

Customer Support and Ordering Information



Simplify ordering with the CAP online store.

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

- Review your 2021 prepopulated quote.
- Add new programs based on your test menu.
- Manage your shipping and billing information.

To get started, visit cap.org and select Shop at the top of the homepage.

Customer Support and Ordering Information

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Customer Support

Customer Contact Center Hours: Monday–Friday, 7:00 am–5:30 pm CT

Extended Support Hours: Monday–Friday, 9:00 pm–5:00 am CT (email correspondence only)

Contact Information

| | |
|---|--|
| Call us to: <ul style="list-style-type: none"> Place or modify an order Update contact and/or demographic information (laboratory name, address, contact email address, telephone and fax numbers) Discuss special needs (international) Initiate CAPTRAKerSM email | 800-323-4040 option 1 847-832-7000 option 1 (Country Code: 001 for international customers) |
| To contact the CAP via email | Go to cap.org and select Contact & Support at the end of the homepage. OR Send an email to contactcenter@cap.org . |
| To submit orders or permits | Fax: 847-832-8168 (Country Code: 001) Email: cdm@cap.org |
| Laboratory Accident Hotline | 800-443-3244 847-470-2812 (Country Code: 001 for international customers) |

CAPTRAKer Email

The CAP's electronic proficiency testing (PT) kit, also referred to as external quality assessment (EQA), shipment-tracking service offers these benefits to your laboratory:

- Locate your PT kit in an instant.
- Receive CAPTRAKer emails notifying you of program shipments.
- Link to carrier tracking information through a CAPTRAKer email.

To initiate the receipt of CAPTRAKer emails, please forward your name, account number, and email address to contactcenter@cap.org.

e-LAB Solutions Suite

Use the CAP's online portal to manage your laboratory improvement programs. The portal provides helpful, convenient, and easy-to-use tools to:

- Access the CAP's web-based reporting solution, Performance Analytics Dashboard.
- Enter, review, and approve your PT results with interactive online forms.
- View and print copies of evaluations, participant summary reports, kit instructions, and result forms.
- Access your analyte scorecard, customized PT shipping calendar, and other analytical tools.
- View and update your CMS analyte reporting selections to ensure proper regulatory reporting.
- Manage your laboratory's online access, user permissions, and your individual profile.
- Manage your accreditation documents, including customized accreditation checklists and test menu/activity change forms.
- Enhance your automated reporting capabilities with e-LAB Solutions Connect (available in the US and Canada).
- Connect to CAP Learning tools, assessments, and modules.

This site contains a Users Guide that will guide you through the process of using e-LAB Solutions Suite. When you enroll/register for e-LAB Solutions Suite, your laboratory will receive important email notifications regarding PT events such as kit and evaluation availability.

Program Certificates

At the completion of the program year, participating laboratories will receive a program certificate that recognizes each institution's participation in the CAP Surveys and Anatomic Pathology Education Programs. This certificate is an indication of your commitment to quality improvement for better patient care.

Program Usage and Materials

- All program materials are intended for PT use only.
- You may not transfer or incorporate PT samples, their progeny, unmodified derivatives, or modifications thereof into a program intended for sale or uses other than PT, quality assurance, or education.
- Upon disposal of PT samples, their progeny, reagents, disposable equipment, unmodified derivatives, or modifications thereof used in PT, you should autoclave or incinerate and dispose of these materials as hazardous waste.
- All directions concerning use of the program materials are intended as guidance only.
- No license is either granted or implied by the sale of any program.
- The CAP contracts with vendors in producing the materials for its PT programs.
- The CAP follows PT manufacturer directions in determining the packaging, transport, and shipping conditions of all materials. These requirements may differ from the in-laboratory storage specifications indicated in the kit instructions that accompany your PT.
- Upon delivery of your PT, follow the kit instructions immediately and conduct the CAP PT as soon as possible.

Laboratory Accident Hotline

800-443-3244

847-470-2812 (Country Code: 001 for international customers)

Accidental exposures while processing specimens from the CAP, including cuts and contamination of mucous membranes or non-intact skin, should be reported to the CAP hotline for evaluation and questions regarding prophylaxis. Please provide the identification number of the relevant specimen.

Biohazard Information/Warning Statements

- The Centers for Disease Control and Prevention (CDC) has classified all bacterial and viral strains used in PT challenges as not greater than a Biosafety Level 2. A full description of Biosafety Level 2 handling requirements as defined by the CDC Office of Health and Safety in Biosafety in Microbiological and Biomedical Laboratories is provided at cdc.gov/biosafety/publications/bmbl5/index.htm.
- All Surveys include a biohazard warning statement appropriate for handling of the material.
- Surveys that do not include etiologic agents are still expected to be handled in keeping with CDC universal precautions and OSHA bloodborne pathogen rules.
- The CAP's Safety Data Sheets (SDS/MSDS) are available on cap.org (Laboratory Improvement > Catalog and Ordering Information).

Governing Law

- All CAP transactions are governed by Illinois state law. Unless otherwise stated US Commercial Code prevails.

CMS Reporting

- The CAP must submit PT results to the CMS for all laboratories providing a CLIA identification number.
- Your reporting preferences are outlined on the **CMS Analyte Reporting Selections** document, which is available online in e-LAB Solutions Suite.
- If a laboratory does not notify the CAP in advance that they have discontinued testing of a regulated analyte, a score of zero will be given.
- To avoid any penalties and ensure appropriate reporting in the future, you must note analytes listed on this report for which you do not perform testing.

PT Referral

Please share this information with anyone who performs and/or manages PT specimens.

PT referral has come under greater scrutiny from inspectors for the CMS. The CAP's PT Program reminds participants that per CLIA '88, a laboratory must test the PT specimens it receives in the same manner as it tests patient specimens—specimens must be tested with the laboratory's **regular workload**, using the laboratory's **routine methods**, and the **same number of times** it routinely tests patient specimens. However, laboratories **must not communicate results, share PT specimens, or refer PT specimens** to a laboratory with a **different CLIA number** for tests not on the laboratory's menu even if the referral for testing is routinely performed for patient specimens.

