

\*Not appropriate for meeting regulatory requirements, see page 160.

### **Program Information**

- 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
- CGS7 Three 1.0-mL lyophilized plasma specimens in duplicate
- Two shipments per year

### Apixaban, Dabigatran, Fondaparinux, Rivaroxaban Anticoagulant Monitoring APXBN, DBGN, FNPX, RVBN

### Program Information

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

Analyte		Challenges per Shipment			
	APXBN	DBGN	FNPX	RVBN	
Activated partial thromboplastin time*		I			3
Prothrombin time*					3
Thrombin time					3
Apixaban					3
Dabigatran					3
Fondaparinux					3
Rivaroxaban					3

\*Not appropriate for meeting regulatory requirements, see page 160.

Activated Clotting Time Series
CT, CT1, CT2, CT3, CT5

Instrument/Cartridge	Program Code				Challenges per Shipment	
	СТ	CT1	CT2	СТЗ	CT5	
ITC Hemochron <sup>®</sup> 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 <sup>®</sup> Celite <sup>®</sup> 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

- 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.

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

Instrument/Cartridge	Program Code				Challenges per Shipment	
	CTQ	CT1Q	CT2Q	CT3Q	CT5Q	
ITC Hemochron <sup>®</sup> 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

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.

### **Program Information**

- 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	I		2				
Helena Plateletworks®			2				

\*This Survey requires the draw of a normal donor sample.

### **Program Information**

- 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

Viscoelastic Studies VES						
Instrument	Program Code Challenges per Shipment					
	VES					
TEG <sup>®</sup> 5000, TEG6s, ROTEM <sup>®</sup>	I	2				

### **Program Information**

- Two 1.0-mL lyophilized whole blood specimens with diluents
- Two shipments per year

### **Coagulation Calibration Verification/Linearity** LN35, LN36, LN37

Analyte	Pr	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.

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

## Coagulation

14

### **D-Dimer Calibration** Verification/Linearity LN42

Analyte	Program Code	
	LN42	LN42 Target Range
D-dimer	I	220-5,500 ng/mL FEU

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

### **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

### **Program Information**

- Six 1.0-mL plasma specimens
- Two shipments per year

Fibrinogen Calibration Verification/Linearity LN44				
Analyte	Program Code			
	LN44	LN 44 Target Range		
Fibrinogen		80–900 mg/dL		

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

### Drug-Specific Platelet Aggregation PIA, PIAX

Procedure	Progra	m Code	Challenges per Shipment
	PIA	PIAX	
Aspirin assay			3
PRU test			3

### Program Information

- Six 1.0-mL frozen plasma specimens
- Two shipments per year; ships on dry ice

### **Program Information**

- PIA Three lyophilized specimens with diluents
- PIAX All Survey PIA specimens in duplicate
- For use with the Accumetrics VerifyNow<sup>®</sup> System
- Kit includes sufficient material to perform one assay; multiple assay reporting requires the purchase of PIAX
- Two shipments per year

Coagulatior

### World-class recognition deserves to be displayed.



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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.

### Whole Blood Coagulation WP3, WP4, WP6, WP9, WP10

Challenges per Shipment				
Program Code				
WP3 WP4 WP6 WP9				
5	5	5	5	3
5	5	5	5	_
	5	P WP3 WP4 5 5	WP3         WP4         WP6           5         5         5	WP3         WP4         WP6         WP9           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

Instrument	Program Code				
	WP3	WP4	WP6	WP9	WP10
Abbott CoaguSense™					
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					
Siemens Xprecia Stride					

### Whole Blood Coagulation, Instrument Matrix

Platelet	Mapping* PLTM						
Analyte Program Code Challenges per							
	PLTM						
AA % aggregation/inhibition	I	2					
ADP % aggregation/inhibition		2					

\*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, two 1.0-mL lyophilized plasma specimens, and one 1.0-mL serum specimen; three shipments per year

Coagulatior

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Mycology Benchtop Reference Guide (MBRG)

Parasitology Benchtop Reference Guide (PBRG)

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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 for *Mycoplasma genitalium* (MGEN)
- Molecular testing for herpes simplex virus and varicella zoster virus, 5 challenges (ID5)
- Molecular testing for lower respiratory pneumonia panel, 5 challenges (IDPN)

### **Microbiology**

Microbiology Bacteriology	
Mycobacteriology	
Mycology	
Parasitology	192
Virology	
Multidiscipline Microbiology	
Infectious Disease Serology	

### New Programs NEW



Routine Microbiology Combination (RMC)1	76
Mycoplasma genitalium, Molecular (MGEN)1	85
HSV, VZV—Molecular (ID5)	98
nfectious Disease, Pneumonia Panel (IDPN)2	203

### **Discontinued Programs**

Bacteriology—Limited (D4) GC, Throat, and Urine Cultures (D7) Microbiology—Combination w/GC (MC1, MC2) Throat & Urine Culture/Rapid Strep A Antigen Detection (MC5) 15

### 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 microbiology. 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	VES	¥YES	¥ YES
Select from the following: • HC6, HC6X,HC7 <i>Chlamydia</i> /GC Nucleic Acid Amplification (page 186)	Select from the following: • IDO, ID1, ID1T, ID2, ID5, IDN Nucleic Acid Amplification (pages 197, 198, 201) • D1 Throat Culture (page 175) • MRS2M/MRS5M MRSA Screen, Molecular (page 182) • BOR Bordetella pertussis/ parapertussis (page 180) • CDF5 C. difficile Detection (page 181) • MGEN Mycoplasma genitalium (page 185) • TVAG Trichomonas vaginalis (page 186) • 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) • IDPN Infectious Disease Pneumonia Panel (page 203) • IDR Infectious Disease Respiratory Panel (page 202) • GIP, GIP5 Gastrointestinal Panel (page 204) • GNBC, GPBC Blood Culture Panels (page 179) • MVP Molecular Vaginal Panel (page 185)

### 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	D2	RMC	D3	MC4	D1
Bacterial identification						
Gram stain						
Antimicrobial susceptibility testing						
Bacterial antigen detection						

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	I	1 graded, 1 ungraded		
Bacterial antigen detection	I	2		
Bacterial identification	I	5		
Gram stain	I	1		

### Additional Information

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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

\*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 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



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Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

Expanded Bacteriology DEX				
Analyte	Program Code	Challenges per Shipment		
	DEX			
Live organisms	I	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

### Microbiology Bench Tools Competency MBT

Procedure	Program Code	Challenges per Shipment
	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**

- Two swab specimens in duplicate with diluents to perform bacterial identification and susceptibility (when directed)
- Three shipments per year



### **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



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Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

### GC, Throat, and Urine Cultures D1, D2, D3

Procedure	Program Code			Challenges per Shipment
	D1	D2	D3	
Antimicrobial susceptibility testing		I		1
Bacterial identification	I	I	I	5
Gram stain			I	1
Culture source:	Throat	Urine	Cervical	
Microbiologic level:	Presence or absence of Group A Streptococcus determination	Organisms identified to the extent of your laboratory's protocol	Presence or absence of Neisseria gonorrhoeae determination	

### **Program Information**

- 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
- Throat swabs compatible with molecular- and culture-based methods
- Three shipments per year



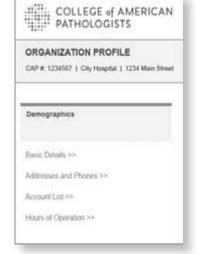
Microbiology

### Ensure your laboratory's information is up-to-date.

The CAP's online Organizational Profile tool ensures your laboratory's information is current to alleviate any issues with your proficiency testing and accreditation procedures. No more mailing forms or experiencing delays in processing—information is recorded in real time.

### Log into e-LAB Solutions Suite to review and update your laboratory's information.

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Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

### Routine Microbiology Combination RMC

Procedure	Program Code	Challenges per Shipment
	RMC	
Antimicrobial susceptibility testing	I	1
GC culture	I	2
Gram stain	I	2
Group A Streptococcus antigen detection*	I	1
Throat culture	I	3
Urine culture	I	3

\*If your laboratory uses a waived method for Group A Streptococcus, these results will not count toward the required five challenges for the subspecialty of bacteriology.

Urine Colony Count MC3, MC4

### **Program Information**

- Five loop specimens with diluents in duplicate, three 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 culturebased methods
- Three shipments per year



### **Program Information**

- MC3 Two urine specimens with diluents
- MC4 Five 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



### **Program Information**

- · Five air-dried, methanolfixed unstained glass slides
- · Three shipments per year



**Challenges per Shipment** 

**Program Code** 

MC4

MC3

Group A Streptococcus antigen detection*		3
Throat culture		3
oward the required five challenges for the subspec	ialty of bacteriology.	

Procedure

Gram Stain	D5	
Procedure	Program Code	Challenges per Shipment
	D5	
Gram stain		5

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### Virtual Gram Stain Competency VGS1, VGS2

Procedure	Program Code		Challenges per Shipment
	VGS1	VGS2	
Virtual gram stain basic			3
Virtual gram stain advanced			3

### Additional Information

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- 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.

### Rapid Group A Strep Antigen Detection D6

Procedure	Program Code	Challenges per Shipment
	D6	
Group A Streptococcus antigen detection*	I	5

\*If your laboratory uses a waived method for Group A *Streptococcus*, these results will not count toward the required five challenges for the subspecialty of bacteriology.

### Program Information

- Three online, whole slide images
- Results included in the kit to assess personnel competency
- Powered by DigitalScope<sup>®</sup> technology
- Two shipments per year

### **Program Information**

- Five swab specimens
- Not compatible with molecular- and culturebased methods
- Three shipments per year



### Program Information

- Two swab specimens
- Not compatible with molecular- and culturebased methods
- Two shipments per year

## Rapid Group A Strep Antigen Detection, Waived D9 Procedure Program Code Challenges per Shipm

Procedure	Program Code	Challenges per Shipment
	D9	
Group A Streptococcus antigen detection	I	2

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	I		2	
Streptococcus pneumoniae antigen detection		I	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 Shipment	
	BSTS		
Staphylococcus	I	2	

### **Program Information**

- Two sets of loops with diluents
- Two shipments per year



### Program Information

- Two specimens with diluents for inoculation of blood culture bottles
- Two shipments per year



Blood Culture BCS		
Procedure	Program Code	Challenges per Shipment
	BCS	
Blood culture bacterial detection and identification	B	2

🐼 ) Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

## Blood Culture, Staphylococcus aureus BCS1

Analyte	Program Code	Challenges per Shipment
	BCS1	
Staphylococcus aureus/MRSA		3

#### Program Information

- 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	GNB	C, GPB	C
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		B	3

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 1.0-mL liquid simulated blood culture fluid specimens
- For laboratories using molecular multiplex panels
- Two shipments per year

#### **Program Information**

- Three specimens with diluents for inoculation of blood culture bottles
- Two shipments per year



Bordetella pertussis/parapertussis,				
Molecu	ular	BOR		
	-	<b>•</b> •	ol 11	

Analyte	Program Code	Challenges per Shipment
	BOR	
Bordetella pertussis	I	3
Bordetella parapertussis	I	3

- Three swab specimens
- Designed for molecular techniques
- Two shipments per year

### Carbapenem-resistant Organisms CRO

Analyte	Program Code	Challenges per Shipment
	CRO	
КРС	I	3
IMP	I	3
NDM	I	3
OXA-48	I	3
VIM	I	3

#### **Program Information**

- Three 130-µL specimens
- Compatible with Cepheid GeneXpert
- Two shipments per year

Campylobacter CAMP			
Analyte Program Code Challenges per Shipment			
	CAMP		
Campylobacter	I	2	

#### **Program Information**

- Two swabs with diluents in duplicate
- For use with rapid antigen, culture-based testing, and molecular methods
- Two shipments per year



## 15

C. difficile, 2 Challenge CDF2			
Analyte Program Code Challenges per Shipmen			
	CDF2		
Clostridium difficile antigen/toxin	I	2	

#### **Program Information**

- Two 0.5-mL lyophilized specimens, for use with rapid or molecular testing methods
- Two shipments per year

BIOHAZARD

C. difficile, 5 Challenge CDF5				
Analyte Program Code Challenges per Shipment				
CDF5				
Clostridium difficile antigen/toxin	<b>I</b> 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.

## C. trachomatis Antigen Detection HC1, HC3

Procedure	Program Code		Challenges per Shipment
	HC1	HC3	
C. trachomatis antigen detection (DFA)			5
C. trachomatis antigen detection (EIA)			5

#### **Program Information**

- Five 0.5-mL lyophilized specimens, for use with rapid or molecular testing methods
- Three shipments per year

#### **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	I	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 Shipment
	HPS	
Helicobacter pylori antigen detection	I	2

Ð

#### Program Information

- Two 0.5-mL fecal suspensions
- Two shipments per year



## Methicillin-resistant Staphylococcus aureus Screen, 2 Challenge MRS

Procedure	Program Code	Challenges per Shipment
	MRS	
MRSA/MSSA detection		2

#### **Program Information**

- 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 2

#### **Program Information**

- Two swab specimens (in duplicate)
- For use with molecular methods that detect mecA
- Two shipments per year

## Methicillin-resistant Staphylococcus aureus Screen, 5 Challenge MRS5

Procedure	Program Code	Challenges per Shipment
	MRS5	
MRSA/MSSA detection	I	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



# Microbiology

15

MRSA Screen, Molecular, 5 Challenge MRS5M				
Procedure Program Code Challenges per Shipme				
	MRS5M			
MRSA/MSSA/SA detection	I.	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	Program Code Challenges per Shipmen			
	LPX				
Live organisms		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.

#### **Program Information**

- · Three swab specimens with diluents
- Not available to international customers due to United States export law restrictions
- Two shipments per year



Rapid Urease RUR					
Analyte Program Code Challenges per Shipmen					
RUR					
Urease	I	3			

#### **Program Information**

- Three simulated gastric biopsy specimens
- For use with methods such as CLOTEST®
- Two shipments per year

#### Help pathologists stay current with rapidly changing issues in clinical pathology.

The Clinical Pathology Improvement Program (CPIP) provides peer-reviewed, interactive, casebased learning activities that cover a diverse portfolio of real-life clinical scenarios. Every month, you receive a new online module with images and clinical details that unfold as you solve the case in real time. Earn CME/SAM credits upon successful completion of the posttest.

#### Add CPIP/CPIP1 to your Surveys order.

Ø



Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

15

Analyte

Shiga toxin

Stool Pathogen SP, SPN, SP1				
Analyte	Pr	Program Code Challenges per Shipme		
	SP	SPN	SP1	
Adenovirus 40/41				2
C. difficile antigen/toxin				2
Rotavirus				2
Shiga toxin				2
Norovirus				1

Shiga Toxin ST

**Program Code** 

ST

Challenges per Shipment

2

#### **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

Program li	nformation
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- 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 Shipment			
	BV			
Bacterial vaginosis detection	I	3		

- Three 1.0-mL liquid specimens
- For OSOM<sup>®</sup> BVBlue users
- Two shipments per year

Vaginitis Screen VS, VS1				
Analyte	Program Code Challenges per Shipment			
	VS*	VS1**		
Candida sp.			5	
Gardnerella vaginalis			5	
Trichomonas vaginalis			5	

\*The biohazard warning applies to Survey VS.

Mycoplasma genitalium, M

Analyte

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Mycoplasma genitalium

\*\*Molecular users are encouraged to use Trichomonas vaginalis, Molecular (TVAG) on page 186.

#### **Program Information**

 VS - Five swabs for DNA probe technology; BD Affirm<sup>™</sup> 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

Molecular	MGEN	<ul><li>Program Information</li><li>Three 1.0-mL liquid</li></ul>
Program Code	Challenges per Shipment	specimens
0	0 1 1	specifiens

3

NFW

	specimens
•	Designed for molecular

- Designed for molecular techniques
- Two shipments per year

Molecular Vaginal Panel MVP				
Analyte Program Code Challenges per Shipm				
	MVP			
Candida species group	I	5		
Candida krusei	I	5		
Candida glabrata	I	5		
Trichomonas vaginalis	I	5		
Bacterial vaginosis	I	5		

MGEN

#### Program Information

- Five 1.0-mL liquid simulated vaginal specimens
- Designed for molecular methods such as BD MAX and Hologic
- 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

\*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 <u>via email</u> when the activity is available

## Trichomonas vaginalis, Molecular TVAG

Analyte	Program Code	Challenges per Shipment
	TVAG	
Trichomonas vaginalis	I	3

#### **Program Information**

- Three 1.0-mL liquid specimens
- Designed for molecular techniques
- Two shipments per year

Vancomycin-resistant Enterococcus VF	RE
--------------------------------------	----

Procedure	Program Code	Challenges per Shipment
	VRE	
Vancomycin-resistant <i>Enterococcus</i> (VRE) detection	I	2

- Two swabs with diluents
- For use with molecular methods and culture-based testing
- Two shipments per year



## Identify microorganisms quickly and confidently.

*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.

Features include:

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- · Seven tabbed sections for easy reference

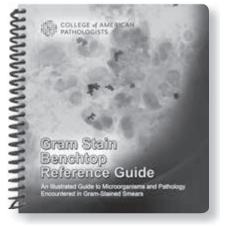
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Item number: GSBRG Spiral bound; 100 pages; 115+ images and tables; 2017

## 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	I	1	
Antimycobacterial susceptibility testing	I	1 graded, 1 ungraded	
Mycobacterial identification*		5	

\*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		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	I	3
Rifampin resistance	I	3

#### **Program Information**

- Three 1.25-mL simulated sputum specimens for use with molecular methods
- Not suitable for culture
- Two shipments per year

15

## 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		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		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 Shipment		
	CRYP		
Cryptococcal antigen	I	5	

Program I	nformation
-----------	------------

- Five 1.0-mL simulated cerebral spinal fluids
- Three shipments per year

Galactomannan FGAL				
Analyte	Program Code Challenges per Shipmer			
	FGAL			
Galactomannan - Aspergillus	I	3		

#### **Program Information**

- Three liquid specimens
- For use with methods such as Bio-Rad Platelia<sup>™</sup>
- Two shipments per year

Fungal Serology FSER				
Procedure	Program Code Challenges per Ship			
	FSER			
Serological detection of specific fungal antibodies	I	3		

#### **Program Information**

- Three serum specimens
- For use with immunodiffusion methods
- Designed for the detection of antibodies to Aspergillus, Blastomyces, Coccidioides, and Histoplasma
- Two shipments per year

Microbiology 21



Fungal Smear FSM				
Procedure	Program Code Challenges per Shipm			
	FSM			
KOH preparation/calcofluor white	I	3		

- Three unstained slides
- Two shipments per year

India Ink IND			
Procedure	Program Code	Challenges per Shipment	
	IND		
India ink	I	2	

#### **Program Information**

- Two liquid specimens
- Two shipments per year

Procedure	Program Code			Challenges per Shipment
	PCP1	PCP2	PCP4	
PCP – Calcofluor white stain				3
PCP – DFA stain				3
PCP – GMS stain				3

#### Program Information

- Three images, each available as photographs and online images for *Pneumocystis jirovecii*
- Two shipments per year

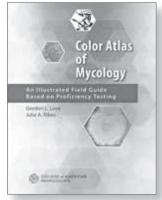
## Color Atlas of Mycology (PUB226)

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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Item number: PUB226 Hardcover; 2018

## Parasitology

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

Parasitology P, P3, P4, P5				
Procedure	Challenges per Shipment			
	Program Code			
	Р	P3	P4	P5
Fecal suspension (wet mount)	2	5	2	
Fecal suspension (Giardia and Cryptosporidium immunoassays and/or 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.

#### **Program Information**

- 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 Cryptosporidium
   immunoassays and/or
   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 Cryptosporidium immunoassays and/or 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 *Cryptosporidium* immunoassays and/or modified acid-fast stain
- P5 Five 0.75-mL fecal suspensions for Giardia and Cryptosporidium immunoassays and/or modified acid-fast stain
- Three shipments per year



15

Blood Parasite BP				
Procedure	Program Code Challenges per Sh			
	BP			
Thin/thick blood film sets*	I	5		

\*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

Rapid Malaria RMAL			
Procedure	Program Code	Challenges per Shipment	
	RMAL		
Rapid malaria detection	I	3	

\*Detects *Plasmodium falciparum* specific histidine-rich protein 2 (HRP2). May not be compatible with methods that use pLDH enzyme detection for mixed malaria infections.

Expanded Parasitology PEX			
Procedure	Program Code	Challenges per Shipment	
	PEX		
Parasite identification	I	3	

This program provides an educational opportunity to challenge laboratory professionals' competency in the identification of parasites utilizing photo images.

#### **Program Information**

- Three 0.5-mL antigen specimens
- Two shipments per year

#### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

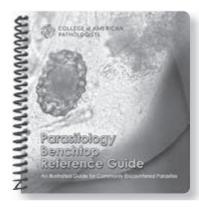
## Parasitology Benchtop Reference Guide (PBRG)

- More than 70 identifications for parasites commonly encountered in the clinical laboratory
- Five tabbed sections for easy reference
- Blood Parasites Intestinal Protozoa Intestinal Helminths
- Miscellaneous Specimens Macroscopic Worms
- A durable and water-resistant format to withstand years of benchtop use—61/2" x 7"

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**Item number:** PBRG Spiral bound; 98 pages; 70+ images and tables; 2014

	ha and Otha	r Arthropods	TNAO
LICKS. WITE	es, and Uthe		

Procedure	Program Code	Challenges per Shipment
	ТМО	
Tick, mite, and arthropod identification	I	3

- Three images, each available as photographs and online images
- Two shipments per year

Worm Identification WID				
Procedure	e Program Code Challenges per Shipmen			
	WID			
Worm identification		3		

#### **Program Information**

- Three images, each available as photographs and online images
- Two shipments per year

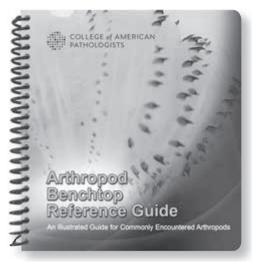
## Arthropod Benchtop Reference Guide (ABRG)

- Numerous identifications of ectoparasites commonly encountered in the clinical laboratory
- Detailed descriptions of the most significant morphologic elements, ecology, and clinical significance
- Eight tabbed sections for easy reference
- Introduction Bed Bugs
- Ticks Kissing Bugs
- Mites Fleas
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## Virology

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

Guide fo	Ordering Regulated Virology Surveys

Program Code	Procedure	
Flogram Code	Viral Identification	Viral Antigen Detection
VR1		
VR2		I
VR4		I
HC2		I
HC4	I	
ID3	I	
ID5		

## **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, participants 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.

For Comprehensive Virology Culture Testing		Select <b>VR1</b> (page 196)
For Virology Antigen Testing by Immunofluorescence		Select VR2 (page 196)
For Viral Serology Testing	$\longrightarrow$	Select <b>VR3, VR3M</b> (page 205)
For Virology Antigen by EIA or Latex Agglutination		Select <b>VR4</b> (page 196)
For Herpes Simplex Virus Antigen Detection by DFA		Select HC2 (page 197)
For Herpes Simplex Virus Culture Testing		Select <b>HC4</b> (page 197)
For Viral Load Testing		Select HV2, HCV2, HBVL, HBVL5, VLS, VLS2 (pages 198-199)
For Nucleic Acid Amplification		Select <b>ID1, ID1T,</b> <b>ID2, ID5, VBDM</b> (pages 197, 198, 200)

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 С VR2 Α В 1 Adenovirus antigen 1 1 1 Cytomegalovirus antigen Herpes simplex virus (HSV) antigen 1 1 I. T. 1 1 Influenza A antigen Influenza B antigen I. 1 I. 1 1 Parainfluenza antigen Respiratory syncytial virus (RSV) 1 1 antigen 1 Varicella-zoster antigen I. 1

#### **Program Information**

- Five 5-well slide specimens
- Three shipments per year

## Virology Antigen Detection (Non-DFA) VR4

I.

1

Analyte	Program Code	Challenges per Shipment
	VR4	
Adenovirus (Not 40/41) antigen	I	5
Influenza A antigen		5
Influenza B antigen		5
Respiratory syncytial virus (RSV) antigen	I	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

🚸 ) Refer to the Ordering Information provided for information regarding additional dangerous goods and related fees.

Educational challenge

## Herpes Simplex Virus HC2, HC4

Procedure	Program Code		Challenges per Shipment
	HC2	HC4*	
Herpes simplex virus antigen detection (DFA)			5
Herpes simplex virus culture			5

\*The biohazard warning applies to Survey HC4.

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#### **Program Information**

- 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	I	2	

For laboratories using Digene, SurePath, and/or ThinPrep collection media, see page 287.

#### **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	ım Code	Challenges per Shipment	
	ID1	ID1T		
Cytomegalovirus			1	
Enterovirus			1	
Epstein-Barr virus			1	
Herpes simplex virus			1	
Human herpesvirus 6			1	
Human herpesvirus 8			1	
Parvovirus B19			1	
Varicella-zoster virus			1	
BK virus		I	1	
JC virus		I	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 ID	20
--------------------------------------------	----

Analyte	Program Code	Challenges per Shipment
	ID2	
Adenovirus		1
Coronavirus**/Rhinovirus*		1
Human metapneumovirus		1
Influenza virus*	l	1
Parainfluenza virus		1
Respiratory syncytial virus (RSV)		1

\*Coronavirus/Rhinovirus and Influenza virus will be included in the following shipments:

- Shipment A: Coronavirus and Influenza A
- Shipment B: Rhinovirus and Influenza B

\*\* Laboratories performing SARS-CoV-2 testing should see COV2 program in online store, <u>here</u>.

### Influenza A, Influenza B, and RSV by Nucleic Acid Amplification ID3

Analyte	Program Code	Challenges per Shipment
	ID3	
Influenza A virus	I	5
Influenza B virus		5
Respiratory syncytial virus (RSV)	I	5

#### **Program Information**

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

#### **Program Information**

- Five 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Three shipments per year

## Herpes s Varicella

HSV, VZV—Mol		
Analyte	Program Code	Challenges per Shipment
	ID5	
Herpes simplex virus		5
Varicella-zoster virus	I	5

#### **Program Information**

NEW

- Five 1.0-mL liquid specimens
- Designed for molecular techniques
- Three shipments per year

## Hepatitis Viral Load HCV2, HBVL, HBVL5

Procedure	Challe	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 1.5-mL plasma specimens; two shipments per year
- HBVL5 Five 1.5-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			5	
HIV genotyping*			1	

\*HIV genotyping is for laboratories reporting reverse transcriptase, protease, and/or integrase mutations.

#### Program Information

- HV2 Five 2.5-mL EDTA plasma specimens
- HIVG One 1.0-mL liquid specimen
- Three shipments per year

#### Viral Load VLS, VLS2 Procedure **Program Code Challenges per Shipment** VLS VLS2 BK viral load . 2 CMV viral load 2 T. EBV viral load 2 Adenovirus viral load 2 HHV6 viral load 2

#### **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

## Atlas of Fundamental Infectious Diseases Histopathology (PUB127)

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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Item number: PUB127 Softcover; 304 pages; 800+ images and tables; 2018

### Viral Load Calibration Verification/Linearity LN38, LN39, LN45

Analyte	Program Code		de	
	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

\*The biohazard warning applies to Survey LN38.

View your expedited linearity evaluations within two business days by logging into e-LAB Solutions Suite.

#### **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	I	3			

#### Program Information

- Three 1.5-mL liquid specimens
- Two shipments per year

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

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

## Multidiscipline Microbiology

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#### Guide for Ordering Regulated Molecular Multidiscipline Surveys

Program Code	Procedure		
	Bacterial Identification	Viral Identification	
IDR	I	I	
GIP5		B	

Nucleic Acid Amplification, Organisms IDO, IDN				
Analyte/Procedure	Progra	m Code	Challenges per Shipment	
	IDO	IDN		
Bordetella pertussis/parapertussis			1	
Legionella pneumophila/Chlamydia pneumoniae*			1	
Methicillin-resistant Staphylococcus aureus			1	
Molecular typing (bacterial isolates)			1	
Mycobacterium tuberculosis			1	
Mycoplasma pneumoniae			1	
Vancomycin-resistant Enterococcus			1	

\*Legionella pneumophila/Chlamydia pneumoniae will be included in the following shipments:

Shipment A: Chlamydia pneumoniaeShipment B: Legionella pneumophila

#### **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





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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	•	3		
Varicella-zoster virus (VZV)	I	3		
Cryptococcus neoformans/gattii		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	I	5
Bocavirus	I	5
Bordetella (pertussis, parapertussis, bronchiseptica, holmesii)	I	5
Chlamydia pneumoniae	I	5
Coronavirus*	I	5
Human metapneumovirus	I	5
Influenza A	I	5
Influenza B	I	5
Legionella pneumophila	I	5
Mycoplasma pneumoniae	I	5
Parainfluenza type 1, 2, 3	1	5
Parainfluenza type 4	1	5
Respiratory syncytial virus (RSV)	I	5
Rhinovirus/Enterovirus	•	5

#### **Program Information**

- Five 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Three shipments per year

\*Laboratories performing SARS-CoV-2 testing should see COV2 program in online store, <u>here</u>.

## Infectious Disease, Pneumonia Panel IDPN

Analyte	Program Code	Challenges per Shipment
	IDPN	
Acinetobacter calcoaceticus-baumannii complex		5
Adenovirus	•	5
Coronavirus*	•	5
Chlamydia pneumoniae	•	5
Enterobacter cloacae complex		5
Escherichia coli	•	5
Haemophilus influenzae	•	5
Human metapneumovirus	I	5
Rhinovirus/Enterovirus	•	5
Influenza A	•	5
Influenza B		5
Klebsiella aerogenes		5
Klebsiella oxytoca		5
Klebsiella pneumoniae group	1	5
Legionella pneumophila	I	5
Moraxella catarrhalis	•	5
Mycoplasma pneumoniae	•	5
Parainfluenza virus	•	5
Proteus spp.	•	5
Pseudomonas aeruginosa		5
Respiratory syncytial virus (RSV)	•	5
Serratia marcescens		5
Staphylococcus aureus		5
Streptococcus agalactiae		5
Streptococcus pneumoniae		5
Streptococcus pyogenes		5

#### includes antimicrobial resistance genes as appropriate.

\*Laboratories performing SARS-CoV-2 testing should see COV2 program in online store,  $\underline{here}.$ 

- Five 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Three shipments per year

Gastrointestinal Panel GIP	5, GIP
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Analyte	er Shipment	
	Progra	m Code
	GIP5	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 <i>E. coli</i> (EAEC)	5	3
Enteropathogenic E. coli (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 <i>E. coli</i> (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.

## 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	Progra	m Code	Challenges per Shipment			
	VR3	VR3M				
Cytomegalovirus (CMV) – IgG, IgM, and total antibodies	I		1			
Epstein-Barr virus (EBV) – VCA – IgG, IgM EBNA – IgG, IgM, and total antibodies EA – IgG	I		1			
Helicobacter pylori – IgG, IgA, and total antibodies	I		1			
Herpes simplex virus (HSV) – IgG antibody			1			
Mycoplasma pneumoniae – IgG, IgM, and total antibodies	I		1			
Mumps – IgG			1			
Rubeola virus (English measles) – IgG antibody	I		1			
<i>Toxoplasma gondii –</i> IgG, IgM, and total antibodies	I		1			
Varicella-zoster virus – IgG and total antibodies	I		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	I	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

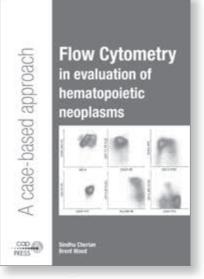
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## **16** Immunology and Flow Cytometry



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

- Offer your staff more than 100 CE credits.
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## Immunology and Flow Cytometry

Immunology	3
Flow Cytometry	ō

## New Programs NEW

## New Analyte Additions

Antiphosphatidylserine Antibody (APS)
Cyclic Citrullinated Peptide Antibody (Anti-CCP) (CCP)

## 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 Lone					Challenges per Shipment		
	ANA	AS0	CRP	HCG	ім	RF/ RFX	RUB/ RUBX	IL	
Antinuclear antibody (ANA)*									5
ANA dry challenge									1
Antistreptolysin 0 (ASO)*									5
C-reactive protein, qualitative/quantitative									2
hCG, serum, qualitative/ quantitative									5
Infectious mononucleosis									5
Rheumatoid factor*									5
Rubella (IgG)*									5

\*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 these Surveys 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 Shipme					
	IG/IGX					
Alpha-1 antitrypsin		5				
Complement C3	I	5				
Complement C4		5				
Haptoglobin	I	5				
IgA	I	5				
IgE	I	5				
lgG		5				
IgM	I	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

			<b>-</b> ,	.,		
Analyte	Pro	gram C	ode	Challen	ges per S	hipment
	S2	S4	S5	Α	В	С
Anticentromere antibody				1		1
Anti-DNA antibody double-stranded				1	1	1
Antiglomerular basement membrane (GBM), IgG antibody					1	1
Antimitochondrial antibody				1	1	1
Antineutrophil cytoplasmic antibody (ANCA, anti-MPO, anti-PR3)	•			1	1	
Anti-RNP antibody				1	1	1
Anti-Ro52 antibody				1	1	1
Anti-Ro62 antibody				1	1	1
Anti-Sm antibody				1	1	1
Anti-Sm/RNP antibody				1	1	1
Antismooth muscle antibody				1	1	1
Anti-SSA antibody				1	1	1
Anti-SSB antibody				1	1	1
Anti-SSA/SSB antibody				1	1	1
Antithyroglobulin antibody				1	1	1
Antithyroid microsomal antibody				1	1	1
Antithyroid peroxidase antibody				1	1	1
Ceruloplasmin				1	1	1
Haptoglobin				1	1	1
Helicobacter pylori, IgG antibody				1	1	
				2	2	
IgD				1	1	1
lgG				1	1	1
lgG subclass proteins				1	1	1
Prealbumin (transthyretin)				1	1	1
Total kappa/lambda ratio				1	1	1
Transferrin				1	1	1

#### **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



16

Survey S2 is not appropriate for antimitochondrial antibody assays that are specific for the M2 antibody. Refer to Survey H on page 210.

Infectious Mononucleosis, Waived IMW					
Analyte	Program Code	Challenges per Shipment			
	IMW				
Infectious mononucleosis, waived	I	3			

- 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				

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

Antichromatin Antibody ACA				
Analyte Program Code Challenges per Shipment				
	ACA			
Antichromatin antibody	I	3		

#### **Program Information**

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

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Immuno	

Antifilamentous Actin IgG Antibody FCN			
Analyte	Program Code	Challenges per Shipment	
	FCN		
Antifilamentous actin (f-actin) IgG antibody	I	3	

#### Program Information

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

Antihistone Antibody AHT			
Analyte Program Code Challenges per Shipn			
	AHT		
Antihistone antibody	I	3	

#### Program Information

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

Antimitochondrial M2 Antibody H		
Analyte	Program Code	Challenges per Shipment
	н	
Antimitochondrial M2 antibody (AMA-M2)	•	2

#### Program Information

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

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

Autoimmune Gastritis Markers APC		
Analyte	Program Code	Challenges per Shipment
	APC	
Antiparietal cell antibody	I	2
Anti-intrinsic factor antibody		2

Antiphospholipid Antibody ACL		
Analyte	Program Code	Challenges per Shipment
	ACL	
Anticardiolipin antibody (polyclonal, lgG, lgM, and lgA)	B	3
Beta-2-glycoprotein I (polyclonal, lgG, lgM, and lgA)	B	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)	I	3	
Antiphosphatidylserine antibody (IgG, IgM, and IgA)	I	3	
Beta-2-glycoprotein I (polyclonal, IgG, IgM, and IgA)	I	3	
Antiphosphatidylserine/prothrombin antibody (aPS/PT) NEW	I	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	I	3		

#### **Program Information**

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

	Anti-Saccharomyces cerevisiae Antibody ASC		
Analyte Program Code Challenges per Ship			
		ASC	
	Anti- <i>Saccharomyces cerevisiae</i> antibody (lgG and lgA)	I	2

- 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)			3
Antiendomysial antibody screen (IgA and IgG)			3
Antigliadin antibody (IgA and IgG)			3
Antideamidated gliadin peptide (DGP) antibody (IgA and IgG)	I	I	3
Anti-DGP antibody screen (IgA and IgG)			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
	CCP	
Anti-CCP	•	2
Rheumatoid factor isotypes (IgA, IgM, IgG) NEW	1	2

#### **Program Information**

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



Cytokines	CTKN	
Analyte	Program Code	Challenges per Shipment
	CTKN	
Interferon (IFN)-gamma	I	3
Interleukin (IL)-1 beta	I	3
IL-2	I	3
IL-6	I	3
IL-8	I	3
IL-10	I	3
Tumor necrosis factor (TNF)-alpha	I	3
Vascular endothelial growth factor (VEGF)	I	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	I	5
IgE, total	I	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 Shipment
	HSCRP	
High-sensitivity C-reactive protein	I	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	I	2

# M. tuberculosis-Stimulated Infection Detection QFAnalyteProgram CodeChallenges per ShipmentQFQF2

#### Program Information

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

#### **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

## 16

## 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.

## Total Hemolytic Complement CH50

Analyte	Program Code	Challenges per Shipment
	CH50	
Total hemolytic complement, 50% lysis		2
Total hemolytic complement, 100% lysis	•	2

#### **Program Information**

- Five 1.5-mL serum specimens
- Three shipments per year



#### **Program Information**

- Two 0.5-mL lyophilized serum specimens
- Two shipments per year

Viscosity V		
Analyte	Program Code	Challenges per Shipment
	V	
Viscosity	I	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		3
Kappa/lambda serum free light chain ratio and ratio interpretation	I	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				3
Lymphocyte immunophenotyping				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	I	2

Survey FL3 is appropriate for laboratories that perform technical component-only flow cytometry 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<sup>®</sup> technology
- Two shipments per year

Flow Cytometry, CD34+ FL4				
Analyte	Program Code	Challenges per Shipment		
	FL4			
CD34+	I	2		

### **Program Information**

- 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	I	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—Post-Immunotherapy Analysis FL6 Procedure Program Code Challenges per Shipment FL6 FL6

cytometry analysis 3 Survey FL6 is appropriate for laboratories that perform flow cytometry analysis on samples from patients treated with chimeric antigen receptor (CAR) T-cell or other immunotherapy regimens that cause immunophenotypic changes to normal and/or neoplastic cells.

### **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

Post-immunotherapy flow

- 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).