Ordering Information, Forms, and Terms and Conditions

Current Customers (placing your renewal order)

- Programs ordered as of August 1 are prepopulated on your order renewal form.
- Review all prepopulated PT ordering information including program enrollment, kit quantity, and demographic data.
- Refer to the Surveys catalog for program changes and discontinued or new programs.
- You can also see a list of programs in your PT Shipping Calendar at cap.org.
- Renew online:
 - Visit cap.org and select Shop at the top of the homepage. Log in and go to “I’m making purchases for” to select your laboratory.
 - Review, modify, and submit the prepopulated quote found under the “Quotes” link.
 - Note: To begin ordering on behalf of your organization, you will need to have ordering privileges granted by your Site Administrator.
- Use the prepopulated order forms:
 - **Print clearly and follow all instructions for adding and canceling programs. Legible printing will help ensure the accuracy of your order.**
 - Review **ALL** pages of your renewal order form.
 - Provide clear and complete shipping address, contact name, telephone number, and email address information on your order form. The CAP cannot accept post office box numbers for shipments.
 - **Complete form with payment information and RETURN ALL PAGES** by email to cdm@cap.org or fax all pages to Customer Data Management at 847-832-8168 (Country Code: 001).
- Upon receipt of the order, an email acknowledgment will be sent to the shipping contact listed.
- Once processed, an order confirmation will be emailed to the shipping contact. Order changes can be made at that time.

New Customers (placing your initial order)

- Visit cap.org and go to the Laboratory Improvement > Catalog and Ordering Information section to access a CAP order form.
- Complete **ALL** pages of order form, **including payment information**. Provide clear and complete shipping address, contact name, telephone number, and email address information.
- The CAP cannot accept post office box numbers for shipments. If you cannot have your order shipped to a street address, contact the CAP Contact Center.
- Return **ALL** pages of the order form and payment information to cdm@cap.org or fax all pages to Customer Data Management at 847-832-8168 (Country Code: 001).
- Upon receipt of the order, an email acknowledgment will be sent to the shipping contact listed.
- Once processed, an order confirmation will be emailed to the shipping contact. Order changes can be made at that time.

All Customers

- If you require additional documentation regarding the CAP’s status in order to place orders or to receive shipments, please contact the CAP Customer Data Management (CDM) department at cdm@cap.org. Examples of available documentation include: U.S. IRS Form 6166 Certificate of Residency, Articles of Incorporation, and the CAP’s tax status.
- Material and Safety Data Sheets are available at cap.org.

Order Deadline

- Order by December 1 to ensure full participation.
- Order early. Programs have limited quantities.
- Orders received after December 1 will be processed by date of receipt and prorated per program availability.

Order Additions and Cancellations

- The CAP will make every effort to accommodate orders received after December 1. Orders are dependent on the shipping schedule, specimen availability, and specimen stability.
- Due to vendor commitments, the CAP must receive cancellations no later than **six weeks** prior to the published ship date to receive credit for canceled programs.
- Program shipping fee refund requests will not be honored if received within the six week period prior to the first scheduled shipment date.
- The CAP does not accept the physical return of PT/EQA programs. Participants are responsible for all costs and expenses related to the return of anatomic pathology slide shipments to the CAP if the reason for such return is late program cancellation, refused shipment, or invalid ship-to address.
- Products not received in condition to perform testing for any reason may be rejected and discarded by the customer. The customer will receive, at its option, a full credit of the purchase price or the replacement of the products at no additional charge and with no additional cost of shipping.

Prelicensure/Reinstatement Service

- The CAP provides PT samples to laboratories that may need to perform prelicensure testing before beginning patient testing and/or reinstatement testing due to PT failures. Contact the CAP for cost and availability.
- PT samples with limited stability are not available for prelicensure/reinstatement testing.
- Reinstatement evaluations will be provided upon submission of results to the CAP.

CAP and CLIA Numbers

- Please have your CAP number available when placing orders. For new CAP customers, a CAP number will be assigned to the laboratory and will appear on your order confirmation.
- US and international customers subject to CLIA: Confirm or provide the laboratory's CLIA identification number, which is assigned by the Centers for Medicare & Medicaid Services (CMS) and can be obtained from your laboratory director. Contact your CMS Regional Office if you do not have a CLIA identification number.
- Orders may be submitted pending assignment of your CLIA number. Forward the number to the CAP once assigned.

Prices/Estimated Costs

- Prices exclude taxes, duties, brokerage fees, disbursement fees, and other applicable shipping and customs charges. These fees are the responsibility of the importer. All prices are subject to change without notice.
- The CAP reserves the right to change the published prices and ship dates.
- Estimated Costs: Contact the CAP if your institution requires an estimated cost (provided as a pro-forma invoice) prior to submitting payment. Upon receipt of the pro-forma invoice, submit the completed order form, including payment method, to the CAP for processing of your order.
 - o A pro-forma invoice can be requested by including the request when submitting your order forms, contacting the CAP, or via the online store.

Payment

Complete the Payment Information section of the order form. **To avoid delay in the processing of your order**, you must use one of the five following methods of payment:

- **Checks:** Make payable to the College of American Pathologists in US dollars and indicate the check number on the form.
- **Credit Card:** Include the card number, expiration date, cardholder's name, and authorized signature in the fields provided on the form.
- **Purchase Order:** A purchase order indicates a future commitment to pay. Indicate the purchase order number on the form. All orders for Canadian customers must be accompanied with a purchase order number. Customs brokers cannot facilitate clearance without a purchase order number for reference.
- **Letter of Authorization:** If your institution does not use a purchase order system, a signed letter of authorization on your institution's letterhead is acceptable. Please include the payment method (bank draft, wire transfer, etc.) information in your letter. Indicate this payment option selection on the order form and include a copy of the letter with your completed form.
- **Wire Transfer:** See next page for more information.

Payment (cont.)

• **Wire Transfer Information**

- o Include all bank fees with your payment. The CAP is not responsible for bank fees incurred while remitting payment. Make arrangements with your financial institution to include all wire transfer fees charged by intermediary banks.
- o Short payment due to deduction of intermediary bank fees will leave an open balance on your account. You are responsible to pay in your next wire transfer to the CAP.
- o Remit wire transfer payment to:
 - BMO Harris Bank N.A., 311 West Monroe Street, Chicago, Illinois 60606 USA
 - Phone: 312-461-2121
 - Account Number: 223-733-7
 - ABA Number: 071000288
 - SWIFT #: HATRUS44
- o Include the following information:
 - Customer name
 - CAP number
 - Account number
 - Invoice and/or order number

Payment Terms and Conditions

- For orders processed by October 31, 2020, payment terms are extended until December 1, 2020.
- After November 1, 2020, terms will be net 30 days from the invoice date.

Tax Information

- The CAP will calculate and add appropriate taxes for your locale to your invoice if your institution is subject to sales tax.
- Include applicable taxes with your prepaid order.
- Enclose your tax-exempt certificate with your order form if your institution is not subject to sales tax or if you have not previously notified the CAP with any changes.
- The CAP federal tax identification number is 36-2118323.

Tax Identification Number/Value-Added Tax (VAT)

Provide the CAP with your federal tax ID or VAT if your country requires that number be listed on the commercial invoice.

This catalog is governed by the CAP Program Ordering and Shipment; Website Terms and Conditions found on the CAP website at cap.org/terms-and-conditions. In the event of any contradiction between this catalog and the website, this catalog shall prevail. The CAP's terms and conditions prevail over any terms and conditions supplied by the customer. The CAP does not accept, and no order shall be subject to, any terms and conditions supplied by the customer.

Permitting Information

What you need to know before your PT program is shipped:

General Permit Requirement Information

Many countries require additional import permits or other clearance documentation for customs clearance (regardless of dangerous goods status of a program).

- Work with your in-country distributor (if applicable) and local authorities to determine if any permits are required.
- As a recipient, you are responsible for obtaining any import permits/documents and forwarding these to the CAP for inclusion with the program shipment. Provide these same documents to your broker or your local designated carrier.
- Programs with dangerous goods materials may require special permits and incur additional charges.
- Do not use the CAP Surveys catalog program descriptions for permit preparation and customs clearance documents. Program specifications may have changed after catalog publication and do not provide sufficient detail. Contact the CAP to obtain such information.
- You are responsible for monitoring permit expiration dates and submitting a new permit six weeks prior to the scheduled ship date. Check with your local in-country distributor (if applicable), which may have longer lead time requirements and adjust your permit obligations accordingly.
- **Program materials will not ship without required documentation.**

Submit permits at the time of ordering with an extended expiration date of December 31, 2021, in order to cover all shipments. **At a minimum, submit permits six weeks prior to the stated program ship date to ensure timely delivery.**

Additional Documentation

If you require additional documentation regarding the CAP's status in order to place orders or to receive shipments, please contact the CAP Customer Data Management (CDM) department at cdm@cap.org. Examples of available documentation include: U.S. IRS Form 6166 Certificate of Residency, Articles of Incorporation, and the CAP's tax status.

Material and Safety Data Sheets are available at cap.org.

Programs that may require import permits are listed below and are accurate as of May 1, 2020.

| General Permit Requirements and Dangerous Goods Classification UN3373 | | | |
|---|--|--------------|--|
| Program Code | Program Name | Program Code | Program Name |
| BCS | Blood Culture | HPS | <i>Helicobacter pylori</i> Antigen, Stool |
| BCS1 | Blood Culture, <i>Staphylococcus aureus</i> | IDN | Nucleic Acid Amplification, Organisms without MTB |
| BDP, BDP5 | Bacterial Detection in Platelets | IDO | Nucleic Acid Amplification, Organisms |
| BDPV, BDPV5 | Bacterial Detection in Platelets, Rapid | LN38 | CMV Viral Load Calibration Verification/Linearity |
| BSTS | Bacterial Strain Typing, <i>Staphylococcus</i> | MBT | Microbiology Bench Tools Competency |
| CAMP | <i>Campylobacter</i> | MC3 | Urine Colony Count |
| D | Bacteriology | MC4 | Urine Colony Count Combination |
| DEX | Expanded Bacteriology | MRS | Methicillin-resistant <i>Staphylococcus aureus</i> Screen |
| D1 | Throat Culture | MRS5 | Methicillin-resistant <i>Staphylococcus aureus</i> Screen, 5 Challenge |
| D2 | Urine Culture | PNA1 | PNA FISH for <i>Staphylococcus</i> |
| D3 | <i>N. gonorrhoeae</i> Culture | PNA2 | PNA FISH for Yeast |
| D8 | Group B Strep Detection | RMC | Routine Microbiology Combination |
| E | Mycobacteriology | SCP | Stem Cell Processing |
| E1 | Mycobacteriology—Limited | VR1 | Virology Culture |
| F | Mycology | VRE | Vancomycin-resistant <i>Enterococcus</i> |
| F1 | Yeast | VS | Vaginitis Screen Antigen Detection – BD Affirm VP III |
| F3 | <i>Candida</i> Culture | | |
| HC4 | Herpes Culture | | |
| HC6, HC6X | <i>C. trachomatis</i> and <i>N. gonorrhoeae</i> by NAA | | |

WARNING: The Instrumentation (I) Survey specimens may contain corrosive or toxic substances, environmental hazards, or irritants. This Survey ships as a Class 9 dangerous good with a specimen volume below the threshold requiring special packaging.

Note: CAP Viral Measures VMI-VM6X do not ship under a Dangerous Goods Classification; however, some countries may still require permits due to the nature of the material.

Hawaiian Permits

Import permits are required by the state of Hawaii. You may obtain an import permit by contacting the Plant Quarantine Branch of the State of Hawaii Department of Agriculture. Complete form PQ-7 to obtain an import permit or a letter of authorization.