- One 1.1-mL specimen containing a cell line/whole blood mixture simulating B lymphoblastic leukemia/ lymphoma minimal residual disease with clinical history
- 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

### 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

Procedure	Program Code	Challenges per Shipment
	HBF	
Kleihauer-Betke and flow cytometry	I	2
Rosette fetal screen	I	2
Acid elution whole slide image		1

- 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<sup>®</sup> technology
- Two shipments per year

Rare Flow Antigen Validation RFAV1, RFAV2			
Analyte	Program Code		Challenges per Shipment
	RFAV1	RFAV2	
CD1a			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 FL0.23737, 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

### **Program Information**

- Three 4.5-mL cell line specimens
- Two shipments per year

## **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 Quality Cross Check-Transfusion Medicine program (JATQ).

### Transfusion Medicine, Viral Markers, and Parentage Testing

Transfusion Medicine	220
Viral Markers	230
Parentage Testing2	233

### New Programs NEW



Antibody Titer—Automated (AABT, AABT1,	1, AABT2, AABT3)	
----------------------------------------	------------------	--

### **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 3.0-mL 3% red blood cell suspensions; five 3.0-mL corresponding serum specimens; one 3.0-mL donor red blood cell suspension
- J1 Five 3.0-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 Image: State Sta

### **Program Information**

- 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 EX	М
Procedure	Program Code	Challenges per Shipment
	EXM	
Electronic crossmatch		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	I	5		
Antibody detection	I	5		
Antibody identification	I	5		
Compatibility testing	I	5		
Rh typing	I	5		

**Transfusion Medicine—Automated** 

**Education Challenge JATE1** 

**Program Code** 

JATE1

Challenges per Shipment

1

Procedure

Educational 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



Quality Cross Check—Transfusion Medicine JATQ					
Procedure Program Code Challenges per Shipmen					
	JATQ				
ABO grouping	I	3			
Antibody detection	<b>■</b> 3				
Rh typing I 3					

This program does not meet regulatory requirements for proficiency testing; see Survey JAT on page 221. 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



### **Program Information**

- Three 2.0-mL 3% red blood cell suspensions; three 2.0-mL corresponding serum specimens
- Two shipments per year

### ABO Subgroup Typing ABOSG

Procedure	Program Code	Challenges per Shipment
	ABOSG	
ABO subgroup typing	I	3
Rh typing	I	3

Red Blood Cell A	ntigen Genotypir	ng RAG
Procedure	Program Code	Challenges per Shipment
	RAG	
Red blood cell antigen genotype with predictive phenotype	I	3

### Red Blood Cell Antigen Typing RBCAT

Procedure	Program Code	Challenges per Shipment
	RBCAT	
Red blood cell antigen typing	I	2

### **Program Information**

- Three 2.0-mL whole blood specimens
- Two shipments per year

### **Program Information**

- Two 2.0-mL 2%-4% red blood cell suspensions
- Two shipments per year

### 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.

Antibod	y Titer	ABT,	ABT1,	ABT2	, ABT3
Procedure		Program Code			Challenges per Shipment
	ABT	ABT1	ABT2	ABT3	
Anti-A titer		I			1
Anti-B titer					1
Anti-D titer					1

- 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

# Antibody Titer—Automated AABT, AABT1, AABT2, AABT3

Procedure	Program Code			Challenges per Shipment	
	AABT	AABT1	AABT2	AABT3	
Anti-A titer					1
Anti-B titer					1
Anti-D titer					1

#### **Program Information**

- AABT One 2.0-mL plasma specimen for anti-A titer; one 2.0-mL plasma specimen for anti-D titer
- AABT1 One 2.0-mL plasma specimen for anti-A titer
- AABT2 One 2.0-mL plasma specimen for anti-D titer
- AABT3 One 2.0-mL plasma specimen for anti-B titer
- Two shipments per year

Transfusion-R	elated Cell Count	
	Drogram Codo	Challenges ner C

Procedure	Program Code	Challenges per Shipment
	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 Program Code Challeng

Procedure	Program Code	Challenges per Shipment
	DAT	
Direct antiglobulin testing	I	3

### **Program Information**

- Three 2.0-mL 3% red blood cell suspensions
- For use with manual method
- Two shipments per year

Eluate Survey ELU			
Procedure	Program Code	Challenges per Shipment	
	ELU		
Antibody elution	I	2	

- Two 2.0-mL 50% red blood cell suspensions
- 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		1		

- 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<sup>®</sup> technology
- Two shipments per year

Platelet Serology PS			
Procedure	Program Code	Challenges per Shipment	
	PS		
Antibody detection	I	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.

### Transfusion Medicine Comprehensive—Competency Assessment TMCA

Procedure	Program Code	Challenges per Shipment
	TMCA	
ABO grouping	I	2
Antibody detection	I	2
Antibody identification	I	2
Compatibility testing	I	2
Rh typing		2

Survey TMCA does not meet the regulatory requirements for proficiency testing.

### 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

- Three 3.0-mL plasma specimens
- For use with solid-phase red cell adherence, flow cytometry, and EIA/ELISA methods
- Two shipments per year

### 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

17

- Two 2.0-mL 3% red blood cell suspensions
- Two shipments per year; order shipments individually or for an entire year

Eluate Competency Assessment	TMCAE
------------------------------	-------

Procedure	Program Code	Challenges per Shipment
	TMCAE	
Antibody elution	I	2

Survey TMCAE does not meet the regulatory requirements for proficiency testing.

### Fetal Red Cell Quantitation—Competency Assessment TMCAF

Procedure	Program Code	Challenges per Shipment
	TMCAF	
Kleihauer-Betke, flow cytometry	1	2
Rosette fetal screen	I	2
Acid elution whole slide image	I	1

Survey TMCAF 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

### **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

### 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:

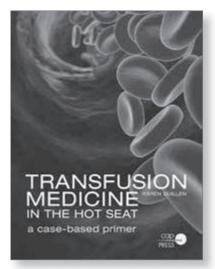
- Antibodies
- Blood Components
- Complications

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

### Add Transfusion Medicine in the Hot Seat (PUB224) to your order.

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

- printed books at estore.cap.org
- ebooks at ebooks.cap.org



Item number: PUB224 Softcover; 123 pages

### Cord Blood and Stem Cell Processing CBT, SCP

Procedure	Progra	m Code	Challenges per Shipment	
	CBT	SCP		
Absolute CD3			2	
Absolute CD34			2	
Absolute CD45			2	
Bacterial culture			2	
%CD3+			2	
%CD34+			2	
%CD45+			2	
BFU-E			2	
CFU-E			2	
CFU-GEMM			2	
CFU-GM			2	
Total CFC			2	
Fungal culture			2	
Hematocrit			2	
Hemoglobin			2	
Mononuclear cell count	1		2	
Nucleated red cells			2	
Number of CD34 positive events			2	
Number of CD45 positive events	I		2	
Total nucleated cells			2	
Viability	I		2	
WBC count			2	

#### **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



#### Additional Information

- 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.





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	I		2
Bacterial culture and detection systems		I	5

### Additional Information

- 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.

### 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**

- BDP Two lyophilized pellet specimens with diluents; two shipments per year
- BDP5 Five lyophilized pellet specimens with diluents; three shipments per year



### **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.

Ð

Expanded Transfusion Medicine Exercises ETME1			
Procedure	Program Code Challenges per Shipmer		
	ETME1		

E.

2

#### **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

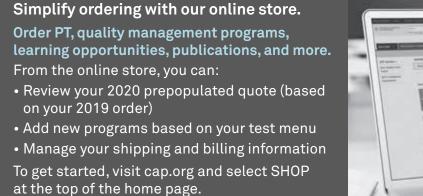
#### Additional Information

Expanded challenges

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.





### **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)	I	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	1	5	
Anti-HIV-2		5	
HBsAg	•	5	

### **Program Information**

- Five 3.5-mL plasma specimens
- Three shipments per year

Do not use Survey VM1 with rapid anti-HCV, anti-HIV-1, or anti-HIV-1/2 kits. See page 231 for Surveys appropriate for rapid methods.

Viral Markers—Series 2 VM2				
Analyte	Program Code Challenges per Shipment			
	VM2			
Anti-HBe	I	5		
HBeAg I 5				

#### **Program Information**

- Five 3.5-mL plasma specimens
- Three shipments per year

Viral Markers—Series 3 VM3				
Analyte Program Code Challenges per Shipme				
VM3				
Anti-CMV I 3				
Anti-HTLV-I/II	i-HTLV-I/II I 3			
HIV-1 p24 antigen I 3				

#### **Program Information**

- Three 3.5-mL plasma specimens
- Two shipments per year

Viral Markers—Series 4 VM4					
Analyte Program Code Challenges per Shipmer					
VM4					
Anti- <i>Trypanosoma cruzi</i> (Chagas disease)					

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

Viral Markers—Series 5 VM5				
Analyte	Program Code	Challenges per Shipment		
	VM5			
Anti-HAV (IgM)		5		
Anti-HBc (IgM)		5		

- Five 1.5-mL plasma specimens
- Three shipments per year

Viral Markers—Series 6 VM6, VM6X			
Analyte	Program Code Challenges per Shipment		
	VM6	VM6X	
Anti-HIV-1/2			5
HIV-1 p24 antigen			5

### **Program Information**

- VM6 Five 0.5-mL plasma specimens
- VM6X All Survey VM6 specimens in duplicate
- Three shipments per year

Anti-HIV 1/2 AHIV, AHIVW			
Analyte/Procedure Program Code Challenges per Shipm			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		I	2

### Anti-HCV, Rapid Methods, Waived RHCVW

Analyte/Procedure	Program Code	Challenges per Shipment
	RHCVW	
Anti-HCV, waived methods only		3

### **Program Information**

- AHIV Five 0.5-mL plasma specimens; three shipments per year
- AHIVW Two 0.5-mL plasma specimens; two shipments per year

- Three 0.5-mL plasma specimens
- Two shipments per year

Nucleic Acid Testing NAT			
Analyte Program Code Challenges per Shipn			
	NAT		
HBV I		5	
HCV I		5	
HIV I		5	
West Nile virus <b>1</b> 5		5	

- 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		3		

### **Program Information**

- Three 1.5-mL liquid specimens
- Two shipments per year

### Help pathologists stay current with rapidly changing issues in clinical pathology.

The Clinical Pathology Improvement Program (CPIP) provides peer-reviewed, interactive, casebased learning activities that cover a diverse portfolio of real-life clinical scenarios. Every month, you receive a new online module with images and clinical details that unfold as you solve the case in real time. Earn CME/SAM credits upon successful completion of the posttest.

Add CPIP/CPIP1 to your Surveys order.



### **Parentage Testing**

Parentage/Relationship Test—Filter Paper PARF					
Analyte/Procedure Program Code Challenges per Shipmen					
	PARF				
Calculation challenge (paper challenge)	I	1			
DNA testing (PCR)	I	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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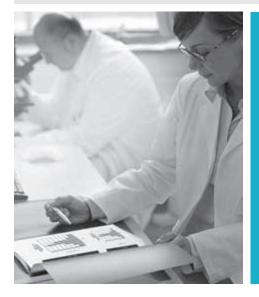
# Insight at a glance.



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 proficiency testing 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.

# **18** Histocompatibility



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

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- 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.



Antibody Titer—Automated (AABT, AABT1, AABT2, AABT3)2	38
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### 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.

### HLA Crossmatching, Antibody Screen, and Antibody Identification (Class II) MX2B, MX2C, MX2E

Procedure	Program Code			Challenges per Shipment
	MX2B	MX2C	MX2E	
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 0.25-mL plasma specimens; must be ordered in conjunction with Survey MX1B or MX1C
- Three shipments per year

### **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 0.25-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	Program Code	
		MXB	MXC
Crossmatching, antibody screen, and antibody identification (Class I)	MX1B*	I	
Crossmatching, antibody screen, and antibody identification (Class II)	MX2B*		
Crossmatching, antibody screen, and antibody identification (Class I)	MX1C*		
Crossmatching, antibody screen, and antibody identification (Class II)	MX2C*		I

\*See page 236 for specimen and analyte information.

### **Program Information**

- MXB Class I: three 0.25-mL plasma specimens, two purified peripheral blood lymphocyte specimens; Class II: three 0.25-mL plasma specimens, two purified peripheral blood lymphocyte specimens
- MXC Class I: three 0.50-mL plasma specimens, two purified peripheral blood lymphocyte specimens; Class II: three 0.50-mL plasma specimens, two 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)	I	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	I	5		

- Five 2.0-mL whole blood specimens in CPD-A
- Two shipments per year

Antibody Titer ABT, ABT1, ABT2, ABT3					ABT3	
Procedure			Program Code			Challenges per Shipment
		ABT	ABT1	ABT2	ABT3	
Anti-A titer						1
Anti-B titer						1
Anti-D titer						1

- 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

#### **Program Information**

- AABT One 2.0-mL plasma specimen for anti-A titer; one 2.0-mL plasma specimen for anti-D titer
- AABT1 One 2.0-mL plasma specimen for anti-A titer
- AABT2 One 2.0-mL plasma specimen for anti-D titer
- AABT3 One 2.0-mL plasma specimen for anti-B titer
- Two shipments per year

18

# Antibody Titer—Automated AABT, AABT1, AABT2, AABT3

Procedure	Program Code			Challenges per Shipment	
	AABT	AABT1	AABT2	AABT3	
Anti-A titer					1
Anti-B titer					1
Anti-D titer					1

Monitoring Engraftment ME					
Procedure Program Code Challenges per Shipn					
	ME				
Stem cell monitoring engraftment	I	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

### Atlas of Transplant Pathology (PUB124)

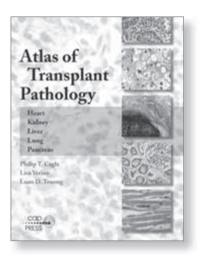
This atlas serves as a handy resource for practical interpretation of solid organ transplant biopsies and other specimens by general pathologists as well as subspecialists.

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**Item number:** PUB124 254 pages; 2015

### HLA Disease Association-Drug Risk DADR1, DADR2

		0		
Analyte	Program	n Code	Challenges per Shipment	
	DADR1	DADR2		
HLA-A*31:01			3	
HLA-B*13:01			3	
HLA-B*15:02			3	
HLA-B*57:01			3	
HLA-B*58:01			3	
HLA-A*29:01			3	
HLA-A*29:02			3	
HLA-DQA1*04:01			3	
HLA-DQA1*05:01			3	
HLA-DQB1*03:02			3	
HLA-DQB1*06:02			3	
HLA-DRB1*03:01			3	
HLA-DRB1*03:02			3	
HLA-DRB1*04:02			3	
HLA-DRB1*04:03			3	
HLA-DRB1*04:06			3	
HLA-DRB1*08:02			3	
HLA-DRB1*08:04			3	
HLA-DRB1*14:04			3	
HLA-DRB1*14:05			3	
HLA-DRB1*14:08			3	
HLA-DRB1*15:01			3	
HLA-DRB1*15:02			3	
DQA1*02			3	
DQA1*03			3	
DQA1*05			3	
DQB1*02:01			3	
DQB1*02:02			3	

#### **Program Information**

- Three 0.1-mL specimens, each containing 200 μg/mL of human DNA in media
- Two shipments per year

# Histocompatibility

18

### adverse reactions to specific drugs.

### DADR1

Additional Information

- o Carbamezepine induced Stevens-Johnson syndrome (CSJ)
- o Allopurinol Stevens-Johnson syndrome (ASJ)
- o Hypersensitivity to abacavir (HA)
- o Dapsone hypersensitivity (DH)

### DADR2

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

- o Celiac disease (CD)
- o Narcolepsy (N)
- o Pemphigus vulgaris (PV)
- o Psoriasis (P)
- Antiglomerular basement membrane disease (ABM)
- o Birdshot retinochoroidopathy (BR)
- o Idiopathic myopathy (IM)

# **19** Genetics and Molecular Pathology



# 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)

### Genetics and Molecular Pathology

Cytogenetics	
Biochemical and Molecular Genetics	
Next-Generation Sequencing	
Molecular Oncology—Solid Tumors	
Molecular Oncology—Hematologic	

### **Program Changes**

Next-Generation Sequencing—Ger	rmline (NGS) New dry	challenge 25	54
Next deneration bequenting der		onationgo minimum 20	<b>7</b>

### 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	te/Procedure Program Code Challenges per Shipmer				
	CY	СҮВК			
Chromosome abnormality			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.

### CAP/ACMG Fluorescence In Situ Hybridization CYF, CYI

Disease/Procedure	Program Code		Challenges per Shipmen	
	CYF	CYF CYI		В
Constitutional and Hematologic Disorders				
FISH for constitutional disorder - slides			1	1
FISH for constitutional disorder - paper/ photograph challenge	I		2	2
FISH for hematologic disorder - slides			1	1
FISH for hematologic disorder - paper/ photograph challenge	•		2	2
Urothelial Carcinoma				
FISH for urothelial carcinoma			2	2

### Additional Information

• CYF 2020-A:

Constitutional disorder - Prenatal aneuploidy probes (interphase cells) (two slides) Constitutional disorder - (two paper/photograph challenges) Hematologic disorder - *MLL* gene rearrangement (two slides) Hematologic disorder - (two paper/photograph challenges)

CYF 2020-B:
 Constitutional disorder

Constitutional disorder - *SHOX* (two slides) Constitutional disorder - (two paper/photograph challenges) Hematologic disorder - *BCR/ABL1* gene rearrangement (two slides) Hematologic disorder - (two paper/photograph challenges)

- CYF is prepared from cell suspension samples. For FISH in paraffin-embedded tissues, see page 243.
- These programs are only for laboratories that perform both hybridization and interpretation under the same CLIA number.

### **Program Information**

- CY Online images of metaphase cells; delivered two times a year; your CAP shipping contact will be notified <u>via email</u> when the activity is available
- CYBK Prints of metaphase cells; two shipments per year



- 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 Cł			Challenges per Shipment	
	СҮН	CYJ	СҮК	CYL	Α	В
Breast Cancer						
HER2 gene amplification					10	10
Brain/Glioma Tissue						
1p/19q					1	1
Solid Tumor						
SS18 gene rearrangement					1	
EWSR1 gene rearrangement						1
Lymphoma Tissue						
MALT1 gene rearrangement					1	
MYC gene rearrangement						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 slides
- Two shipments per year

ACMG

### Additional Information

- These programs are only for laboratories that perform both hybridization and interpretation under the same CLIA number.
- For HER2 FISH, interpretation only, for breast cancer, see page 282.

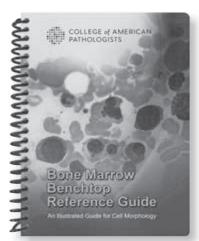
### **Bone Marrow Benchtop Reference Guide (BMBRG)**

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.

### Add it to your order.

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

- printed books at estore.cap.org
- ebooks at ebooks.cap.org



Item number: BMBRG Spiral bound; 2018

CAP/ACMG Constitutional Microarray	CYCGH
------------------------------------	-------

Procedure	Program Code	Challenges per Shipment
	CYCGH	
Cytogenomic microarray analysis for constitutional abnormality	I	2
Educational dry challenge for constitutional abnormality	I	1

- Two 3.0-µg DNA specimens; one dry 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	I	1
Educational dry challenge for oncologic abnormality	I	1

#### **Program Information**

- One 2.0-ug DNA specimen; one dry challenge
- Two shipments per year



#### Additional Information

Participants will identify and characterize gains or losses and the cytogenetic location of abnormalities detected.

### 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.

### **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	I		1	
Amino acids, qualitative and quantitative			1	
Carnitine, qualitative and quantitative			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



### **Program Information**

- Three 10.0-µg extracted DNA specimens
- Two shipments per year



genotyping

This Survey will test for the M, S, and Z alleles.

Alpha-1 antitrypsin (SERPINA1)

Analyte/Procedure

# CAP/ACMG Apolipoprotein E<br/>Genotyping APOEAnalyte/ProcedureProgram CodeChallenges per ShipmentApolipoprotein E (APOE) genotypingI3

CAP/ACMG Alpha-1 Antitrypsin Genotyping AAT

**Program Code** 

AAT

**Challenges per Shipment** 

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



### CAP/ACMG BRCA1/2 Sequencing BRCA

Analyte/Procedure	Program Code	Challenges per Shipment
	BRCA	
<i>BRCA1/2</i> DNA sequencing and variant interpretation	I	3
BRCA1/2 duplication/deletion analysis	I	3

### Additional Information

- 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.

### CAP/ACMG Cardiomyopathy Sequencing Panel CMSP

Analyte/Procedure	Program Code	Challenges per Shipment
	CMSP	
Cardiomyopathy sequencing panel	I	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.

### **Program Information**

- Three 10.0-µg extracted DNA specimens
- Results for this program must be submitted online through e-LAB Solutions Suite
- Two shipments per year



### **Program Information**

- Three 80.0-µL purified extracted DNA specimens (50 ng/µL)
- Results for this program must be submitted online through e-LAB Solutions Suite
- Two shipments per year



19

### Ensure your laboratory's information is up-to-date.

The CAP's online Organizational Profile tool ensures your laboratory's information is current to alleviate any issues with your proficiency testing and accreditation procedures. No more mailing forms or experiencing delays in processing—information is recorded in real time.

Log into e-LAB Solutions Suite to review and update your laboratory's information.

	COLLEGE of AMERICAN PATHOLOGISTS
ORGA	NIZATION PROFILE
CAP #: 12	234567   City Hospital   1234 Main Street
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Basic De	stails >>
	es and Phones >>
Address	
Addressi Account	List>>

CAP/ACMG Hemoglobinopathies Genotyping HGM						
Analyte/Procedure Program Code Challenges per Shipme						
НGМ						
Alpha-thalassemia	I	3				
Beta-thalassemia		3				
Hemoglobin S/C		3				

- Three 50.0-µg extracted DNA specimens
- Two shipments per year



### CAP/ACMG Inherited Cancer Sequencing Panel ICSP

Analyte/Procedure	Program Code	Challenges per Shipment
	ICSP	
Inherited cancer sequencing panel	I	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 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)
- Results for this program must be submitted online through e-LAB Solutions Suite
- Two shipments per year



### Atlas of Fundamental Infectious Diseases Histopathology (PUB127)

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.

### Add it to your order.

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

- printed books at estore.cap.org
- ebooks at ebooks.cap.org



Item number: PUB127 Softcover; 304 pages; 800+ images and tables; 2018

### CAP/ACMG Molecular Genetics Series MGL1, MGL2, MGL3, MGL4, MGL5

	Program Code					Challenges per
Disease/Gene	MGL1	MGL2	MGL3	MGL4	MGL5	Shipment
Bloom syndrome ( <i>BLM</i> gene)						3
BRCA1/2						3
Canavan (ASPA gene)						3
Connexin 26 (GJB2 gene)						3
Cystic fibrosis (CFTR gene)						3/2(MGL5)
DMD/Becker ( <i>DMD</i> gene)						3
Factor V Leiden ( <i>F5</i> gene)						3
Familial dysautonomia (IKBKAP gene)						3
Fanconi anemia complementation group C (FANCC gene)						3
Fragile X (FMR1 gene)						3
Friedreich ataxia (FXN gene)						3
Gaucher (GBA gene)						3
Glycogen storage disease type IA (G6PC gene)						3
Hemochromatosis (HFE gene)						3
Hemoglobin S/C						3
Huntington (HTT gene)						3
Methylene tetrahydrofolate reductase ( <i>MTHFR</i> gene) c.665C>T (677C>T) and c.1286A>C (1298A>C)	•					3
Mucolipidosis IV (MCOLN1 gene)						3
Multiple endocrine neoplasia type 2 ( <i>RET</i> gene)						3
Myotonic dystrophy (DMPK gene)						3
Niemann-Pick type A/B (SMPD1 gene)						3
Plasminogen activator inhibitor (PAI)-1 (SERPINE1 gene)						3
Continued on the next page						

### **Program Information**

- MGL1, MGL2, MGL3, MGL4 - Three 50.0-µg extracted DNA specimens per disease/gene
- MGL5 Two 50.0-µg extracted DNA specimens
- Two shipments per year



19

### 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 Molecular Genetics Series MGL1, MGL2, MGL3, MGL4, MGL5 continued

Disease/Gene	Program Code					Challenges per
	MGL1	MGL2	MGL3	MGL4	MGL5	Shipment
Prader-Willi/Angelman syndrome						3
Prothrombin (F2 gene)						3
RhD						3
Spinal muscular atrophy (SMN1 and SMN2 genes)						3
Spinocerebellar ataxia (ATXN1, ATXN2, ATXN3, CACNA1A, and ATXN7 genes)						3
Tay-Sachs (HEXA gene)						3

#### **Program Information**

- MGL1, MGL2, MGL3, MGL4 - Three 50.0-µg extracted DNA specimens per disease/gene
- MGL5 Two 50.0-µg extracted DNA specimens
- Two shipments per year

### 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 Shipment
	IMD1	IMD2	IMD3	
Mitochondrial DNA deletion syndromes				3
MCAD				3
Mitochondrial cytopathies*				3

\*Includes disorders/diseases such as Leber hereditary optic neuropathy and myoclonus epilepsy with ragged red fibers (MERRF).

#### **Program Information**

- 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 Shipment
	SEC SEC1		
DNA sequencing interpretation challenge			3
DNA sequencing			3

### Additional Information

- 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.

#### **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 <u>via email</u> when the activity is available
- SEC1 Three 30.0-µg extracted DNA specimens; forward and reverse lyophilized primers are provided. Two shipments per year
- Results for both programs must be submitted online through e-LAB Solutions Suite



### 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.

### Pharmacogenetics PGX, PGX1, PGX2, PGX3

Analyte/Procedure	Program Code			Challenges per Shipment	
	PGX	PGX1	PGX2	PGX3	
CYP2C19					3
CYP2C9					3
CYP2D6					3
СҮРЗА4					3
СҮРЗА5					3
SLC01B1 (rs4149056)					3
VKORC1					3
<i>IL28B</i> (rs12979860)					3
HLA-B*15:02					3
HLA-B*57:01					3
DPYD					3
ТРМТ					3
UGT1A1					3

#### Program Information

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

#### 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 Shipment	
	RETT		
Rett ( <i>MECP2</i> ) genotyping	•	3	
Rett ( <i>MECP2</i> ) duplication/deletion analysis	I	3	

- Three 10.0-µg extracted DNA specimens
- Two shipments per year



CAP/ACMG Thrombophilia Mutations TPM			
Analyte/Procedure	Program Code	Challenges per Shipment	
	ТРМ		
Factor II (F2 gene, Prothrombin)	I	3	
Factor V Leiden (F5 gene)		3	

### Additional Information

This Survey is designed for the Cepheid GeneXpert factor II and factor V assays. DNA extraction for other assays/methods is NOT recommended.

#### **Program Information**

- Three 250.0-µL synthetic whole blood specimens
- Two shipments per year



## Red Blood Cell Antigen Genotyping RAG

Procedure	Program Code	Challenges per Shipment
	RAG	
Red blood cell antigen genotype with predictive phenotype	I	3

### **Program Information**

- Three 2.0-mL whole blood specimens
- Two shipments per year

Variant Interpretation Only Program VIP/VIP1			
Analyte/Procedure	Program Code	Challenges per Shipment	
	VIP/VIP1		
Variant interpretation online case review	I	3	

### Additional Information

VIP is an educational activity 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

- 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<sup>™</sup>) 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 <u>via email</u> when the activity is available



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

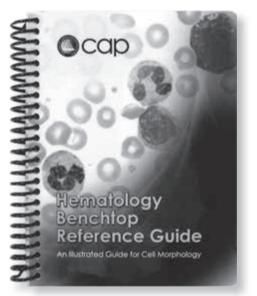
### Hematology Benchtop Reference Guide (HBRG)

- More than 50 different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- Six tabbed sections for easy reference
  - $\circ$  Erythrocytes
  - Erythrocyte Inclusions
  - Granulocytic (Myeloid) and Monocytic Cells
  - Lymphocytic Cells
  - Platelets and Megakaryocytic Cells
  - Microorganisms and Artifacts
- A durable and water-resistant format to withstand years of benchtop use—5" x 6½"

### Add it to your order.

### Or, view sample pages and purchase 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	2

### 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 gDNA specimen; one educational variant interpretation paper challenge
- 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		

#### **Program Information**

- Three 1.0-µg gDNA (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 cancer genes or mutation hotspots in solid tumors. Laboratories will be asked to identify somatic single nucleotide variants and small insertions or deletions in some of these 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%.

### Next-Generation Sequencing—Hematologic Malignancies NGSHM

Procedure	Program Code	Challenges per Shipment
	NGSHM	
Next-generation sequencing	I	3

#### **Program Information**

- Three 1.0-µg gDNA (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 some of these 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%.

### Next-Generation Sequencing Bioinformatics NGSB1, NGSB2

Procedure	Program Code		Challenges per Shipment
	NGSB1	NGSB2	
Illumina TruSeq Amplicon Cancer Panel			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 some of these 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 FASTQ file formats for the Ion Torrent AmpliSeq Cancer Hotspot v2 Panel
- Two online activities per year; your CAP shipping contact will be notified <u>via</u> <u>email</u> 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 254) 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. For the most up-to-date information on system requirements, go to cap.org and click **System Requirements**, located at the bottom of the home page.
- Due to the extremely large file sizes, a minimum allowable transfer speed of 40 Mbps or higher is needed to ensure successful transfer of your laboratory's sequencing files to the CAP. Contact your IT 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 and steps to provide your laboratory's exome file will be included in the kit materials.

- 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	I	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 254) 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)
  - o 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. For the most up-to-date information on system requirements, go to cap.org and click **System Requirements**, located at the bottom of the home page.
- Due to the extremely large file sizes, a minimum allowable transfer speed of 40 Mbps or higher is needed to ensure successful transfer of your laboratory's sequencing files to the CAP. Contact your IT 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 and steps to provide your laboratory's sequencing file will be included in the kit materials.

#### **Program Information**

- 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 <u>via email</u> when the activity is available

19

### 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 Shipm				
	MSI			
Microsatellite instability testing (DNA amplification)	I	3		
MLH1 promoter methylation analysis	I	1		

Laboratories performing DNA mismatch repair assessment by immunohistochemistry methods should see Survey MMR on page 278.

IGHV Mutation Analysis IGHV				
Analyte/Procedure	Program Code Challenges per Shipn			
	IGHV			
IGHV		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
	ISH	ISH2	
Epstein-Barr virus (EBV)			4
Human papillomavirus (HPV)			4
Kappa/Lambda (IGK/IGL)			4
<i>HER2</i> ( <i>ERBB2</i> ) gene amplification (brightfield)			10

Laboratories performing FISH for interphase chromosomal targets in paraffin sections refer to the Cytogenetics Surveys, page 243.

### Additional Information

Survey ISH2 is only for laboratories that perform both hybridization and interpretation under the same CLIA number.

### **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

### Program Information

- Three 20-µg DNA specimens (200 ng/µL)
- Two shipments per year

### **Program Information**

• 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 Shipment				
	MH05				
DNA purification	I	1			

#### Additional Information

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.

- Three 10.0-micron paraffin sections
- Two shipments per year

#### Neoplastic Cellularity NEO Procedure **Program Code Challenges per Shipment** NEO Online assessment of percent 10 neoplastic cellularity

### **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<sup>®</sup> 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

Sarcoma Translocation SARC				
Gene Program Code Challenges per Shipmen				
	SARC			
Sarcoma translocation* (RT-PCR)	I	3		

\*See translocation listing below.

Laboratories performing FISH for sarcoma translocation refer to the Cytogenetics Surveys, page 243.

### **Program Information**

- Three snap-frozen cell pellets from which approximately 5.0-µg of RNA can be extracted
- Two shipments per year

COL1A1/PDGFB, t(17;22) ETV6/NTRK3, t(12;15) EWSR1/ATF1, t(12;22) EWSR1/ERG, t(21;22) EWSR1/FLI1, t(11;22)

### Sarcoma Translocation Listing

EWSR1/FLI1 or EWSR1/ERG *EWSR1/WT1*, t(11;22) FUS/DDIT3, t(12;16) PAX3/FOX01, t(2;13) PAX7/FOX01, t(1;13)

PAX3/FOX01 or PAX7/FOX01 SS18/SSX1, t(X;18) SS18/SSX2, t(X;18) SS18/SSX1 or SS18/SSX2

19

Cell-free Tumor DNA CFDNA					
Analyte/Procedure Program Code Challenges per Shipment					
	CFDNA				
cfDNA		3			

#### Additional Information

- 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%.

Fusion RNA Sequencing RNA					
Analyte/Procedure	/Procedure Program Code Challenges per Shipm				
	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 259).
- Potential fusion variants include: CD74-ROS1, EML4-ALK, ETV6-NTRK3, FGFR3-TACC3, PAX8-PPARG, SLC45A3-BRAF.
- Specific intragenic fusion/exon skipping variants may also be included, specifically *EGFRvIII* and *MET* exon 14 skipping.

### Solid Tumor—Other BRAF, EGFR, KRAS, KIT

Analyte	Program Code				Challenges per Shipment
	BRAF EGFR KRAS KIT				
BRAF					3
EGFR					3
KRAS					3
КІТ					3
PDGFRA					3

#### **Program Information**

- Three 125-ng DNA (25 ng/mL) specimens
- Two shipments per year

### **Program Information**

- Three 500-ng RNA (20 ng/µL) specimens
- Two shipments per year

- BRAF, EGFR, KRAS -Paraffin-embedded sections or shavings
- KIT/PDGFRA -
  - One specimen containing four 10.0-micron unstained paraffin section slides and one H&E slide
  - Two 1.0-µg gDNA (50 ng/µL) specimens
- 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	1	3			
KRAS	1	3			
NRAS	I	3			
PDGFRA	I	3			
PIK3CA	I	3			

#### **Program Information**

- Three 2.0-µg gDNA (50 ng/µL) specimens for laboratories performing molecular testing on multiple targets
- Two shipments per year

### Additional Information

*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 254), 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 Shipme					
	GLI				
MGMT	I	3			
IDH1, IDH2	I	3			
10q (PTEN) deletion	I	1			

- Four 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
	MHO, MHO1	MHO2, MHO3	MH05	
Lymphoid malignancy genotyp	ing			
IGH				3
IGH/BCL2 major				3
IGH/BCL2 minor				3
IGH/CCND1				3
IGK				3
TRB				3
TRG				3
Myeloid malignancy genotypin	g			
BCR/ABL1 p190				3
BCR/ABL1 p210		I		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		I		3
PML/RARA				3
RUNX1/RUNX1T1				3
DNA extraction and amplification from formalin- fixed, paraffin-embedded (FFPE) tissue			I	1

### **Program Information**

- MHO One sample vial containing purified DNA (200 µg/mL per vial) for each specimen
- MHO1 MHO 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
- MHO3 MHO2 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 MH05 or international shipments)

### Minimal Residual Disease MRD, MRD1, MRD2

Analy	rte	Program Code			Challenges per Shipment
		MRD	MRD1	MRD2	
BCR/	<i>ABL1</i> p190				3
BCR/	⁄ABL1 p210				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

## **20** Anatomic Pathology



### Depend on our commitment to slide quality for PAP PT and PAP Education programs.

- Every slide is reviewed and approved by pathologists and cytotechnologists before it is put in circulation.
- All slide sets are reviewed every six months by a staff cytotechnologist.
- Slides that do not maintain consensus grading are removed from the program and reviewed by a committee of pathologist experts.

### Anatomic Pathology

Surgical Pathology	
General Immunohistochemistry	
Predictive Markers	
Specialty Anatomic Pathology	
Cytopathology	

### New Programs NEW



CAP/NSH HistoQIP Central Nervous System IHC (HQNEU)	
CAP/NSH HistoQIP In Situ Hybridization (Kappa/Lambda) (HQISH)	
CAP/NSH HistoQIP Melanoma IHC (HQMEL)	
Dermatopathology Immunohistochemistry (DPIHC)	
c-Myc/Bcl-2 Immunohistochemistry Tissue Microarray (MYBC)	
CAP/ACMG HER2 Gene Amplification by FISH, Interpretation Only (CYHI)	

### **Program Changes**

BRAF V600E (BRAFV) Additional Mailing	278
CD20 Immunohistochemistry Tissue Microarray (PM3) Additional Mailing	279
PD-L1 (PDL1) Additional Mailing	
Highly Sensitive Anaplastic Lymphoma Kinase IHC (PM6) Additional Mailing	

20

### Surgical Pathology

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

	Online Performan in Surgical Pa	ice Improvement thology PIPW/P	
Program		Program Code	Challenges per Shipment

Flogram	Fiogram code	chattenges per Sinpinent
	PIPW/PIPW1	
Surgical pathology case review	I	10

### 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:
  - A variety of neoplastic and nonneoplastic lesions
  - 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<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
- 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	Program Code	Challenges per Shipment
	PIP/PIP1	
Surgical pathology case review	l	10

### Additional Information

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:
- A variety of neoplastic and nonneoplastic lesions
- Inflammatory and infectious diseases
- o 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<sup>™</sup>) per pathologist for completion of an entire year
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Four shipments per year



### Medical Kidney Diseases: Morphology-Based Novel Approach to Renal Biopsy (PUB129)

This book is designed to provide brief and concise yet comprehensive information for practicing pathologists, pathology residents, and nephrology fellows. It presents a simple and practical approach to renal biopsy by providing a pertinent differential diagnosis related to various patterns of injuries involving renal parenchyma by light microscopy, reaching a correct diagnosis by assimilating immunofluorescence and electron microscopy findings. The book is divided into sections on glomerular, vascular, tubulointerstitial, and transplant renal pathology.

### Add it to your order.

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- printed books at estore.cap.org
- ebooks at ebooks.cap.org



Item number: PUB129 Softcover; 92 pages; 245+ photomicrographs, exhibits, and tables; 2019

Virtual Biopsy Program VBP/VBP1			
Program	Program Code Challenges per Shipme		
	VBP/VBP1		
Online biopsy case review		5	

### Additional Information

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:
  - 2020-A Upper Gastrointestinal Tract Biopsy
  - 2020-B Bone Biopsy
  - o 2020-C Lymph Node Biopsy
  - o 2020-D Surgical Pathology Biopsy (various sites)
- See system requirements on page 13.

- 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<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
- Four online activities per year; your CAP shipping contact will be notified <u>via</u> <u>email</u> when the activity is available



### Digital Slide Program—Dermatopathology DPATH/DPATH1

Program	Program Code	Challenges per Shipment
	DPATH/DPATH1	
Online dermatopathology case review		6

### Additional Information

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.

- 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 <u>via email</u> when the activity is available



Hematopathology Online Education HPATH/HPATH1			
gram		Program Code	Challenges per S

Program	Program Code	Challenges per Shipment
	HPATH/HPATH1	
Hematopathology online case review	I	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<sup>™</sup>) 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 <u>via email</u> when the activity is available



### Clinical Pathology Improvement Programs (CPIP/CPIP1)

CPIP supports pathologists who principally practice clinical pathology as well as those who primarily practice anatomic pathology but cover clinical pathology. A diverse portfolio of real-life case scenarios, including images and clinical background, help pathologists to stay abreast of issues and advances in the lab.

Designed for pathologists, by pathologists. Each case is developed and peer-reviewed ensuring what you learn is practical and easily applied to your work. Thought provoking questions with feedback and a multiple-choice post-test allow you to assess and confirm your diagnostic skills. Participants who earn a passing score on the post-test may apply their earned credits to the ABP's CC requirements.

### Clinical Pathology Improvement Program CPIP/CPIP1

Program Name	Program Code	Cases/Year
	CPIP/CPIP1	
Online cases in clinical pathology	I	12 (One per month. See below.)

#### Additional Information

Consider the CPIP program if you are a:

- Medical director seeking to continuously improve the clinical pathology knowledge and collective skills of your pathology team.
- Pathologist with clinical and/or laboratory management responsibilities.
- Pathologist seeking CME/SAM or CC credits in clinical pathology.
- Subspecialty clinical pathologist who needs to keep current.

To learn more visit www.cap.org and search CPIP.