Hawaiian Permit Requirements

| Program Code | Program Name | Documentation Requirement | Program Code | Program Name | Documentation Requirement |
|--------------|--|---------------------------|------------------------|--|---------------------------|
| ACA | Antichromatin Antibody | AR | E | Mycobacteriology | NR |
| AHIV | Anti-HIV 1/2 | AR | E1 | Mycobacteriology—Limited | NR |
| ARP | Antiribosomal P Antibody | AR | F | Mycology and Aerobic Actinomycetes | P |
| BCM | Bacterial Blood Culture, Molecular | AR | F1 | Yeast | P |
| BCS | Blood Culture | NR | F3 | <i>Candida</i> Culture | NR |
| BCS1 | Blood Culture, <i>S. aureus</i> | NR | FSM | Fungal Smear | AR |
| BDP, BDP5 | Bacterial Detection in Platelets | NR | GIP, GIP5 | Gastrointestinal Panel | AR |
| BDPV, BDPV5 | Bacterial Detection in Platelets, Rapid | NR | HBVL | Hepatitis B Viral Load, 3 Challenge | AR |
| BOR | <i>B. pertussis/parapertussis</i> , Molecular | AR | HBVL5 | Hepatitis B Viral Load, 5 Challenge | AR |
| BP | Blood Parasite | AR | HC1 | <i>C. trachomatis</i> Antigen Detection (DFA) | AR |
| BSTS | Bacterial Strain Typing, <i>Staphylococcus</i> | NR | HC2 | Herpes Simplex, Antigen Detection (DFA) | AR |
| BV | Bacterial Vaginosis | NR | HC3 | <i>C. trachomatis</i> Antigen Detection (EIA) | AR |
| CAMP | <i>Campylobacter</i> | NR | HC4 | Herpes Simplex Virus, Culture | NR |
| CBT | Cord Blood Testing | NR | HC6, HC6X | <i>C. trachomatis/N. gonorrhoeae</i> by Nucleic Acid Amplification (NAA) | NR |
| CDF2, CDF5 | <i>Clostridium difficile</i> | AR | HC7 | <i>C. trachomatis/N. gonorrhoeae</i> with DNA | AR |
| CHPVD | Human Papillomavirus, Digene | AR | HCV2 | Hepatitis C Viral Load | AR |
| CHPVK | Human Papillomavirus, SurePath | AR | HIVG | HIV Genotyping | AR |
| CHPVM | Human Papillomavirus, ThinPrep | AR | HPS | <i>H. pylori</i> Antigen, Stool | NR |
| COV2 | SARS-CoV-2, Molecular | AR | HPV | Human Papillomavirus | AR |
| CRYP | Cryptococcal Antigen Detection | AR | ID1 | Nucleic Acid Amplification, Viruses | AR |
| D | Bacteriology | P | ID1T | Nucleic Acid Amplification, JC & BK | AR |
| D1 | Throat Culture | NR | ID2 | Nucleic Acid Amplification, Respiratory | AR |
| D2 | Urine Culture | P | ID3 | Influenza A, Influenza B, & RSV by NAA | AR |
| D3 | <i>N. gonorrhoeae</i> Culture | NR | ID5 | HSV, VZV—Molecular | AR |
| D5 | Gram Stain | AR | IDME | Meningitis/Encephalitis Panel | AR |
| D6 | Rapid Group Strep A Antigen Detection | AR | Continued on next page | | |
| D8 | Group B Strep Detection | NR | | | |
| D9 | Rapid Strep Antigen Detection, Waived | AR | | | |
| DEX | Expanded Bacteriology | P | | | |

Permit Definitions

AR = AR Letter: Hawaii Department of Agriculture letter for programs not specifically regulated but still requiring documentation for importing

NR = NR Letter: Hawaii Department of Agriculture letter for programs considered to be low risk but still requiring documentation for importing

P = Permit

Hawaiian Permit Requirements *continued*

| Program Code | Program Name | Documentation Requirement | Program Code | Program Name | Documentation Requirement |
|--------------|---|---------------------------|--------------|--|---------------------------|
| IDM5 | Meningitis/Encephalitis Panel, 5 Challenge | AR | PNA2 | PNA FISH for Yeast | NR |
| IDN | NAA, Organisms Without MTB | NR | POC4 | POC Strep Screen Competency | AR |
| IDO | Nucleic Acid Amplification, Organisms | NR | RHCWV | Anti-HCV, Rapid Methods, Waived | AR |
| IDPN | Infectious Disease, Pneumonia Panel | AR | RMC | Routine Microbiology Combination | P |
| IDR | Infectious Disease, Respiratory Panel | NR | SBAS | <i>S. pneumoniae</i> Antigen Detection | AR |
| LBAS | <i>Legionella</i> Antigen Detection | AR | SCP | Stem Cell Processing | NR |
| LN38 | CMV Viral Load Calibration Verification/Linearity | NR | SP | Stool Pathogens | AR |
| LN39 | HIV Viral Load Calibration Verification/Linearity | AR | SP1 | Norovirus | AR |
| LN45 | HCV Viral Load Calibration Verification/Linearity | AR | SPN | Stool Pathogen, without Shiga Toxin | AR |
| LPX | Laboratory Preparedness Exercise | P | ST | Shiga Toxin | AR |
| MBT | Micro Bench Tools Competency | P | TTD | Tick-Transmitted Diseases | AR |
| MC3 | Urine Colony Count | NR | TVAG | <i>T. vaginalis</i> , Molecular | AR |
| MC4 | Urine Colony Count Combination | NR | VBDM | Vector-Borne Disease—Molecular | AR |
| MGEN | <i>Mycoplasma genitalium</i> , Molecular | AR | VLS | BK, CMV, and EBV Viral Load | AR |
| MRS, MRS5 | Methicillin-resistant <i>Staphylococcus aureus</i> Screen | NR | VLS2 | Viral Load | AR |
| MRS2M, MRS5M | MRSA Screen, Molecular | AR | VM1 | Viral Markers—Series 1 | AR |
| MTBR | Molecular MTB Detection and Resistance | AR | VM2 | Viral Markers—Series 2 | AR |
| MTR5 | Molecular MTB Detection and Resistance, 5 Challenge | AR | VM3 | Viral Markers—Series 3 | AR |
| MVP | Molecular Vaginal Panel | AR | VM4 | Viral Markers—Series 4 | AR |
| NAT | Nucleic Acid Testing | AR | VM5 | Viral Markers—Series 5 | AR |
| P | Parasitology | AR | VM6, VM6X | Viral Markers—Series 6 | AR |
| P3 | Parasite, Fecal Suspension, Immunoassay | AR | VR1 | Virology Culture | NR |
| P4 | Parasite, Fecal Suspension, PVA, Immunoassay | AR | VR2 | Virology Antigen Detection (DFA) | AR |
| P5 | Parasitology, <i>Giardia/Crypto</i> Immunoassay | AR | VR3 | Infectious Disease Serology | AR |
| PNA1 | PNA FISH for <i>Staphylococcus</i> | NR | VR3M | Infectious Disease Serology, Mumps | AR |
| | | | VR4 | Virology Antigen Detection (Non-DFA) | AR |
| | | | VRE | Vancomycin-resistant <i>Enterococcus</i> | NR |
| | | | VS | Vaginitis Screen Antigen Detection | NR |
| | | | VS1 | Vaginitis Screen, <i>T. vaginalis</i> | AR |
| | | | YBC | Yeast Blood Culture, Molecular | AR |

Permit Definitions

AR = AR Letter: Hawaii Department of Agriculture letter for programs not specifically regulated but still requiring documentation for importing
 NR = NR Letter: Hawaii Department of Agriculture letter for programs considered to be low risk but still requiring documentation for importing
 P = Permit

Canadian Permits

Canadian regulations require permits to import animal, plant, and human pathogens. Permit applications should list the CAP program code and full program name. Do not list the Program Fulfillment Group (PFG). Do not list the mailing designation (A, B, C).

These permits must be obtained for all infectious modules by the recipient from:

- The Public Health Agency of Canada (PHAC). Contact PHAC.licence-permis.ASPC@canada.ca.
- Canadian Food Inspection Agency (CFIA) permits may also be required. Contact CFIA.permission.acia@canada.ca.

Canadian Permit Requirements

| Program Code | Program Name | PHAC License: HAR (RG2) & HPTR (RG2) if culturing | PHAC License: HPTR (RG2) if culturing | CFIA OBCS (aquatic-animal HAA/HAR) | CFIA Compliance Letter | CFIA COA (plant PPA/PPR) |
|--------------|---|---|---------------------------------------|------------------------------------|------------------------|--------------------------|
| BCS | Blood Culture | X | | X | X | |
| BCS1 | Blood Culture, <i>S. aureus</i> | X | | X | X | |
| BDP, BDP5 | Bacterial Detection in Platelets | X | | | | |
| BDPV, BDPV5 | Bacterial Detection in Platelets, Rapid | X | | X | X | |
| BSTS | Bact Strain Typing, <i>Staphylococcus</i> | X | | | | |
| CAMP | <i>Campylobacter</i> | X | | X | X | |
| CBT | Cord Blood Testing | | | X | X | |
| D | Bacteriology | X | | X | X | |
| D1 | Throat Culture | X | | X | X | |
| D2 | Urine Culture | X | | X | X | |
| D3 | <i>N. gonorrhoeae</i> Culture | X | | X | X | |
| D8 | Group B Strep Detection | X | | X | X | |
| DEX | Expanded Bacteriology | X | | | | |
| E | Mycobacteriology | X | | X | X | |
| E1 | Mycobacteriology—Limited | X | | | | |
| F | Mycology and Aerobic Actinomycetes | X | | X | X | X |
| F1 | Yeast | X | | X | X | |
| F3 | <i>Candida</i> Culture | X | | X | X | |
| HC4 | Herpes Simplex Virus, Culture | X | | | | |
| HC6, HC6X | <i>C. trachomatis</i> / <i>N. gonorrhoeae</i> by Nucleic Acid Amplification (NAA) | X | | X | X | |
| HCV2 | Hepatitis Viral Load | | X | | | |

Continued on next page

Definitions

HAA/HAR—Health of Animals Act and Health of Animals Regulations

HPTR—Human Pathogens and Toxins Regulations

PPA/PPR—Plant Protection Act and Plant Protection Regulations

OBCS—Office of Biohazard Containment and Safety

RG2—Risk Group 2

Canadian Permit Requirements *continued*

| Program Code | Program Name | PHAC License: HAR (RG2) & HPTR (RG2) if culturing | PHAC License: HPTR (RG2) if culturing | CFIA OBCS (aquatic-animal HAA/HAR) | CFIA Compliance Letter | CFIA COA (plant PPA/PPR) |
|--------------|--|---|---------------------------------------|------------------------------------|------------------------|--------------------------|
| HIVG | HIV Genotyping | | X | | | |
| HPS | <i>H. pylori</i> Antigen, Stool | X | | | | |
| ID1 | Nucleic Acid Amplification, Viruses | | X | | | |
| ID2 | Nucleic Acid Amplification, Respiratory | | X | | | |
| IDME | Meningitis/Encephalitis Panel | | X | | | |
| IDM5 | Meningitis/Encephalitis Panel, 5 Challenge | | X | | | |
| IDO, IDN | Nucleic Acid Amplification, Organisms | X | | | | |
| IDR | Infectious Disease, Respiratory Panel | | X | | | |
| LN38 | CMV Viral Load Calibration Verification/Linearity | | X | | | |
| LN39 | HIV Viral Load Calibration Verification/Linearity | | X | | | |
| LN45 | HCV Viral Load Calibration Verification/Linearity | | X | | | |
| MBT | Micro Bench Tools Competency | X | | X | X | |
| MC3 | Urine Colony Count | X | | X | X | |
| MC4 | Urine Colony Count Combination | X | | X | X | |
| MRS | Methicillin-resistant <i>Staphylococcus aureus</i> Screen, 2 Challenge | X | | X | X | |
| MRS5 | Methicillin-resistant <i>Staphylococcus aureus</i> Screen, 5 Challenge | X | | X | X | |
| NAT | Nucleic Acid Testing | X | | | | |
| PNA1 | PNA FISH for <i>Staphylococcus</i> | X | | X | X | |
| PNA2 | PNA FISH for Yeast | X | | | | |
| RMC | Routine Microbiology Combination | X | | X | X | |
| SCP | Stem Cell Processing | | | X | X | |
| SP1 | Norovirus | | X | | | |
| VBDM | Vector-Borne Disease—Molecular | | X | | | |
| VM1 | Viral Markers—Series 1 | | X | | | |
| VM2 | Viral Markers—Series 2 | | X | | | |
| VM3 | Viral Markers—Series 3 | | X | | | |
| VM4 | Viral Markers—Series 4 | | X | | | |