Discipline	Case Schedule (subject to change)	Month 2020
Lab Management	How to retire a test	January
Toxicology	Non-cancer pain management	February
Hematology	Molecular approach to myeloid neoplasms	March
Chemistry	Growth hormone testing	April
Transfusion Medicine	Blood bank education for clinical staff	Мау
Hematology	Neutrophilia	June
Microbiology	Automation in clinical microbiology	July
Transfusion Medicine	Utilization of platelets and plasma	August
Hematology	Flow/lymphocytosis	September
Molecular Pathology	Cell-free and/or circulating tumor cell DNA testing for solid tumors	October
Chemistry	Adrenal function testing	November
Lab Management	Physician wellness	December

- CPIP One online clinical laboratory case per month
- CPIP1 Reporting option with CME/SAM credit for each additional pathologist (within the same institution); 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



Touch Imprint/Crush Preparation TICP/TICP1				
Procedure	Program Code Challenges per Ship			
	TICP/TICP1			
Online slide and image program in rapid assessment case review	B	4		

### Additional Information

- 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 gastrointestinal and miscellaneous topics.
- 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/ cytotechnologist (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





CAP/NSH HistoQIP HQIP				
Stain/Tissue			enges per pment	
	HQIP	Α	В	
H&E – Bone marrow needle core biopsy	I	1		
H&E – Lymph node, excision specimen	I	1		
IHC – Podoplanin, appendix specimen	I	1		
IHC – CD5, lymph node nonneoplastic specimen	I	1		
Special stain – Reticulin, liver biopsy specimen	I	1		
H&E – Colon resection	I		1	
H&E – Stomach resection	I		1	
IHC – SOX10, skin resection	I		1	
IHC – E-cadherin, ductal carcinoma (breast) resection	I		1	
Special stain – Elastin, lung resection			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

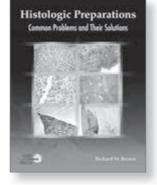
HistoQIP improves the preparation of histologic slides in all anatomic pathology laboratories. In this educational program, participants will receive an evaluation specific to their laboratory, an education critique, and a participant summary that includes peer comparison data, evaluators' comments, and performance benchmarking data. An expert panel of pathologists, histotechnologists, and histotechnicians will evaluate submitted slides for histologic technique using uniform grading criteria.

### 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, along with mycobacteria, *Helicobacter pylori*, spirochetes, and fungi.

### Add Histologic Preparations: Common Problems and Their Solutions (PUB123) to your order. Or, view sample pages and purchase online:

- printed books at estore.cap.org
- ebooks at ebooks.cap.org



**Item number:** PUB123 Softcover; 168 pages; 300+ photomicrographs, figures, and tables; 2009

HistoQIP IHC programs assess preanalytic steps. For immunohistochemistry programs that focus on analytic and postanalytic (interpretive) steps, see the immunohistochemistry programs on pages 272-276.

CAP/NSH HistoQIP	
Central Nervous System IHC	HQNEU

Stain/Tissue	Program Code	Challen Ship	iges per ment
	HQNEU	Α	В
H&E – Glioblastoma	I	1	
IHC – GFAP positive glioblastoma	I	1	
IHC – p53 positive glioblastoma	I	1	
H&E – IDH1 positive mutant glioma	I	1	
IHC – IDH1 (R132H) positive mutant glioma	I	1	
H&E – Low grade astrocytoma	I		1
IHC – S100 positive low grade astrocytoma	I		1
IHC – Ki-67 positive low grade astrocytoma	I		1
H&E – ATRX positive wild-type glioma	I		1
IHC – ATRX positive wild-type glioma	I		1

#### Program Information

- Participants may submit up to three IHC and two 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 central nervous system gliomas.

### CAP/NSH HistoQIP In Situ Hybridization (Kappa/Lambda) HQISH

Program Code	Challenges per Shipment			
HQISH	Α	В		
	1			
I	1			
	1			
	1			
I	1			
		1		
		1		
I		1		
I		1		
		1		
	Program Code	Program Code Challen Ship		

### **Program Information**

- Participants are to submit an H&E, positive and negative reagent control slides and kappa and lambda DNA/RNA ISH 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 ISH slides in all anatomic pathology laboratories involved in the handling of specimens undergoing analysis for kappa and lambda expression by chromogenic in situ hybridization.

HistoQIP IHC programs assess preanalytic steps. For immunohistochemistry programs that focus on analytic and postanalytic (interpretive) steps, see the immunohistochemistry programs on pages 272-276.

20

### CAP/NSH HistoQIP Melanoma IHC HQMEL

Stain/Tissue	Program Code	Challenges per Shipment	
	HQMEL	Α	В
H&E – Melanoma, skin biopsy		1	
IHC – Melan A/MART-1 positive melanoma, skin biopsy	I	1	
IHC – SOX10 positive melanoma, skin biopsy	I	1	
H&E – PD-L1 positive melanoma, skin biopsy		1	
IHC – PD-L1 positive melanoma, skin biopsy	I	1	
H&E – Melanoma, skin resection			1
IHC – S100 positive melanoma, skin resection			1
IHC – HMB-45 positive melanoma, skin resection	I		1
H&E – BRAF V600E positive mutated melanoma	I		1
IHC – BRAF V600E positive mutated melanoma	I		1

#### **Program Information**

- Participants may submit up to three IHC and two H&E stained coverslipped glass slides (one from each category) per mailing
- Two shipments per year



### Additional Information

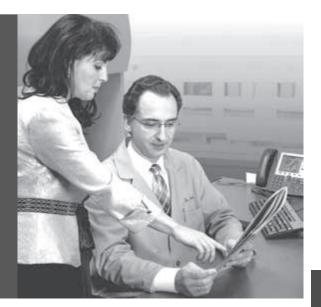
This program augments efforts to improve the preparation of H&E and immunohistochemical slides in all anatomic pathology laboratories involved in the handling of skin specimens containing melanoma.

### Practice Management Resources will help you successfully advance your practice.

Enhance the profitability of your practice while sharpening your skillset with our practice management training, tools, and resources, including:

- Business development and marketing
- Coding and payment
- Compliance and risk management
- Human Resources

Learn what medical school didn't teach you by searching *Practice Management* on cap.org.



HistoQIP IHC programs assess preanalytic steps. For immunohistochemistry programs that focus on analytic and postanalytic (interpretive) steps, see the immunohistochemistry programs on pages 272-276.

### HQIP Whole Slide Image Quality Improvement Program HQWSI

Stain/Tissue	Program Code	Challenges per Shipment	
	HQWSI	Α	В
H&E – Breast resection	I	1	
H&E – Lung resection	I	1	
H&E – Breast needle core biopsy	I	1	
H&E – Prostate needle core biopsy	I	1	
H&E – Colon resection	I		1
H&E – Kidney resection	I		1
H&E – Colon biopsy	I		1
H&E – Skin punch biopsy	I		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



### CAP/NSH HistoQIP—IHC HQIHC

Stain/Tissue			lenges per nipment	
	HQIHC	А	В	
IHC – Desmin, leiomyoma	I	1		
IHC – CD20, tonsil resection	I	1		
IHC – ER, tonsil resection	I	1		
IHC – BCL6, follicular lymphoma	I	1		
IHC – GATA3, bladder biopsy	I	1		
IHC – Calretinin, appendix	I		1	
IHC – Pancytokeratin, liver resection	I		1	
IHC – PR, breast core biopsy	I		1	
IHC – PAX5, tonsil resection	I		1	
IHC – NKX3.1, prostatic adenocarcinoma	I		1	

### **Program Information**

- Participant laboratories may submit up to five 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.

20

HistoQIP IHC programs assess preanalytic steps. For immunohistochemistry programs that focus on analytic and postanalytic (interpretive) steps, see the immunohistochemistry programs on pages 272-276.

### CAP/NSH HistoQIP Mismatch Repair IHC HQMMR

Stain/Tissue	Program Code	Challenges per Shipmer	
	HQMMR	Α	В
H&E – Colon adenocarcinoma	I	1	
IHC – MLH1 (colon adenocarcinoma)	I	1	
IHC – MSH2 (colon adenocarcinoma)	I	1	
IHC – MSH6 (colon adenocarcinoma)	I	1	
IHC – PMS2 (colon adenocarcinoma)	I	1	
H&E – Endometrial adenocarcinoma	I		1
IHC – MLH1 (endometrial adenocarcinoma)	I		1
IHC – MSH2 (endometrial adenocarcinoma)	I		1
IHC – MSH6 (endometrial adenocarcinoma)	I		1
IHC – PMS2 (endometrial adenocarcinoma)			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 colonic and endometrial tumors performing mismatch repair IHC.

### Laboratory Administration for Pathologists, Second Edition (PUB312)

Laboratory Administration for Pathologists is designed to provide pathologists with an overview of the fundamentals of management and leadership, addressing the specific role and responsibility of the pathologist in directing the laboratory.

- Provides information for both clinical and anatomic pathology practice
- Includes an overview of patient safety not available in the first edition
- Covers financial management of the laboratory and the pathology practice
- Geared for trainees and those entering practice while appropriate for all pathologists

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Item number: PUB312 Hardcover; 296 pages; 2019

LABORATORY ADMINISTRATION FOR

PATHOLOGISTS

2nd

Edition

HistoQIP IHC programs assess preanalytic steps. For immunohistochemistry programs that focus on analytic and postanalytic (interpretive) steps, see the immunohistochemistry programs on pages 272-276.

20

### CAP/NSH HistoQIP Non-small Cell Lung Carcinoma IHC HQNSC

Stain/Tissue	Program Code	Challenges per Shipment	
	HQNSC	Α	В
H&E – Lung adenocarcinoma	I	1	
IHC – TTF-1 (lung adenocarcinoma)	I	1	
IHC – Napsin-A (lung adenocarcinoma)	I	1	
H&E – ALK (positive lung adenocarcinoma)	I	1	
IHC – ALK (positive lung adenocarcinoma)	I	1	
H&E – Lung squamous cell carcinoma	I		1
IHC – p40/p63 (lung squamous cell carcinoma)	I		1
IHC – CK5/6 (lung squamous cell carcinoma)	I.		1
H&E – PD-L1 (positive lung squamous cell carcinoma)	I		1
IHC – PD-L1 (positive lung squamous cell carcinoma)	I		1

#### **Program Information**

- Participants may submit up to three IHC and two 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	Brogram Codo	Challanges	or Shinmont
Stalli/ IISSue	Program Code	Chattenges p	er Shipment
	HQIPBX	Α	В
H&E – Bladder biopsy		1	
H&E – Cervical biopsy		1	
H&E – Skin punch biopsy		1	
H&E – Stomach biopsy		1	
H&E – Colon biopsy			1
H&E – Endometrial biopsy			1
H&E – Prostate needle biopsy			1
H&E – Breast core biopsy			1

### **Program Information**

- Participants may submit up to four H&E stained and coverslipped glass slides (one from each category) per mailing
- Two shipments per year



#### 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.

HistoQIP IHC programs assess preanalytic steps. For immunohistochemistry programs that focus on analytic and postanalytic (interpretive) steps, see the immunohistochemistry programs on pages 272-276.

### CAP/NSH HistoQIP Specialty Series HQBX1, HQBX2, HQBX3, HQBX4

Stain/Tissue	Program Code			Challenges per Shipment		
	HQBX1	HQBX2	HQBX3	HQBX4	A .	В
Gastrointestinal Biopsy Module	1	1	1	1		
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						
H&E – Alopecia					1	1
H&E – Skin excisional biopsy (large excision)					1	1
H&E – Skin punch biopsy					1	1
H&E – Skin shave biopsy					1	1
Urogenital Tract Biopsy Module				^		
H&E – Bladder biopsy (nonneoplastic)					1	1
H&E – Bladder biopsy (with carcinoma)					1	1
H&E – Prostate needle biopsy (nonneoplastic)					1	1
H&E – Prostate needle biopsy (with carcinoma)					1	1
Gynecological Biopsy						
H&E – Cervical biopsy					1	1
H&E – Endometrial biopsy					1	1
H&E – Cone/Leep biopsy					1	1
H&E – Vagina biopsy					1	1

### Additional Information

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.

### **Program Information**

- 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



HistoQIP IHC programs assess preanalytic steps. For immunohistochemistry programs that focus on analytic and postanalytic (interpretive) steps, see the immunohistochemistry programs on pages 272-276.

### 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 Shipm		
МК			
Immunohistochemistry	I	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	I	10	

### **Program Information**

- One 10-core tissue microarray slide
- Two shipments per year

Dermatopathology Im DPI	istry	
Procedure	Program Code	Challenges per Shipment
	DPIHC	
Dermatopathology	I	8

### **Program Information**

- Six glass slides with unstained tissue sections from two separate cases; additional slides provided for an H&E stain, four to be stained and one for negative control
- Two shipments per year

### **Program Information**

- Four 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

# DNA Mismatch Repair MMR

Procedure	Program Code	Challenges per Shipment	
	MMR		
DNA mismatch repair by immunohistochemistry	I	4	

If your laboratory performs DNA mismatch repair by molecular methods, see the MSI program on page 258.

20

These general immunohistochemistry Surveys assess analytic and postanalytic (interpretive) steps. For Surveys focusing on preanalytic steps, see the HistoQIP IHC programs on pages 272-276.

PD-L1 PDL1			
Procedure Program Code Challenges per Shipmen			
	PDL1		
PD-L1	I	10	

#### **Program Information**

- One 10-core tissue microarray slide; additional slides provided for H&E and PD-L1 control
- Two shipments per year

### CD117, CD20 Immunohistochemistry Tissue Microarray PM1, PM3

Analyte	Program Code		Challenges per Shipment
	PM1	PM3	
CD117			10
CD20			10

For ER/PgR testing, see the PM2 program on page 281.

c-Myc

Bcl-2

### CD30 Immunohistochemistry Tissue Microarray CD30

I.

E.

10

10

Analyte	Program Code	Challenges per Shipment
	CD30	
CD30	I	10

#### **Program Information**

- PM1, PM3 One 10-core tissue microarray slide per predictive marker
- PM1: One shipment per year; PM3: Two shipments per year

### **Program Information**

- One 10-core tissue microarray slide
- Two shipments per year

c-Myc/Bcl-2 I Tissue M	try	
Analyte	Program Code	Challenges per Shipment
	MYBC	

#### **Program Information**

- Two 10-core tissue microarray slides, one for c-Myc and one for Bcl-2
- Two shipments per year

Program Information
One 10-core tissue microarray slide
Two shipments per year

# **Anatomic Pathology**

20

p16 Immunohistochemistry Tissue Microarray P16				
Analyte Program Code Challenges per Shipment			Challenges per Shipment	
P16				
p16			10	

These general immunohistochemistry Surveys assess analytic and postanalytic (interpretive) steps. For Surveys focusing on preanalytic steps, see the HistoQIP IHC programs on pages 272-276.

Immunohistochemistry Tissue Microarray Series PM5				
Analyte Program Code Challenges per Shipment				
PM5				
pan-TRK	I	10		
Ki-67	I	10		

#### **Program Information**

- Two 10-core tissue microarray slides, one for pan-TRK and one for Ki-67
- One shipment per year

### 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. The IHC markers for this Survey may change from those listed above due to development constraints.

Highly Sensitive Anaplastic Lymphoma Kinase IHC PM6			
Procedure	Program Code	Challenges per Shipment	
	PM6		
Highly sensitive anaplastic lymphoma kinase IHC (ALK)	I	10	

### Program Information

- One 10-core tissue microarray slide
- Two shipments 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.

These general immunohistochemistry Surveys assess analytic and postanalytic (interpretive) steps. For Surveys focusing on preanalytic steps, see the HistoQIP IHC programs on pages 272-276.

20

### **Predictive Markers**

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

HER2 Immunohistochemistry HER2						
Analyte	nalyte Program Code Challe					
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	I	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	Analyte Program Code Challenges per Ship						
	PM2						
Estrogen receptor (ER)		20					

E.

20

### **Program Information**

- Four 10-core microarray slides, two for ER and two for PgR
- Two shipments per year

# **Anatomic Pathology**

The PM2 program fulfills the proficiency testing requirement stated in the

Additional Information

Progesterone receptor (PgR)

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.

These general immunohistochemistry Surveys assess analytic and postanalytic (interpretive) steps. For Surveys focusing on preanalytic steps, see the HistoQIP IHC programs on pages 272-276.

### CAP/ACMG HER2 Gene Amplification by FISH, Interpretation Only CYHI

Analyte/Procedure	Program Code	Challenges per Shipment
	СҮНІ	
<i>HER2</i> gene amplification in breast cancer, interpretation only	I	3

### Additional Information

- *HER2* Gene Amplification by FISH, Interpretation Only, is an exercise and is not considered proficiency testing. This exercise may be used to meet the requirements for alternative assessment.
- This program is for laboratories that perform <u>interpretation only</u> for HER2 FISH for breast cancer.
- For laboratories that perform both hybridization and interpretation for HER2 FISH for breast cancer under the same CLIA number, see page 243.

#### **Program Information**

NEW

- Three online, educational interpretation dry challenges; your CAP shipping contact will be notified <u>via email</u> when the activity is available
- Two shipments per year

Accing American College of Medical Genetics and Genomics Translate Genomics Health

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### **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 <b>I</b> 5						

Each case includes case description, gross and/or microscopic images, and case discussion with sample death certificate, key teaching points, and current references.

- AUP Online activity providing five cases; reporting with CME/SAM or CE credit is available for one pathologist or pathologists' assistant; for each additional pathologist/pathologists' assistant order AUP1
- · Includes the option to download program content
- AUP1 Reporting option with CME/SAM or CE credit for each additional pathologist or pathologists' assistant (within the same institution); must order in conjuction with Survey AUP
- · Earn a maximum of 12.5 CME/SAM credits (AMA PRA Category 1 Credits<sup>™</sup>) per pathologist and a maximum of 12.5 CE credits per pathologists' assistant for completion of entire year
- · This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Two online activities per year





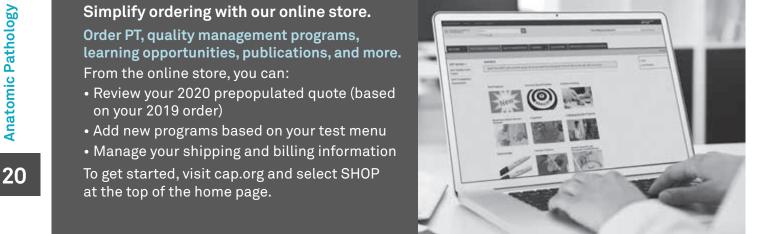
Neuropathology Program NP/NP1					
Program	Program Code Challenges per Shipment				
	NP/NP1				
Neuropathology online case review	I	8			

#### Additional Information

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 at least four of the eight cases.

- 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<sup>™</sup>) per pathologist
- This activity meets the ABP CC Part IV Practice Performance Assessment requirements
- Powered by DigitalScope technology
- Two online activities per year





### Cytopathology

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

### Glass Slide Gynecologic Cytopathology PT Program with Glass Slide PAP Education PAP PT

Slide Type		Program Code				Challenges per Year	
	PAPCPT	PAPKPT	PAPMPT	PAPLPT	PAPJPT	Proficiency Testing	Education
Conventional							
SurePath							
ThinPrep						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
      - A mailing ships February
      - <sup>o</sup> B mailing ships August
    - Series 2
      - A mailing ships May
      - <sup>o</sup> B mailing ships November
  - c. Add the PAP Education series number after the slide type program code (eg, PAPCPT1, PAPCPT2).
- 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, 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							
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
      - <sup>o</sup> A mailing ships February
    - <sup>o</sup> 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, 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		Progra	m Code		Challenges per Shipment
	CHPVD	CHPVM	CHPVK	CHPVJ	
HPV					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<sup>®</sup> Specimen Transport Medium<sup>™</sup> (STM)
- CHPVM ThinPrep PreservCyt<sup>®</sup> 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

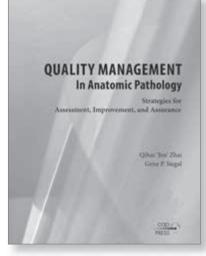
## How current is your laboratory quality management plan?

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.

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**Item number:** PUB125 Hardcover; 228 pages; 135+ figures and tables; 2017

Touch Imprint/Crush Preparation TICP/TICP1						
Procedure	Program Code	Challenges per Shipment				
	TICP/TICP1					
Online slide and image program in rapid assessment case review	I	4				

#### Additional Information

- 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 gastrointestinal and miscellaneous topics.
- 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/ cytotechnologist (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

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#### Nongynecologic Cytopathology Education Program NGC/NGC1

Procedure	Program Code	Challenges per Shipment
	NGC/NGC1	
Nongynecologic cytopathology case review – glass slides	I	5
Nongynecologic cytopathology case review – online	I	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<sup>™</sup>) 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 own CAP Profile?

Each laboratory staff member should have their own profile. Your profile is transferable 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

#### Digital Slide Program in Fine-Needle Aspiration FNA/FNA1

Procedure	Program Code	Challenges per Shipment
	FNA/FNA1	
Online program in fine-needle aspiration case review	I	5

#### Additional Information

- 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 FNA of unusual variants of common tumors and EBUS/EUS topics.
- May include rarely captured cases that may not be available on the glass slide.
- See system requirements on page 13.

#### **Program Information**

- 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<sup>™</sup>) 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	I	5

#### Additional Information

- 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 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



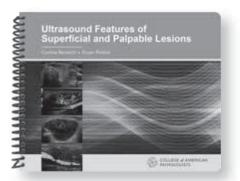
#### Ultrasound Features of Superficial and Palpable Lesions (PUB128)

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.

### Add Ultrasound Features of Superficial and Palpable Lesions (PUB128) to your order.

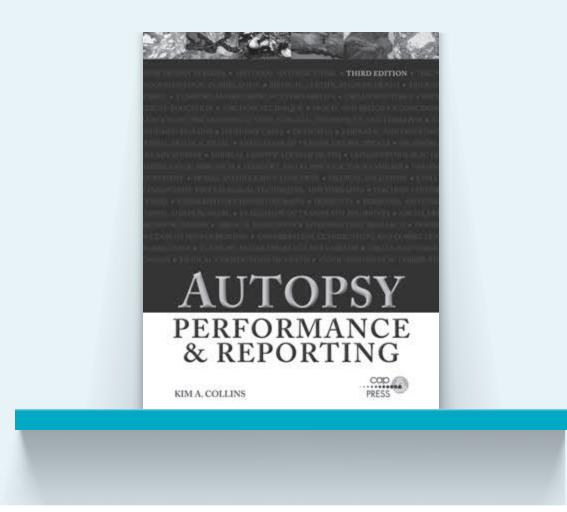
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Item number: PUB128 Spiral bound; 200 pages; 375 images and illustrations; 2018

# 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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## **21** Forensic Sciences



#### We live our mission of quality.

- More than 8,000 CAP-accredited laboratories
- Approximately 4,000 CAP inspections annually
- More than 22,500 laboratory sites using CAP proficiency testing

#### **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	eedure Program Code Challenges per Shipmer					
	FR/FR1					
Forensic pathology cases	I	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.

#### **Program Information**

- 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<sup>™</sup>) 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



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

#### Clinical Toxicology Testing: A Guide for Laboratory Professionals, Second Edition (PUB227)

This book is a practical guide, written for pathologists, to directing hospital toxicology laboratory operations. This new edition features expanded sections on testing in the clinical setting, methodologies, and more user-friendly information on specific analytes. It provides the reader with a comprehensive view of what is needed—and expected—when offering a clinical toxicology service.

Contents include:

- Toxicology testing in the clinical setting, including new chapters on pediatric testing and chronic opioid therapy
- Toxicokinetics and methodologies, with new and expanded information on laboratory-developed tests, screening assays, targeted tests, and oral fluids and alternative matrices
- Specific analytes, including novel psychoactive substances and the use of medical cannabis
- Appendices on such useful topics as urine and serum screens, therapeutic drug monitoring, and proficiency testing

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#### 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

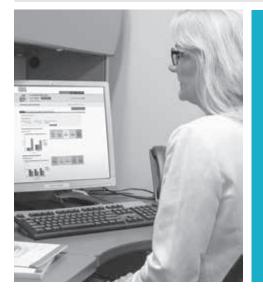
Challenges will include a mix of drugs from the list below.

6-acetylmorphine (6-AM) 7-aminoclonazepam 7-aminoflunitrazepam Acetaminophen Alpha-hydroxyalprazolam Alprazolam Amitriptyline Amphetamine Benzoylecgonine Brompheniramine **Butalbital** Carisoprodol Chlorpheniramine Clonazepam Cocaethylene Cocaine Codeine Cyclobenzaprine\* Delta-9-THC Delta-9-THC-COOH Desipramine Desmethylcyclobenzaprine Dextromethorphan Diazepam Diphenhydramine Doxepin

Ecgonine ethyl ester	Norfluoxetine
Ecgonine methyl ester	Norketamine
Ephedrine	Norpropoxyphene
Fentanyl*	Norsertraline
Fluoxetine	Nortriptyline
Flurazepam*	Oxazepam
Gamma-hydroxybutyrate (GHB)	Oxycodone
Hydrocodone	Oxymorphone
Hydromorphone	Paroxetine
Imipramine	Phencyclidine
Ketamine	Phenethylamine
Lorazepam	Phenobarbital
Lysergic acid diethylamide (LSD)	Phentermine
Meperidine*	Phenytoin
Meprobamate	Propoxyphene
Methadone	Pseudoephedrine
Methadone metabolite (EDDP)	Salicylate
Methamphetamine	Secobarbital
Methylenedioxyamphetamine (MDA)	Sertraline
Methylenedioxymethamphetamine	Temazepam
(MDMA)	Tramadol*
Morphine*	Trazodone
N-desmethyltramadol	Zolpidem
Nordiazepam	
Nordoxepin	
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	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
1,25 dihydroxy Vitamin D		BMV1	Bone Markers and Vitamins	86	25-OH vitamin D, total (cont.)	Х	VITD	25-OH Vitamin D	84
1,5-anhydroglucitol		AG	1,5-Anhydroglucitol	71	50:50 mixing study, APTT		CGE/CGEX	Coagulation, Extended	161
3-methoxytyramines		N/NX	Urine Chemistry, Special	69			CGS1	Coag Special, Series 1	162
4-hydroxytriazolam		DFC	Drug-Facilitated Crime	108	50:50 mixing study, PT		CGE/CGEX	Coagulation, Extended	161
5-hydroxyindoleacetic acid, qualitative		N/NX	Urine Chemistry, Special	69	ABO grouping	X	CGS1 J,J1	Coag Special, Series 1 Transfusion Medicine	162 220
5-hydroxyindoleacetic acid, quantitative	Х	N/NX	Urine Chemistry, Special	69		X	JAT	Transfusion Medicine, Automated	220
6-acetylmorphine (6-AM)		DMPM	Drug Monitoring for Pain Management				JATE1	Transfusion Medicine, Automated, Educational	221
		FTC	Forensic Toxicology, Criminalistics	104			JATQ	Quality Cross Check, Transfusion Medicine	49
		OFD	Oral Fluid for Drugs of Abuse	100			TMCA	Transfusion Medicine, Competency	225
	Т	Toxicology	96				Assessment		
	UDC	Forensic Urine Drug Testing, Confirmatory	99	ABO subgroup typing Acetaminophen	X	ABOSG CZ, CZ2X,	ABO Subgroup Typing Chemistry and TDM	222 56-58	
		UT	Urine Toxicology	96	Acetamnophen		CZ, CZZX, CZX, Z	Chemistry and TDM	50-58
7-aminoclonazepam		DFC	Drug-Facilitated Crime	108			CZQ	Quality Cross Check, Chemistry and TDM	41
		DMPM	Drug Monitoring for Pain Management	107			FTC	Forensic Toxicology,	104
		FTC	Forensic Toxicology, Criminalistics	104	I		LN3	Criminalistics TDM Cal Ver/Lin	121
		Т	Toxicology	96		X	SDS	Serum Drug Screen	101
		UT	Urine Toxicology	96			Т	Toxicology	96
7-aminoflunitrazepam		DFC	Drug-Facilitated Crime	108			UDS, UDS6	Urine Drug Screen	98
		FTC	Forensic Toxicology,	104			UT	Urine Toxicology	96
		Т	Criminalistics Toxicology	96	Acetone	Х	AL1	Whole Blood Alcohol/ Volatiles	101
		UT	Urine Toxicology	96		X	AL2	Serum Alcohol/Volatiles	101
10q (PTEN) deletion		GLI	Glioma	261		^	SDS	Serum Drug Screen	101
11-deoxycortisol		Y/YY	Ligand Assay, Special	84			VF	Vitreous Fluid, Post-	101
11-hydroxy-THC		THCB	Blood Cannabinoids	106			VF	mortem	101
17-hydroxycorticosteroids		N/NX	Urine Chemistry, Special	69	Acid phosphatase	X	C3, C3X, CZ,	Chemistry and TDM	56-58
17-hydroxyprogesterone	Х	Y/YY	Ligand Assay, Special	84	. p p		CZ2X, CZX		
17-ketosteroids		N/NX	Urine Chemistry, Special	69			CZQ	Quality Cross Check,	41
25-OH vitamin D, total	Х	ABVD	Accuracy-Based	112	Acid-fast smear	v	E	Chemistry and TDM	100
			Vitamin D		Acid-rast smear	X	E E1	Mycobacteriology Mycobacteriology, Ltd	188
		LN40	Vitamin D Cal Ver/Lin	130	I	^	<b>L</b> I	wycobacteriology, Lla	100

Analyte/Procedure	LAP ENR		Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
Acinetobacter calcoaceticus-baumannii complex		IDPN	Infectious Disease, Pneumonia Panel	203	Alanine aminotransferase (ALT/ SGPT)	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58
Activated clotting time	Х	CT, CT1, CT2, CT3, CT5	ACT	164			CZQ	Quality Cross Check, Chemistry and TDM	41
		CTQ, CT1Q,	Quality Cross Check,	48			IFS	Interfering Substances	133
		CT2Q, CT3Q, CT5Q	ACT				LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		POC14, POC15, POC16	Competency Activated Clotting Time	54			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal	120
Activated partial thromboplastin time	X	CGB	Basic Coagulation	160	Albumin	X	C1, C3, C3X,	Ver/Lin Chemistry and TDM	56-58
		CGE/CGEX	Coagulation, Extended	161			CZ, CZ2X,		
	Х	CGL	Coagulation, Limited	160			CZX		
		CGLQ	Quality Cross Check, Coagulation, Limited	47			CZQ	Quality Cross Check, Chemistry and TDM	41
		CGS1	Coag Special, Series 1	162			FLD	Body Fluid	72
		CGS3	Coag Special, Series 3	162			FLDQ	Quality Cross Check,	42
		CGS4	Coag Special, Series 4	162			150	Body Fluid Chemistry	400
		DBGN	Anticoagulant Monitoring, Dabigatran	163			IFS LN2	Interfering Substances Chemistry, Lipid,	133 120
	FNPX	Anticoagulant Monitoring, Fondaparinux	163			LN2BV	Enzyme Cal Ver/Lin Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal	120	
		RVBN	Anticoagulant Monitoring, Rivaroxaban	163				Ver/Lin	
Activated protein C		CGE/CGEX	Coagulation, Extended	161			SPE	Protein Electrophoresis	76
resistance		CGS2	Coag Special, Series 2	162	Albumin, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Active vitamin B12		MMA	MMA and Active Vitamin	82	Albumin, urine		ABU	Accuracy-Based Urine	113
			B12				LN20	Urine Albumin	126
Acylcarnitine		BGL	Biochemical Genetics	245		X	U	Urine Chemistry, General	68
ADAMTS13		CGS7	ADAMTS13	162	Albumin: creatinine ratio		ABU	Accuracy-Based Urine	113
Adenovirus	x	GIP GIP5	Gastrointestinal Panel Gastrointestinal Panel	204 204			LN20	Urine Albumin Cal Ver/	126
		ID2	Nucleic Acid Amp, Respiratory	198			U	Urine Chemistry, General	68
		IDPN	Infectious Disease, Pneumonia Panel	203			UMC	Urine Albumin Creatinine	153
	X	IDR	Infectious Disease Respiratory Panel	202	Alcohol, serum	X	AL2	Serum Alcohol/Volatiles	101
		VLS2	Viral Load	199			LN11	Serum Ethanol Cal Ver/	124
	Х	VR1	Virology Culture	196	Alashal whale blood	X	AL1	Lin Whole Blood Alcohol/	101
	Х	VR2	Viral Antigen by DFA	196	Alcohol, whole blood	^	ALI	Volatiles	101
	Х	VR4	Viral Antigen by EIA and	196	Aldolase		ADL	Aldolase	71
			Latex		Aldosterone, serum	X	RAP	Renin and Aldosterone	89
Adenovirus 40/41		SP, SPN	Stool Pathogen	184	Aldosterone, urine	Х	N/NX	Urine Chemistry, Special	
Adjustable micropipette cal ver/lin		1	Instrumentation	132	Alkaline phosphatase (ALP)	X	C1, C3, C3X, CZ, CZ2X,	Chemistry and TDM	56-58
Adrenocorticotropic hormone (ACTH)	Х	TM/TMX	Tumor Markers	89		-	CZQ	Quality Cross Check,	41

Analyte/Procedure			Description	Pg			Program Code	Description	Pg
Alkaline phosphatase		FLD2	Body Fluid Chemistry 2	73	Amikacin (cont.)		LN3	TDM Cal Ver/Lin	121
(ALP) (cont.)	ENRCodeENRCodeine phosphatase (cont.)FLD2Body Fluid Chemistry 273(cont.)I IFSInterfering Substances133LN2Chemistry, Lipid, Enzyme Cal Ver/Lin120LN2Chemistry, Lipid, Enzyme Cal Ver/Lin120LN2BVChemistry, Lipid, 	245							
		IFS	Interfering Substances	133			BGL	Biochemical Genetics	245
		LN2		120	Amitriptyline		DFC	Drug-Facilitated Crime	108
	LN2BV Chemistry,	Chemistry, Lipid,	120			FTC		104	
			except AU, Vitros Cal						96 96
Allergens (specific)		SE	Diagnostic Allergy	213		Х	ZT	TDM, Special	60
Alpha-1 antitrypsin	Х	IG/IGX		208	Ammonia			Chemistry and TDM	56-58
. ,		LN7		123					
Alpha-1 antitrypsin genotyping	Х	AAT	Alpha-1 Antitrypsin	245			CZQ	-	41
Alpha-1 globulin		SPE		76			LN32	Ammonia Cal Ver/Lin	128
Alpha-2 globulin					Ū.		AFL	Amniotic Fluid Leakage	148
Alpha-2-antiplasmin		-			· · · · · ·				
Alpha-2-macroglobulin			-				-		108
Alpha-fetoprotein (AFP), amniotic fluid	Х	FP/FPX	1 0	87	Amphetamine		-	Drug Monitoring for Pain	108 107
Alpha-fetoprotein (AFP), serum	Х	FP/FPX	Maternal Screen	87			FTC	Forensic Toxicology,	104
	X	K/KK	Ligand Assav. General	82					
				121-					100
		LN5S	Ligand Assay Siemens						96
			Cal Ver/Lin	122			UDC		99
Αιρπα-πγατοχγαιριαζοιαπ		-					UDS, UDS6	Urine Drug Screen	98
		DIVIFIVI		107			UT	Urine Toxicology	96
		FTC	Forensic Toxicology,	104			UTCO		134
			Toxicology		Amphetamine group		DMPM	Drug Monitoring for Pain Management	107
			Testing, Confirmatory				OFD	Oral Fluid for Drugs of Abuse	100
		UT	Urine Toxicology	96			Т	Toxicology	96
Alpha-thalassemia		HGM	Hemoglobinopathies, Molecular Methods	247			UDS, UDS6	Urine Drug Screen	98
Alprazolam		DMPM	Drug Monitoring for Pain	107			UT	Urine Toxicology	96
		FTC	Management Forensic Toxicology,	107	Amylase	Х	C1, C3, C3X, CZ, CZ2X,	Chemistry and TDM	56-58
			Criminalistics				CZQ	Quality Cross Check,	41
		OFD	Oral Fluid for Drugs of Abuse	100			FLD	Chemistry and TDM	72
		Т	Toxicology	96			FLDQ	Body Fluid Quality Cross Check,	42
		UT	Urine Toxicology	96			FLDQ	Body Fluid Chemistry	42
Aluminum	Х	R	Trace Metals	78			IFS	Interfering Substances	133
Aluminum, whole blood		TMU TMWB	Trace Metals, Urine Trace Metals, Whole	103 103			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
Amikacin	X	CZ, CZ2X, CZX, Z CZQ	Blood Chemistry and TDM Quality Cross Check,	56–58 41			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	120

Analyte/Procedure		Program Code	Description	Pg			Program Code	Description	Pg
Amylase, pancreatic	Х	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58	Antibody screen (HLA)		MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	236 23
		CZQ	Quality Cross Check, Chemistry and TDM	41			MX2B, MX2C, MX2E, MXB,	HLA Analysis, Class II	230 23
Amylase, urine		LN6	Urine Chemistry Cal Ver/Lin	122	Antibody titer		MXC ABT, ABT1,	Antibody Titer	22
	X	U	Urine Chemistry, General	68	Antibody titer, automated		ABT2, ABT3 AABT, AABT1,	Antibody Titer,	22
Anabasine		NTA	Nicotine and Tobacco Alkaloids	102			AABT2, AABT3	Automated	
Analytical balance		1	Instrumentation	132	Anticardiolipin IgA,		ACL, APS	Antiphospholipid	21
Anaplasma phagocytophilum		TTD	Antibody Detection- Tick-Transmitted Diseases	205	qualitative Anticardiolipin IgA, quantitative		ACL, APS	Antibody Antiphospholipid Antibody	21
Anaplastic lymphoma kinase		PM6	Anaplastic Lymphoma Kinase IHC	280	Anticardiolipin IgG, IgM, polyclonal; qualitative	Х	ACL, APS	Antiphospholipid Antibody	21
Androstenedione	Х	Y/YY	Ligand Assay, Special	84	Anticardiolipin IgG, IgM,		ACL, APS	Antiphospholipid	21
Angiotensin converting enzyme		ACE	Angiotensin Converting Enzyme	71	polyclonal; quantitative Anti-CCP		ССР	Antibody Cyclic Citrullinated	2'
Anti ADAMTS13 IgG		CGS7	ADAMTS13	162				Peptide Antibody	
Anti-A titer		AABT, AABT1	Antibody Titer,	224	Anticentromere antibody		S2	Immunology, Special	20
			Automated		Antichromatin antibody		ACA	Antichromatin Antibody	2'
Anti-B titer		ABT, ABT1 AABT3	Antibody Titer Antibody Titer,	223 224	Anti-CMV, IgG, IgM	Х	VR3	Infectious Disease Serology	20
			Automated		Anti-CMV, total	Х	VM3	Viral Markers-Series 3	23
Antibody detection	X	ABT3 J, JAT	Antibody Titer Transfusion Medicine	223 220-		Х	VR3	Infectious Disease Serology	20
		JATE1	Transfusion Medicine,	221 221	Anti-D titer		AABT, AABT2	Antibody Titer, Automated	22
			Automated, Educational				ABT, ABT2	Antibody Titer	22
		JATQ	Quality Cross Check, Transfusion Medicine	49	Anti-DNA (ds) antibody, qualitative	Х	S2, S4	Immunology, Special	20
	Х	PS TMCA	Platelet Serology Transfusion Medicine,	225 225	Anti-DNA (ds) antibody, quantitative		S2, S4	Immunology, Special	20
		TMCA	Competency Assessment	225	Anti-DNA topoisomerase (Anti-Scl-70)		RDS	Rheumatic Disease Special Serologies	21
Antibody detection/ identification (HLA)	Х	MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	236- 237	Antideamidated gliadin peptide antibody screen, IgA, IgG		CES, CESX	Celiac Serology	21
	X	MX2B, MX2C, MX2E, MXB, MXC	HLA Analysis, Class II	236- 237	Antideamidated gliadin peptide antibody, IgA, IgG; qualitative	Х	CES, CESX	Celiac Serology	2'
Antibody identification		ETME1	Expanded Transfusion Medicine Exercises	229	Antideamidated gliadin peptide antibody, IgA,		CES, CESX	Celiac Serology	2'
	Х	J, JAT	Transfusion Medicine	220- 221	IgG; quantitative Antideamidated		CES, CESX	Celiac Serology	2
		JATE1	Transfusion Medicine, Automated, Educational	221	gliadin peptide/tissue transglutaminase				
		ТМСА	Transfusion Medicine, Competency	225	antibody screen, IgA, IgG Antiendomysial antibody IgA, qualitative		CES, CESX	Celiac Serology	2'
			Assessment		Antiendomysial antibody IgA, quantitative		CES, CESX	Celiac Serology	2

	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Antiendomysial antibody		CES, CESX	Celiac Serology	212	Anti-HBs, qualitative	Х	VM1	Viral Markers-Series 1	230
IgG, qualitative		,			Anti-HBs, quantitative		VM1	Viral Markers-Series 1	230
Antiendomysial antibody IgG, quantitative		CES, CESX	Celiac Serology	212	Anti-HCV	Х	RHCVW	Anti-HCV, Rapid Methods, Waived	231
Antifilamentous actin IgG		FCN	Antifilamentous Actin	210		Х	VM1	Viral Markers-Series 1	230
antibody			Antibody		Antihistidyl t-RNA		RDS	Rheumatic Disease	213
Antifungal drugs monitoring		AFD	Antifungal Drugs Monitoring	106	synthetase (Jo-1) Antihistone antibody		AHT	Special Serologies Antihistone Antibody	210
Antifungal susceptibility	Х	F	Mycology and Aerobic	189	Anti-HIV-1	Х	AHIV	Anti-HIV Rapid Methods	
esting			Actinomycetes			X	AHIVW	Anti-HIV Rapid Methods	
	Х	F1	Yeast	189		X	VM1	Viral Markers-Series 1	230
Antigen detection,		CDF2	Clostridium difficile	180	Anti-HIV-2	X	AHIV	Anti-HIV Rapid Methods	
pacterial			Detection			X	VM1	Viral Markers-Series 1	230
	Х	CDF5	Clostridium difficile Detection	181	Anti-HIV-1/2	X	AHIV	Anti-HIV Rapid Methods	-
	Х	D	Bacteriology	173		X	AHIVW	Anti-HIV Rapid Methods	
			Rapid Group A Strep	173		X	VM1	Viral Markers-Series 1	230
	X	D6	1 1 1		Anti-HIV-1/2, HIV-1 p24	X	VM6, VM6X	Viral Markers-Series 6	23
	X	D8	Group B Strep	178	antigen		4100, 4100		20
	Х	D9	Rapid Group A Strep, Waived	1//	Anti-HTLV-I/II		VM3	Viral Markers-Series 3	230
	Х	HC1	C. trachomatis by DFA	181	Anti-Jo-1 (antihistidyl		RDS	Rheumatic Disease	213
	X	HC3	C. trachomatis by EIA	181	t-RNA synthetase)			Special Serologies	
	^	LBAS	Legionella pneumophila	178	Anti-LKM		LKM	Liver-Kidney	21:
	Х	MC4	Urine Colony Count	176				Microsomal Antibody	
	^		Combination		Antimicrobial susceptibility testing	Х	D	Bacteriology	17:
		POC4	POC Strep Screen	52		Х	D2	Urine Cultures	175
	Х	RMC	Competency Routine Microbiology Combination	176			MBT	Microbiology Bench Tools Competency	174
		SBAS	Streptococcus pneumoniae	178		Х	RMC	Routine Microbiology Combination	176
	Х	VS	Vaginitis Screen	185	Antimitochondrial	Х	S2	Immunology, Special	209
Antigen detection, viral	Х	HC2	HSV by DFA	197	antibody, qualitative				
	X	VR2	Viral Antigen Detection by DFA	196	Antimitochondrial antibody, quantitative		S2	Immunology, Special	209
	Х	VR4	Viral Antigen Detection	196	Antimitochondrial M2 antibody		Н	Antimitochondrial M2 Antibody	210
Antigliadin antihadu lgA			by EIA and Latex	212	Anti-MP0		S2	Immunology, Special	209
Antigliadin antibody IgA, gG, qualitative		CES, CESX	Celiac Serology	212	Antimüllerian hormone	Х	AMH	Antimüllerian Hormone	84
Antigliadin antibody IgA, gG, quantitative		CES, CESX	Celiac Serology	212	Antimycobacterial susceptibility testing	Х	E	Mycobacteriology	188
Antiglomerular basement nembrane, qualitative	Х	S2	Immunology, Special	209			MTBR	Molecular MTB Detection and	188
Antiglomerular basement membrane, quantitative		S2	Immunology, Special	209	Antineutrophil		S2	Resistance Immunology, Special	209
Anti-HAV, IgG	Х	VM1	Viral Markers-Series 1	230	cytoplasmic antibody (ANCA)				
Anti-HAV, IgM	Х	VM5	Viral Markers-Series 5	231	Antinuclear antibody	X	ANA, IL	Immunology	208
Anti-HAV, total		VM1	Viral Markers-Series 1	230	(ANA)	^	ANA, IL	minunotogy	200
Anti-HBc, IgM	Х	VM5	Viral Markers-Series 5	231	Antiparietal cell antibody		APC	Autoimmune Gastritis	210
Anti-HBc, total	Х	VM1	Viral Markers-Series 1	230	. anapariotai oon antibody			Markers	[
Anti-Hbe	Х	VM2	Viral Markers-Series 2	230	Antiphosphatidylserine		APS	Antiphosphatidylserine	21

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure		Program Code	Description	Pg
Antiphosphatidylserine/ prothrombin complex		APS	Antiphosphatidylserine Antibodies	211	Antithyroid peroxidase, qualitative	Х	S2, S4	Immunology, Special	209
Antiphospholipid antibody		ACL	Antiphospholipid Antibody	211	Antithyroid peroxidase, quantitative		S2, S4	Immunology, Special	209
Anti-PR3		S2	Immunology, Special	209	Antitissue	Х	CES, CESX	Celiac Serology	212
Antiribosomal P antibody		ARP	Antiribosomal P Antibody	211	transglutaminase antibody IgA, qualitative				
Anti-RNP antibody, qualitative	Х	S2	Immunology, Special	209	Antitissue transglutaminase		CES, CESX	Celiac Serology	212
Anti-RNP antibody, quantitative		S2	Immunology, Special	209	antibody IgA, quantitative		050.0501/		
Anti-Saccharomyces cerevisiae antibody		ASC	Anti-Saccharomyces cerevisiae Antibody	211	Antitissue transglutaminase		CES, CESX	Celiac Serology	212
Anti-Scl-70 (anti-DNA topoisomerase)		RDS	Rheumatic Disease Special Serologies	213	antibody IgG, qualitative Antitissue transglutaminase		CES, CESX	Celiac Serology	212
Anti-Sm antibody, qualitative	Х	S2	Immunology, Special	209	antibody IgG, quantitative				
Anti-Sm antibody,		S2	Immunology, Special	209	Anti-Trypanosoma cruzi		VM4	Viral Markers-Series 4	230
quantitative Anti-Sm/RNP antibody,	X	S2	Immunology, Special	209	Apixaban		APXBN	Anticoagulant Monitoring, Apixaban	163
qualitative					Apolipoprotein A1	Х	ABL	Accuracy-Based Lipids	112
Anti-Sm/RNP antibody, quantitative		S2	Immunology, Special	209		X	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58
Antismooth muscle antibody, qualitative	Х	S2	Immunology, Special	209			CZQ	Quality Cross Check, Chemistry and TDM	41
Antismooth muscle		S2	Immunology, Special	209	Apolipoprotein B	Х	ABL	Accuracy-Based Lipids	112
antibody, quantitative Antisperm antibody IgG		ASA	Semen Analysis	156	· · ·	Х	C3, C3X, CZ,	Chemistry and TDM	56-58
Anti-SSA antibody, qualitative	Х	S2	Immunology, Special	209			CZ2X, CZX CZQ	Quality Cross Check,	41
Anti-SSA antibody, quantitative		S2	Immunology, Special	209	Apolipoprotein E (APOE)	X	APOE	Chemistry and TDM Apolipoprotein E	245
Anti-SSA/SSB antibody,	Х	S2	Immunology, Special	209	genotyping Arsenic, urine		TMU	(APOE) genotyping	102
qualitative Anti-SSA/SSB antibody,		S2	Immunology, Special	209	Arsenic, whole blood		TMWB	Trace Metals, Urine Trace Metals, Whole	103 103
quantitative Anti-SSB antibody,	X	S2	Immunology, Special	209	Arthropod identification		ТМО	Blood Ticks, Mites, and Other	194
qualitative					Aspartate	X	C1, C3, C3X,	Arthropods Chemistry and TDM	56-58
Anti-SSB antibody, quantitative		S2	Immunology, Special	209	aminotransferase (AST/ SGOT)		CZ, CZ2X, CZX	Chemistry and TDM	50-58
Antistreptolysin 0 (ASO)	Х	ASO, IL	Immunology	208			CZQ	Quality Cross Check,	41
Antithrombin (activity, Ag)		CGE/CGEX	Coagulation, Extended	161	I		IFS	Chemistry and TDM Interfering Substances	133
		CGS2	Coag Special, Series 2	162	I		LN2	Chemistry, Lipid,	120
		LN35	Thrombophilia Cal Ver/ Lin	129				Enzyme Cal Ver/Lin	
Antithyroglobulin antibody, qualitative	Х	S2, S4	Immunology, Special	209			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal	120
Antithyroglobulin antibody, quantitative		S2, S4	Immunology, Special	209	Aspirin assay		PIA, PIAX	Ver/Lin Drug-Specific Platelet	167
Antithyroid microsomal, qualitative	Х	S2, S4	Immunology, Special	209	Astrovirus		GIP	Aggregation Gastrointestinal Panel	204
Antithyroid microsomal, quantitative		S2, S4	Immunology, Special	209		X	GIP5	Gastrointestinal Panel	204

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Atenolol		Т	Toxicology	96	Bacterial detection in		BDP, BDPV	Bacterial Detection,	22
		UT	Urine Toxicology	96	platelets			Platelets	
Atropine		T	Toxicology	96		X	BDP5, BDPV5	Bacterial Detection, Platelets	2
		UT	Urine Toxicology	96	Bacterial identification	X	D	Bacteriology	1
Automated WBC differential	X	FH1-FH4, FH6, FH9, FH10, FH13,	Hematology Automated Differential	136		X	D1, D2, D3, RMC	Throat, Urine, GC Cultures	17
		FH1P-FH4P,				Х	D8	Group B Strep	1
		FH6P, FH9P, FH10P, FH13P				X	DEX HC6/HC6X	Expanded Bacteriology <i>C. trachomatis/</i> GC by	1
		FH3Q, FH4Q,	Quality Cross Check,	45				Nucleic Acid Amp	<u> </u>
		FH6Q, FH9Q	Automated Hematology Series			X	HC7	C. trachomatis/GC DNA by NAA	1
Autopsy pathology		AUP/AUP1	Autopsy Pathology	283		X	IDR	Infectious Disease, Respiratory Panel	2
B-ALL		BALL	B-ALL Minimal Residual Disease	216			MBT	Microbiology Bench Tools Competency	1
B-type natriuretic peptides	X	BNP	B-Type Natriuretic Peptides, 2 Chall	61		Х	MC4	Urine Colony Count Combination	1
	X	BNP5 BNPQ	B-Type Natriuretic Peptides, 5 Chall Quality Cross Check,	61			MRS	Methicillin-resistant Staphylococcus aureus Screen	1
			B-Type Natriuretic Peptides				MRS2M	MRSA Screen, Molecular, 2 Challenge	1
		LN30	B-Type Natriuretic Peptides Cal Ver/Lin	128		Х	MRS5	Methicillin-resistant Staphylococcus aureus	1
	X	PCARI, PCARM, PCARMX	Plasma Cardiac Markers	65		X	MRS5M	Screen MRSA Screen,	1
		POC12	Competency Plasma Cardiac Markers	53	Bacterial strain typing		BSTS	Molecular, 5 Challenge Bacterial Strain Typing- Staphylococcus	1
Babesia microti		TTD	Antibody Detection of Tick-Transmitted	205	Bacterial vaginosis screen		BV	Bacterial Vaginosis	1
Destavial antinen		0050	Diseases	100			MVP	Molecular Vaginal Panel	1
Bacterial antigen detection		CDF2	Clostridium difficile Detection	180			VS2	Vaginitis Screen, Virtual Gram Stain	1
	Х	CDF5	<i>Clostridium difficile</i> Detection	181	Barbiturate group		DMPM	Drug Monitoring for Pain Management	1
	Х	D	Bacteriology	173			SDS	Serum Drug Screen	1
	Х	D6	Rapid Group A Strep	177			T	Toxicology	
	X	HC1	C. trachomatis by DFA	181			UDS, UDS6	Urine Drug Screen	6
	X	HC3	C. trachomatis by EIA	181	I		UT	Urine Toxicology	6
		LBAS	Legionella pneumophila Antigen Detection	178	BCR/ABL1 p190		MH02, MH03	Molecular Hematologic Oncology	2
	X	MC4	Urine Colony Count Combination	176			MRD1	Minimal Residual Disease	2
	v	POC4	POC Strep Screen Competency Routine Microbiology	52 176	BCR/ABL1 p210		MH02, MH03	Molecular Hematologic Oncology	2
	X	SBAS	Combination	176			MRD	Minimal Residual Disease	2
		VS	S. pneumoniae Antigen Detection		Bence Jones protein		UBJP	Urinary Bence Jones Protein	7
	X	və	Vaginitis Screen	185	Benzodiazepine group		DMPM	Drug Monitoring for Pain Management	1

Analyte/Procedure	LAP ENR	Program Code	Description	Pg		LAP ENR	Program Code	Description	Pg
Benzodiazepine group (cont.)		OFD	Oral Fluid for Drugs of Abuse	100	Bilirubin, total (cont.)		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		SDS	Serum Drug Screen	101			LN2BV	Chemistry, Lipid,	120
		Т	Toxicology	96				Enzyme all Beckman	
		UDS, UDS6	Urine Drug Screen	98				except AU, Vitros Cal Ver/Lin	
		UT	Urine Toxicology	96	l	Х	NB, NB2	Neonatal Bilirubin	65
Benzoylecgonine		DFC	Drug-Facilitated Crime	108	Bilirubin, urine	X	CMP, CMP1	Clinical Microscopy	146
		DMPM	Drug Monitoring for Pain Management	107			CMQ	Quality Cross Check, Urinalysis	46
		FTC	Forensic Toxicology, Criminalistics	104			DSC	Dipstick Confirmatory	149
		OFD	Oral Fluid for Drugs of	100		Х	HCC2	Waived Combination	66
		Т	Abuse	96			POC3	POC Urine Dipstick Competency	52
			Toxicology	90	Bioavailable testosterone		DY	Ligand Assay, Special	84
		UDC	Forensic Urine Drug Testing, Confirmatory	99	Biochemical genetics		BGL, BGL1	Biochemical Genetics	245
		UDS, UDS6	Urine Drug Screen	98	Bioterrorism agents		LPX	Laboratory Preparedness Exercise	183
		UT UTCO	Urine Toxicology Urine Toxicology	96 134	BK virus		ID1T	Nucleic Acid Amp, JC	197
		0100	Carryover		l		14.0.14.00	and BK	400
Beta-2-glycoprotein I		ACL, APS	Antiphospholipid	211			VLS, VLS2	Viral Load	199
			Antibody		Blood cannabinoids		THCB	Blood Cannabinoids	106
Beta-2-microglobulin, serum	X	TM/TMX	Tumor Markers	89	Blood cell identification		VPBS	Virtual Peripheral Blood Smear	143
Beta-2-microglobulin, urine		CD	Cadmium	102	Blood cell identification photographs	Х	BCP, BCP2	Blood Cell Identification	139
Beta globulin		SPE	Serum Electrophoresis	76		Х	FH1-FH4,	Hematology Automated	136
Beta-hydroxybutyrate	Х	KET	Ketones	64			FH6, FH9, FH10, FH13,	Differential	
Beta-thalassemia		HGM	Hemoglobinopathies, Molecular Methods	247			FH1P-FH4P, FH6P, FH9P,		
Bile crystal identification, photographs		BCR	Bile Crystals	149			FH10P, FH13P		
Bilirubin, confirmatory		DSC	Dipstick Confirmatory	149		Х	HEP	Basic Hematology	136
urine					Blood culture	Х	BCS	Blood Culture	178
Bilirubin, direct	X	C1, C3, C3X, C4, CZ, CZ2X,	Chemistry and TDM	56-58			GNBC	Gram-Negative Blood Culture Panel	179
		CZX CZQ	Quality Cross Check,	41			GPBC	Gram-Positive Blood Culture Panel	179
		LN2	Chemistry and TDM Chemistry, Lipid,	120	Blood culture Staphylococcus aureus	Х	BCS1	Blood Culture Staphylococcus aureus	179
		LN2BV	Enzyme Cal Ver/Lin Chemistry, Lipid,	120	Blood or hemoglobin, urine	Х	CMP, CMP1	Clinical Microscopy	146
			Enzyme all Beckman except AU, Vitros Cal		Blood parasite	Х	BP	Blood Parasite	193
			Ver/Lin			Х	Р	Parasitology	192
	Х	NB, NB2	Neonatal Bilirubin	65	Blood parasite, rapid		RMAL	Rapid Malaria	193
Bilirubin, total	Х	C1, C3, C3X, C4, CZ, CZ2X,	Chemistry and TDM	56-58	Bloom syndrome ( <i>BLM</i> gene)	Х	MGL4	Molecular Genetics	248- 249
		CZX CZQ	Quality Cross Check,	41	Bocavirus		IDR	Infectious Disease Respiratory Panel	202
			Chemistry and TDM		Body fluid (cell count)		ABF1, ABF2,	Automated Body Fluid	148
		FLD2	Body Fluid Chemistry 2	73			ABF3		4.5.5
		IFS	Interfering Substances	133	Body fluid (cell count) manual	Х	HFC, HFCI	Hemocytometer Fluid Count	150- 151

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Body fluid cell identification		CMP/CMP1	Clinical Microscopy	146	Buprenorphine (cont.)		OFD	Oral Fluid for Drugs of Abuse	100
		VBF	Virtual Body Fluid	148			Т	Toxicology	96
Body fluid (chemistry) Body fluid crystal		FLD, FLD2 BFC	Body Fluid Crystals	72–73 149	I		UDC	Forensic Urine Drug Testing, Confirmatory	99
identification							UDS, UDS6	Urine Drug Screen	98
Body fluid photographs		CMP, CMP1	Clinical Microscopy	146			UT	Urine Toxicology	96
Bone marrow cell differential		BMD	Bone Marrow Cell Differential	139	Bupropion		T UT	Toxicology Urine Toxicology	96 96
Bone marrow cell identification		BMD	Bone Marrow Cell Differential	139	Butalbital		DFC	Drug-Facilitated Crime	108 107
Bone specific alkaline phosphatase		BMV2	Bone Markers and Vitamins	86			DMPM	Drug Monitoring for Pain Management	
Bordetella holmesii	Х	IDR	Nucleic Acid Amp,	202			FTC	Forensic Toxicology, Criminalistics	104
Develope II a survey output is		DOD	Organisms Bordetella pertussis/	100			Т	Toxicology	96
Bordetella parapertussis		BOR	Boraetella pertussis/ parapertussis, Molecular	180			UDC	Forensic Urine Drug Testing, Confirmatory	99
		IDN, IDO	Nucleic Acid Amp,	201			UT	Urine Toxicology	96
			Organisms		C. difficile antigen		CDF2	Clostridium difficile Detection	180
	X	IDR	Infectious Disease Respiratory Panel	202			SP, SPN	Stool Pathogens-Rapid and Molecular	184
Bordetella pertussis		BOR	Bordetella pertussis/ parapertussis, Molecular	180		Х	CDF5	Clostridium difficile Detection	181
		IDN, IDO	Nucleic Acid Amp, Organisms	201		Х	D	Bacteriology, Antigen Detection	173
	Х	IDR	Infectious Disease Respiratory Panel	202	C. difficile toxin		CDF2	Clostridum difficile Detection	180
Borrelia burgdorferi		TTD	Antibody Detection of Tick-Transmitted	205			CDF5	<i>Clostridum difficile</i> Detection	181
BRAF	X	BRAF	Diseases Mutation Testing	260			D	Bacteriology-Antigen Detection	173
	X	MTP	Multigene Tumor Panel	261			GIP	Gastrointestinal Panel	204
BRAF V600E		BRAFV	BRAF V600E	278			GIP5	Gastrointestinal Panel	204
BRCA1/2	Х	MGL3	Molecular Genetics	248- 249			SP, SPN	Stool Pathogens, Rapid and Molecular	184
BRCA1/2 duplication/ deletion analysis	Х	BRCA	BRCA1/2 Sequencing	246	CA 15-3		LN34	Tumor Markers Cal Ver/ Lin	129
BRCA1/2 sequencing	Х	BRCA	BRCA1/2 Sequencing	246		Х	TM/TMX	Tumor Markers	89
Brain tissue by FISH	~	CYJ	Fluorescence In	243	CA 19-9		FLD	Body Fluid	72
Brain tissue by Horr			Situ Hybrid and Interpretation on Site,	240			FLDQ	Quality Cross Check, Body Fluid Chemistry	42
Brightfield in situ	X	ISH2	Brain/Glioma Tissue	258			LN34	Tumor Markers Cal Ver/ Lin	129
hybridization				200	l	X	TM/TMX	Tumor Markers	89
Bromazepam		DFC	Drug-Facilitated Crime	108	CA 27.29	Х	TM/TMX	Tumor Markers	89
Brompheniramine		DFC	Drug-Facilitated Crime	108	CA 72-4		TM/TMX	Tumor Markers	89
<u> </u>		FTC	Forensic Toxicology, Criminalistics	104	CA 125		LN34	Tumor Markers Cal Ver/ Lin	129
		Т	Toxicology	96	I	X	TM/TMX	Tumor Markers	89
		UT	Urine Toxicology	96	Cadmium, urine	X	CD	Cadmium	102
Buprenorphine		DMPM	Drug Monitoring for Pain		Cadmium, whole blood	X	CD	Cadmium	102
· ·			Management		Caffeine	X	CZ2X, CZX, CZ, Z	Chemistry and TDM	56-58

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Caffeine (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41	Carbamazepine (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41
Calcitonin	Х	TM/TMX	Tumor Markers	89			LN3	TDM Cal Ver/Lin	121
Calcium		ABVD	Accuracy-Based	112			Т	Toxicology	96
			Vitamin D				UT	Urine Toxicology	96
	X	C1, C3, C3X, C4, CZ, CZ2X,	Chemistry and TDM	56-58	Carbamazepine-10,11- epoxide		Т	Toxicology	96
		CZX					UT	Urine Toxicology	96
		CZQ	Quality Cross Check, Chemistry and TDM	41	Carbamazepine, free	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		FLD2	Body Fluid Chemistry 2	73			CZQ	Quality Cross Check,	41
		IFS	Interfering Substances	133				Chemistry and TDM	
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120	Carbapenem-resistant organisms		CRO	Carbapenem-resistant Organisms	180
		LN2BV	Chemistry, Lipid,	120	Carboxyhemoglobin	X	SO	Blood Oximetry	94
			Enzyme all Beckman except AU, Vitros Cal Ver/Lin				SOQ	Quality Cross Check, Blood Oximetry	44
Calcium, ionized	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92	Cardiomyopathy sequencing panel		CMSP	Cardiomyopathy Sequencing Panel	246
		AQQ, AQ2Q,	Quality Cross Check,	44	Carisoprodol		DFC	Drug-Facilitated Crime	108
		AQ3Q, AQ4Q	Critical Care Aqueous Blood Gas Series				DMPM	Drug Monitoring for Pain Management	107
	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58			FTC	Forensic Toxicology, Criminalistics	104
		CZQ	Quality Cross Check,	41			Т	Toxicology	96
			Chemistry and TDM				UT	Urine Toxicology	96
		LN13C	Blood Gas Cal Ver/Lin	124-	Carnitine	X	BGL1	<b>Biochemical Genetics</b>	245
		POC10,	POC Competency Blood	125 53	Casts, urine, semiquantitative		UAA, UAA1	Automated Urinalysis	149
Calcium, urine		POC11 ABU	Gases Accuracy-Based Urine	113	CD1a		RFAV1	Rare Flow Antigen Validation CD1a	218
		LN6	Urine Chemistry Cal Ver/Lin	122	CD3	Х	FL, FL1	Lymphocyte Subset Immunophenotyping	215
	Х	U	Urine Chemistry, General	68			LN22	Flow Cytometry Cal Ver/Lin	126
Calcofluor white		FSM	Fungal Smear	191			SCP	Stem Cell Processing	227
Campylobacter		CAMP	Campylobacter	180	CD4	X	FL, FL1	Lymphocyte Subset	215
		GIP	Gastrointestinal Panel	204		_		Immunophenotyping	
	Х	GIP5	Gastrointestinal Panel	204			LN22	Flow Cytometry Cal	126
Canavan disease (ASPA gene)	Х	MGL4	Molecular Genetics	248- 249	CD8	X	FL, FL1	Ver/Lin Lymphocyte Subset	215
Candida culture	Х	F3	Candida Culture	190			1 1 100	Immunophenotyping	100
<i>Candida glabrata</i> vaginal, molecular		MVP	Molecular Vaginal Panel	185			LN22	Flow Cytometry Cal Ver/Lin	126
<i>Candida krusei</i> vaginal, molecular		MVP	Molecular Vaginal Panel	185	CD20 CD30		PM3 CD30	Immunohistochemistry CD30	279 279
Candida sp., DNA probe	Х	VS	Vaginitis Screen	185		_		Immunohistochemistry	
Candida sp. group,		MVP	Molecular Vaginal Panel	185	CD34		CBT	Cord Blood Testing	227
vaginal, molecular						X	FL4	Flow Cytometry CD34+	215
Cannabinoids			See Delta-9-THC-COOH				SCP	Stem Cell Processing	227
			and Delta-9-THC		CD45		CBT	Cord Blood Testing	227
Carbamazepine	X	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58		X	FL, FL1	Lymphocyte Subset Immunophenotyping	215

Analyte/Procedure Index

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
CD45 (cont.)		FL4	Flow Cytometry CD34+	215	Chloride (cont.)		LN2BV	Chemistry, Lipid,	120
		SCP	Stem Cell Processing	227				Enzyme all Beckman	
CD49d		ZAP70	ZAP-70 Analysis by Flow Cytometry	218				except AU, Vitros Cal Ver/Lin	
CD103		RFAV2	Rare Flow Antigen Validation, CD103	218			POC10, POC11	POC Competency Blood Gases	53
CD117 (c-kit)		PM1	Immunohistochemistry	279	Chloride, sweat	X	SW1, SW2,	Sweat Analysis Series	79
CEA		FLD	Body Fluid	72	Chlorido urino		SW4	Living Chamistry Cal	122
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42	Chloride, urine		LN6	Urine Chemistry Cal Ver/Lin	
	Х	K, KK, K2	Ligand Assay, General	82		X	U	Urine Chemistry, General	68
		LN5	Ligand Assay Cal Ver/Lin	121	Chloride, vitreous fluid		VF	Vitreous Fluid, Post-	101
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121	Chlorpheniramine		DFC	mortem	101
Cell free DNA		CFDNA	Cell-Free Tumor DNA	260			FTC	Drug-Facilitated Crime	108
		NIPT	Noninvasive Prenatal Testing	88				Forensic Toxicology, Criminalistics	
Ceruloplasmin	X	S2, S4	Immunology, Special	209			Т	Toxicology	96
CFU-GM	^	SCP	Stem Cell Processing	203			UT	Urine Toxicology	96
CH50		CH50	Total Hemolytic	214	Cholesterol		ABL	Accuracy-Based Lipids	112
CH100		CH50	Complement CH100	214		X	C1, C3, C3X, C4, CZ, CZ2X,	Chemistry and TDM	56-58
	v	HC1		181			CZX		
Chlamydia trachomatis	X	HC1 HC3	C. trachomatis by DFA C. trachomatis by EIA	181			CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	HC6, HC6X	C. trachomatis/GC by	186			FLD	Body Fluid	72
	X	HC7	Nucleic Acid Amp C. trachomatis/GC DNA	186			FLDQ	Quality Cross Check, Body Fluid Chemistry	42
			by NAA			Х	LCW	Ltd Chem, Waived	64
		VR1	Virology Culture	196			LN2	Chemistry, Lipid,	120
Chlamydia pneumoniae		IDN, IDO	Nucleic Acid Amp, Organisms	201			LN2BV	Enzyme Cal Ver/Lin Chemistry, Lipid,	120
	V		Infectious Disease, Pneumonia Panel	203				Enzyme all Beckman except AU, Vitros Cal Ver/Lin	
	X	IDR	Infectious Disease, Respiratory Panel	202	Chromium	X	R	Trace Metals	78
Chlordiazepoxide		Т	Toxicology	96	Chromium, urine		TMU	Trace Metals, Urine	103
Chloride	X	UT <b>AQ, AQ2, AQ3,</b>	Urine Toxicology	96 92	Chromium, whole blood		TMWB	Trace Metals, Whole Blood	103
	^	AQ4	-		Chromosomal abnormalities	X	СҮ, СҮВК	Cytogenetics	242
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous	44	Citalopram		DFC	Drug-Facilitated Crime	108
		7000,7040	Blood Gas Series				T	Toxicology	96
	X	C1, C3, C3X,		56-58			UT	Urine Toxicology	96
		C4, CZ, CZ2X, CZX	,		Citrate		KSA	Kidney Stone Risk Assessment	69
		CZQ	Quality Cross Check,	41	CK isoenzymes	X	CRTI	Cardiac Markers	62
			Chemistry and TDM		CK-MB	X	CRT, CRTI	Cardiac Markers	62
		FLD2	Body Fluid Chemistry 2	73	(immunochemical)		3, 0		
		IFS	Interfering Substances	133	· · · ·	1	CRTQ	Quality Cross Check,	42
		LN13C	Blood Gas Cal Ver/Lin	124- 125				Cardiac Markers	
		LN2	Chemistry, Lipid,	120			IFS	Interfering Substances	133
			Enzyme Cal Ver/Lin				LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
СК-МВ		LN2BV	Chemistry, Lipid,	120	CMV (cont.)	Х	VM3	Viral Markers-Series 3	230
(immunochemical)			Enzyme all Beckman			Х	VR1	Virology Culture	196
(cont.)			except AU, Vitros Cal Ver/Lin			Х	VR2	Viral Antigen Detection by DFA	196
	X	PCARI, PCARM, PCARMX	Plasma Cardiac Markers	65		Х	VR3	Infectious Disease Serology	205
		POC12	Competency Plasma Cardiac Markers	53	c-Myc/Bcl-2 immunohistochemistry tumor markers		MYBC	c-Myc/Bcl-2 Immunohistochemistry Tumor Markers	279
CK2 (MB)		IFS	Interfering Substances	133	Cobalt		TMU	Trace Metals, Urine	103
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120	Cobalt, whole blood		TMWB	Trace Metals, Whole Blood	103
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal	120	Cocaethylene		FTC	Forensic Toxicology, Criminalistics	104
			Ver/Lin				Т	Toxicology	96
Clinical pathology		CPIP/CPIP1	Quality Management,	14			UT	Urine Toxicology	96
improvement program Clobazam		DFC	Education Drug-Facilitated Crime	108	Cocaine		DMPM	Drug Monitoring for Pain Management	107
Clomipramine		Т	Toxicology	96			FTC	Forensic Toxicology,	104
		UT	Urine Toxicology	96				Criminalistics	
Clonazepam		DMPM	Drug Monitoring for Pain Management	107			OFD	Oral Fluid for Drugs of Abuse	100
		FTC	Forensic Toxicology,	104			Т	Toxicology	96
			Criminalistics				UDS, UDS6	Urine Drug Screen	98
		Т	Toxicology	96			UT	Urine Toxicology	96
		UT	Urine Toxicology	96	Codeine		DFC	Drug-Facilitated Crime	108
Clonidine		DFC	Drug-Facilitated Crime	108			DMPM	Drug Monitoring for Pain	107
Clostridium difficile antigen		CDF2	<i>C. diff,</i> 2 Challenge	180			FTC	Management Forensic Toxicology,	104
	Х	CDF5	C. diff, 5 Challenge	181				Criminalistics	
	Х	D	Bacteriology-Antigen Detection	173			OFD	Oral Fluid for Drugs of Abuse	100
		SP, SPN	Stool Pathogens-Rapid	184			Т	Toxicology	96
Clostridium difficile toxin		CDF2	and Molecular Clostridum difficile	180			UDC	Forensic Urine Drug Testing, Confirmatory	99
			Detection				UT	Urine Toxicology	96
		CDF5	Clostridum difficile Detection	181	Compatibility testing	X	J, JAT	Transfusion Medicine	220- 221
		D	Bacteriology-Antigen Detection	173			JATE1	Transfusion Medicine, Automated, Educational	221
		GIP	Gastrointestinal Panel	204			TMCA	Transfusion Medicine,	225
		GIP5	Gastrointestinal Panel	204				Competency	
		SP, SPN	Stool Pathogens-Rapid	184	Complement C3	X	IG/IGX	Assessment	208
			and Molecular			^	LN7	Immunology, General Immunology Cal Ver/Lin	123
Clozapine		Т	Toxicology	96	Complement C4	X	IG/IGX	Immunology, General	208
		UT	Urine Toxicology	96		~	LN7	Immunology Cal Ver/Lin	123
		ZE	Therapeutic Drug	60	Complexed PSA	X	K/KK	Ligand Assay, General	82
CMV		ID1	Monitoring, Extended Nucleic Acid Amp,	197	Conductivity, sweat	X	SW1, SW2, SW4	Sweat Analysis Series	79
			Viruses	400	Connexin 26 (GJB2 gene)	X	MGL3	Molecular Genetics	248-
		LN38	CMV Viral Load Cal	130			malo		249
		VLS, VLS2	Viral Load	199	Copper	Х	R	Trace Metals	78

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
Copper, urine		TMU	Trace Metals, Urine	103	Creatine kinase (CK)		LN2BV	Chemistry, Lipid,	120
Copper, whole blood		TMWB	Trace Metals, Whole Blood	103	(cont.)			Enzyme all Beckman except AU, Vitros Cal Ver/Lin	
Coproporphyrins	Х	N/NX	Urine Chemistry, Special	69	Creatinine	X	AQ2, AQ4		92
Coronavirus*		ID2	Nucleic Acid Amp, Respiratory	198		^	AQ2Q, AQ4Q	Aqueous Blood Gas Quality Cross Check, Critical Care Aqueous	44
		IDPN	Infectious Disease, Pneumonia Panel	203		X	C1 C2 C2V	Blood Gas Series	56-5
	X	IDR	Infectious Disease, Respiratory Panel	202			C1, C3, C3X, C4, CZ, CZ2X, CZX	Chemistry and TDM	50-56
Cortisol		ABS	Accuracy-Based Testosterone and Estradiol	113			CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	C1, C3, C3X,	Chemistry and TDM	56-58			FLD	Body Fluid	72
		CZ, CZ2X, CZX					FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		CZQ	Quality Cross Check,	41			IFS	Interfering Substances	133
	X	К/КК	Chemistry and TDM Ligand Assay, General	82			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		LN5	Ligand Assay Cal Ver/Lin				LN24	Creatinine Accuracy Cal Ver/Lin	127
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121- 122			LN2BV	Chemistry, Lipid, Enzyme all Beckman	120
Cortisol, salivary		SALC	Salivary Cortisol	77				except AU, Vitros Cal	
Cortisol, urinary free	Х	N/NX	Urine Chemistry, Special	69			SCO	Ver/Lin	10/
Cortisol, urinary free Cotinine		NTA	Nicotine and Tobacco	102	Creatining wring		ABU	Serum Carryover	134 113
			Alkaloids		Creatinine, urine	X	BU	Accuracy-Based Urine Bone and Mineral, Urine	_
		Т	Toxicology	96		X	CD	Cadmium	102
		UT	Urine Toxicology	96		^	DAI	Urine Drug Adulterant/	98
C-peptide		ABGIC	Accuracy-Based Glucose, Insulin, and	115			LN20	Integrity Testing	126
	Х	ING	C-Peptide Insulin, Gastrin,	86			-	Lin	
		LN46	C-Peptide, PTH C-Peptide/Insulin Cal	131			LN6	Urine Chemistry Cal Ver/Lin	122
C-reactive protein (CRP)	X	CRP, IL	Ver/Lin Immunology	208		X	U	Urine Chemistry, General	68
		LN12, LN12E	C-Reactive Protein Cal Ver/Lin	124			UDC	Forensic Urine Drug Testing, Confirmatory	99
C-reactive protein, high- sensitivity (hsCRP)	Х	HSCRP	High-Sensitivity C-Reactive Protein	64		Х	UMC	Urine Albumin/ Creatinine	153
		LN21	High-Sensitivity C-Reactive Protein Cal	126	Creatinine, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
			Ver/Lin		Creatinine, whole blood	Х	WBCR	Whole Blood Creatinine	66
Creatine kinase (CK)	Х	C1, C3, C3X, CZ, CZ2X,	Chemistry and TDM	56-58	Crossmatching		EXM, EXM2	Electronic Crossmatch	221– 222
		CZQ	Quality Cross Check,	41		X	J, JAT	Transfusion Medicine	220- 221
		IFS	Chemistry and TDM Interfering Substances	133		Х	MX1B, MX1C, MXB, MXC	HLA Analysis, Class I	236- 237
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	133		Х	MX2B, MX2C, MXB, MXC	HLA Analysis Class II	236- 237

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\*Laboratories performing SARS-CoV-2 testing should see COV2 program in online store, <u>here</u>.