Continued on next page

Definitions

HAA/HAR—Health of Animals Act and Health of Animals Regulations

HPTR—Human Pathogens and Toxins Regulations

PPA/PPR—Plant Protection Act and Plant Protection Regulations

OBCS—Office of Biohazard Containment and Safety

RG2—Risk Group 2

Canadian Permit Requirements continued

| Program Code | Program Name | PHAC License: HAR (RG2) & HPTR (RG2) if culturing | PHAC License: HPTR (RG2) if culturing | CFIA OBCS (aquatic-animal HAA/HAR) | CFIA Compliance Letter | CFIA COA (plant PPA/PPR) |
|--------------|---|---|---------------------------------------|------------------------------------|------------------------|--------------------------|
| VM5 | Viral Markers—Series 5 | | X | | | |
| VM6 | Viral Markers—Series 6 | | X | | | |
| VM6X | Viral Markers—Series 6, Additional Material | | X | | | |
| VR1 | Virology Culture | X | | | | |
| VRE | Vancomycin-resistant <i>Enterococcus</i> | X | | | | |
| VS | Vaginitis Screen Antigen Detection | X | | | | |

Some programs require multiple permits. If the lab is not culturing the programs in column marked “PHAC License: HPTR (RG2) if culturing,” they would return the provided permit request letter signed “No Permit Required.”

Definitions

HAA/HAR—Health of Animals Act and Health of Animals Regulations

HPTR—Human Pathogens and Toxins Regulations

PPA/PPR—Plant Protection Act and Plant Protection Regulations

OBCS—Office of Biohazard Containment and Safety

RG2—Risk Group 2

Shipping Information

Shipping Terms and Conditions

- Incoterms for all shipments are made CPT (Carriage Paid To) destination. Customers are responsible for all customs fees, duties, taxes, and brokerage fees. The shipping and handling fee does not cover additional costs incurred by the recipient's government or brokerage company.
- The CAP is not liable for loss or damage caused by force majeure.
- For PT/EQA orders allow up to 10 business days for international shipments via air service. Domestic orders are shipped via expedited service types such as next-day or two-day air services.

Shipping and Handling Fees

Our goal is to ensure program materials are shipped to maintain stability and reach your laboratory using a reliable transportation carrier. The CAP requires the addition of a 1% fuel surcharge for 2021 program shipments for all continental US customers due to the increase in shipping rates. Additional shipping fees for programs shipped to all non-continental US customers are indicated in the table below.

| Shipping and Handling Fees | |
|--|----------------------------------|
| Destination | Shipping Fee Per Program (US \$) |
| Alaska | \$55 |
| American Samoa | \$55 |
| Canada | \$120 |
| Guam | \$55 |
| Hawaii | \$55 |
| Puerto Rico | \$95 |
| Virgin Islands | \$95 |
| Shipments beyond the continental US and destinations noted above | \$160 |

Shipping and handling fees shown above are collected for shipments sent beyond the continental US and cover shipping costs and handling requirements. Additional fees, duties, and taxes not reflected in the CAP list price may be imposed on PT orders. Participants should contact their local customs office and local carrier's office regarding any additional charges that may be imposed.

- Discuss your local delivery requirements.
- Identify your broker with your local carrier's office.
- Consider establishing an account with the local carrier for direct billing of duties and taxes. It is common practice for carriers to charge additional disbursement fees for advancing duties and taxes due to your government. If an account is not established with your local carrier's office, deliveries may be delayed or arrive Collect on Delivery (COD).
- Inquire whether signing a power of attorney for brokerage services will expedite clearance of your shipments.
- Inquire if there are documents you can prepare in advance and place on file for the program year.

Local duties and tax charges may apply to shipments within your geographic area.

- Duties and import taxes imposed by countries outside of the United States are the responsibility of the customer and cannot be waived by the CAP.
- Other government fees imposed by your country are the responsibility of the customer and cannot be waived by the CAP.
- Shipments are processed CPT Destination.

Programs Exempt from Shipping and Handling Charges

| Program Code | Program Name |
|---|---|
| APAPCPT, APAPJPT, APAPKPT, APAPLPT, APAPMPT, PPTENR, Series 1 and 2 | Glass Slide Gynecologic Cytopathology PT Program with Glass Slide PAP Education, additional pathologist or cytotechnologist |
| APAPCE, APAPJE, APAPKE, APAPLE, APAPME, Series 1 and 2 | Cytopathology Glass Slide Education Program, additional pathologist or cytotechnologist |
| AUP | Autopsy Pathology |
| AUP1 | Autopsy Pathology, additional pathologist |
| BMD | Bone Marrow Cell Differential |
| CAPBIND* | CAP Survey Binder |
| CPIP/CPIP1 | Clinical Pathology Improvement Program |
| CY | CAP/ACMG Cytogenetics |
| DPATH/DPATH1 | Online Digital Slide Program in Dermatopathology |
| DY | Ligand Assay, Special |
| EHE1 | Expanded Virtual Peripheral Blood Smear |
| EMB | Embryology |
| FNA/FNA1 | Online Digital Slide Program in Fine-Needle Aspiration |
| FNAG1 | Fine-Needle Aspiration Glass Slide Education Program, additional pathologist or cytotechnologist |
| FR/FR1 | Forensic Pathology |
| HPATH/HPATH1 | Hematopathology Online Education |
| NEO | Neoplastic Cellularity |
| NGC1 | Nongynecologic Cytopathology Education, additional pathologist or cytotechnologist |
| NGSB1 | NGS Bioinformatics for Illumina Platforms |
| NGSB2 | NGS Bioinformatics for Ion Torrent Platforms |
| NGSBV | NGS Bioinformatics Somatic Validation |
| NGSE | NGS Undiagnosed Disorders-Exome |
| NP/NP1 | Neuropathology Program |
| PIP1 | Performance Improvement Program in Surgical Pathology, additional pathologist |
| PIPW/PIPW1 | Online Performance Improvement Program in Surgical Pathology |
| QP211, QP212, QP213, and all QT programs | Quality Management Tools |
| SEC | CAP/ACMG DNA Sequencing Interpretation |
| SMCD, SM1CD, SM2CD | Semen Analysis—Online |
| TICP/TICP1 | Nongynecologic Cytopathology—Intraoperative Touch Imprint/Crush Preparation Program |