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Crossmatching (cont.)		TMCA	Transfusion Medicine, Competency	225	Cytogenomic microarray		CYCGH	Constitutional Microarray Analysis	244
Cryptococcal antigen detection	Х	CRYP	Assessment Cryptococcal Antigen Detection	190			CYCMA	Cytogenomic Microarray Analysis for Oncologic Abnormality	244
		F	Mycology and Aerobic Actinomycetes	189	Cytology proficiency testing			See Cytopathology GYN proficiency testing	
		F1	Yeast	189	Cytomegalovirus (CMV)		ID1	Nucleic Acid Amp,	197
Cryptococcus neoformans/gatti		IDME	Meningitis/Encephalitis Panel	202			IDME	Viruses Meningitis/Encephalitis	202
Cryptosporidium		GIP	Gastrointestinal Panel	204				Panel	
		GIP5	Gastrointestinal Panel	204			LN38	CMV Viral Load Cal Ver/	130
Cryptosporidium	Х	P, P3, P4, P5	Parasitology	192				Lin	
mmunoassay, preserved			6,5				VLS, VLS2	Viral Load	199
specimen						X	VM3	Viral Markers-Series 3	230
Crystal identification		BCR	Bile crystals	149		Х	VR1	Virology Culture	196
bile)						Х	VR2	Virology by DFA	190
Crystal identification body fluid)		BFC	Body Fluid Crystals	149		Х	VR3	Infectious Disease Serology	20
Crystal identification urine)		URC	Urine Crystals	149	Cytopathology GYN education		PAPCE1	PAP Edu, Conventional	280
Crystals, urine semiquantitative)		UAA	Automated Urinalysis	149			PAPJE1	PAP Edu, All Technologies	28
CSF antigen detection	Х	D	Bacteriology	173			PAPKE1	PAP Edu, SurePath	286
CSF IgG calculations		OLI	CSF Chemistry and	74			PAPME1	PAP Edu, ThinPrep	28
C-telopeptide (CTX)		BMV5	Oligoclonal Bands Bone Markers and	86	Cytopathology GYN proficiency testing		PAPCPT	PAP PT, Conventional	28
			Vitamin		· · · · ·		PAPJPT	PAP PT, Combination	28
		BU	Bone and Mineral, Urine	85	I		PAPKPT	PAP PT, SurePath	28
Cyclic citrullinated		CCP	Anti-cyclic Citrullinated	212			PAPLPT	PAP PT, Combination	28
peptide antibody			Peptide Antibody				PAPMPT	PAP PT, ThinPrep	28
Cyclobenzaprine		DFC FTC	Drug-Facilitated Crime Forensic Toxicology,	108 104	Cytopathology, nongynecologic		FNA/FNA1	Fine-Needle Aspiration- Online	29
		Т	Criminalistics Toxicology	96			FNAG/FNAG1	Fine-Needle Aspiration- Glass	29 <sup>-</sup>
		UT	Urine Toxicology	96	I		NGC/NGC1	Nongynecologic	289
Cyclospora cayatanensis		GIP	Gastrointestinal Panel	204			Nuc/Nuc1	Cytopath Edu Prgm	20.
Cyclosporine	X	GIP5 CS	Gastrointestinal Panel Immunosuppressive	204 59	Cytopreparation differential manual		HFC	Hemocytometer Fluid Count	15
			Drugs		Dabigatran		DBGN	Anticoagulant	16
		LN31	Immunosuppressive Drugs Cal Ver/Lin	128	D-dimer, qualitative		CGDF	Monitoring, Dabigatran Coagulation, D-dimer/	16
CYP2C9		PGX	Pharmacogenetics	251	, , , , , , , , , , , , , , , , , , , ,			FDP	
CYP2C19		PGX	Pharmacogenetics	251			CGL	Coagulation, Limited	16
CYP2D6		PGX	Pharmacogenetics	251	D-dimer, quantitative	Х	CGDF	Coagulation, D-dimer/	16
CYP3A4		PGX	Pharmacogenetics	251				FDP	
YP3A5		PGX	Pharmacogenetics	251		Х	CGL	Coagulation, Limited	16
Cystatin C Cystic fibrosis (CFTR	X	CYS MGL2, MGL5	Cystatin C Molecular Genetics	74 248–			CGLQ	Quality Cross Check, Coagulation, Limited	47
gene)	^	WIGEZ, WIGED	molecular Genetics	248-			LN42	D-dimer Cal Ver/Lin	13
Cystine		KSA	Kidney Stone Risk Assessment	69		Х	PCARM, PCARMX	Plasma Cardiac Markers	65
		<u> </u>	Assessment				POC12	Competency Plasma Cardiac Markers	53

Analyte/Procedure	LAP ENR	0	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Delta-9-THC		FTC	Forensic Toxicology, Criminalistics	104	Diazepam		DMPM	Drug Monitoring for Pain Management	107
		OFD	Oral Fluid for Drugs of Abuse	100			FTC	Forensic Toxicology, Criminalistics	104
		Т	Toxicology	96			OFD	Oral Fluid for Drugs of	100
		THCB	Blood Cannabinoids	106				Abuse	
		UT	Urine Toxicology	96			Т	Toxicology	96
Delta-9-THC-COOH		DFC	Drug-Facilitated Crime	108			UT	Urine Toxicology	96
		DMPM	Drug Monitoring for Pain Management	107	Differential, automated	X	FH1-FH4, FH6, FH9,	Hematology Automated Differential	136
		FTC	Forensic Toxicology, Criminalistics	104			FH10, FH13 FH1P-FH4P,		136
		OFD	Oral Fluid for Drugs of Abuse	100			FH6P, FH9P, FH10P, FH13P		
		Т	Toxicology	96			FH3Q, FH4Q,	Quality Cross Check,	45
		THCB UDC	Blood Cannabinoids Forensic Urine Drug	106 99			FH6Q, FH9Q	Automated Hematology Series	40
		UDS, UDS6	Testing, Confirmatory Urine Drug Screen	98	Differential (bone marrow), manual		BMD	Bone Marrow Cell Differential	139
		UT	Urine Toxicology	96	Differential (fluid),		HFC, HFCI	Hemocytometer Fluid	150-
		UTCO	Urine Toxicology Carryover	134	manual Differential (peripheral		EHE1	Count Expanded Virtual	151 144
Demoxepam		Т	Toxicology	96	blood), manual			Peripheral Blood Smear	
Deoxypyridinoline (DPD)		BU	Bone and Mineral, Urine	85			VPBS	Virtual Peripheral Blood	143
Dermatopathology		DPATH/ DPATH1	Online Digital Slide Program	267	Digital slide program in		FNA/FNA1	Smear Online Digital Slide	290
Dermatopathology immunohistochemistry		DPIHC	Dermatophathology Immunohistochemistry	278	fine-needle aspiration, online			Program	
Dermatophyte identification	Х	F	Mycology and Aerobic Actinomycetes	189	Digoxin	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-5
Desipramine		DFC	Drug-Facilitated Crime	108			CZQ	Quality Cross Check,	41
		FTC	Forensic Toxicology,	104				Chemistry and TDM	
			Criminalistics				LN3	TDM Cal Ver/Lin	121
		Т	Toxicology	96	Digoxin, free	X	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-5
		UT	Urine Toxicology	96			CZQ	Quality Cross Check,	41
<b>D</b>	Х	ZT	TDM, Special	60			0LQ	Chemistry and TDM	
Desmethylclomipramine		T	Toxicology	96	Dihydrocodeine		Т	Toxicology	96
De e verethe de velete e ve		UT	Urine Toxicology	96			UT	Urine Toxicology	96
Desmethylcycloben- zaprine		FTC	Forensic Toxicology, Criminalistics	104	Diltiazem		Т	Toxicology	96
Zaprine		Т	Toxicology	96			UT	Urine Toxicology	96
		UT	Urine Toxicology	96	Dilute prothrombin time		CGE/CGEX	Coagulation, Extended	161
Desmethylsertraline		T	Toxicology	96	Dilute Russell's viper		CGS1	Coag Special, Series 1	162
,		UT	Urine Toxicology	96	venom time				
Dextromethorphan		DFC	Drug-Facilitated Crime	108	Dimeric inhibin A (DIA)	Х	FP, FPX	Maternal Screen	87
k		FTC	Forensic Toxicology, Criminalistics	104	Diphenhydramine		DFC FTC	Drug-Facilitated Crime Forensic Toxicology,	108 104
	-	Т	Toxicology	96			-	Criminalistics	
		UT	Urine Toxicology	96			T	Toxicology	96
DHEA sulfate	Х	Y/YY	Ligand Assay, Special	84			UT	Urine Toxicology	96
DIA (Dimeric inhibin A)	Х	FP/FPX	Maternal Screen	87	Diphenylhydantoin		DAT	See Phenytoin	0.0.1
			1		Direct antiglobulin testing	X	DAT	Direct Antiglobulin Testing	224

Analyte/Procedure	LAP ENR	Program Code	Description	Pg		LAP ENR		Description	Pg
Direct antiglobulin testing (cont.)		TMCAD	Transfusion Medicine, Competency	225	Ecgonine methyl ester		FTC	Forensic Toxicology, Criminalistics	104
			Assessment				Т	Toxicology	96
Direct bilirubin	X	C1, C3, C3X,	Chemistry and TDM	56-58			UT	Urine Toxicology	96
		C4, CZ, CZ2X,			E. coli 0157		GIP	Gastrointestinal Panel	204
		CZX CZQ	Quality Cross Check,	41		Х	GIP5	Gastrointestinal Panel	204
			Chemistry and TDM		eGFR		LN24	Creatinine Accuracy CalVer/Lin	127
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120	EGFR—epidermal growth factor receptor	Х	EGFR	Mutation Testing	260
		LN2BV	Chemistry, Lipid, Enzyme all Beckman	120		Х	MTP	Multigene Tumor Panel	261
			except AU, Vitros Cal Ver/Lin		Electronic crossmatch		EXM, EXM2	Electronic Crossmatch	221-
	X	NB, NB2	Neonatal Bilirubin	65	Electrophoresis	Х	HG	Hemoglobinopathy	140
Disease association/ drug risk		DADR1, DADR2	Disease Association/ Drug Risk	240			LPE	Lipoprotein Electrophoresis	76
Disopyramide	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58		Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74
		CZQ	Quality Cross Check,	41			SPE	Protein Electrophoresis	76
DMD/Becker ( <i>DMD</i> gene)	X	MGL2	Chemistry and TDM Molecular Genetics	248-			UBJP	Urinary Bence Jones Proteins	76
Divid/ Deckei (Divid gene)	^	MGLZ	Molecular Genetics	240-	Elution, antibody		ELU	Eluate	224
DNA analysis	Х	DML MHO	HLA Molecular Typing Molecular Oncology	237			TMCAE	Eluate Competency Assessment	226
	Х	PARF		233	Embryology		EMB	Embryology	157
DNA content/cell cycle analysis	^	FL, FL2	Parentage/Relationship Flow Cytometry	233	Enteroaggregative E. coli (EAEC)		GIP	Gastrointestinal Panel	204
DNA extraction and		MH05	Molecular Oncology	259,		Х	GIP5	Gastrointestinal Panel	204
amplification DNA fingerprinting		IDN, IDO	Hematologic Nucelic Acid Amp,	262	Enterobacter cloacae complex		IDPN	Infectious Disease, Pneumonia Panel	203
DNA mismatch repair		HQMMR	Organisms HistoQIP Mismatch	275	Enteropathogenic E. coli (EPEC)		GIP	Gastrointestinal Panel	204
DNA mismatch repair			Repair IHC	2/5		Х	GIP5	Gastrointestinal Panel	204
		MMR	DNA Mismatch Repair	278	Enterotoxigenic E. coli		GIP	Gastrointestinal Panel	204
DNA sequencing		SEC, SEC1	DNA Sequencing	250	(ETEC)				
Dopamine	Х	N/NX	Urine Chemistry, Special	69		Х	GIP5	Gastrointestinal Panel	204
Doxepin		DFC FTC	Drug-Facilitated Crime Forensic Toxicology,	108 104	Enterovirus		ID1	Nucleic Acid Amp, Viruses	197
		Т	Criminalistics Toxicology	96			IDME	Meningitis/Encephalitis Panel	202
		UT	Urine Toxicology	96		Х	IDR	Infectious Disease, Respiratory Panel	202
Doxylamine	-	DFC	Drug-Facilitated Crime	108		Х	VR1	Virology Culture	196
		T	Toxicology	96	Eosinophils, urine		SCM2	Special Clinical	152
		UT	Urine Toxicology	96				Microscopy	
DPYD Duloxetine		PGX3 T	Pharmacogenetics Toxicology	251 96	Ephedrine		FTC	Forensic Toxicology, Criminalistics	104
		UT	Urine Toxicology	96			Т	Toxicology	96
Ecgonine ethyl ester		FTC	Forensic Toxicology, Criminalistics	104	Epidermal growth factor	Х	UT EGFR	Urine Toxicology Mutation Testing	96 260
		Т	Toxicology	96	receptor (EGFR)				
		UT	Urine Toxicology	96		Х	MTP	Multigene Tumor Panel	261
					Epinephrine	Х	N/NX	Urine Chemistry, Special	

Analyte/Procedure		Program Code	Description	Pg		LAP ENR	Program Code	Description	Pg
Epithelial cells, urine, semiquantitative		UAA1	Automated Urinalysis	149	Factor II mutation	Х	MGL1	Molecular Genetics	248- 249
Epstein-Barr virus (EBV)		ID1	Nucleic Acid Amp, Viruses	197		Х	TPM	Thrombophilia Mutations	252
	Х	ISH	In Situ Hybridization	258	Factor V		CGE/CGEX	Coagulation, Extended	161
		VLS, VLS2	Viral Load	199	Factor V Leiden mutation	Х	MGL1	Molecular Genetics	248-
		VR3	Antibody Detection- Infectious Disease	205	(F5 gene)	Х	ТРМ	Thrombophilia Mutations	249 252
ER, PgR by immunohistochemistry	Х	PM2	Serology ER, PgR by Immunohistochemistry	281	Factor VII Factor VIII		CGE/CGEX CGE/CGEX	Coagulation, Extended Coagulation, Extended	161
Erythrocyte		ESR, ESR1,	Erythrocyte	140			CGS3	Coag Special, Series 3	162
sedimentation rate		ESR2, ESR3	Sedimentation Rate		Factor VIII inhibitor		CGS3	Coag Special, Series 3	162
Erythropoietin		EPO	Erythropoietin	88	Factor IX		CGE/CGEX	Coagulation, Extended	161
Eschericia coli		IDPN	Infectious Disease,	203	Factor X		CGE/CGEX	Coagulation, Extended	161
			Pneumonia Panel		Factor XI		CGE/CGEX	Coagulation, Extended	161
Escherichia coli K1		IDME	Meningitis/Encephalitis	202	Factor XII		CGE/CGEX	Coagulation, Extended	161
		0.5	Panel		Factor XIII		CGE/CGEX	Coagulation, Extended	161
Escherichia coli 0157		GIP	Gastrointestinal Panel	204	Familial dysautonomia	X	MGL4	Molecular Genetics	248-
	Х	GIP5	Gastrointestinal Panel	204	(IKBKAP gene)				249
Estazolam Estradiol		DFC ABS	Drug-Facilitated Crime Accuracy-Based Testosterone and	108 113	Fanconi anemia, complementation grp. C (FANCC gene)	Х	MGL4	Molecular Genetics	248- 249
			Estradiol	123	Fecal calprotectin		FCAL	Fecal Calprotectin	75
		LN8	Reproductive Endocrinology Cal Ver/	123	Fecal fat, qualitative		FCFS	Fecal Fat	75
			Lin		Fecal lactoferrin		FLAC	Fecal Lactoferrin	181
	Х	Y/YY	Ligand Assay, Special	84	Fecal occult blood		OCB	Occult Blood	151
Estriol, unconjugated (uE3)	Х	FP/FPX	Maternal Screen	87			OCBQ	Quality Cross Check Occult Blood	46
	Х	Y/YY	Ligand Assay, Special	84	Fentanyl		DFC	Drug-Facilitated Crime	108
Estrogen receptors by immunohistochemistry	Х	PM2	ER, PgR by Immunohistochemistry	281			DMPM	Drug Monitoring for Pain Management	
Ethanol	Х	AL1	Whole Blood Alcohol/ Volatiles	101			FTC	Forensic Toxicology, Criminalistics	104
	Х	AL2 LN11	Serum Alcohol/Volatiles Serum Ethanol Cal Ver/	101 124			OFD	Oral Fluid for Drugs of Abuse	100
			Lin				Т	Toxicology	96
Ethanol, urine Ethanol, vitreous fluid		UDS, UDS6 VF	Urine Drug Screen Vitreous Fluid, Post-	98 101			UDC	Forensic Urine Drug Testing, Confirmatory	99
			mortem				UDS, UDS6	Urine Drug Screen	98
Ethosuximide	X	CZ, CZ2X,	Chemistry and TDM	56-58			UT	Urine Toxicology	96
		CZQ	Quality Cross Check,	41	Fern test (vaginal)	Х	CMMP	Clinical Microscopy, Misc	147
			Chemistry and TDM		Ferritin	X	C3, C3X, CZ,	Chemistry and TDM	56-58
Ethyl glucuronide (EtG)		ETB	Ethanol Biomarkers	102			CZ2X, CZX		
Ethyl sulfate (EtS)		ETB	Ethanol Biomarkers	102			CZQ	Quality Cross Check, Chemistry and TDM	41
Ethylene glycol		AL1	Whole Blood Alcohol/	101		Х	K, KK, K2	Ligand Assay, General	82
		AL 2	Volatiles	101		~	LN5	Ligand Assay, General	
Everolimus		AL2 EV	Serum Alcohol/Volatiles Everolimus	101 60					121
Factor II		EV CGE/CGEX	Coagulation, Extended	161			LN5S	Ligand Assay, Siemens Cal Ver/Lin	121-
					Fetal fibronectin	L			122

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Fetal hemoglobin (gastric fluid)		APT	Fetal Hemoglobin	150	FISH for lymphoma		CYL	Fluorescence In Situ Hybridization and	243
Fetal hemoglobin identification	Х	HG	Hemoglobinopathy	140				Interpretation on Site, Lymphoma	
Fetal membrane rupture		ROM1	Placental Alpha Microglobulin 1 (PAMG-1)	152	FISH for paraffin- embedded tissue	X	СҮН	Fluorescence In Situ Hybridization and Interpretation on Site, Breast Cancer	243
Fetal red cell quantitation	X	HBF	Fetal Red Cell Detection	225			CYJ	Fluorescence In Situ	24
		TMCAF	Transfusion Medicine, Competency Assessment	226				Hybridization and Interpretation on Site, Brain/Glioma Tissue	
Fetal screen (Rosette testing)	Х	HBF	Fetal Red Cell Detection	225			СҮК	Fluorescence In Situ Hybridization and Interpretation on Site,	24
		TMCAF	Transfusion Medicine, Competency	226			CYL	Solid Tumor Fluorescence In Situ	24
Fibrin degradation products, plasma		CGDF	Assessment Coagulation, D-dimer/ FDP	160				Hybridization and Interpretation on Site, Lymphoma	
		CGL	Coagulation, Limited	160	FISH for solid tumor		СҮК	Fluorescence In Situ	24
		CGLQ	Quality Cross Check, Coagulation, Limited	47			UIK	Hybridization and Interpretation on Site,	27
Fibrin degradation products, serum		CGDF	Coagulation, D-dimer/ FDP	160	FISH for urothelial	X	CYI	Solid Tumor Fluorescence In Situ	24
		CGL CGLQ	Coagulation, Limited Quality Cross Check,	160 47	carcinoma hybridization and interpretation			Hybridization and Interpretation on Site,	
			Coagulation, Limited					Urothelial Carcinoma	
Fibrin monomer		CGS3	Coag Special, Series 3	162	Flow cytometry, post- immunotherapy analysis		FL6	Flow Cytometry, Post-Immunotherapy	21
Fibrinogen	Х	CGLQ	Coagulation, Limited Quality Cross Check,	160 47			450	Analysis	10
			Coagulation, Limited		Fluconazole		AFD	Antifungal Drugs Monitoring	10
		LN44	Fibrinogen, Cal Ver/Lin	131	Flunitrazepam		Т	Toxicology	96
Fibrinogen antigen		CGE/CGEX	Coagulation, Extended	161			UT	Urine Toxicology	96
Fine-needle aspiration, digital slide program		FNA/FNA1	Online Digital Slide Program	290	Fluorescent microscope check		1	Instrumentation	13
Fine-needle aspiration,		FNAG/FNAG1	Fine-Needle Aspiration	291	Fluoxetine		DFC	Drug-Facilitated Crime	10
glass slides FISH for brain/glioma		CYJ	Fluorescence In Situ Hybridization and	243			FTC	Forensic Toxicology, Criminalistics	10
			Interpretation on Site,		Folate, RBC	Х	FOL	RBC Folate	88
			Brain/Glioma Tissue		Folate, serum	Х	K, KK, K2	Ligand Assay, General	82
FISH for breast	Х	СҮН	Fluorescence In Situ	243			LN5	Ligand Assay Cal Ver/Lin	12
carcinoma hybridization and interpretation			Hybridization and Interpretation on Site,				LN5S	Ligand Assay, Siemens Cal Ver/Lin	12
on site (HER2 gene amplification)			Breast Cancer		Follicle-stimulating hormone (FSH)		ABS	Accuracy-Based Testosterone, Estradiol	11
FISH for breast carcinoma, interpretation only ( <i>HER2</i> gene amplification)		СҮНІ	Interpetation Only, <i>HER2</i> FISH, Breast Cancer	282			LN8	Reproductive Endocrinology Cal Ver/ Lin	12
FISH for constitutional		CYF	Fluorescence In Situ	242		Х	Y/YY	Ligand Assay, Special	84
and hematologic disorders			Hybridization and Interpretation on Site		Fondaparinux		FNPX	Anticoagulant Monitoring, Fondaparinux	16
					Forensic pathology		FR/FR1	Forensic Pathology	29

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	U U U U U U U U U U U U U U U U U U U	Description	Pg
Forensic toxicology		FTC	Forensic Toxicology, Criminalistics	104	Gentamicin	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
Fragile X ( <i>FMR1</i> gene)	Х	MGL1	Molecular Genetics	248- 249			CZQ	Quality Cross Check, Chemistry and TDM	41
Free beta hCG		FP1B	First Trimester Maternal Screening, Free Beta	87	Giardia		LN3 GIP	TDM Cal Ver/Lin Gastrointestinal Panel	121 204
Free Kappa/Lambda ratio		SFLC	Serum Free Light Chains	214			-		
Free testosterone	Х	DY	Ligand Assay, Special	84		V	GIP5	Gastrointestinal Panel	204
Friedreich ataxia (FXN	X	MGL2	Molecular Genetics	248-	<i>Giardia</i> immunoassay, preserved specimen	X	P, P3, P4, P5	Parasitology	192
gene)		FT	<b>F</b>	249	Giemsa stain	X	BP	Blood Parasite	193
Fructosamine		FT	Fructosamine	75		Х	Р	Parasitology	192
Fungal culture		CBT SCP	Cord Blood Testing Stem Cell Processing	227 227	Glioma by FISH		CYJ	Fluorescence In Situ Hybridization and	243
Fungal serology		FSER	Fungal Serology	190				Interpretation on Site, Brain/Glioma Tissue	
Fungus identification	Х	F	Mycology and Aerobic Actinomycetes	189	Glucose		ABGIC	Accuracy-Based Glucose, Insulin, and	115
	X	F1	Yeast	189				C-Peptide	
	Х	F3	Candida culture	190	I	X	AQ2, AQ4	Aqueous Blood Gas	92
Gabapentin		DFC DMPM	Drug-Facilitated Crime Drug Monitoring for Pain Management	108 107			AQ2Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		Т	Toxicology	96		X	C1, C3, C3X,	Chemistry and TDM	56-58
		UT	Urine Toxicology	96			C4, CZ, CZ2X,		
		ZE	Therapeutic Drug Monitoring, Extended	60			CZQ	Quality Cross Check,	41
Galactomannan		FGAL	Galactomannan	190				Chemistry and TDM	
Gamma globulin		M, OL1	CSF Chemistry	74			FLD	Body Fluid	72
		SPE	Serum Electrophoresis	76			FLDQ	Quality Cross Check,	42
Gamma glutamyl transferase (GGT)	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58			IFS	Body Fluid Chemistry Interfering Substances	133
		CZQ	Quality Cross Check, Chemistry and TDM	41			LN13, LN13C	Blood Gas Cal Ver/Lin	124- 125
		IFS	Interfering Substances	133			LN2	Chemistry, Lipid,	120
		LN2	Chemistry, Lipid,	120			LN2BV	Enzyme Cal Ver/Lin Chemistry, Lipid,	120
		LN2BV	Enzyme Cal Ver/Lin Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal	120				Enzyme all Beckman except AU, Vitros Cal Ver/Lin	
		DE0	Ver/Lin	100	Glucose, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Gamma hydroxybutyrate (GHB)		DFC	Drug-Facilitated Crime	108	Glucose, urine	Х	CMP, CMP1 CMQ	Clinical Microscopy Quality Cross Check,	146 46
		FTC	Forensic Toxicology, Criminalistics	104				Urinalysis	
Gardnerella vaginalis, DNA probe	Х	VS	Vaginitis Screen	185		X	HCC2 LN6	Waived Combination Urine Chemistry Cal	66 122
Gastric occult blood		GOCB	Gastric Occult Blood	150			<b>DQQQ</b>	Ver/Lin	
Gastric pH		GOCB	Gastric Occult Blood	150			POC3	POC Urine Dipstick Competency	52
Gastrin	Х	ING	Insulin, Gastrin, C-Peptide, PTH	86		X	U	Urine Chemistry,	68
Gaucher disease (GBA gene)	Х	MGL4	Molecular Genetics	248- 249	Glucose, vitreous fluid		VF	General Vitreous Fluid, Post-	101
Genomic copy number		CYCGH	Constitutional	244	Glucose whole blood	X	НСС	mortem	99
	1		Microarray Analysis	· ·	Glucose, whole blood	A	1100	Waived Combination	66

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Glucose, whole blood (cont.)	Х	LCW	Ltd Chem, Waived	64	Gyn cytopathology education			See Cytopathology GYN Education	
		LN17	Whole Blood Glucose Cal Ver/Lin	125	Haemophilus influenzae		IDME	Meningitis/Encephalitis Panel	202
		POC2	POC Glucose Competency	52			IDPN	Infectious Disease, Pneumonia Panel	203
		POC7	POC/Waived Glucose	52	Haptoglobin	Х	IG/IGX	Immunology, General	208
			and Hemoglobin			Х	S2/S4	Immunology, Special	209
			Competency		HBeAg	Х	VM2	Viral Markers, Series 2	230
		WBGQ	Quality Cross Check, Whole Blood Glucose	41	HBsAg	Х	VM1	Viral Markers, Series 1	230
		00000		75	HBV	Х	HBVL, HBVL5	Hepatitis Viral Load	198
ilucose-6-phosphate ehydrogenase		G6PDS	Glucose-6 Phosphate Dehydrogenase	75		Х	NAT	Nucleic Acid Testing	232
qualitative and quantitative)					HCV	Х	HCV2	Hepatitis Viral Load, Genotyping and Qualitative	198
Glutaraldehyde, urine		DAI	Urine Drug Adulterant/ Integrity Testing	98			LN45	HCV Viral Load Cal Ver/	130
Glycated serum albumin		GSA	Glycated Serum Albumin	64		Х	NAT	Nucleic Acid Testing	232
Glycogen storage disease	Х	MGL4	Molecular Genetics	248-	HDL cholesterol		ABL	Accuracy-Based Lipid	112
ype IA (G6PC gene) Glycohemoglobin	X	GH2, GH5,	Hemoglobin A <sub>1c</sub>	249 63		Х	C1, C3, C3X, C4, CZ, CZ3X,	Chemistry and TDM	56-5
		GH5I GHQ	Quality Cross Check,	42			CZQ	Quality Cross Check,	41
			Hemoglobin A <sub>1c</sub>			X	LCW	Chemistry and TDM Ltd Chem, Waived	64
		LN15	Hemoglobin A <sub>1c</sub> Cal	125		~			
Glycosaminoglycans	Х	BGL	Ver/Lin Biochemical Genetics	245			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
mucopolysaccharides) Gram stain	Х	D	Bacteriology	173			LN2BV	Chemistry, Lipid, Enzyme all Beckman	120
	X	D2, D3, RMC	Throat, Urine, GC Cultures	175– 176				except AU, Vitros Cal Ver/Lin	
	Х	D5	Gram Stain	176	Helicobacter pylori	Х	HPS	H. pylori Antigen, Stool	181
	~	VGS1	Virtual Gram Stain Basic	-		Х	S2, S4	H. pylori IgG Antibody	209
		VGS1	Virtual Gram Stain	177		Х	S5	H. pylori IgG Antibody	209
		1002	Advanced			Х	VR3	H. pylori IgG Antibody	205
		VS2	Vaginitis Screen, Virtual Gram stain	186	Hematocrit	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
Group A Streptococcus antigen detection	Х	D	Bacteriology	173			AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous	44
	Х	D6	Rapid Group A Strep	177				Blood Gas Series	
	Х	D9	Rapid Group A Strep, Waived	177		X	CBT FH15	Cord Blood Testing Centrifugal Hematology	227 137
	Х	MC4	Urine Colony Count Combination	176		Х	FH1-FH4, FH6, FH9,	Hematology Automated Differential	136
		POC4	POC Strep Screen Competency	52			FH10, FH13, FH1P-FH4P,		
	Х	RMC	Routine Microbiology Combination	176			FH6P, FH9P, FH10P, FH13P		
Group B Streptococcus	Х	D8	Group B Strep	178	I		FH3Q, FH4Q,	Quality Cross Check,	45
Growth hormone	Х	Y/YY	Ligand Assay, Special See Cytopathology GYN	84			FH6Q, FH9Q	Automated Hematology Series	40
			Proficiency Testing			Х	HCC2	Waived Combination	66
		1	, 0		I	X	HE, HEP	Basic Hematology	136

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Hematocrit (cont.)		POC10, POC11	POC Competency Blood Gases	53	Hemoglobin, estimated	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92
		SCP	Stem Cell Processing	227			AQQ, AQ2Q,	Quality Cross Check,	44
	Х	S0	Blood Oximetry	94			AQ3Q, AQ4Q	Critical Care Aqueous Blood Gas Series	
		SOQ	Quality Cross Check, Blood Oximetry	44	l		POC10,	POC Competency Blood	53
Hematologic disorders by FISH		CYF	Fluorescence In Situ Hybridization and Interpretation on Site	242	Hemoglobin F quantitation	X	POC11 HG	Gases Hemoglobinopathy	140
Hematology bone marrow		BMD	Bone Marrow Cell	139	Hemoglobin, plasma		PHG	Plasma Hemoglobin	76
case studies			Differential		Hemoglobin S/C	Х	HGM	Hemoglobinopathies	247
Hematology case studies		VPBS	Virtual Periperal Blood Smear	143		Х	MGL2	Genotyping Molecular Genetics	248
Hematology peripheral blood case studies		EHE1	Expanded Virtual Peripheral Blood Smear	144	Hemoglobin, urine	X	CMP, CMP1	Clinical Microscopy	249
Hematopathology online education		HPATH, HPATH1	Hematopathology Online Education	145		^	CMQ	Quality Cross Check, Urinalysis	46
Hemochromatosis (HFE	X	MGL1	Molecular Genetics	248-	I	X	HCC2	Waived Combination	66
gene)		ind in		249			POC3	POC Urine Dipstick	52
Hemocytometer fluid	Х	HFC, HFCI	Hemocytometer Fluid	150-				Competency	
count Hemoglobin		CBT	Count Cord Blood Testing	151 227	Hemolytic complement, total		CH50	Total Hemolytic Complement	214
nemoglobin	Х	FH15	Centrifugal Hematology	137	Hemosiderin, urine		SCM1	Special Clinical	152
	Х	FH1-FH4,	Hematology Automated	136				Microscopy	
		FH6, FH9,	Differential		Heparin assay		CGS4	Coag Special, Series 4	162
		FH10, FH13, FH1P-FH4P,			Heparin-induced thrombocytopenia		CGE/CGEX	Coagulation, Extended	161
		FH6P, FH9P, FH10P,					CGS5	Coag Special, HIT	162
		FH13P			Heparin, low molecular weight		LN36	Heparin Cal Ver/Lin	129
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology	45	Heparin, unfractionated		LN36	Heparin Cal/Ver Lin	129
			Series		Heparin/platelet Factor		CGS5	Coag Special, HIT	162
	X	HCC	Waived Combination	66	Hepatitis B virus	Х	HBVL, HBVL5	Hepatitis Viral Load	198
	X X	HCC2 HE, HEP	Waived Combination Basic Hematology	66 136	Hepatitis C virus	Х	HCV2	Hepatitis Viral Load,	198
		LN9	Hematology Cal Ver/Lin	123				Genotyping and	
		POC7	POC/Waived Glucose and Hemoglobin	52			LN45	Qualitative HCV Viral Load Cal Ver/ Lin	130
		000	Competency	007	HER2 by	Х	HER2	HER2 by	281
	X	SCP SO	Stem Cell Processing Blood Oximetry	227 94	immunohistochemistry			Immunohistochemistry	
	^	SOQ	Quality Cross Check,	44	HER2 by molecular testing		MTP	Multigene Tumor Panel	261
Hemoglobin A <sub>1c</sub>	X	GH2, GH5,	Blood Oximetry Hemoglobin A <sub>1c</sub>	63	HER2, gastric		GHER2	Gastric HER2	281
	^	GH5I			HER2 gene amplification by FISH, hybridization	X	СҮН	Fluorescence In Situ Hybridization and	243
		GHQ	Quality Cross Check, Hemoglobin A <sub>1c</sub>	42	and interpretation on site			Interpretation on Site, Breast Cancer	
		LN15	Hemoglobin A <sub>1c</sub> Cal Ver/Lin	125	HER2 gene amplification by FISH, interpretation		СҮНІ	Interpetation Only, <i>HER2</i> FISH, Breast Cancer	282
Hemoglobin A2 quantitation	Х	HG	Hemoglobinopathy	140	Only HER2 gene amplification	X	ISH2	In Situ Hybridization	258
Hemoglobin electrophoresis	Х	HG	Hemoglobinopathy	140	by ISH				

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Herpes simplex virus	Х	HC2	HSV by DFA	197	HIV (cont.)	Х	NAT	Nucleic Acid Testing	232
(HSV)					HIV genotyping		HIVG	HIV Viral Genotyping	199
	Х	HC4	HSV Culture	197	HIV-1 p24 antigen	Х	VM3	Viral Markers-Series 3	230
		ID1	Nucleic Acid Amp, Viruses	197	HIV-1 p24 antigen, <b>anti-</b> HIV-1/2	Х	VM6, VM6X	Viral Markers-Series 6	231
	Х	ID5	HSV, Molecular	198	HLA-A, -B, -C antibody	Х	MX1B, MX1C,	HLA Analysis, Class I	236-
		IDME	Meningitis/Encephalitis Panel	202	identification		MX1E, MXB, MXC		237
	Х	VR1	Virology Culture	196		Х	MX2B, MX2C,	HLA Analysis, Class II	236-
	Х	VR2	Viral Antigen by DFA	196			MX2E, MXB,		237
	Х	VR3	Antibody Detection- Infectious Disease Serology	205	HLA-(class I/II) antibody screen		MXC MX1B, MX1C, MX1E, MX2B,	HLA Analysis, Class I/II	236- 237
HHV6		ID1	Nucleic Acid Amp, Viruses	197			MX2C, MX2E, MXB, MXC		
		IDME	Meningitis/Encephalitis Panel	202	HLA-(class I/II) crossmatching	X	MX1B, MX1C, MX1E, MXB, MXC	HLA Analysis, Class I	236– 237
		VLS2	Viral Load	199	I	X	MX2B, MX2C,	HLA Analysis, Class II	236-
HHV8		ID1	Nucleic Acid Amp, Viruses	197			MX2E, MXE, MX2E, MXB, MXC	The Analysis, oldss in	237
High-sensitivity	X	HSCRP	hsCRP	64	HLA-B*1502		PGX2	Pharmacogenetics	251
C-reactive protein					HLA-B27 typing	Х	B27	HLA-B27 Typing	237
		LN21	High-Sensitivity C-Reactive Protein Cal Ver/Lin	126	HLA-B*57:01		DADR1	Disease Association, Drug Risk	240
Histotechnology quality		HQIP	HistoQIP	271			PGX2	Pharmacogenetics	251
improvement Histotechnology quality		HQIPBX,	HistoQIP Biopsy Series	276-	HLA-B*58:01		DADR1	Disease Association, Drug Risk	240
improvement, biopsy		HQPBX1, HQBX2,	Thorough Diopoy Conco	277	HLA-DQA1*03/ DQB1*03:02		DADR2	Disease Association, Drug Risk	240
		HQBX3, HQBX4			HLA-DQA1*05/DQB1*02		DADR2	Disease Association, Drug Risk	240
Histotechnology quality		HQNEU	HistoQIP Central	272	HLA molecular typing	Х	DML	HLA Molecular Typing	237
improvement, central			Nervous System IHC		Homocysteine	Х	HMS	Homocysteine	64
nervous system IHC Histotechnology quality		HQIHC	HistoQIP IHC	274			LN16	Homocysteine Cal Ver/ Lin	125
improvement, IHC					Homovanillic acid	Х	N/NX	Urine Chemistry, Special	69
Histotechnology quality improvement, mismatch		HQMMR	HistoQIP Mismatch Repair IHC	275	HPV (cytopathology), high-risk	Х	CHPVD	Digene Specimen Transport Medium	287
repair IHC Histotechnology quality		HQNSC	HistoQIP Non-small Cell	276		Х	CHPVJ	Mixed Medium	287
improvement, non-small cell lung carcinoma IHC		RUNOC	Lung Carcinoma IHC	270		Х	СНРУК	SurePath Preservative Fluid Transport Medium	287
Histotechnology quality improvement, ISH		HQISH	HistoQIP In Situ Hybridization (Kappa/	272		Х	CHPVM	ThinPrep PreservCyt Transport Medium	287
Histotechnology quality		HQMEL	Lambda) HistoQIP Melanoma IHC	273			HPV	Digene Hybrid Capture Technology Only	197
improvement, melanoma				2,0			ISH	In Situ Hybridization	258
HC					HSV	Х	HC2	HSV by DFA	197
Histotechnology quality		HQWSI	HistoQIP Whole Slide	274		Х	HC4	HSV Culture	197
improvement, whole slide image			Image				ID1	Nucleic Acid Amp, Viruses	197
HIV	Х	HIVG, HV2 LN39	HIV Viral Load HIV Viral Load Cal Ver/	199 130		Х	ID5	Herpes Simplex Virus, Molecular	198
			Lin			Х	VR1	Virology Culture	196

Analyte/Procedure	LAP ENR		Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
HSV (cont.)	Х	VR2	Viral Antigen by DFA	196	Human papillomavirus	Х	CHPVM	ThinPrep PreservCyt	287
. ,	Х	VR3	Antibody Detection- Infectious Disease	205	(cytology) high-risk (cont.)			Transport Medium	
Human chorionic	X	C1, C3, C3X,	Serology Chemistry and TDM	56-58			HPV	Digene Hybrid Capture Technology Only	197
gonadotropin (hCG),		C4, CZ, CZ2X,	, <b>,</b>				ISH	In Situ Hybridization	258
serum		CZX					CHPVJ	Mixed Medium	287
		CZQ	Quality Cross Check, Chemistry and TDM	41			CHPVM	ThinPrep PreservCyt Transport Medium	287
	Х	FP/FPX, FP1T	Maternal Screen	87	Human parechovirus		IDME	Meningitis/Encephalitis	202
	X	HCG, IL	Immunology	208				Panel	
	Х	K/KK	Ligand Assay, General	82	Huntington disease (HTT gene)	X	MGL2	Molecular Genetics	248-
		LN5	Ligand Assay Cal Ver/Lin	121- 122	Hydrocodone		DFC	Drug-Facilitated Crime	108
		LN5S	Ligand Assay, Siemens	121-			DMPM	Drug Monitoring for Pain	
			Cal Ver/Lin Reproductive	122			FTC	Management	107
		LN8	Endocrinology Cal Ver/ Lin	123				Forensic Toxicology, Criminalistics	
		SCO	Serum Carryover	134			OFD	Oral Fluid for Drugs of Abuse	100
Human chorionic	Х	CMP, CMP1	Clinical Microscopy	146	I		Т	Toxicology	96
gonadotropin (hCG),urine		CMQ	Quality Cross Check,	46			UDC	Forensic Urine Drug Testing, Confirmatory	99
			Urinalysis				UT	Urine Toxicology	96
	Х	HCC2	Waived Combination	66	Hydromorphone		DFC	Drug-Facilitated Crime	108
		POC1 POC3	POC hCG Competency POC Urine Dipstick	52 52			DMPM	Drug Monitoring for Pain Management	107
			Competency				FTC	Forensic Toxicology,	104
	Х	UHCG	Urine HCG	152				Criminalistics	
Human epididymis protein 4		HUEP	Human Epididymis Protein 4	89			OFD	Oral Fluid for Drugs of Abuse	100
Human herpesvirus 6		ID1	Nucleic Acid Amp,	197	I		Т	Toxicology	96
		IDME	Viruses Meningitis/Encephalitis	202			UDC	Forensic Urine Drug Testing, Confirmatory	99
			Panel				UT	Urine Toxicology	96
		VLS2	Viral Load	199	Hydroxybupropion		Т	Toxicology	96
Human herpesvirus 8		ID1	Nucleic Acid Amp, Viruses	197	Hydroxyzine		DFC	Drug-Facilitated Crime	108
Human immuno-		HIVG	HIV Genotyping	199			T	Toxicology	96
deficiency virus (HIV)				100			UT	Urine Toxicology	96
	Х	HIVG, HV2	HIV Viral Load	199	Ibuprofen		T	Toxicology	96
		LN39	HIV Viral Load Cal Ver/	130	IDH1		UT GLI	Urine Toxicology Glioma	96 261
			Lin		IDH2		GLI	Glioma	261
Human metapneumovirus		ID2	Nucleic Acid Amp, Respiratory	198	IgA	X	IG/IGX	Immunology, General	201
inetapricanoviras		IDPN	Infectious Disease.	203	<u> </u>		LN7	Immunology Cal Ver/Lin	123
			Pneumonia Panel		IgA, electrophoresis	Х	SPE	Protein Electrophoresis	76
	Х	IDR	Infectious Disease,	202	IgD		S2, S4	Immunology, Special	209
			Respiratory Panel		lgE	Х	IG/IGX	Immunology, General	208
Human papillomavirus	X	CHPVD	Digene Specimen	287		Х	K/KK	Ligand Assay, General	82
(cytology) high-risk	v		Transport Medium Mixed Medium	207		Х	SE	Diagnostic Allergy	213
	X	CHPVJ CHPVK	Nixed Medium SurePath Preservative	287 287	IgE allergen-specific,		SE	Diagnostic Allergy	213
			Fluid Transport Medium	207	quantitative				

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
IgE multi-allergen screen	Х	SE	Diagnostic Allergy	213	In situ hybridization	Х	ISH	In Situ Hybridization	258
IGF-1 (somatomedin C)	X X	BGS Y/YY	Bone and Growth Ligand Assay, Special	85 84		Х	ISH2	In Situ Hybridization HER2	258
IgG	X	IG/IGX	Immunology, General	208	India ink		IND	India Ink	191
.54		LN7	Immunology Cal Ver/Lin	123	Infectious disease,		IDPN	Infectious Disease,	203
		S2, S4	Immunology, Special	209	pneumonia panel			Pneumonia Panel	
IgG subclass proteins		S2, S4	Immunology, Special	209	Infectious	Х	IL, IM	Immunology	208
IgG, CSF	Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74	mononucleosis (IM)	X	IMW	Infectious	209
IgG, electrophoresis	Х	SPE	Protein Electrophoresis	76		_	15.0	Mononucleosis, Waived	400
IGHV		IGHV	Mutation Analysis	258	Influenza virus	N N	ID2	Nucleic Acid Amp, Resp	198
lgM	Х	IG/IGX	Immunology, General	208		X	ID3	Influenza A, Influenza B, RSV by NAA	198
		LN7	Immunology Cal Ver/Lin	123	I		IDPN	Infectious Disease,	203
IgM, electrophoresis	Х	SPE	Protein Electrophoresis	76				Pneumonia Panel	
IL-2		CTKN	Cytokines	212		Х	IDR	Infectious Disease,	202
IL-6		CTKN	Cytokines	212	I			Respiratory Panel	
IL-8		CTKN	Cytokines	212			POC8	POC Influenza A/B Ag	52
IL-10		CTKN	Cytokines	212		Х	VR1	Virology Culture	196
IL28B		PGX1	Pharmacogenetics	251		Х	VR2	Viral Antigen Detection	196
Imipramine		DFC FTC	Drug-Facilitated Crime Forensic Toxicology,	108		X	VR4	by DFA Viral Antigen Detection	196
			Criminalistics					by EIA and Latex	
		T UT	Toxicology Urine Toxicology	96 96	Inherited cancer sequencing panel		ICSP	Inherited Cancer Sequencing Panel	247
	Х	ZT	TDM, Special	60	Instrument function		I	Instrumentation	132
Immature granulocyte		FH9, FH9P	Hematology, Auto Diff	136	Instrument linearity		1	Instrumentation	132
mmature granulocyte barameter mmature platelet		FH9, FH9P	Hematology, Auto Diff	136			LN11	Serum Ethanol Cal Ver/ Lin	124
fraction (IPF)							LN12, LN12E	C-Reactive Protein Cal Ver/Lin	124
Immature reticulocyte fraction (IRF)		RT, RT3, RT4	Reticulocyte	141			LN13, LN13C	Blood Gas Cal Ver/Lin	124- 125
Immunohistochemistry		BRAFV	BRAF V600E	278	I	_	LN15	Hemoglobin A <sub>1c</sub> Cal	125
		CD30	CD30 Immunohistochemistry	279			2.1110	Ver/Lin	120
		DPIHC	Dermatophathology Immunohistochemistry	278			LN16	Homocysteine Cal Ver/ Lin	125
	V	GHER2	Gastric HER2	281			LN17	Whole Blood Glucose Cal Ver/Lin	125
	X	HER2	HER2 by Immunohistochemistry	281			LN18, LN19	Reticulocyte Cal Ver/Lin	126
		МК	Immunohistochemistry	278			LN2	Chemistry, Lipid,	120
		MMR	DNA Mismatch Repair	278	I		1.1105	Enzyme Cal Ver/Lin	
		PDL1	PDL1	279	I		LN20	Urine Albumin Cal Ver/ Lin	126
		PM1	CD117 by Immunohistochemistry	279			LN21	High-Sensitivity C-Reactive Protein Cal	126
	Х	PM2	ER, PR by Immunohistochemistry	281			LN22	Ver/Lin Flow Cytometry Cal	126
		PM3	CD20 by Immunohistochemistry	279				Ver/Lin	
		PM5	Immunohistochemistry TMA	280			LN23 LN24	PSA Cal Ver/Lin Creatinine Accuracy Cal	127 127
		PM6	Anaplastic Lymphoma	280	I		LNOE	Ver/Lin	107
			Kinase IHC		I	_	LN25	Troponin I Cal Ver/Lin	127
		1	1				LN27	Troponin T Cal Ver/Lin	127

	LN2BV LN3 LN30 LN31 LN32 LN33 LN34 LN35 LN36 LN37	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin TDM Cal Ver/Lin BNP Cal Ver/Lin Immunosuppressive Drugs Cal Ver/Lin Ammonia Cal Ver/Lin Serum Myoglobin Cal Ver/Lin Tumor Markers Cal Ver/ Lin Thrombophilia Cal Ver/ Lin	120 121 128 128 128 128 129 129	International normalized ratio (INR) (cont.)	X	CGL CGLQ CGS1 CGS4 POC6 WP10 WP3, WP4,	Coagulation, Limited Quality Cross Check, Coagulation, Limited Coag Special, Series 1 Coag Special, Series 4 POC PT/INR, CoaguChek XS Plus Whole Blood Coagulation Whole Blood	160 47 162 162 52 168 168
	LN30 LN31 LN32 LN33 LN34 LN35 LN36	Ver/Lin         TDM Cal Ver/Lin         BNP Cal Ver/Lin         Immunosuppressive         Drugs Cal Ver/Lin         Ammonia Cal Ver/Lin         Serum Myoglobin Cal         Ver/Lin         Tumor Markers Cal Ver/Lin         Thrombophilia Cal Ver/Lin	128 128 128 128 128 129		X	CGS1 CGS4 POC6 WP10	Coagulation, Limited Coag Special, Series 1 Coag Special, Series 4 POC PT/INR, CoaguChek XS Plus Whole Blood Coagulation	162 162 52 168
	LN30 LN31 LN32 LN33 LN34 LN35 LN36	BNP Cal Ver/Lin         Immunosuppressive         Drugs Cal Ver/Lin         Ammonia Cal Ver/Lin         Serum Myoglobin Cal         Ver/Lin         Tumor Markers Cal Ver/         Lin         Thrombophilia Cal Ver/         Lin	128 128 128 128 128 129		X	CGS4 POC6 WP10	Coag Special, Series 1 Coag Special, Series 4 POC PT/INR, CoaguChek XS Plus Whole Blood Coagulation	162 52 168
	LN31 LN32 LN33 LN34 LN35 LN36	Immunosuppressive         Drugs Cal Ver/Lin         Ammonia Cal Ver/Lin         Serum Myoglobin Cal         Ver/Lin         Tumor Markers Cal Ver/         Lin         Thrombophilia Cal Ver/         Lin	128 128 128 129		X	POC6 WP10	Coag Special, Series 4 POC PT/INR, CoaguChek XS Plus Whole Blood Coagulation	52 168
	LN32 LN33 LN34 LN35 LN36	Drugs Cal Ver/Lin Ammonia Cal Ver/Lin Serum Myoglobin Cal Ver/Lin Tumor Markers Cal Ver/ Lin Thrombophilia Cal Ver/ Lin	128 128 129		X	WP10	POC PT/INR, CoaguChek XS Plus Whole Blood Coagulation	168
	LN33 LN34 LN35 LN36	Serum Myoglobin Cal Ver/Lin Tumor Markers Cal Ver/ Lin Thrombophilia Cal Ver/ Lin	128 129		X		Coagulation	
	LN34 LN35 LN36	Ver/Lin Tumor Markers Cal Ver/ Lin Thrombophilia Cal Ver/ Lin	129		X	WP3, WP4,		160
	LN35 LN36	Lin Thrombophilia Cal Ver/ Lin		leained estations				1 100
	LN36	Lin	129		X	WP6, WP9 AQ, AQ2, AQ3,	Coagulation Aqueous Blood Gas	92
			120		^	AQ4	Quality Cross Check,	44
	LN37	Heparin Cal Ver/Lin	129			AQQ, AQ2Q, AQ3Q, AQ4Q	Critical Care Aqueous	44
		von Willebrand Factor Ag Cal Ver/Lin	129				Blood Gas Series	
	LN38	CMV Viral Load Cal Ver/	130	I	X	C3, CZ, CZX	Chemistry and TDM	56-5
	LN39	Lin HIV Viral Load Cal Ver/	130			POC10, POC11	POC Competency Blood Gases	53
		Lin		Iron	X	C1, C3, C3X, CZ, CZ2X,	Chemistry and TDM	56-
	-							
		Lin					Chemistry and TDM	41
			-			IFS	-	133
		Cal Ver/Lin				LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
		-				LN2BV		120
		Lin					except AU, Vitros Cal	
		Ver/Lin		Isopropanol	X	AL1	Whole Blood Alcohol/	10
	LN5	Ligand Assay Cal Ver/Lin						-
		Ligand Assay Ciamana			X			
		Cal Ver/Lin	122	Itraconazole		AFD	Antifungal Drugs Monitoring	10
		Ver/Lin		JC virus		ID1T	Nucleic Acid Amp, JC and BK	197
	LN7 LN8	Reproductive	123 123	Jo-1 (antihistidyl t-RNA synthetase)		RDS	Rheumatic Disease Special	213
		0,		Kaolin-activated CT		CGE/CGEX	Coagluation, Extended	16
			122	Kappa/Lambda	Х	ISH	In Situ Hybridization	258
				Kappa/Lambda ratio		IG/IGX	Immunology, General	208
		Glucose, Insulin, and				S2, S4	Immunology, Special	209
		C-Peptide		Karyotype nomenclature	X	CY, CYBK	Cytogenetics	24
Х	ING	Insulin, Gastrin, C-Peptide, PTH	86	Ketamine		DFC FTC	Drug-Facilitated Crime Forensic Toxicology,	10
	LN46	C-Peptide/Insulin Cal Ver/Lin	131				Criminalistics	96
	CTKN	Cytokines	212	I				96
	CTKN	Cytokines	212	Ketones, serum		-		64
Х	CGB		160		x			140
		LN9 ABGIC X ING LN46 CTKN CTKN	LN40Vitamin D Cal Ver/LinLN41Procalcitonin Cal Ver/ LinLN42D-Dimer Cal Ver/LinLN43Lamellar Body Count Cal Ver/LinLN44Fibrinogen Cal Ver/LinLN45HCV Viral Load Cal Ver/ LinLN46C-Peptide/Insulin Cal Ver/LinLN5Ligand Assay Cal Ver/LinLN5Ligand Assay, Siemens Cal Ver/LinLN5Ligand Assay Cal Ver/LinLN5Ligand Assay Cal Ver/LinLN5Ligand Assay Cal Ver/LinLN6Urine Chemistry Cal Ver/LinLN7Immunology Cal Ver/ LinLN8Reproductive Endocrinology Cal Ver/ LinABGICAccuracy-Based Glucose, Insulin, and C-PeptideXINGInsulin, Gastrin, C-Peptide, PTHLN46C-Peptide/Insulin Cal Ver/LinCTKNCytokinesCTKNCytokines	LN40Vitamin D Cal Ver/Lin130LN41Procalcitonin Cal Ver/ Lin130LN42D-Dimer Cal Ver/Lin131LN43Lamellar Body Count Cal Ver/Lin131LN43Lamellar Body Count Cal Ver/Lin131LN44Fibrinogen Cal Ver/Lin131LN45HCV Viral Load Cal Ver/ Lin130LN46C-Peptide/Insulin Cal Ver/Lin131LN5Ligand Assay Cal Ver/Lin 122121- 122LN5Ligand Assay, Siemens Cal Ver/Lin121- 122LN6Urine Chemistry Cal Ver/Lin123LN8Reproductive Endocrinology Cal Ver/Lin123LN9Hematology Cal Ver/Lin123ABGICAccuracy-Based Glucose, Insulin, and C-Peptide115XING C-Peptide/Insulin Cal Ver/Lin131LN46C-Peptide/Insulin Cal Ver/Lin131CTKNCytokines212	LinLinLN40Vitamin D Cal Ver/Lin130LN41Procalcitonin Cal Ver/130LN42D-Dimer Cal Ver/Lin131LN43Lamellar Body Count131Cal Ver/Lin131LN44Fibrinogen Cal Ver/Lin131LN45HCV Viral Load Cal Ver/130LN46C-Peptide/Insulin Cal131Ver/Lin121-LN5Ligand Assay, Siemens121-Cal Ver/Lin122LN6Urine Chemistry Cal Ver/Lin122LN7Immunology Cal Ver/Lin123LN8Reproductive Endocrinology Cal Ver/Lin123ABGICAccuracy-Based Glucose, Insulin, and C-Peptide115LN46C-Peptide/Insulin Cal Ver/Lin115LN46C-Peptide/Insulin Cal Yor/Lin131Karyotype nomenclatureKaryotype nomenclatureXINGInsulin, Gastrin, C-Peptide86CTKNCytokines212CTKNCytokines212	LinLinLN40Vitamin D Cal Ver/Lin130LN41Procalcitonin Cal Ver/130LN42D-Dimer Cal Ver/Lin131LN43Lamellar Body Count131LN44Fibrinogen Cal Ver/Lin131LN45HCV Viral Load Cal Ver/130LN46C-Peptide/Insulin Cal131Ver/Lin121-LN5Ligand Assay, Siemens121-Cal Ver/Lin122LN6Urine Chemistry Cal122LN7Immunology Cal Ver/Lin123LN8Reproductive Endocrinology Cal Ver/Lin123LN9Hematology Cal Ver/Lin123ABGICAccuracy-Based Glucose, Insulin, and C-Peptide/115LN46C-Peptide/Insulin Cal Ver/Lin131LN46C-Peptide/Insulin Cal Ver/Lin123ABGICAccuracy-Based Glucose, Insulin, and C-Peptide/115LN46C-Peptide/Insulin Cal Ver/Lin131CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines212CTKNCytokines	LinLinCZ, CZZX, CZXLN40Vitamin D Cal Ver/Lin130LN41Procalcitonin Cal Ver/130LN42D-Dimer Cal Ver/Lin131LN43Lamellar Body Count Cal Ver/Lin131LN44Fibrinogen Cal Ver/Lin131LN45HCV Viral Load Cal Ver/130LN46C-Peptide/Insulin Cal Ver/Lin131LN5Ligand Assay Cal Ver/Lin121- 122LN6Urine Chemistry Cal Ver/Lin122LN7Immunology Cal Ver/Lin123 Endocrinology Cal Ver/LinLN8Reproductive Endocrinology Cal Ver/Lin123 LinLN9Hematology Cal Ver/Lin123 C-Peptide/Insulin, and C-Peptide/PTH123 LinLN6Accuracy-Based Glucose, Insulin, and C-Peptide/PTH131 C-Peptide/PTH132 LinXINGInsulin, Gastrin, C-Peptide/PTH86 C-Peptide/PTHFTCLN46C-Peptide/PTH131 CTKNCytokines212 CTKNXINGInsulin, Gastrin, C-Peptide/PTH131 CTKNTCTKNCytokines212 CTKNUTCTKNCytokines212 CTKNUTCTKNCytokines212CTKNCytokines212 CTKNCTKNCytokines212 CTKN	LinCZ, CZZ, CZXLN40Vitamin D Cal Ver/Lin130LN41Procalcitonin Cal Ver/Lin131LN42D-Dimer Cal Ver/Lin131LN43Lamellar Body Count Cal Ver/Lin131LN44Fibrinogen Cal Ver/Lin131LN45HCV Viral Load Cal Ver/ Lin130LN46C-Peptide/Insulin Cal Ver/Lin131LN5Ligand Assay, Siemens Cal Ver/Lin121- 122LN6Urine Chemistry Cal Ver/Lin122LN6Urine Chemistry Cal Ver/Lin122LN7Immunology Cal Ver/Lin123 LinLN8Reproductive Endocrinology Cal Ver/Lin123 LinLN9Hematology Cal Ver/Lin123 LinLN8Reproductive Endocrinology Cal Ver/Lin123 LinLN8Reproductive Endocrinology Cal Ver/Lin123 LinLN9Hematology Cal Ver/Lin123 LinLN8C-Peptide/Insulin Cal Ver/Lin115 LinLN8Reproductive Endocrinology Cal Ver/Lin123 LinXINGInsulin, Gastrin, C-Peptide/Insulin Cal Ver/Lin86 C-Peptide/Insulin Cal Ver/LinXINGInsulin, Gastrin, C-Peptide/Insulin Cal Ver/Lin131 LinXINGInsulin, Gastrin, C-Peptide/Insulin Cal Ver/Lin131 LinZCTKNCytokines212 LinXINGInsulin, Gastrin, C-Peptide/Insulin Cal Ver/Lin131 LinXINGInsulin, Gastri

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Ketones, urine (cont.)		CMQ	Quality Cross Check, Urinalysis	46	Lactate dehydrogenase (LD) (cont.)		LN2BV	Chemistry, Lipid, Enzyme all Beckman	120
	Х	HCC2	Waived Combination	66				except AU, Vitros Cal	
		POC3	POC Urine Dipstick	52				Ver/Lin	
			Competency			V	SCO	Serum Carryover	134
Kidney stone assessment		KSA	Kidney Stone Assessment	69	Lactate dehydrogenase (LD), CSF	Х	M, OLI	CSF Chemistry and Oligclonal Bands	74
KIT		KIT	KIT/PDGFRA	260	Lamellar body count		LBC	Lamellar Body Count	151
		MTP	Multigene Tumor Panel	261			LN43	Lamellar Body Count Cal Ver/Lin	131
Klebsiella aerogenes		IDPN	Infectious Disease, Pneumonia Panel	203	Lamotrigine		Т	Toxicology	96
Klebsiella oxytoca		IDPN	Infectious Disease,	203			UT	Urine Toxicology	96
			Pneumonia Panel				ZE	Therapeutic Drug	60
Klebsiella pneumoniae group		IDPN	Infectious Disease, Pneumonia Panel	203	Large unclassified cells		FH4, FH4P	Monitoring, Extended Hematology, Auto Diff	
KOH prep (skin)	Х	СММР	Clinical Microscopy,	147	(LUC)				
			Misc		LD isoenzymes	Х	CRTI	Cardiac Markers	62
KOH prep (skin or vaginal)	X	FSM	Fungal Smear	191	LD1/LD2 ratio	Х	CRTI	Cardiac Markers	62
KRAS	X	KRAS	Colorectal Cancer	260	LDL cholesterol	Х	ABL	Accuracy-Based Lipid	112
			Mutation		LDL cholesterol, measured	Х	C1, C3, C3X, C4, CZ, CZ2X,	Chemistry and TDM	56-58
	Х	MTP	Multigene Tumor Panel	261			CZX		
Laboratory preparedness exercise		LPX	Laboratory Preparedness Exercise	183			CZQ	Quality Cross Check, Chemistry and TDM	41
Lacosamide		ZE	Therapeutic Drug Monitoring, Extended	60	LDL cholesterol, waived	Х	LCW	Ltd Chem, Waived	64
actate	X	AQ, AQ2, AQ3,	Aqueous Blood Gas	92	Lead (blood)	Х	BL	Blood Lead	102
Laciale		AQ4	Aqueous blood das	52	Lead, urine		TMU	Trace Metals, Urine	103
		AQQ, AQ2Q,	Quality Cross Check,	44	Legionella		LBAS	Legionella Ag	178
		AQ3Q, AQ4Q	Critical Care Aqueous Blood Gas Series		Legionella pneumophila		IDN, IDO	Nucleic Acid Amp, Organisms	201
	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58			IDPN	Infectious Disease, Pneumonia Panel	203
		CZQ	Quality Cross Check, Chemistry and TDM	41		Х	IDR	Infectious Disease, Respiratory Panel	202
		FLD	Body Fluid	72	Leukemia/lymphoma		FL3	Flow Cytometry	215
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42	immunophenotype Leukemia/lymphoma		FL5	Flow Cytometry	216
		LN13C	Blood Gas Cal Ver/Lin	124-	interpretation only			Interpretation Only	
		D0010	DOC Compotences Disc	125	Leukocyte esterase, urine	Х	CMP, CMP1	Clinical Microscopy	146
		POC10, POC11	POC Competency Blood Gases	53			CMQ	Quality Cross Check, Urinalysis	46
Lactate, CSF	X	M, OLI	CSF Chemistry and	74		Х	HCC2	Waived Combination	66
Lactate dehydrogenase	X	C1,C3,C3X,	Oligoclonal Bands Chemistry and TDM	56-58			POC3	POC Urine Dipstick Competency	52
(LD)		CZ, CZ2X, CZX			Leukocyte-reduced platelets		TRC	Transfusion-Related Cell Count	224
		CZQ	Quality Cross Check, Chemistry and TDM	41	Leukocyte-reduced RBC		TRC	Transfusion-Related Cell Count	224
		FLD	Body Fluid	72	Leukocyte, stool, Wright-	Х	CMMP	Clinical Microscopy,	147
		FLDQ	Quality Cross Check,	42	Giemsa			Misc	
			Body Fluid Chemistry	100	Levetiracetam		Т	Toxicology	96
		IFS	Interfering Substances	133			UT	Urine Toxicology	96
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120					

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Levetiracetam (cont.)		ZE	Therapeutic Drug Monitoring, Extended	60	Lorazepam (cont.)		DMPM	Drug Monitoring for Pain Management	107
Lidocaine	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58			FTC	Forensic Toxicology, Criminalistics	104
		CZQ	Quality Cross Check, Chemistry and TDM	41			T UDC	Toxicology	96 99
		LN3	TDM Cal Ver/Lin	121			UDC	Forensic Urine Drug Testing, Confirmatory	99
		T	Toxicology	96			UT	Urine Toxicology	96
		UT	Urine Toxicology	96	Lorazepam glucuronide		DMPM	Drug Monitoring for Pain	
Lipase	Х	C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56-58	Lupus anticoagulant		CGS1	Management Coag Special, Series 1	162
		CZQ	Quality Cross Check, Chemistry and TDM	41	(screen, conf) Luteinizing hormone (LH)		ABS	Accuracy-Based	113
		FLD2	Body Fluid Chemistry 2	73			ADO	Testosterone, Estradiol	115
		IFS	Interfering Substances	133	I		LN8	Reproductive	123
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120				Endocrinology Cal Ver/ Lin	
		LN2BV	Chemistry, Lipid,	120		Х	Y/YY	Ligand Assay, Special	84
			Enzyme all Beckman except AU, Vitros Cal		Lyme disease		TTD	Tick-Transmitted Disease	205
Lipids		ABL	Ver/Lin Accuracy-Based Lipid	112	Lymphocyte immunophenotyping	X	FL, FL1	Flow Cytometry	215
	X	C1, C3, C3X, CZ, CZ2X, CZX	Chemistry and TDM	56–58	Lymphoma by FISH		CYL	Fluorescence In Situ Hybridization and Interpretation on Site, Lymphoma	243
		CZQ	Quality Cross Check, Chemistry and TDM	41	Lysergic acid diethylamide (LSD)		FTC	Forensic Toxicology, Criminalistics	104
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120			Т	Toxicology	96
		LN2BV	Chemistry, Lipid,	120			UDS, UDS6	Urine Drug Screen	98
			Enzyme all Beckman				UT	Urine Toxicology	96
	V		except AU, Vitros Cal Ver/Lin	110	Magnesium	X	C1, C3, C3X, CZ, CZ2X,	Chemistry and TDM	56-58
Lipoprotein (a)	X X	ABL C1, C3, C3X,	Accuracy-Based Lipid Chemistry and TDM	112 56-58			CZQ	Quality Cross Check,	41
		CZ, CZ2X, CZX			I		150	Chemistry and TDM	100
		CZQ	Quality Cross Check,	41			IFS LN2	Interfering Substances Chemistry, Lipid,	133 120
			Chemistry and TDM				LINZ	Enzyme Cal Ver/Lin	120
Lipoprotein-associated phospholipase		PLA	Lp-PLA <sub>2</sub>	75			LN2BV	Chemistry, Lipid, Enzyme all Beckman	120
Lipoprotein electrophoresis		LPE	Lipoprotein Electrophoresis	76				except AU, Vitros Cal Ver/Lin	
Listeria monocytogenes		IDME	Meningitis/Encephalitis	202	Magnesium, ionized	Х	AQ, AQ2	Aqueous Blood Gas	92
Lithium	Х	C1, C3, C3X, CZ, CZ2X,	Panel Chemistry and TDM	56-58			AQQ, AQ2Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		CZQ	Quality Cross Check,	41			POC10, POC11	POC Competency Blood Gases	53
		LN3	Chemistry and TDM TDM Cal Ver/Lin	121	Magnesium, urine	Х	U	Urine Chemistry, General	68
Liver-kidney microsomal		LKM	Liver-Kidney	213	Malaria		RMAL	Rapid Malaria	193
antibody			Microsomal Antibody		Manganese		R	Trace Metals	78
Lorazepam		DFC	Drug-Facilitated Crime	108	Manganese, urine		TMU	Trace Metals, Urine	103

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Manganese, whole blood		TMWB	Trace Metals, Whole Blood	103	Meprobamate (cont.)		FTC	Forensic Toxicology, Criminalistics	104
MCAD	Х	IMD2	MCAD	249			Т	Toxicology	96
МСН		FH1-FH4,	Hematology Automated	136			UT	Urine Toxicology	96
		FH6, FH9, FH10, FH13,	Differential		Meprobamate/ Carisoprodol		UDS, UDS6	Urine Drug Screen	98
		FH1P-FH4P, FH6P, FH9P,			Mercury, urine		TMU	Trace Metals, Urine	103
		FH10P, FH10P, FH13P			Mercury, whole blood		TMWB	Trace Metals, Whole Blood	103
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology	45	Metabolic disease testing		BGL	Biochemical Genetics	245
			Series		Metanephrine	Х	N/NX	Urine Chemistry, Special	69
		HE, HEP	Basic Hematology	136	Methadone		DFC	Drug-Facilitated Crime	108
МСНС		FH1-FH4, FH6, FH9,	Hematology Automated Differential	136			DMPM	Drug Monitoring for Pain Management	107
		FH10, FH13, FH1P-FH4P,					FTC	Forensic Toxicology, Criminalistics	104
		FH6P, FH9P, FH10P,					OFD	Oral Fluid for Drugs of Abuse	100
		FH13P	Quality Quasa Obaaly	45			Т	Toxicology	96
		FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology Series	45	l		UDC	Forensic Urine Drug Testing, Confirmatory	99
		HE, HEP	Basic Hematology	136			UDS, UDS6	Urine Drug Screen	98
MCV		FH1-FH4,	Hematology Automated	136			UT	Urine Toxicology	96
MCV		FH6, FH9, FH10, FH13,	Differential	100	Methadone metabolite (EDDP)		DFC	Drug-Facilitated Crime	108
		FH1P-FH4P, FH6P, FH9P,					DMPM	Drug Monitoring for Pain Management	107
		FH10P, FH13P					FTC	Forensic Toxicology, Criminalistics	104
		FH3Q, FH4Q,	Quality Cross Check,	45			Т	Toxicology	96
		FH6Q, FH9Q	Automated Hematology Series		l		UDC	Forensic Urine Drug Testing, Confirmatory	99
		HE, HEP	Basic Hematology	136			UDS, UDS6	Urine Drug Screen	98
MECP2 deletion/	Х	RETT	RETT Syndrome	251			UT	Urine Toxicology	96
duplication analysis	V	DETT	Genotyping	051	Methamphetamine		DFC	Drug-Facilitated Crime	108
MECP2 genotyping	X	RETT	RETT Syndrome Genotyping Molecular Genetics	251	l		DMPM	Drug Monitoring for Pain Management	107
MEN2 (multiple endocrine neoplasia type 2)	X	MGL3	Molecular Genetics	248– 249			FTC	Forensic Toxicology, Criminalistics	104
Meperidine		DFC DMPM	Drug-Facilitated Crime Drug Monitoring for Pain	108			OFD	Oral Fluid for Drugs of Abuse	100
			Management	107			Т	Toxicology	96
		FTC	Forensic Toxicology, Criminalistics	104			UDC	Forensic Urine Drug Testing, Confirmatory	99
		Т	Toxicology	96			UDS, UDS6	Urine Drug Screen	98
		UT	Urine Toxicology	96			UT	Urine Toxicology	96
Mephedrone		Т	Toxicology	96	Methanol	X	AL1	Whole Blood Alcohol/ Volatiles	101
		UT	Urine Toxicology	96		Х	AL2	Serum Alcohol/Volatiles	101
Meprobamate		DFC DMPM	Drug-Facilitated Crime Drug Monitoring for Pain	108 107	Methaqualone		UDC	Forensic Urine Drug Testing, Confirmatory	99
			Management				UDS, UDS6	Urine Drug Screen	98

Methemoglobin Methicillin-resistant Staphylococcus aureus (MRSA)	Х					ENR	Code		Pg
Methicillin-resistant Staphylococcus aureus		SO	Blood Oximetry	94	Methylenetetra-	Х	MGL1	Molecular Genetics	248
Staphylococcus aureus		SOQ	Quality Cross Check, Blood Oximetry	44	hydrofolate reductase (MTHFR gene)				249
		BCS1	Blood Culture	179	Methylmalonic acid		MMA	MMA and Active B12	82
(MRSA)			Staphylococcus aureus		Methylphenidate		Т	Toxicology	96
							UT	Urine Toxicology	96
		IDN, IDO	Nucleic Acid Amp,	201	Metoprolol		Т	Toxicology	90
		MDO	Organisms	400			UT	Urine Toxicology	90
		MRS	Methicillin-resistant S. aureus Screen	182	MGMT		GLI	Glioma	26
		MRS2M	MRSA Screen, Molecular, 2 Challenge	182	Microalbumin, urine		LN20	Urine AlbuminCal Ver/ Lin	12
	X	MRS5	Methicillin-resistant S.	182		Х	U	Urine Chemistry	68
	X	MRS5M	aureus Screen MRSA Screen,	182		Х	UMC	Urine Albumin (Microalbumin)/	15
	^	WINGOW	Molecular, 5 Challenge	102				Creatinine	
Methotrexate	Х	CZ, CZ2X, CZX, Z		56-58	Microarray, constitutional disorders		CYCGH	Constitutional Microarray Analysis	24
		CZQ	Quality Cross Check, Chemistry and TDM	41	Microarray, neoplastic disorders		CYCMA	Cytogenomic Microarray Analysis for Oncologic Abnormality	24
Methylenedioxy-		DFC	Drug-Facilitated Crime	108	Microsatellite instability		MSI	Microsatellite Instability	25
amphetamine (MDA)		DMPM	Drug Monitoring for Pain	107	Microtiter plate reader linearity		1	Instrumentation	13
			Management		Midazolam		DFC	Drug-Facilitated Crime	10
		FTC	Forensic Toxicology, Criminalistics	104	Minimal residual disease		BALL	B-ALL Minimal Residual Disease	21
		OFD	Oral Fluid for Drugs of Abuse	100			MRD	Minimal Residual Disease, BCR/ABL1	26
		Т	Toxicology	96				p210	
		UDC	Forensic Urine Drug Testing, Confirmatory	99			MRD1	Minimal Residual Disease, BCR/ABL1	26
		UT	Urine Toxicology	96				p190	
Methylenedioxyethyl- amphetamine (MDEA)		OFD	Oral Fluid for Drugs of Abuse	100			MRD2	Minimal Residual Disease, <i>PML/RARA</i>	26
		UDC	Forensic Urine Drug	99	Mirtazapine		Т	Toxicology	9
		550	Testing, Confirmatory	400			UT	Urine Toxicology	9
Methylenedioxymeth- amphetamine (MDMA)		DFC	Drug-Facilitated Crime	108	Mite identification		ТМО	Ticks, Mites, and Other Arthropods	19
		DMPM	Drug Monitoring for Pain Management		Mitochondrial cytopathies	Х	IMD3	Mitochondrial Cytopathies	24
		FTC	Forensic Toxicology, Criminalistics	104	Mitochondrial DNA deletion syndromes	Х	IMD1	Mitochondrial DNA Deletion Syndromes	24
		OFD	Oral Fluid for Drugs of Abuse	100	Mixing studies, APTT		CGE/CGEX CGS1	Coagulation, Extended Coag Special, Series 1	16
		Т	Toxicology	96	Mixing studies, PT		CGE/CGEX	Coagulation, Extended	16
		UDC	Forensic Urine Drug Testing, Confirmatory	99	MLH1 promoter methylation analysis		MSI	Defective DNA Mismatch Repair/	25
		UDS, UDS6	Urine Drug Screen	98	mothytation analysis			Hereditary	
		UT	Urine Toxicology	96				Nonpolyposis Colorectal	
Methylenedioxy- pyrovalerone (MDPV)		Т	Toxicology	96	Modified acid-fast stain	Х	P, P3, P4, P5	Cancer (HNPCC) Parasitology	19
		UT	Urine Toxicology	96	Mold identification	X	F	Mycology and Aerobic	18

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Molecular genetics	Х	MGL1, MGL2, MGL3, MGL4, MGL5	Molecular Genetics	248– 249	Multiple endocrine neoplasia type 2 ( <i>RET</i> gene)	Х	MGL3	Molecular Genetics	248- 249
Molecular hematologic		MHO, MHO1,	Molecular Hematologic	259,	Mumps-IgG		VR3M	Virology	205
oncology		MHO2,	Oncology	262	Mycobacterial culture	X	E1	Mycobacteriology, Ltd	188
		MH03, MH05			Mycobacterial	X	E	Mycobacteriology	188
Molecular HLA typing	Х	DML	HLA Molecular Typing	237	identification				
Molecular typing		IDN, IDO	Nucleic Acid Amp, Organisms	201	Mycobacterium tuberculosis		IDO	Nucleic Acid Amp, Organisms	201
Monitoring engraftment	X	ME	Monitoring Engraftment	239	Mycobacterium		QF	M. tuberculosis	213
Mononuclear cell count		CBT	Cord Blood Testing	227	tuberculosis antibody			Infection Detection	
		SCP	Stem Cell Processing	227	detection		MTBR	Molecular MTB	188
Moraxella catarrhalis		IDPN	Infectious Disease, Pneumonia Panel	203	Mycobacterium tuberculosis identification and		MIBR	Identification and Resistance Detection	188
Morphine		DFC	Drug-Facilitated Crime	108	resistance detection			Resistance Detection	
		DMPM	Drug Monitoring for Pain	107	Mycophenolic acid	X	MPA	Mycophenolic Acid	60
		FTC	Management Forensic Toxicology, Criminalistics	104	Mycoplasma genitalium		MGEN	Mycoplasma genitalium, Molecular	185
		OFD	Oral Fluid for Drugs of Abuse	100	Mycoplasma pneumoniae		IDN, IDO	Nucleic Acid Amp, Organisms	201
		Т	Toxicology	96			IDPN	Infectious Disease,	203
		UDC	Forensic Urine Drug	99				Pneumonia Panel	
U	UT	Testing, Confirmatory Urine Toxicology	96		X	IDR	Infectious Disease, Respiratory Panel	202	
M-protein (paraprotein) identification	Х	SPE	Protein Electrophoresis	76			VR3	Antibody Detection, Infectious Disease Serology	205
MPV		FH1-FH4,	Hematology Automated	136	Myoglobin	Х	CRT, CRTI	Cardiac Markers	62
		FH6, FH9, FH10, FH13, FH1P-FH4P,	Differential				CRTQ	Quality Cross Check, Cardiac Markers	42
		FH6P, FH9P, FH10P,					LN33	Serum Myoglobin Cal Ver/Lin	128
		FH13P FH3Q, FH4Q,	Quality Cross Check,	45		Х	PCARM, PCARMX	Plasma Cardiac Markers	65
		FH6Q, FH9Q	Automated Hematology Series				POC12	Competency Plasma Cardiac Markers	53
		HE, HEP	Basic Hematology	136	Myoglobin, urine		MYG	Myoglobin, Urine	69
MRSA		BCS1	Blood Culture Staphylococcus aureus	179	Myotonic dystrophy ( <i>DMPK</i> gene)	Х	MGL2	Molecular Genetics	248- 249
		IDN, IDO	Nucleic Acid Amp, Organisms	201	N-acetylprocainamide (NAPA)	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58
		MRS	Methicillin-resistant S. aureus Screen	182			CZQ	Quality Cross Check, Chemistry and TDM	41
		MRS2M	MRSA Screen,	182			LN3	TDM Cal Ver/Lin	121
	X	MRS5	Molecular, 2 Challenge Methicillin-resistant S.	182	N-desmethyltramadol		DMPM	Drug Monitoring for Pain Management	107
	X	MRS5M	aureus Screen MRSA Screen,	182			FTC	Forensic Toxicology, Criminalistics	104
			Molecular, 5 Challenge			-	Т	Toxicology	96
Mucolipidosis IV	Х	MGL4	Molecular Genetics	248-			UT	Urine Toxicology	96
(MCOLN1 gene)				249	Naproxen	1	T	Toxicology	96
Mucopolysaccharide (Glycosaminoglycan)	X	BGL	Biochemical Genetics	245			UT	Urine Toxicology	96