Continued on the next page

*The CAP does not charge shipping and handling for binders that are included with your order. The purchase of additional binders will incur a shipping and handling fee.

Programs Exempt from Shipping and Handling Charges continued

| | |
|----------|--|
| VBF | Virtual Body Fluid |
| VBP/VBP1 | Online Virtual Biopsy Program |
| VGS1 | Virtual Gram Stain Basic Competency |
| VGS2 | Virtual Gram Stain Advanced Competency |
| VIP/VIP1 | Variant Interpretation Only |
| VPBS | Virtual Peripheral Blood Smear |
| VS2 | Vaginitis Screen, Virtual Gram Stain |

*The CAP does not charge shipping and handling for binders that are included with your order. The purchase of additional binders will incur a shipping and handling fee.

Carriers

The CAP will send all standard PT program shipments via the CAP's preferred carrier. If your organization is specifically requesting shipment via a freight forwarder or another designated carrier **at your expense**, provide the CAP with your final shipment address, account number, and the freight forwarder's US domestic address and contact information.

Carrier Contact

Carriers or customs officials may attempt to contact your PT shipping contact if there are issues regarding clearing your shipment; make sure you provide the CAP with your PT shipping contact email and local number. Please respond to these requests for additional information as soon as possible. Contact the CAP if you need additional information to expedite clearance.

If you fail to respond to information requests from carriers and customs officials, the following may occur:

- Your organization may incur additional charges for storage and management fees.
- You may incur additional fees due to disposal or return of your shipment.

Special Requirements

Discuss any special shipping requirements or updates with the CAP Customer Contact Center staff.

Communicate all requests for special shipping arrangements to the CAP a minimum of six weeks prior to the stated program ship date.

Commercial Invoice

Commercial invoices are affixed to packages as required by international shipping conventions. The commercial invoice is an official transaction record between an exporter and an importer. Customs officials use this form to clear your shipment.

The invoice total listed on the commercial invoice is not an amount due to the CAP or your country. The invoice total is listed for the purpose of computing duties and taxes.

Delivery

CAP programs are shipped door-to-door service whenever possible. In instances where your country does not allow delivery to your door, the CAP can only arrange shipment to an airport. In these instances you will be notified when a program has been cleared and is ready for pickup. You must pick up your shipment at that point. If you refuse to pick up your shipment, your order for any remaining shipments may be canceled.

Stability

Some programs have limited stability and may not be available in certain countries. For more information, contact the CAP Customer Contact Center.

Programs With 10 or Less Days Stability

| Program Code | Program Name |
|--------------|--|
| B27* | HLA-B27 Typing |
| BALL | Flow Cytometry—B-ALL Minimal Residual Disease |
| CBT* | Cord Blood Testing |
| EPO | Erythropoietin |
| FL3* | Flow Cytometry—Immunophenotypic Characterization of Leukemia/Lymphoma |
| FL8 | Flow Cytometry—Mature B-Cell Leukemia/Lymphoma Minimal Residual Disease |
| FL9 | Flow Cytometry—Plasma Cell Myeloma Minimal Residual Disease |
| GH2, GH5 | Hemoglobin A _{1c} |
| HFC* | Hemocytometer Fluid Count |
| LN15 | Hemoglobin A _{1c} Accuracy Calibration Verification/Linearity |
| MXB | HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II) |
| MXC | HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II) |
| MXE | HLA Antibody Screen and Antibody Identification (Class I/Class II) |
| PCNEO* | Flow Cytometry, Plasma Cell Neoplasmas |
| RFAV1* | Rare Flow Antigen Validation CD1a |
| RFAV3 | Rare Flow Antigen Validation, CD30 |
| SCP* | Stem Cell Processing |
| ZAP70* | ZAP-70/CD49d Analysis by Flow Cytometry |

Note: The CAP strives to deliver all program materials in a stable condition. Surveys that must be kept cold will ship with frozen cold packs or dry ice as needed and allowed by country importation regulations. If transportation to your location cannot meet these conditions, please note that replacements will not be available.

For CAP-accredited international laboratories, the CAP requests that your laboratory perform testing on these materials. If unacceptable results are achieved and it is established that such results are due to shipping conditions, your laboratory may review options with the CAP Laboratory Accreditation Program staff at accred@cap.org.

*Programs with less than five days stability may not be suitable for participants located outside the US and Canada.

Dry Ice

Some shipments are packed on dry ice to maintain stability. Dry ice shipments are shipped as UN1845 dangerous goods shipments. Due to sublimation, there may not be any dry ice present when you open your kit. This condition is not an indication that the program material has been compromised. If your country does not allow dry ice shipments, your program material will be packaged with cool packs that may not be as effective in maintaining a cool environment. When you receive your shipment, follow the kit storage instructions immediately to avoid compromising the program material.