Analyte/Procedure	LAP ENR		Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Nasal smears, eosinophil	Х	СММР	Clinical Microscopy, Misc	147	Nongynecologic cytopathology (cont.)		FNAG/FNAG1	Fine-Needle Aspiration, Glass	291
Neisseria gonorrhoeae	Х	D3	GC Cultures	175			NGC/NGC1	Nongynecologic	289
	Х	HC6/HC6X	<i>C. trachomatis/</i> GC by Nucleic Acid Amp	186				Cytopathology Education Program	
	Х	HC7	C. trachomatis/GC DNA by NAA	186	Noninvasive prenatal testing		NIPT	Noninvasive Prenatal Testing	88
	Х	RMC	Routine Microbiology Combination	176	Norbuprenorphine		DFC DMPM	Drug-Facilitated Crime Drug Monitoring for Pain	108 107
Neisseria meningitidis		IDME	Meningitis/Encephalitis Panel	202	I		OFD	Management Oral Fluid for Drugs of	100
Neoplastic cellularity		NEO	Neoplastic Cellularity	259				Abuse	
Neuropathology		NP/NP1	Neuropathology	284			Т	Toxicology	96
			Program				UDC	Forensic Urine Drug	99
Neutral fats		FCFS	Fecal Fat	75				Testing, Confirmatory	
Next-generation		NGS	Next-Generation	254			UT	Urine Toxicology	96
sequencing		10054	Sequencing	055	Norchlordiazepoxide		T	Toxicology	96
		NGSB1	NGS Bioinformatics for Illumina Platforms	255			UT	Urine Toxicology	96
		NGSB2	NGS Bioinformations for	255	Norclomipramine		T	Toxicology	96
		NGSBZ	Ion Torrent Platforms	200			UT -	Urine Toxicology	96
		NGSBV	NGS Bioinformatics	257	Norcodeine		T	Toxicology	96
			Somatic Validated				UT -	Urine Toxicology	96
			Materials		Norcyclobenzaprine		T	Toxicology	96
		NGSE	NGS Undiagnosed	256			UT	Urine Toxicology	96
		NGSHM	Disorders-Exome Next Generation	255	Nordiazepam		DMPM	Drug Monitoring for Pain Management	107
			Sequencing, Hematologic				FTC	Forensic Toxicology, Criminalistics	104
		NGSST	Malignancies Next Generation	254			OFD	Oral Fluid for Drugs of Abuse	100
			Sequencing, Solid				Т	Toxicology	96
Nicotine		NTA	Tumor Nicotine and Tobacco	102			UDC	Forensic Urine Drug Testing, Confirmatory	99
			Alkaloids				UT	Urine Toxicology	96
		Т	Toxicology	96	Nordoxepin		DFC	Drug-Facilitated Crime	108
Niemann-Pick type A/B	X	UT MGL4	Urine Toxicology Molecular Genetics	96 248-			FTC	Forensic Toxicology, Criminalistics	104
(SMPD1 gene)				249			Т	Toxicology	96
NIPT		NIPT	Noninvasive Prenatal	88			UT	Urine Toxicology	96
			Testing		Norepinephrine	Х	N/NX	Urine Chemistry, Special	69
Nitrite, urine	X	CMP, CMP1 CMQ	Clinical Microscopy Quality Cross Check,	146 46	Norfentanyl		DMPM	Drug Monitoring for Pain Management	107
	-	DAI	Urinalysis Urine Drug Adulterant/	98			FTC	Forensic Toxicology, Criminalistics	104
	X	HCC2	Integrity Testing Waived Combination	66			OFD	Oral Fluid for Drugs of	100
	^	POC3	POC Urine Dipstick	52	l		<b>T</b>	Abuse	000
		1003	Competency	52	I		T UDC	Toxicology Forensic Urine Drug	96 99
Nitrogen, total, urine		U	Urine Chemistry, General	68				Testing, Confirmatory	
Nongynecologic	-	FNA/FNA1	Fine-Needle Aspiration,	290			UT	Urine Toxicology	96
cytopathology			Digital	230	Norfluoxetine	_	DFC	Drug-Facilitated Crime	108
		1		L			FTC	Forensic Toxicology, Criminalistics	104

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Norfluoxetine (cont.)		Т	Toxicology	96	nRBC		FH3, FH3P,	Hematology, Auto Diff	13
		UT	Urine Toxicology	96			FH9, FH9P,		
Norhydrocodone		DMPM	Drug Monitoring for Pain	107			FH13, FH13P		
			Management		N-telopeptide (NTX)		BMV6	Bone Markers and	86
Norketamine		DFC	Drug-Facilitated Crime	108				Vitamin	
		FTC	Forensic Toxicology,	104		Х	BU	Bone and Mineral, Urine	85
			Criminalistics		NT-pro B-type natriuretic		BNP	B-Type Natriuretic	61
		Т	Toxicology	96	peptides	V	DNDC	Peptides, 2 Chall B-Type Natriuretic	01
		UT	Urine Toxicology	96		X	BNP5	Peptides, 5 Chall	61
Normeperidine		DFC	Drug-Facilitated Crime	108			BNPQ	Quality Cross Check,	41
		DMPM	Drug Monitoring for Pain Management	107			DIVEQ	B-Type Natriuretic Peptides	
		Т	Toxicology	96			LN30	BNP Cal Ver/Lin	12
		UT	Urine Toxicology	96	Nucleated cells, total		ABF3	Automated Body Fluid	14
Normetanephrine	Х	N/NX	Urine Chemistry Special	69			CBT	Cord Blood Testing	22
Norovirus		GIP	Gastrointestinal Panel	204	I		SCP	Stem Cell Processing	22
	Х	GIP5	Gastrointestinal Panel	204	Nucleated red blood cell		FH3, FH3P,	Hematology, Auto Diff	13
		SP1	Stool Pathogens	184	count		FH9, FH9P,		
Noroxycodone		DMPM	Drug Monitoring for Pain	107			FH13, FH13P		
			Management		Nucleated red cells, total		CBT	Cord Blood Testing	22
		Т	Toxicology	96			SCP	Stem Cell Processing	22
		UT	Urine Toxicology	96	Nucleic acid		BSTS	Bacterial Strain Typing	17
Noroxymorphone		DMPM	Drug Monitoring for Pain Management	107	amplification	X	HBVL,	Staphylococcus Hepatitis Viral Load	19
lorpropoxyphene		DFC	Drug-Facilitated Crime	108			HBVL5, HCV2		
		DMPM	Drug Monitoring for Pain Management	107		Х	HC6/HC6X	<i>C. trachomatis/</i> GC by Nucleic Acid Amp	18
		FTC	Forensic Toxicology, Criminalistics	104		Х	HC7	C. trachomatis/GC DNA by NAA	18
		Т	Toxicology	96		Х	HIVG, HV2	HIV Viral Load	19
		UDC	Forensic Urine Drug Testing, Confirmatory	99			ID1, ID1T	Nucleic Acid Amp, Viruses	19
		UT	Urine Toxicology	96			ID2	Nucleic Acid Amp,	19
Norsertraline		DFC	Drug-Facilitated Crime	108				Respiratory	
		FTC	Forensic Toxicology, Criminalistics	104		X	ID3	Influenza A, Influenza B, RSV by NAA	19
		Т	Toxicology	96			IDN, IDO	Nucleic Acid Amp,	20
		UT	Urine Toxicology	96				Organisms	
Nortrimipramine		Т	Toxicology	96			MRS2M	MRSA Screen,	18
		UT	Urine Toxicology	96	I		MD0-14	Molecular, 2 Challenge	
Nortriptyline		DFC	Drug-Facilitated Crime	108		X	MRS5M	MRSA Screen, Molecular, 5 Challenge	18
		FTC	Forensic Toxicology,	104	I		SP, SPN, SP1	Stool Pathogens	18
			Criminalistics		l		VLS, VLS2	Viral Load	19
		Т	Toxicology	96	I		VRE	Vancomycin-Resistant	18
		UT	Urine Toxicology	96				Enterococcus	
	Х	ZT	TDM, Special	60	Nucleic acid testing	Х	NAT	Nucleic Acid Testing	23
Norvenlafaxine		DFC	Drug-Facilitated Crime	108	Nugent scoring		VS2	Vaginitis Screen, Virtual	18
Norverapamil		Т	Toxicology	96	Ŭ			Gram Stain	
		UT	Urine Toxicology	96	Occult blood		OCB	Occult Blood	15
Novel opioids and benzodiazepines		NOB	Novel Opioids and Benzodiazepines	105			OCBQ	Quality Cross Check, Occult Blood	4

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Occult blood (cont.)		POC9	POC Fecal Occult Blood	52	Oxazepam (cont.)		DMPM	Drug Monitoring for Pain	107
Occult blood, gastric		GOCB	Gastric Occult Blood	150	· · · · · · · · · · · · · · · · · · ·			Management	
Ocular micrometer check		1	Instrumentation	132			FTC	Forensic Toxicology,	104
0-desmethyltramadol		DFC	Drug-Facilitated Crime	108				Criminalistics	
		DMPM	Drug Monitoring for Pain Management	107			OFD	Oral Fluid for Drugs of Abuse	100
		FTC	Forensic Toxicology,	104			Т	Toxicology	96
			Criminalistics				UDC	Forensic Urine Drug	99
		Т	Toxicology	96			UT	Testing, Confirmatory	06
		UT	Urine Toxicology	96			UT	Urine Toxicology	96
Olanzapine		Т	Toxicology	96	Oxcarbazepine metabolite		ZE	Therapeutic Drug Monitoring, Extended	60
		UT	Urine Toxicology	96	Oxidants, urine		DAI	Urine Drug Adulterant/	98
Oligoclonal bands		OLI	Oligoclonal Bands	74	Oxidants, drine		DAI	Integrity Testing	90
Opiate group		DMPM	Drug Monitoring for Pain	107	Oxycodone		DFC	Drug-Facilitated Crime	108
		OFD	Management Oral Fluid for Drugs of	100			DMPM	Drug Monitoring for Pain Management	107
		Т	Abuse Toxicology	96			FTC	Forensic Toxicology, Criminalistics	104
		UDS, UDS6	Urine Drug Screen	98			OFD	Oral Fluid for Drugs of	100
		UT	Urine Toxicology	96				Abuse	
		UTCO	Urine Toxicology	134			Т	Toxicology	96
Organic acids, urine	X	BGL	Carryover Biochemical Genetics	245			UDC	Forensic Urine Drug Testing, Confirmatory	99
qualitative							UDS, UDS6	Urine Drug Screen	98
Organic acids, urine quantitative		BGL	Biochemical Genetics	245			UT	Urine Toxicology	96
Osmolality, measured	X	C3, C3X, CZ,	Chamiotry and TDM	56-58	Oxyhemoglobin	Х	SO	Blood Oximetry	94
	^	CZ2X, CZX	Chemistry and TDM				SOQ	Quality Cross Check, Blood Oximetry	44
		CZQ	Quality Cross Check, Chemistry and TDM	41	Oxymorphone		DFC	Drug-Facilitated Crime	108
		IFS	Interfering Substances	133			DMPM	Drug Monitoring for Pain Management	107
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120			FTC	Forensic Toxicology, Criminalistics	104
		LN2BV	Chemistry, Lipid, Enzyme all Beckman	120			OFD	Oral Fluid for Drugs of Abuse	100
			except AU, Vitros Cal Ver/Lin				Т	Toxicology	96
Osmolality, urine	Х	CMP, CMP1 CMQ	Clinical Microscopy Quality Cross Check,	146 46			UDC	Forensic Urine Drug Testing, Confirmatory	99
		CIVIQ	Urinalysis	40			UT	Urine Toxicology	96
		LN6	Urine Chemistry Cal Ver/Lin	122	p16		P16	P16 Immunohistochemistry	279
		POC3	POC Urine Dipstick Competency	52	Pancreatic amylase	X	C1, C3, C3X,	TMA Chemistry and TDM	56-58
	Х	U	Urine Chemistry, General	68			CZ, CZ2X, CZX		
Osmometer check		1	Instrumentation	132			CZQ	Quality Cross Check,	41
Osteocalcin		BGS	Bone and Growth	85			ED1D	Chemistry and TDM	07
Oxalate		KSA	Kidney Stone Risk Assessment	69	PAPP-A		FP1B	First Trimester Maternal Screening, Free Beta	
Oxazepam		DFC	Drug-Facilitated Crime	108			FP1T	First Trimester Maternal Screening, Total hCG	87

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure		Program Code	Description	Pg
Parainfluenza virus		ID2	Nucleic Acid Amp, Respiratory	198	pH (cont.)		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		IDPN	Infectious Disease, Pneumonia Panel	203			FLD	Body Fluid	72
	Х	IDR	Infectious Disease, Respiratory Panel	202			FLDQ	Quality Cross Check, Body Fluid Chemistry	42
	Х	VR1	Virology Culture	196			GOCB	Gastric Occult Blood	150
	Х	VR2	Viral Antigen Detection by DFA	196			LN13, LN13C	Blood Gas Cal Ver/Lin	124- 125
Paraprotein identification	Х	SPE	Protein Electrophoresis	76			POC10, POC11	POC Competency Blood Gases	53
Parasite identification	Х	BP	Blood Parasite	193	pH, gastric		GOCB	Gastric Occult Blood	150
	Х	P, P3, P4, P5	Parasitology	192	pH interpretation		AFL	Amniotic Fluid Leakage	148
		PEX	Expanded Parasitology	193	pH meters		I	Instrumentation	132
Parathyroid hormone	Х	ING	Insulin, Gastrin,	86	pH, urine	Х	CMP, CMP1	Clinical Microscopy	146
(PTH)		PTHQ	C-Peptide, PTH Quality Cross Check,	43			CMQ	Quality Cross Check, Urinalysis	46
Parentage/relationship	X	PARF	PTH Parentage/Relationship	233			DAI	Urine Drug Adulterant/ Integrity Testing	98
testing						Х	HCC2	Waived Combination	66
Paroxetine		DFC FTC	Drug-Facilitated Crime Forensic Toxicology,	108 104			POC3	POC Urine Dipstick Competency	52
		Т	Criminalistics Toxicology	96			UDC	Forensic Urine Drug Testing, Confirmatory	99
		UT	Urine Toxicology	96	Phencyclidine		DFC	Drug-Facilitated Crime	108
Parvovirus B19		ID1	Nucleic Acid Amp, Viruses	197			FTC	Forensic Toxicology, Criminalistics	104
pC02	X	AQ, AQ2, AQ3, AQ4		92			OFD	Oral Fluid for Drugs of Abuse	100
		AQQ, AQ2Q,	Quality Cross Check,	44			Т	Toxicology	96
		AQ3Q, AQ4Q	Critical Care Aqueous Blood Gas Series				UDC	Forensic Urine Drug Testing, Confirmatory	99
		LN13, LN13C	Blood Gas Cal Ver/Lin	124-			UDS, UDS6	Urine Drug Screen	98
				125			UT	Urine Toxicology	96
		POC10, POC11	POC Competency Blood Gases	53	Phenethylamine		FTC	Forensic Toxicology, Criminalistics	104
PDGFRA		KIT	KIT/PDGFRA	260			Т	Toxicology	96
		MTP	Multigene Tumor Panel	261			UT	Urine Toxicology	96
PDL1		PDL1	PDL1	279	Pheniramine		Т	Toxicology	96
Pentobarbital		DFC	Drug-Facilitated Crime	108			UT	Urine Toxicology	96
		FTC	Forensic Toxicology, Criminalistics	104	Phenobarbital	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-5
	_	T UT	Toxicology Urine Toxicology	96 96			CZQ	Quality Cross Check, Chemistry and TDM	41
Performance		PIP/PIP1,	Performance	264-			DFC	Drug-Facilitated Crime	108
improvement program in surgical pathology		PIPW/PIPW1	Improvement Program in Surgical Pathology	265			DMPM	Drug Monitoring for Pain Management	
Peripheral blood cell identification		EHE1	Expanded Virtual Peripheral Blood Smear	144			FTC	Forensic Toxicology, Criminalistics	104
Peripheral blood smear, virtual		VPBS	Virtual Peripheral Blood Smear	143			LN3 T	TDM Cal Ver/Lin	121
				1/.0	I		-	Toxicology	96
рН	X	AFL AQ, AQ2, AQ3,	Amniotic Fluid Leakage Aqueous Blood Gas	148 92			UDC	Forensic Urine Drug Testing, Confirmatory	99

Analyte/Procedure Index

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Phentermine		FTC	Forensic Toxicology, Criminalistics	104	Platelet calculator		TRC	Transfusion-Related Cell Count	224
		Т	Toxicology	96	Platelet count	Х	FH15	Centrifugal Hematology	137
		UT	Urine Toxicology	96		Х	FH1-FH4,	Hematology Automated	136
Phenylephrine		Т	Toxicology	96			FH6, FH9,	Differential	
		UT	Urine Toxicology	96			FH10, FH13, FH1P-FH4P,		
Phenytoin	Х	CZ, CZ2X, CZX, Z	Chemistry and TDM	56-58			FH6P, FH9P, FH10P,		
		CZQ	Quality Cross Check, Chemistry and TDM	41			FH13P FH3Q, FH4Q,	Quality Cross Check,	45
		DFC	Drug-Facilitated Crime	108			FH6Q, FH9Q	Automated Hematology	
		FTC	Forensic Toxicology, Criminalistics	104		X	HE, HEP	Series Basic Hematology	136
		LN3	TDM Cal Ver/Lin	121			LN9	Hematology Cal Ver/Lin	123
		SC0	Serum Carryover	134	Platelet count		EHE1	Expanded Virtual	144
		Т	Toxicology	96	(estimated)			Peripheral Blood Smear	
		UT	Urine Toxicology	96			VPBS	Virtual Peripheral Blood	143
Phenytoin, free	Х	CZ, CZ2X,	Chemistry and TDM	56-58				Smear	
	_	CZX, Z	Quality Cross Check,	41	Platelet count (platelet- rich plasma)	X	TRC	Transfusion-Related Cell Count	224
			Chemistry and TDM		Platelet crossmatch		PS	Platelet Serology	225
Phosphorus	X	C3, C3X, CZ,	Chemistry and TDM	56-58	Platelet function		PF1	Platelet Function	166
·		CZX, CZ2X			Platelet mapping		PLTM	Platelet Mapping	169
		CZQ	Quality Cross Check,	41	Plesiomonas shigelloides		GIP	Gastrointestinal Panel	204
			Chemistry and TDM			Х	GIP5	Gastrointestinal Panel	204
		IFS LN2	Interfering Substances Chemistry, Lipid,	133 120	PML/RARA		MHO2, MHO3	Molecular Hematologic Oncology	262
		LN2BV	Enzyme Cal Ver/Lin Chemistry, Lipid,	120			MRD2	Minimal Residual Disease	262
			Enzyme all Beckman except AU, Vitros Cal		PNA FISH— Staphylococcus		PNA1	PNA FISH for Staphylococcus	179
			Ver/Lin		PNA FISH—yeast		PNA2	PNA FISH for Yeast	179
Phosphorus, urine		LN6	Urine Chemistry Cal Ver/Lin	122	Pneumocystis detection		PCP1	Pneumocystis jiroveci, Calcofluor White Stain	191
	Х	U	Urine Chemistry, General	68			PCP2	Pneumocystis jiroveci, DFA Stain	191
PIK3CA		MTP	Multigene Tumor Panel	261	I		PCP4	Pneumocystis jiroveci,	191
Pinworm prep	Х	СММР	Clinical Microscopy, Misc	147	PNH immunophenotype		PNH	GMS Stain Paroxysmal Nocturnal	217
Pipette calibration- gravimetric		I	Instrumentation	132		V		Hemoglobinuria, RBC Aqueous Blood Gas	
Plasma cell neoplasms		PCNEO	Flow Cytometry, Plasma Cell Neoplasms	217	p02	X	AQ, AQ2, AQ3, AQ4		92
Plasma hemogloblin		PHG	Plasma Hemoglobin	76	I		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous	44
Plasminogen activator		CGE/CGEX	Coagulation, Extended	161			LN13, LN13C	Blood Gas Cal Ver/Lin	124-
inhibitor Plasminogen activator		MGL1	Molecular Genetics	248-	I		LINIO, LINIOU		124-
inhibitor (PAI)-1 (SERPINE1 gene)		MGLI	Molecular Genetics	248-			P0C10, P0C11	POC Competency Blood Gases	53
Plasminogen antigen		CGE/CGEX	Coagulation, Extended	161	Porphobilinogen, urine		UPBG	Porphobilinogen, Urine	70
Platelet aggregation		PF	Platelet Function	166	Posaconazole		AFD	Antifungal Drugs	106
Platelet antibody	X	PF	Platelet Serology	225				Monitoring	
detection					Post-immunotherapy analysis, flow cytometry		FL6	Post-Immunotherapy Flow Analysis	216

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Postanalytical DNA sequencing		SEC	DNA Sequencing Count	250	Predictive markers by immunohistochemistry	Х	PM2	ER, PgR by Immunohistochemistry	281
Postvasectomy sperm count, automated		PV1	Postvasectomy Sperm Count	156	(cont.)		PM3	CD20 by	279
Postvasectomy sperm count, manual	X	PV	Postvasectomy Sperm Count	156			PM5	Immunohistochemistry Immunohistochemistry	280
Postvasectomy sperm presence/absence, manual	X	PV	Postvasectomy Sperm Count	156	Pregabalin		DMPM	TMA Drug Monitoring for Pain Management	107
Potassium	Х	AQ, AQ2, AQ3, AQ4	Aqueous Blood Gas	92			T	Toxicology	96
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous	44			UT ZE	Urine Toxicology Therapeutic Drug Monitoring, Extended	96 60
			Blood Gas Series		Prekallikrein		CGE/CGEX	Coagulation, Extended	161
	Х	C1, C3, C3X, C4, CZ, CZX, CZ2X	Chemistry and TDM	56-58	Primidone	Х	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41			CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	73			LN3	TDM Cal Ver/Lin	121
		IFS	Interfering Substances	133	Pro B-type natriuretic peptides		BNP	B-Type Natriuretic Peptides, 2 Chall	61
		LN13C LN2	Blood Gas Cal Ver/Lin Chemistry, Lipid,	124 120	· · ·	Х	BNP5	B-Type Natriuretic Peptides, 5 Chall	61
		LN2BV	Enzyme Cal Ver/Lin Chemistry, Lipid, Enzyme all Beckman	120			BNPQ	Quality Cross Check, B-Type Natriuretic Peptides	41
	POC10, POC	except AU, Vitros Cal Ver/Lin		Procainamide	Х	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-58	
		POC10, POC11	POC Competency Blood Gases	53			CZQ	Quality Cross Check, Chemistry and TDM	41
Potassium, urine		LN6	Urine Chemistry Cal Ver/Lin	122	Descalaiteain		LN3	TDM Cal Ver/Lin	121
	Х	U	Urine Chemistry, General	68	Procalcitonin		LN41	Procalcitonin Cal Ver/ Lin	130
Potassium, vitreous fluid		VF	Vitreous Fluid, Post-	101		Х	PCT	Procalcitonin	77
PRA		MX1B, MX1C,	mortem	236-	Progesterone		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
		MX1E, MXB, MXC		237		Х	Y/YY	Ligand Assay, Special	84
		MX2B, MX2C, MX2E, MXB, MXC	HLA Analysis, Class II	236- 237	Progesterone receptors by immunohistochemistry	Х	PM2	ER, PgR by Immunohistochemistry	281
Prader-Willi/Angelman syndrome	Х	MGL1	Molecular Genetics	248- 249	Prolactin		LN8	Reproductive Endocrinology Cal Ver/ Lin	123
Prealbumin (transthyretin)	Х	C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58		X	Υ/ΥΥ	Ligand Assay, Special	84
		CZQ	Quality Cross Check, Chemistry and TDM	41	Propoxyphene		DFC DMPM	Drug-Facilitated Crime Drug Monitoring for Pain	108 107
	Х	S2, S4	Immunology, Special	209				Management	
Predictive markers by immunohistochemistry		GHER2	Gastric HER2	281			FTC	Forensic Toxicology, Criminalistics	104
	Х	HER2	HER2 by	281			Т	Toxicology	96
		PM1	Immunohistochemistry CD117 by	279			UDC	Forensic Urine Drug Testing, Confirmatory	99
			Immunohistochemistry				UDS, UDS6	Urine Drug Screen	98

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
Propoxyphene (cont.)		UT	Urine Toxicology	96	Proteus spp.		IDPN	Infectious Disease,	203
Propranolol		Т	Toxicology	96				Pneumonia Panel	
		UT	Urine Toxicology	96	Prothrombin mutation	X	MGL1	Molecular Genetics	248
Prostate-specific antigen (PSA)	Х	K, KK, K2	Ligand Assay, General	82	(F2 gene)	Х	ТРМ	Thrombophilia	249 252
		LN23	PSA Cal Ver/Lin	127		V	000	Mutations	100
Prostate-specific	Х	K/KK	Ligand Assay, General	82	Prothrombin time	X X	CGB CGL	Basic Coagulation	160
antigen, complexed (cPSA)						~	CGLQ	Coagulation, Limited Quality Cross Check,	160 47
Prostate-specific antigen, free (PSA, free)	Х	К/КК	Ligand Assay, General	82			CGS1	Coagulation, Limited	162
Prostatic acid	х	K/KK	Ligand Assay, General	82			CGS4	Coag Special, Series 4	162
phosphatase (PAP)	^		Liganu Assay, General	02			DBGN	Anticoagulant	163
Protein C		CGE/CGEX	Coagulation, Extended	161			DDUN	Monitoring, Dabigatran	100
		CGS2	Coag Special, Series 2	162			FNPX	Anticoagulant	163
		LN35	Thrombophilia Cal Ver/ Lin	129				Monitoring, Fondaparinux	
Protein, confirmatory urine		DSC	Dipstick Confirmatory	149			POC6	POC PT/INR, CoaguChek XS Plus	52
Protein electrophoresis, serum, interpretation		SPE	Protein Electrophoresis	76			RVBN	Anticoagulant Monitoring Rivaroxaban	163
Protein S		CGE/CGEX	Coagulation, Extended	161		X	WP3, WP4,	Whole Blood	168
		CGS2	Coag Special, Series 2	162			WP6, WP9	Coagulation	
Protein, CSF	Х	M, OLI	CSF Chemistry and	74	Prothrombin time, dilute		CGE/CGEX	Coagulation, Extended	161
,			Oligoclonal Bands		Provider-performed microscopy		CMMP	Clinical Microscopy, Misc	147
Protein, total	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58	PRU test		PIA, PIAX	Drug-Specific Platelet Aggregation	167
		CZQ	Quality Cross Check,	41	Pseudocholinesterase	Х	C7	Pseudocholinesterase	77
		FLD	Chemistry and TDM Body Fluid	72	Pseudoephedrine		FTC	Forensic Toxicology, Criminalistics	104
		FLDQ	Quality Cross Check,	42			Т	Toxicology	96
		1 LDQ	Body Fluid Chemistry	72			UT	Urine Toxicology	96
		IFS	Interfering Substances	133	Pseudomonas aeruginosa		IDPN	Infectious Disease,	203
		LN2	Chemistry, Lipid,	120				Pneumonia Panel	
			Enzyme Cal Ver/Lin		PTEN		GLI	Glioma	261
		LN2BV	Chemistry, Lipid,	120	Pyridinoline (PYD)		BU	Bone and Mineral, Urine	85
			Enzyme all Beckman except AU, Vitros Cal Ver/Lin		Q-PROBES		QP201	Technical Competency Assessment of Peripheral Blood	25
		SPE	Lipoprotein and Protein Electrophoresis	76			QP202	Smears Red Blood Cell	26
Protein, urine	Х	CMP, CMP1	Clinical Microscopy	146				Utilization: Single	
		CMQ	Quality Cross Check, Urinalysis	46				and Double Unit Transfusions	
		DSC	Dipstick Confirmatory	149			QP203	Inpatient Test	27
	Х	HCC2	Waived Combination	66				Utilization and Volume Benchmarking	
		LN6	Urine Chemistry Cal Ver/Lin	122			QP204	Turnaround Time	28
		POC3	POC Urine Dipstick Competency	52				for Image-Guided Breast Needle Biopsy Specimens	
	Х	U	Urine Chemistry, General	68	Q-TRACKS		QT1	Patient Identification Accuracy	31

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Q-TRACKS (cont.)		QT10	Critical Values Reporting	34	RBC count (cont.)	Х	FH1-FH4, FH6, FH9,	Hematology Automated Differential	136
		QT15	TATs of Troponin	35			FH10, FH13,		
		QT16	Corrected Results	36			FH1P-FH4P,		
		QT17	Outpatient Order Entry Errors	36			FH6P, FH9P, FH10P, FH13P		
		QT2	Blood Culture Contamination	31			FH3Q, FH4Q, FH6Q, FH9Q	Quality Cross Check, Automated Hematology	45
		QT3	Laboratory Specimen Acceptability	32		V		Series	100
	-	QT4	In-Date Blood Product	32		Х	HE, HEP	Basic Hematology	136
			Wastage				LN9	Hematology Cal Ver/Lin	123
		QT5	Gynecologic Cytology Outcomes—Biopsy	37	RBC count, automated, urine (quantitative)		UAA, UAA1	Automated Urinalysis	149
			Correlation		RBC folate	Х	FOL	RBC Folate	88
	_	QT7	Performance Satisfaction with	33	RBC manual count, fluid	X	HFC, HFCI	Hemocytometer Fluid Count	150- 151
			Outpatient Specimen Collection	55	RBC morphology		EHE1	Expanded Virtual Peripheral Blood Smear	144
		QT8	State Test TAT Outliers	33			VPBS	Virtual Peripheral Blood	143
Quetiapine		DFC	<b>Drug-Facilitated Crime</b>	108				Smear	
		T UT	Toxicology	96 96	RDW		FH1-FH4, FH6, FH9,	Hematology Automated Differential	136
Quinidine	X	CZ, CZX, CZ2X, Z	Urine Toxicology Chemistry and TDM	96 56-58			FH10, FH13, FH1P-FH4P, FH6P, FH9P,		
		CZQ	Quality Cross Check, Chemistry and TDM	41			FH10P, FH13P		
		LN3	TDM Cal Ver/Lin	121			FH3Q, FH4Q,	Quality Cross Check,	45
		Т	Toxicology	96			FH6Q, FH9Q	Automated Hematology	
		UT	Urine Toxicology	96				Series	
Quinine		Т	Toxicology	96			HE, HEP	Basic Hematology	136
		UT	Urine Toxicology	96	Red blood cell antigen		J, J1	Transfusion Medicine	220
Ranitidine		Т	Toxicology	96	detection		540		0.00
		UT	Urine Toxicology	96	Red blood cell antigen genotyping		RAG	Red Blood Cell Antigen Genotyping	223
Rapamycin (sirolimus)	Х	CS	Immunosuppressive Drugs	59	Red blood cell antigen		RBCAT	Red Blood Cell Antigen	223
Rapid group A strep	X	D	Bacteriology	173	typing Reducing substance,	X	CMP, CMP1	Typing Clinical Microscopy	146
	X	D6	Rapid Group A Strep	177	urine	^	CIVIF, CIVIF I	ounicat witcroscopy	140
	Х	D9	Rapid Group A Strep, Waived	177			CMQ	Quality Cross Check, Urinalysis	46
	Х	MC4	Urine Colony Count Combination	176		Х	HCC2	Waived Combination	66
	X	RMC	Routine Microbiology	176			POC3	POC Urine Dipstick Competency	52
DDO automata J			Combination	1/0	Refractometer check		1	Instrumentation	132
RBC automated count, fluid		ABF1, ABF2, ABF3	Automated Body Fluid	148	Renin	Х	RAP	Renin and Aldosterone	89
RBC count		ABF1, ABF2,	Automated Body Fluid	148	Reptilase time Respiratory syncytial		CGE/CGEX	Coagulation, Extended Nucleic Acid Amp,	161 198
		ABF3			virus (RSV)			Respiratory	
						X	ID3	Influenza A, Influenza B, RSV by NAA	198

RSV by NAA

Infectious Disease, Pneumonia Panel 203

IDPN

Analyte/Procedure	LAP ENR		Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Respiratory syncytial virus (RSV) (cont.)	Х	IDR	Infectious Disease, Respiratory Panel	202	RSV		ID2	Nucleic Acid Amp, Respiratory	198
	Х	VR1	Virology Culture	196		Х	ID3	Influenza A, Influenza B,	198
	Х	VR2	Viral Antigen Detection by DFA	196			IDPN	RSV by NAA Infectious Disease,	203
	Х	VR4	Virology Antigen Detection by EIA and	196		X	IDR	Pneumonia Panel Infectious Disease,	202
			Latex					Respiratory Panel	
Reticulocyte count, absolute	Х	RT, RT2, RT3, RT4	Reticulocyte	141		X	VR1 VR2	Virology Culture Viral Antigen Detection	196 196
		RTQ, RT3Q, RT4Q	Quality Cross Check, Reticulocyte	45	I	X	VR4	by DFA Viral Antigen Detection	196
Reticulocyte count,		LN18, LN19	Reticulocyte Cal Ver/Lin	126				by EIA and Latex	
percent	Х	RT, RT2, RT3,	Reticulocyte	141	Rubella antibody, IgG	X	IL, RUB/ RUBX	Immunology	208
		RT4 RTQ, RT3Q, RT4Q	Quality Cross Check, Reticulocyte	45	Rubeola antibody (English measles)	Х	VR3	Antibody Detection- Infectious Disease Serology	205
Reticulocyte hemoglobin (RET-He)		RT4	Reticulocyte	141	Rufinamide		ZE	Therapeutic Drug Monitoring, Extended	60
Reticulocyte hemoglobin concentration (CHr)		RT3	Reticulocyte	141	Rupture of fetal membranes		ROM1	Placental Alpha Microglobulin 1	152
RETT syndrome	Х	RETT	RETT Syndrome Genotyping	251	Russell's viper venom		CGS1	(PAMG-1) Coagulation Special,	162
RETT syndrome <i>MECP2</i> duplication deletion analysis	Х	RETT	RETT Syndrome Genotyping	251	time, dilute Salicylate	X	CZ, CZX, CZ2X, Z	Series 1 Chemistry and TDM	56-5
RhD	Х	MGL2	Molecular Genetics	248- 249			CZQ	Quality Cross Check, Chemistry and TDM	41
RhD typing	Х	J,J1	Transfusion Medicine	220			FTC	Forensic Toxicology,	104
	Х	JAT	Transfusion Medicine, Automated	221			LN3	Criminalistics TDM Cal Ver/Lin	121
		JATE1	Transfusion Medicine,	221	l	X	SDS	Serum Drug Screen	101
		JAILI	Automated, Educational	1	l	~	T	Toxicology	96
		JATQ	Quality Cross Check.	49		_	UT	Urine Toxicology	96
			Transfusion Medicine		Salmonella	_	GIP	Gastrointestinal Panel	204
		TMCA	Transfusion Medicine,	225		X	GIP5	Gastrointestinal Panel	204
			Competency		Sapovirus (I, II, IV, V)		GIP	Gastrointestinal Panel	204
			Assessment			X	GIP5	Gastrointestinal Panel	204
Rheumatoid factor Rheumatoid factor	X	IL, RF/RFX CCP	Immunology Cyclic Citrullinated	208 212	Sarcoma by FISH		СҮК	Fluorescence In Situ Hybridization	243
isotypes, IgA, IgG, and IgM			Peptide Antibody		Sarcoma translocation	_	SARC	Sarcoma Translocation	259
Rhinovirus		ID2	Nucleic Acid Amp, Respiratory	198	Scl-70 (anti-DNA		RDS	Rheumatic Disease	213
	Х	IDR	Infectious Disease, Respiratory Panel	202	topoisomerase) Scopolamine		DFC	Special Drug-Facilitated Crime	108
Rhinovrus/enterovirus		IDPN	Infectious Disease, Pneumonia Panel	203	Secobarbital		DFC FTC	Drug-Facilitated Crime Forensic Toxicology,	108 104
RNA sequencing		RNA	RNA Sequencing	260				Criminalistics	
Rotavirus	.,	GIP	Gastrointestinal Panel	204			UDC	Forensic Urine Drug Testing, Confirmatory	99
	Х	GIP5	Gastrointestinal Panel	204	Selenium	X	R	Trace Metals	78
	Х	SP, SPN VR4	Stool Pathogens Viral Antigen Detection	184 196	Selenium, urine		TMU	Trace Metals, Urine	103

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
Selenium, whole blood		TMWB	Trace Metals, Whole Blood	103	Sodium (cont.)		LN2BV	Chemistry, Lipid, Enzyme all Beckman	120
Semen analysis		ASA, SM	Semen Analysis	156				except AU, Vitros Cal	
	Х	SC, SC1, SV, PV	Semen Analysis	156			P0C10,	Ver/Lin POC Competency Blood	53
	Х	SMCD	Semen Analysis, Online	156			POC11	Gases	
		SM1CD, SM2CD	Semen Analysis, Online	156	Sodium, urine		LN6	Urine Chemistry Cal Ver/Lin	122
SERPINA1 genotyping	Х	AAT	Alpah-1 Antitrypsin Genotyping	245		X	U	Urine Chemistry, General	68
Serratia marcescens		IDPN	Infectious Disease, Pneumonia Panel	203	Sodium, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
Sertraline		DFC	Drug-Facilitated Crime	108	Soluble transferrin		STFR	Soluble Transferrin	80
		FTC	Forensic Toxicology,	104	receptor			Receptor	
			Criminalistics		Somatomedin C (IGF-1)	X	Y, YY	Ligand Assay, Special	84
		Т	Toxicology	96	SOX10		PM5	Immunohistochemistry TMA	280
		UT	Urine Toxicology	96	Specific gravity	X	CMP, CMP1	Clinical Microscopy	146
Serum free light chains		SFLC	Serum Free Light Chains	214		^	CMQ	Quality Cross Check,	46
Sex hormone-binding globulin (SHBG)		ABS	Testosterone and Estradiol Accuracy	113				Urinalysis Urine Drug Adulterant/	
	Х	DY	Ligand Assay, Special	84			DAI	Integrity Testing	98
Shiga toxin		SP	Stool Pathogens, Rapid	184		X	HCC2	Waived Combination	66
		ST	and Molecular Shiga Toxin	184			POC3	POC Urine Dipstick Competency	52
Shiga-like toxin producing <i>E. coli</i> (STEC)		GIP	Gastrointestinal Panel	204			UDC	Forensic Urine Drug Testing, Confirmatory	99
		GIP5	Gastrointestinal Panel	204	Spectrophotometer		1	Instrumentation	132
Shigella		GIP	Gastrointestinal Panel	204	linearity				
	Х	GIP5	Gastrointestinal Panel	204	Sperm count	Х	SMCD	Semen Analysis, Online	156
Sickle cell screen,	X	HG	Hemoglobinopathy	140	Sperm count, automated		PV1	Semen Analysis	156
qualitative						Х	SC1	Semen Analysis	156
Sirolimus (Rapamycin)	X	SCS CS	Sickle Cell Screen Immunosuppressive	142 59	Sperm count, manual	Х	PV	Postvasectomy Sperm Count	156
			Drugs			Х	SC	Semen Analysis	156
SLC01B1		PGX	Pharmacogenetics	251	Sperm morphology		SM	Semen Analysis	156
Sodium	X		Aqueous Blood Gas	92			SM1CD	Semen Analysis, Online	156
		AQ4		<u> </u>	Sperm motility		SMCD	Semen Analysis, Online	156
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44	Sperm presence/ absence		SC	Semen Analysis	156
	X	C1, C3, C3X, C4, CZ, CZ2X,		56-58	Sperm presence/ absence, postvasectomy	Х	PV	Semen Analysis	156
		CZX			Sperm viability		SM2CD	Semen Analysis, Online	156
	-	CZQ	Quality Cross Check,	41		Х	SV	Semen Analysis	156
			Chemistry and TDM		Spinal fluid meningitis	Х	D	Bacteriology	173
		FLD2	Body Fluid Chemistry 2	73	panel				
		IFS	Interfering Substances	133	Spinal muscular atrophy	X	MGL2	Molecular Genetics	248-
		LN13C	Blood Gas Cal Ver/Lin	124- 125	(SMN1 and SMN2 genes) Spinocerebellar ataxia	X	MGL2	Molecular Genetics	249 248-
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120	(ATXN1, ATXN2, ATXN3, CACNA1A, and ATXN7 genes)				249
					Split fats		FCFS	Fecal Fat	75

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Staphylococcus aureus		IDPN	Infectious Disease, Pneumonia Panel	203	T3, total (triiodothyronine)		ABTH	Harmonized Thyroid	114
Staphylococcus aureus- blood culture		BCS1	Blood Culture Staphylococcus aureus	179		X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
STEC (Shiga-like toxin producing <i>E. coli</i> )		GIP	Gastrointestinal Panel	204			CZQ	Quality Cross Check,	41
		GIP5	Gastrointestinal Panel	204		V		Chemistry and TDM	00
Strep screen		POC4	POC/Waived Strep Screen Competency	52	I	X	K/KK LN5	Ligand Assay, General Ligand Assay Cal Ver/Lin	
Streptococcus agalactiae	Х	D8	Group B Strep	178					122
		IDME	Meningitis/Encephalitis Panel	202			LN5S	Ligand Assay, Siemens Cal Ver/Lin	121- 122
		IDPN	Infectious Disease, Pneumonia Panel	203	T3, uptake and related tests	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
Streptococcus pneumoniae		IDME	Meningitis/Encephalitis Panel	202			CZQ	Quality Cross Check, Chemistry and TDM	41
		IDPN	Infectious Disease, Pneumonia Panel	203		Х	K/KK	Ligand Assay, General	82
		SBAS	S. pneumoniae Ag	178	T4, free (thyroxine)		ABTH	Harmonized Thyroid	114
Streptococcus pyogenes	v	D	Detection	178		Х	C1, C3, C3X, CZ, CZX,	Chemistry and TDM	56-58
Streptococcus pyogenes	X X	D1	Bacteriology Throat	175			CZ2X		
	Х	D6	Rapid Group A Strep	177			CZQ	Quality Cross Check, Chemistry and TDM	41
	X	D9	Rapid Group A Strep,	177		Х	K/KK	Ligand Assay, General	82
			Waived	200	T4, total (thyroxine)		ABTH	Harmonized Thyroid	114
	X	IDPN MC4	Infectious Disease, Pneumonia Panel	203		Х	C1, C3, C3X, CZ, CZX,	Chemistry and TDM	56-58
			Urine Colony Count Combination				CZ2X CZQ	Quality Cross Check,	41
	X	RMC	Routine Microbiology Combination	176				Chemistry and TDM	ļ
Strychnine		Т	Toxicology	96		X	K/KK	Ligand Assay, General	82
		UT	Urine Toxicology	96			LN5	Ligand Assay Cal Ver/Lin	121-
Sulfate		KSA	Kidney Stone Risk Assessment	69			LN5S	Ligand Assay, Siemens Cal Ver/Lin	122 121- 122
Sulfosalicylic acid (SSA)		DSC	Dipstick Confirmatory	149	Tacrolimus	X	CS	Immunosuppressive	59
Surgical pathology		DPATH/ DPATH1	Online Digital Slide Program	267		^		Drugs	
		PIP/PIP1,	Performance	264-			LN31	Immunosuppressive Drugs Cal Ver/Lin	128
		PIPW/PIPW1	Improvement Program	265	Tapentadol		DFC	Drug-Facilitated Crime	108
		VBP/VBP1	in Surgical Pathology Online Virtual Biopsies	266			DMPM	Drug Monitoring for Pain Management	
Synthetic cannabinoid/		SCDD	Program Synthetic Cannabinoid/	105	Tapentadol-O-sulfate		DMPM	Drug Monitoring for Pain Management	107
designer drugs			Designer Drugs		Tay-Sachs (HEXA gene)	X	MGL4	Molecular Genetics	248-
Syphilis	Х	G	Syphilis Serology	214	, , , , , , , , , , , , , , , , , , , ,				249
T3, free (triiodothyronine)		ABTH	Harmonized Thyroid	114	tCO <sub>2</sub>		AQ, AQ2, AQ3,	Aqueous Blood Gas	92
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56–58			AQ4 AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous	44
		CZQ	Quality Cross Check, Chemistry and TDM	41			POC10,	Blood Gas Series POC Competency Blood	53
	Х	K/KK	Ligand Assay, General	82	I		POC11	Gases	
		1	,		Temazepam		DFC	Drug-Facilitated Crime	108

		Program Code	Description	Pg	Analyte/Procedure		Program Code	Description	Pg
Temazepam (cont.)		DMPM	Drug Monitoring for Pain Management	107	Thyroid-stimulating hormone (TSH) (cont.)		LN5	Ligand Assay Cal Ver/Lin	121- 122
		FTC	Forensic Toxicology, Criminalistics	104			LN5S	Ligand Assay, Siemens Cal Ver/Lin	121- 122
		OFD	Oral Fluid for Drugs of	100	Thyroxine (T4), free		ABTH	Harmonized Thyroid	114
		Т	Abuse Toxicology	96		Х	C1, C3, C3X, CZ, CZX,	Chemistry and TDM	56-5
		UDC	Forensic Urine Drug	99			CZ2X		
		UT	Testing, Confirmatory Urine Toxicology	96			CZQ	Quality Cross Check, Chemistry and TDM	41
Teriflunomide		ZE	Therapeutic Drug	60	I	X	K/KK	Ligand Assay, General	82
lemunomue			Monitoring, Extended	00	Thyroxine (T4), total		ABTH	Harmonized Thyroid	114
Testosterone		ABS	Accuracy-Based Testosterone and Estradiol	113		X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-5
		LN8	Reproductive Endocrinology Cal Ver/	123			CZQ	Quality Cross Check, Chemistry and TDM	41
			Lin			Х	K/KK	Ligand Assay, General	82
Testosterone,	Х	Y/YY DY	Ligand Assay, Special Ligand Assay, Special	84 84			LN5	Ligand Assay Cal Ver/Lin	121- 122
bioavailable, measured							LN5S	Ligand Assay, Siemens	121-
Testosterone, free, measured	Х	DY	Ligand Assay, Special	84	Tick identification		ТМО	Cal Ver/Lin Ticks, Mites, and Other	122 194
Tetrahydrozoline		DFC	Drug-Facilitated Crime	108				Arthropods	
Thallium, urine Thallium, whole blood		TMU TMWB	Trace Metals, Urine Trace Metals, Whole	103 103	Tissue parasite identification	X	BP	Blood Parasite	193
			Blood			Х	Р	Parasitology	192
Theophylline	Х	CZ, CZX,	Chemistry and TDM	56-58			PEX	Expanded Parasitology	193
		CZ2X,Z	Quality Cross Check,	41	Tobramycin	Х	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-5
		LN3	Chemistry and TDM TDM Cal Ver/Lin	121			CZQ	Quality Cross Check, Chemistry and TDM	41
Throat culture	Х	D1	Throat	175			LN3	TDM Cal Ver/Lin	121
	X	MC4	Urine Colony Count	176	Topiramate		DFC	Drug-Facilitated Crime	108
		1010-1	Combination	170			T	Toxicology	96
	Х	RMC	Routine Microbiology	176	Total bile acids		TBLA	Total Bile Acid	78
			Combination		Total bilirubin	Х	C1, C3, C3X,	Chemistry and TDM	56-5
Thrombin time		CGE/CGEX CGS4	Coagulation, Extended Coag Special, Series 4	161 162			CZ, CZX, C4, CZ2X		
		DBGN	Dabigatran	163	l		CZQ	Quality Cross Check,	41
Thrombophilia mutations	Х	TPM	Thrombophilia	252				Chemistry and TDM	
			Mutations	<u> </u>	I		FLD2	Body Fluid Chemistry 2	73
Thyroglobulin	Х	TM/TMX	Tumor Markers	89	I		IFS	Interfering Substances	133
Thyroid-stimulating normone (TSH)		ABS	Accuracy-Based Testosterone and	113			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
			Estradiol				LN2BV	Chemistry, Lipid, Enzyme all Beckman	120
	X	ABTH C1, C3, C3X,	Harmonized Thyroid Chemistry and TDM	114 56-58				except AU, Vitros Cal Ver/Lin	
		CZ, CZX, CZ2X				X	NB, NB2	Neonatal Bilirubin	65
		CZQ	Quality Cross Check,	41	Total bilirubin, urine	X	CMP, CMP1	Clinical Microscopy	146
			Chemistry and TDM	, <b>T</b>	l		DSC	Dipstick Confirmatory	149
	Х	K/KK	Ligand Assay, General	82		Х	HCC2	Waived Combination	66
		1	<u> </u>		Total free fatty acids		FCFS	Fecal Fat	75

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
Total hCG	Х	FP1T	First Trimester Maternal Screening, Total hCG	87	Toxicology, urine, qualitative (cont.)	Х	Т	Toxicology	96
Total hemolytic		CH50	Total Hemolytic	214		Х	UDS, UDS6	Urine Drug Screen	98
complement			Complement			Х	UT	Urine Toxicology	96
Total iron binding capacity, measured	Х	C3, C3X, CZ CZX, CZ2X	Chemistry and TDM	56-58	Toxicology, urine, qualitative/quantitative	Х	DMPM	Drug Monitoring for Pain Management	107
		CZQ	Quality Cross Check, Chemistry and TDM	41	Toxicology, urine, qualitative/quantitative	Х	UDC	Forensic Urine Drug Testing, Confirmatory	99
Total nitrogen, urine		U	Urine Chemistry, General	68	Toxoplasma gondii	Х	VR3	Antibody Detection- Infectious Disease	205
Total nucleated cells		CBT	Cord Blood Testing	227				Serology	
		SCP	Stem Cell Processing	227	ТРМТ		PGX3	Pharmacogenetics	251
Total nucleated cells		HFC/HFCI	Hemocytometer Fluid	150-	Tramadol		DFC	Drug-Facilitated Crime	108
manual differential count (body fluid)			Count	151			DMPM	Drug Monitoring for Pain Management	107
		VBF	Virtual Body Fluid	148			FTC	Forensic Toxicology,	104
Total nucleated red cells		CBT	Cord Blood Testing	227				Criminalistics	
		SCP	Stem Cell Processing	227	I		Т	Toxicology	96
Total protein	Х	C1, C3, C3X,	Chemistry and TDM	56-58	I		UDS, UDS6	Urine Drug Screen	98
		CZ, CZX, CZ2X			I		UT	Urine Toxicology	96
		CZQ	Quality Cross Check,	41	Transferrin	X	C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		FLD	Chemistry and TDM Body Fluid	72			CZQ	Quality Cross Check,	41
		FLDQ	Quality Cross Check,	42			1.1.7	Chemistry and TDM	100
		I LDQ		42	I	X	LN7	Immunology Cal Ver/Lin	123
	Body Fluid Chemistry X S2, S4 Immunology, Special		209						
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120	Transfusion medicine		ETME1	Expanded Transfusion Medicine Exercises	229
		LN2BV	Chemistry, Lipid, Enzyme all Beckman	120			EXM, EXM2	Electronic Crossmatch	221– 222
			except AU, Vitros Cal		I	X	J,J1 JAT	Transfusion Medicine	220 221
			Ver/Lin			X	JAI	Transfusion Medicine, Automated	221
Total protein, CSF	Х	SPE M, OLI	Protein Electrophoresis CSF Chemistry and	76 74			JATE1	Transfusion Medicine, Automated	221
			Oligoclonal Bands		I		JE1	Transfusion Medicine,	220
Total protein, urine	Х	CMP, CMP1	Clinical Microscopy	146			021	Education	220
		CMQ	Quality Cross Check, Urinalysis	46			TMCA	Transfusion Medicine, Competency	225
	Х	HCC2	Waived Combination	66				Assessment	
		LN6	Urine Chemistry Cal Ver/Lin	122			TMCAD	Transfusion Medicine, Competency	225
	Х	U	Urine Chemistry, General	68			TMCAE	Assessment Transfusion Medicine,	226
Total tricyclics	Х	SDS	Serum Drug Screen	101				Competency	1
	Х	ZT	TDM, Special	60				Assessment	
Touch imprint/crush prep		TICP, TICP1	Touch Imprint/Crush Prep	288			TMCAF	Transfusion Medicine, Competency Assessment	226
Toxicology, serum, qualitative	Х	SDS	Serum Drug Screen	101		X	TRC	Transfusion-Related Cell Count	224
	Х	Т	Toxicology	96	Trazodone metabolite		DFC		100
Toxicology, urine, qualitative	Х	DMPM	Drug Monitoring for Pain Management	107	(m-CPP)			Drug-Facilitated Crime	108

Analyte/Procedure		Program Code	Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
Trazodone		FTC T	Forensic Toxicology, Criminalistics Toxicology	104 96	Troponin I, plasma	Х	PCARI, PCARM, PCARMX	Plasma Cardiac Markers	65
		UT	Urine Toxicology	96			POC12	Competency Plasma Cardiac Markers	53
Treponema pallidum	Х	G	Syphilis Serology	214		X	CRT, CRTI	Cardiac Markers	62
Trichomonas vaginalis		MVP TVAG	Molecular Vaginal Panel Trichomonas vaginalis,	185 186	Troponin I, serum	^	CRTQ	Quality Cross Check, Cardiac Markers	42
			Molecular		I		LN25	Troponin I Cal Ver/Lin	127
	Х	VS, VS1	Vaginitis Screen	185	I		LN27	Troponin T Cal Ver/Lin	127
Tricyclic group		Т	Toxicology	96	I		TNT	Troponin T	62
		UDS, UDS6	Urine Drug Screen	98	I	X	TNT5	Troponin T, 5 Challenge	62
		UT	Urine Toxicology	96	Tumor necrosis factor	^	CTKN	Cytokines	212
Tricyclics, total	Х	SDS	Serum Drug Screen	101	(TNF)-alpha		CIKN	Cytokines	212
	Х	ZT	TDM, Special	60	UGT1A1		PGX3	Pharmacogenetics	251
<b>Triglycerides</b>		ABL	Accuracy-Based Lipid	112	Unsaturated iron binding	X	C3, C3X, CZ,	Chemistry and TDM	56-58
	Х	C1, C3, C3X, C4, CZ, CZX,	Chemistry and TDM	56–58	capacity, measured	^	CZX, CZ2X	Quality Cross Check,	41
		CZ2X	Quelity Queen Obserie	(1			020	Chemistry and TDM	
		CZQ	Quality Cross Check, Chemistry and TDM	41	Urea nitrogen	Х	AQ2, AQ4	Aqueous Blood Gas	92
		FCFS	Fecal Fat	75			AQ2Q, AQ4Q	Quality Cross Check,	44
		FLD	Body Fluid	72				Critical Care Aqueous	
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42		X	C1, C3, C3X,	Blood Gas Series Chemistry and TDM	56-58
	X     LCW     Ltd Chem, Waived     64     C4, CZ, CZX, CZ2X								
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120			CZQ	Quality Cross Check, Chemistry and TDM	41
		LN2BV	Chemistry, Lipid,	120			FLD	Body Fluid	72
			Enzyme all Beckman except AU, Vitros Cal				FLDQ	Quality Cross Check, Body Fluid Chemistry	42
			Ver/Lin				IFS	Interfering Substances	133
Triiodothyronine (T3), total		ABTH	Harmonized Thyroid	114			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120
	X	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56-58			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal	120
		CZQ	Quality Cross Check, Chemistry and TDM	41	liroa nitrogon urino		LN6	Ver/Lin Urine Chemistry Cal	122
	Х	K/KK	Ligand Assay, General	82	Urea nitrogen, urine		LINU	Ver/Lin	122
		LN5	Ligand Assay Cal Ver/Lin	122		Х	U	Urine Chemistry, General	68
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121- 122	Urea nitrogen, vitreous fluid		VF	Vitreous Fluid, Post- mortem	101
Triiodothyronine (T3), free		ABTH	Harmonized Thyroid	114	Urease	Х	RUR	Rapid Urease	183
	Х	C1, C3, C3X, CZ, CZX, CZ2X	Chemistry and TDM	56–58	Uric acid	X	C1, C3, C3X, C4, CZ, CZX, CZ2X	Chemistry and TDM	56-58
		CZQ	Quality Cross Check, Chemistry and TDM	41			CZQ	Quality Cross Check, Chemistry and TDM	41
	Х	K/KK	Ligand Assay, General	82	I		FLD2	Body Fluid Chemistry 2	73
Trimipramine		Т	Toxicology	96	I		IFS	Interfering Substances	133
		UT	Urine Toxicology	96			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	120

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure	LAP ENR		Description	Pg
Uric acid (cont.)		LN2BV	Chemistry, Lipid, Enzyme all Beckman	120	Urobilinogen (cont.)		POC3	POC Urine Dipstick Competency	52
			except AU, Vitros Cal		Uroporphyrin	Х	N/NX	Urine Chemistry, Special	69
Uric acid, urine		LN6	Ver/Lin Urine Chemistry Cal Ver/Lin	122	Urothelial carcinoma by FISH, hybridization and interpretation on site	Х	CYI	Fluorescence In Situ Hybridization and Interpretation on Site,	242
	X	U	Urine Chemistry, General	68	Vaginal wet preparations	X	СММР	Urothelial Carcinoma Clinical Microscopy,	147
Urine albumin		LN20	Urine albumin Cal Ver/ Lin	126	(clue cell, epithelial cell, trichomonas, or yeast)			Misc	
	X	U	Urine Chemistry, General	68	Vaginitis screen		BV MVP	Bacterial Vaginosis Molecular Vaginal Panel	184 185
	Х	UMC	Urine Albumin Creatinine	153		X	VS	BD Affirm VP III Antigen Detection	185
Urine albumin: creatinine ratio		ABU	Accuracy-Based Urine	113		Х	VS1	Genzyme OSOM Trichomonas	185
		U	Urine Chemistry, General	68			VS2	Vaginitis Screen, Virtual Gram Stain	186
		UMC	Urine Albumin Creatinine	153	Valproic acid	Х	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-5
Urine colony count		MC3	Urine Colony Count	176			CZQ	Quality Cross Check,	41
		MC4	Urine Colony Count Combination	176			DFC	Chemistry and TDM Drug-Facilitated Crime	108
Urine crystals identification		URC	Crystals	149			LN3 T	TDM Cal Ver/Lin	12
Urine crystals,		UAA	Automated Urinalysis	149			UT	Toxicology Urine Toxicology	96 96
semiquantitative Urine culture	X	D2	Urine Culture	175	Valproic acid, free	Х	CZ, CZX,	Chemistry and TDM	56-5
		MC3	Urine Colony Count	176			CZ2X, Z CZQ	Quality Cross Check,	41
	Х	MC4	Urine Colony Count Combination	176				Chemistry and TDM	
	Х	RMC	Routine Microbiology Combination	176	Vancomycin	X	CZ, CZX, CZ2X, Z	Chemistry and TDM	56-5
Urine dipstick	Х	CMP, CMP1	Clinical MIcroscopy	146			CZQ	Quality Cross Check, Chemistry and TDM	41
		CMQ	Quality Cross Check,	46			LN3	TDM Cal Ver/Lin	121
	X	HCC2	Urinalysis Waived Combination	66	Vancomycin-resistant		IDN, IDO	Nucleic Acid Amp,	201
		POC3	POC/Waived Urine Dipstick Competency	52	Enterococcus		VRE	Organisms Vancomycin-resistant Enterococcus	187
Urine drug screen	Х	DMPM	Drug Monitoring for Pain Management	107	Vanillylmandelic acid	X	N/NX	Urine Chemistry, Special	
	Х	UDS, UDS6	Urine Drug Screen	98	Variant interpretation only		VIP, VIP1	Variant Interpretation Only	252
Urine eosinophils, wright stain		SCM1	Special Clinical Microscopy	152	Varicella-zoster virus (VZV)		ID1	Nucleic Acid Amplification	197
Urine hCG, qualitative	Х	UHCG	Urine hCG	152	· · ·	Х	ID5	Varicella-Zoster Virus,	198
Urine hemosiderin, prussian blue stain		SCM1	Special Clinical Microscopy	152			IDME	Molecular Meningitis/Encephalitis	202
Urine sediment, color photographs	Х	CMP, CMP1, CMMP	Clinical Microscopy	146- 147		X	VR1	Panel Virology Culture	196
Urobilinogen	X	CMP, CMP1	Clinical Microscopy	146	I	X	VR1 VR2		196
		CMQ	Quality Cross Check,	46				Viral Antigen Detection by DFA	
	Х	HCC2	Urinalysis Waived Combination	66		X	VR3	Antibody Detection- Infectious Disease Serology	205

Analyte/Procedure	LAP ENR		Description	Pg	Analyte/Procedure	LAP ENR	Program Code	Description	Pg
Vascular endothelial		CTKN	Cytokines	212	von Willebrand factor		CGE/CGEX	Coagulation, Extended	161
growth factor (VEGF)							CGS3	Coag Special, Series 3	162
Venlafaxine		Т	Toxicology	96			LN37	von Willebrand Factor	129
		UT	Urine Toxicology	96				Ag Cal Ver/Lin	
Verapamil		Т	Toxicology	96	Voriconazole		AFD	Antifungal Drugs	106
		UT	Urine Toxicology	96				Monitoring	
Viability		CBT	Cord Blood Testing	227	VZV		ID1	Nucleic Acid	197
		SCP	Stem Cell Processing	227				Amplification	
Vibrio cholerae		GIP	Gastrointestinal Panel	204		X	ID5	Varicella-Zoster Virus,	198
	Х	GIP5	Gastrointestinal Panel	204		X	VD4	Molecular	100
Viral antigen detection	Х	HC2	HSV by DFA	197		X	VR1	Virology Culture	196
		POC8	POC Influenza A/B Ag	52		X	VR2	Viral Antigen Detection by DFA	196
	Х	VR2	Viral Antigen Detection by DFA	196		Х	VR3	Antibody Detection, Infectious Disease	205
	Х	VR4	Viral Antigen Detection by EIA and Latex	196	Wayalangth and		1	Serology	122
Viral isolation/ identification	Х	HC4	HSV Culture	197	Wavelength and photometric calibration			Instrumentation	132
	Х	ID3	Influenza A, Influenza B, RSV by NAA	198	WBC automated count (fluid)		ABF1, ABF2, ABF3	Automated Body Fluid	148
	Х	ID5	HSV. VZV—Molecular	198	WBC count		ABF1, ABF2, ABF3	Automated Body Fluid	148
	X	IDR	Infectious Disease,	202				Card Dlaad Teating	227
			Respiratory Panel	202		V	CBT	Cord Blood Testing	
	Х	VR1	Virology Culture	196		X	FH15	Centrifugal Hematology	137
Virtual biopsy program, online		VBP/VBP1	Online Virtual Biopsies Program	266		X	FH1-FH4, FH6, FH9, FH10, FH13,	Hematology Automated Differential	136
Virtual gram stain		VGS1	Virtual Gram Stain Basic	177			FH1P-FH4P,		
		VGS2	Virtual Gram Stain Advanced	177			FH6P, FH9P, FH10P,		
Virtual peripheral blood smear		VPBS	Virtual Peripheral Blood Smear	143			<b>FH13P</b> FH3Q, FH4Q,	Quality Cross Check,	45
Viscoelastic studies		VES	Viscoelastic Studies	166			FH6Q, FH9Q	Automated Hematology Series	
Viscosity		V	Viscosity	214			FL4	Flow Cytometry CD34+	215
Vitamin A		BMV3	Bone Markers and	86		X	HE, HEP	Basic Hematology	136
			Vitamins			~	LN9	Hematology Cal Ver/Lin	123
Vitamin B12	X	K, KK, K2 LN5	Ligand Assay, General Ligand Assay Cal Ver/Lin			X	RWBC	Rapid Total White Blood Cell Count	140
		1 1150		122			SCP	Stem Cell Processing	227
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	121- 122	WBC count (leukocyte- reduced platelets)		TRC	Transfusion-Related Cell Count	224
Vitamin B12, active		MMA	MMA and Active B12	82	WBC count (leukocyte-		TRC	Transfusion-Related	224
Vitamin D, 1, 25 dihydroxy		BMV1	Bone Markers and Vitamins	86	reduced RBCs)			Cell Count	
Vitamin D, 25-0H	Х	ABVD	Accuracy-Based	85	WBC count (urine)	v	UAA, UAA1	Automated Urinalysis	149
			Vitamin D		WBC differental (2-part)	Х	FH15	Centrifugal Hematology	137
		LN40	Vitamin D Cal Ver/Lin	130	WBC differential (manual)		EHE1	Expanded Virtual Peripheral Blood Smear	144
Vitamin E	X	VITD BMV4	25-OH Vitamin D Bone Markers and	84 86			VPBS	Virtual Peripheral Blood Smear	143
			Vitamins		I			Unical	
VKORC1		PGX	Pharmacogenetics	251					
Volatiles	X	AL1	Whole Blood Alcohol/ Volatiles	101					
	X	AL2	Serum Alcohol/Volatiles	101					

Analyte/Procedure	LAP ENR	Program Code	Description	Pg	Analyte/Procedure		Program Code	Description	Pg
WBC differential,	Х	FH1-FH4,	Hematology Automated	136	Zaleplon		DFC	Drug-Facilitated Crime	108
automated		FH6, FH9, FH10, FH13,	Differential		ZAP-70		ZAP70	ZAP-70 Analysis by Flow Cytometry	218
		FH1P-FH4P, FH6P, FH9P,			Zika virus		VBDM	Vector-Borne Disease— Molecular	200
		FH10P, FH13P			Zinc	Х	R	Trace Metals	78
		FH3Q, FH4Q,	Quality Cross Check,	45	Zinc, urine		TMU	Trace Metals, Urine	103
		FH6Q, FH9Q	Automated Hematology Series	40	Zinc, whole blood		TMWB	Trace Metals, Whole Blood	103
WBC differential, body		VBF	Virtual Body Fluid	148	Ziprasidone		DFC	Drug-Facilitated Crime	108
fluid					Zolpidem		DFC	Drug-Facilitated Crime	108
WBC manual count (fluid)	Х	HFC, HFCI	Hemocytometer Fluid Count	150- 151			FTC	Forensic Toxicology, Criminalistics	104
West Nile virus	Х	NAT	Nucleic Acid Testing	232			Т	Toxicology	96
Worm identification		WID	Worm Identification	194			UT	Urine Toxicology	96
Yeast identification	Х	F	Mycology and Aerobic Actinomycetes	189	Zonisamide		ZE	Therapeutic Drug Monitoring, Extended	60
	Х	F1	Yeast	189	Zopiclone/Eszopiclone		DFC	Drug-Facilitated Crime	108
	Х	F3	Candida Culture	190					
Yersinia enterocolitica		GIP	Gastrointestinal Panel	204					
	Х	GIP5	Gastrointestinal Panel	204					

### **23** Program Code Page Index



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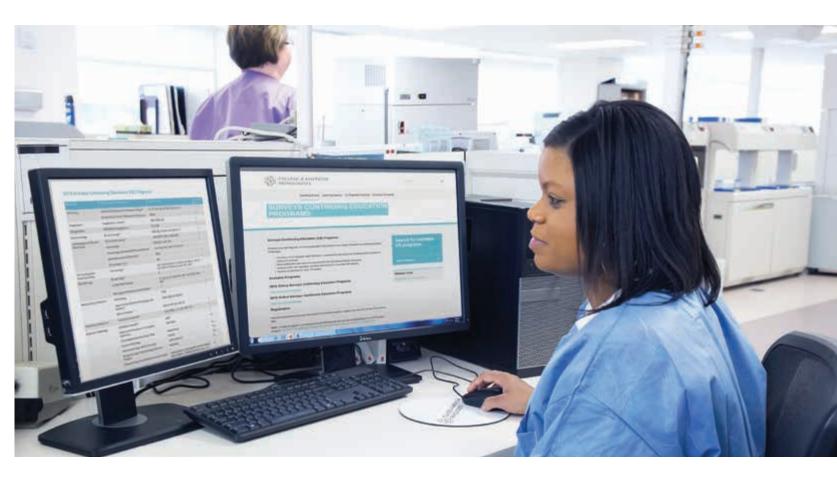
#### Program Code Page Index

Program Code	Pg	Program Code	Pg	Program Code	Pg	Program Code	Pg	Program Code	Pg
A2MG	210	APT	150	BSTS	178	CRTQ	42	DMPM	107
AABT	224	APXBN	163	BU	85	CRYP	190	DPATH	267
AABT1	224	AQ	92	BV	184	CS	59	DPATH1	267
AABT2	224	AQ2	92	C1	56-58	СТ	164	DPIHC	278
AABT3	224	AQ2Q	44	C3	56-58	CT1	164	DSC	149
AAT	245	AQ3	92	C3X	56-58	CT1Q	48	DY	84
ABF1	148	AQ3Q	44	C4	56-58	CT2	164	E	188
ABF2	148	AQ4	92	C7	77	CT2Q	48	E1	188
ABF3	148	AQ4Q	44	CAMP	180	CT3	164	EGFR	260
ABGIC	115	AQQ	44	CBT	227	CT3Q	48	EHE1	144
ABL	112	ARP	211	ССР	212	CT5	164	ELU	224
ABOSG	222	ASA	156	CD	102	CT5Q	48	EMB	157
ABS	113	ASC	211	CD30	279	CTKN	212	EPO	88
ABT	223	ASO	208	CDF2	180	CTQ	48	ESR	140
ABT1	223	AUP	283	CDF5	181	CY	242	ESR1	140
ABT2	223	AUP1	283	CES	212	СҮВК	242	ESR2	140
ABT3	223	B27	237	CESX	212	CYCGH	244	ESR3	140
ABTH	114	BALL	216	CFDNA	260	СҮСМА	244	ETB	102
ABU	113	BCP	139	CGB	160	CYF	242	ETME1	229
ABVD	112	BCP2	139	CGDF	160	СҮН	243	EV	60
ACA	210	BCR	149	CGE	161	СҮНІ	282	EXM	221
ACE	71	BCS	178	CGEX	161	CYI	242	EXM2	222
ACL	211	BCS1	170	CGL	160	CYJ	242	F	189
ADL	71	BDP	228		47	СҮК	243	F1	189
AFD	106	BDP5	228	CGM	169	CYL	243	F1 F3	190
AFD AFL	148	BDPV	228	CGS1	162	CYS	74	FS	75
AG	71	BDPV5	228	CGS2	162	CZ	56-58	FCFS	75
AHIV	231	BFC	149	CGS2	162	CZ2X	56-58	FCN	210
AHIVW	231	BGL	245	CGS4	162	CZQ	41	FF	88
		-		-					
	210	BGL1	245	CGS5	162	CZVM	67	FGAL	190
AL1	101	BGS	85	CGS7	162	CZX	56-58	FH1-FH10	136
AL2	101	BL	102	CH50	214	D	173	FH1P-FH10P	136
AMH	84	BMD	139	CHPVD	287	D1	175	FH3Q	45
	208	BMV1	86	CHPVJ	287	D2	175	FH4Q	45
	286	BMV2	86	CHPVK	287	D3	175	FH6Q	45
	285	BMV3	86	CHPVM	287	D5	176	FH9Q	45
	286	BMV4	86	CMMP	147	D6	177	FH13	136
	285	BMV5	86	CMP	146	D8	178	FH13P	136
	286	BMV6	86	CMP1	146	D9	177	FH15	137
	285	BNP	61	CMQ	46	DADR1	240	FL	215
PAPLE	286	BNP5	61	CMSP	246	DADR2	240	FL1	215
APAPLPT	285	BNPQ	41	CPIP	14	DAI	98	FL2	215
APAPME	286	BOR	180	CPIP1	14	DAT	224	FL3	215
APAPMPT	285	BP	193	CRO	180	DBGN	163	FL4	215
APC	210	BRAF	260	CRP	208	DEX	174	FL5	216
APOE	245	BRAFV	278	CRT	62	DFC	108	FL6	216
APS	211	BRCA	246	CRTI	62	DML	237	FLAC	181

Program Code	Pg	Program Code	Pg	Program Code	Pg	Program Code	Pg	Program Code	Pg
FLD	72	HER2	281	ING	86	LN33	128	MX1E	236
FLD2	73	HFC	150	ISH	258	LN34	129	MX2B	236
FLDQ	42	HFCI	151	ISH2	258	LN35	129	MX2C	236
FNA	290	HG	140	J	220	LN36	129	MX2E	236
FNA1	290	HGM	247	J1	220	LN37	129	МХВ	237
FNAG	291	HIVG	199	JAT	221	LN38	130	MXC	237
FNAG1	291	HMS	64	JATE1	221	LN39	130	MYBC	279
FNPX	163	HPATH	145	JATQ	49	LN40	130	MYG	69
FOL	88	HPATH1	145	JE1	220	LN41	130	N	69
FP	87	HPS	181	К	82	LN42	131	NAT	232
FP1B	87	HPV	197	K2	82	LN43	131	NB	65
FP1T	87	HQBX1	277	KET	64	LN44	131	NB2	65
FPX	87	HQBX2	277	КІТ	260	LN45	130	NEO	259
FR	294	HQBX3	277	КК	82	LN46	131	NGC	289
FR1	294	HQBX4	277	KRAS	260	LPE	76	NGC1	289
FSER	190	HQIHC	274	KSA	69	LPX	183	NGS	254
FSM	191	HQIP	271	KVM	90	M	74	NGSB1	255
FT	75	HQIPBX	276	LBAS	178	MBT	174	NGSB2	255
FTC	104	HQISH	270	LBC	151	MC3	174	NGSBV	257
G	214	HQMEL	272	LCW	64	MC4	176	NGSE	256
G6PDS	75	HQMMR	275	LKM	213	ME	239	NGSHM	255
GH2	63	HQNEU	273	LN2	120	MGEN	185	NGSST	253
GH2 GH5	63	HQNSC	272	LN2BV	120	MGL1	248-249	NIPT	88
GH5I	63	HQWSI	274	LN3	121	MGL2	248-249	NOB	105
GHER2	281	HSCRP	64	LN5	121-122	MGL3	248-249	NP	284
GHQ	42	HUEP	89	LN5S	121-122	MGL4	248-249	NP1	284
GIP	204	HV2	199	LN6	122	MGL5	248-249	NTA	102
GIP5	204	1	132	LN7	123	MHO	262	NX	69
GLI	261	ICSP	247	LN8	123	MH01	262	OCB	151
GNBC	179	ID1	197	LN9	123	MH02	262	OCBQ	46
GOCB	150	ID1T	197	LN11	124	MH03	262	OFD	100
GPBC	179	ID2	198	LN12	124	MH05	259, 262	OLI	74
GSA	64	ID3	198	LN12E	124	MK	278	Р	192
Н	210	ID5	198	LN13	124-125	MMA	82	P3	192
HBF	225	IDME	202	LN13C	124-125	MMR	278	P4	192
HBVL	198	IDN	201	LN15	125	MPA	60	P5	192
HBVL5	198	IDO	201	LN16	125	MRD	262	P16	279
HC1	181	IDPN	203	LN17	125	MRD1	262	PAPCE	286
HC2	197	IDR	202	LN18	126	MRD2	262	PAPCPT	285
HC3	181	IFS	133	LN19	126	MRS	182	PAPJE	286
HC4	197	IG	208	LN20	126	MRS2M	182	PAPJPT	285
HC6	186	IGHV	258	LN21	126	MRS5	182	PAPKE	286
HC6X	186	IGX	208	LN22	126	MRS5M	182	PAPKPT	285
HC7	186	IL	208	LN23	127	MSI	258	PAPLE	286
HCC	66	IM	208	LN24	127	MTBR	188	PAPLPT	285
HCC2	66	IMD1	249	LN25	127	MTP	261	PAPME	286
HCG	208	IMD2	249	LN27	127	MVM	80	PAPMPT	285
HCV2	198	IMD3	249	LN30	128	MVP	185	PARF	233
HE	136	IMW	209	LN31	128	MX1B	236	PCARI	65
HEP	136	IND	191	LN32	128	MX1C	236	PCARM	65

Program Code	Pg								
PCARMX	65	QF	213	SBAS	178	U	68	WP4	168
PCNEO	217	QP201	25	SC	156	UAA	149	WP6	168
PCP1	191	QP202	26	SC1	156	UAA1	149	WP9	168
PCP2	191	QP203	27	SCDD	105	UBJP	76	WP10	168
PCP4	191	QP204	28	SCM1	152	UDC	99	Y	84
PCT	77	QT1	31	SCM2	152	UDS	98	YVM	90
PDL1	279	QT2	31	SCO	134	UDS6	98	ΥY	84
PEX	193	QT3	32	SCP	227	UDSM	109	Z	56-58
PF	166	QT4	32	SCS	142	UHCG	152	ZAP70	218
PF1	166	QT5	37	SDS	101	UMC	153	ZE	60
PGX	251	QT7	33	SE	213	UPBG	70	ZT	60
PGX1	251	QT8	33	SEC	250	URC	149		
PGX2	251	QT10	34	SEC1	250	UT	96		
PGX3	251	QT15	35	SFLC	214	UTCO	134		
PHG	76	QT16	36	SM	156	UVM	70		
PIA	167	QT17	36	SM1CD	156	V	214		
PIAX	167	QTC	22	SM2CD	156	VBDM	200		
PIP	265	QTP	22	SMCD	156	VBF	148		
PIP1	265	R	78	S0	94	VBP	266		
PIPW	264	RAG	223	SOQ	44	VBP1	266		
PIPW1	264	RAP	89	SP	184	VES	166		
PLA	75	RBCAT	223	SP1	184	VF	101		
PLTM	169	RDS	213	SPE	76	VGS1	177		
PM1	279	RETT	251	SPN	184	VGS2	177		
PM2	281	RF	208	ST	184	VIP	252		
PM3	279	RFAV1	218	STFR	80	VIP1	252		
PM5	280	RFAV2	218	SV	156	VITD	84		
PM6	280	RFX	208	SW1	79	VLS	199		
PNA1	179	RHCVW	231	SW2	79	VLS2	199		
PNA2	179	RMAL	193	SW4	79	VM1	230		
PNH	217	RMC	176	Т	96	VM2	230		
POC1	52	RNA	260	TBLA	78	VM3	230		
POC2	52	ROM1	152	ТНСВ	106	VM4	230		
POC3	52	RT	141	TICP	288	VM5	231		
POC4	52	RT2	141	TICP1	288	VM6	231	-	
POC6	52	RT3	141	ТМ	89	VM6X	231		
POC7	52	RT3Q	45	TMCA	225	VPBS	143	-	
POC8	52	RT4	141	TMCAD	225	VR1	196	-	
POC9	52	RT4Q	45	TMCAE	226	VR2	196		
POC10	53	RTQ	45	TMCAF	226	VR3	205		
POC11	53	RUB	208	TMO	194	VR3M	205		
POC12	53	RUBX	208	TMU	103	VR4	196		
POC14	54	RUR	183	TMWB	103	VRE	187		
POC15	54	RVBN	163	TMX	89	VS	185		
POC16	54	RWBC	140	TNT	62	VS1	185		
PRO	22	S2	209	TNT5	62	VS2	186		
PS	225	S4	209	TPM	252	WBCR	66		
PTHQ	43	S5	209	TRC	224	WBGQ	41		
PV	156	SALC	77	TTD	205	WID	194		
	156	SARC	259	TVAG	186	WP3	168	-	

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