Program Materials Shipped on Dry Ice

| Program Code | Program Name |
|---|---|
| ABGIC | Accuracy-Based Glucose, Insulin, and C-Peptide |
| ABL | Accuracy-Based Lipids |
| ABS | Accuracy-Based Testosterone, Estradiol |
| ABTH | Harmonized Thyroid |
| ABU | Accuracy-Based Urine |
| ABVD | Accuracy-Based Vitamin D |
| ACA | Antichromatin Antibody |
| AFD | Antifungal Drugs Monitoring |
| AG* | 1,5-Anhydroglucitol |
| ARP | Antiribosomal P Antibody |
| BDPV, BDPV5 | Bacterial Detection in Platelets, Rapid |
| BGL, BGL1, BGL2 | CAP/ACMG Biochemical Genetics |
| BMV2* | Bone Specific Alkaline Phosphatase |
| BNP, BNP5 | B-Type Natriuretic Peptides |
| BU* | Bone and Mineral Metabolism, Urine |
| C1*, C3*/C3X*, C4*, CZ*/CZX*, CZ2X*/CZVM*, Z* | Chemistry and Therapeutic Drug Monitoring |
| C7* | Pseudocholinesterase |
| CMSP | CAP/ACMG Cardiomyopathy Sequencing Panel |
| CRT, CRTI | Cardiac Markers |
| CRTQ | Quality Cross Check—Cardiac Markers |
| CS | CAP/AACC Immunosuppressive Drugs |
| CZQ* | Quality Cross Check—Chemistry/Therapeutic Drug Monitoring |
| DAI* | Urine Drug Adulterant/Integrity Testing |
| DMPM* | Drug Monitoring for Pain Management |
| EPO* | Erythropoietin |
| ETB* | Ethanol Biomarkers |
| EV | Everolimus |
| FOL* | RBC Folate |
| FT* | Fructosamine |
| FTC* | Forensic Toxicology, Criminalistics |
| GSA* | Glycated Serum Albumin |
| HCRT, HCRTI, HTNT | High-Sensitivity Cardiac Markers |
| HCV2 | Hepatitis C Viral Load |

Continued on the next page

*This program ships with a cool pack to laboratories in the US, Puerto Rico, Guam, Virgin Islands, American Samoa, and to APO/FPO addresses.

Program Materials Shipped on Dry Ice continued

| Program Code | Program Name |
|------------------------|--|
| HIVG | HIV Genotyping |
| HV2 | HIV Viral Load |
| ICSP | CAP/ACMG Inherited Cancer Sequencing Panel |
| IFS* | Interfering Substances |
| IGHV | IGHV Mutation Analysis |
| ING* | Insulin, Gastrin, C-Peptide, and PTH |
| K*, KK*, KVM* | Ligand Assay—General |
| KET* | Ketones |
| KIT | <i>KIT/PDGFR</i> A |
| LCW | Chemistry—Limited, Waived |
| LN2*, LN2BV* | Chemistry Calibration Verification/Linearity |
| LN24 | Creatinine Accuracy Calibration Verification/Linearity |
| LN25, LN27 | Troponin Calibration Verification/Linearity |
| LN30 | B-Type Natriuretic Peptides Calibration Verification/Linearity |
| LN31 | Immunosuppressive Drugs Calibration Verification/Linearity |
| LN35, LN36, LN37 | Coagulation Calibration Verification/Linearity |
| LN38 | CMV Viral Load Calibration Verification/Linearity |
| LN41 | Procalcitonin Calibration Verification/Linearity |
| LN44 | Fibrinogen Calibration Verification/Linearity |
| LN45 | HCV Viral Load Calibration Verification/Linearity |
| LN46 | C-Peptide/Insulin Calibration Verification/Linearity |
| LN5*, LN5S* | Ligand Calibration Verification/Linearity |
| LPE*, SPE* | Lipoprotein and Protein Electrophoresis |
| MHO, MH01, MH02, MH03 | Molecular Hematologic Oncology |
| MPA | Mycophenolic Acid |
| MRD, MRD1, MRD2 | Minimal Residual Disease |
| NAT | Nucleic Acid Testing |
| NB*, NB2* | Neonatal Bilirubin |
| NIPT* | Noninvasive Prenatal Testing |
| NOB | Novel Opioids and Benzodiazepines |
| NTA | Nicotine and Tobacco Alkaloids |
| OFD* | Oral Fluid for Drugs of Abuse |
| PCARI, PCARM*, PCARMX* | Plasma Cardiac Markers |
| RAP* | Renin and Aldosterone |
| RNA | Fusion RNA Sequencing |
| SALC | Salivary Cortisol |
| SARC | Sarcoma Translocation |
| SCDD* | Synthetic Cannabinoid/Designer Drugs |
| SCO* | Serum Carryover |

Continued on the next page

*This program ships with a cool pack to laboratories in the US, Puerto Rico, Guam, Virgin Islands, American Samoa, and to APO/FPO addresses.

Program Materials Shipped on Dry Ice continued

| Program Code | Program Name |
|--------------------|--|
| T* | Toxicology |
| TBLA | Total Bile Acids |
| TM*, TMX* | Tumor Markers |
| TNT5 | Troponin T |
| UDS*, UDSM*, UDS6* | CAP/AACC Urine Drug Testing, Screening |
| UPBG | Porphobilinogen, Urine |
| UT*, UTCO* | Urine Toxicology Carryover |
| VF* | Vitreous Fluid, Postmortem |
| VITD* | 25-OH Vitamin D, Total |
| Y*, YY*, YVM* | Ligand—Special |
| ZE* | Therapeutic Drug Monitoring—Extended |

*This program ships with a cool pack to laboratories in the US, Puerto Rico, Guam, Virgin Islands, American Samoa, and to APO/FPO addresses.

Options for International Customers

If you are ordering programs shipped with dry ice or cool packs and the average temperature in your country is higher than 25°C (77°F), the CAP recommends you upgrade your shipment packaging to the extended shipper (XDS). The XDS is a dual insulation shipper intended to maintain the cold chain to destinations with warmer climates. The fee associated with such service is \$30 per program.

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