



COLLEGE of AMERICAN
PATHOLOGISTS
Laboratory Quality Solutions

Surveys and Anatomic Pathology Education Programs

2023



Performance you can measure.
Accuracy you can trust.

Take Pride in Your Perseverance

As a medical laboratory professional, it's always taken a certain amount of persistence to do what you do.

But lately, faced with a seemingly endless array of challenges—supply chain issues, staffing shortages, ongoing global pandemics—it requires even more devotion on your part. Your dedication to high-quality patient care, and to unshakable accuracy, is nothing short of inspiring.

In fact, your day-in, day-out perseverance is what drives us to partner with laboratory professionals around the globe, tapping into the expertise of the world's largest organization of board-certified pathologists. Your efforts motivate us to elevate the quality of laboratory medicine by designing best-in-class solutions that will help you achieve operational excellence and diagnostic confidence.

As you continue to model tenacity and dedication—maintaining consistency and accuracy in the laboratory—we vow to be just as tenacious. To join you. To keep developing premium proficiency testing and external quality assessment (PT/EQA) programs, quality improvement solutions, protocols, and guidelines.

Together we can take pride in our tireless endeavor to achieve the best outcomes for patients.

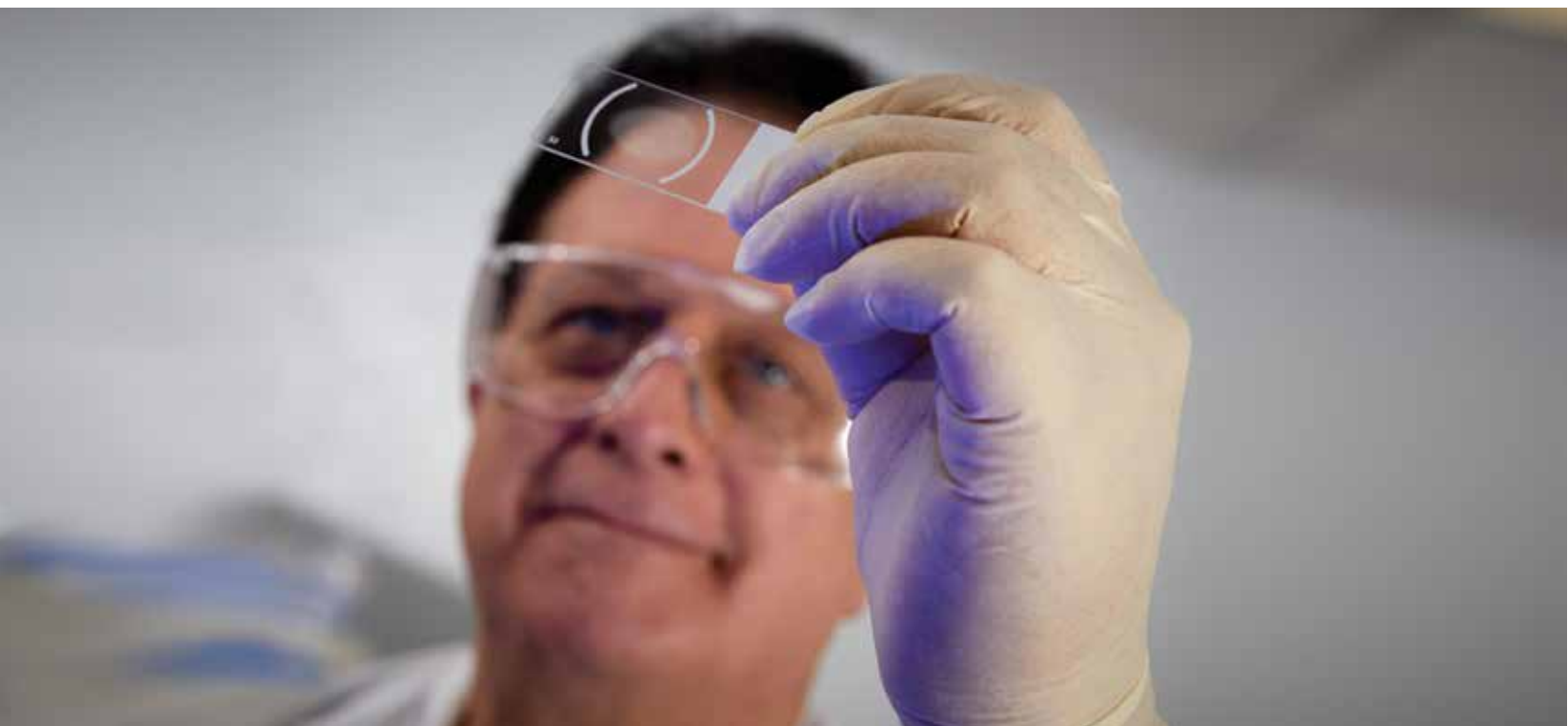


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With direct transmission, less equals more.



Transmit your quantitative PT results directly to the CAP with **direct transmission**. Your laboratory will spend less time manually entering results, which will free up resources for other priorities. Plus, you will reduce clerical errors and streamline your process to be more like patient testing.

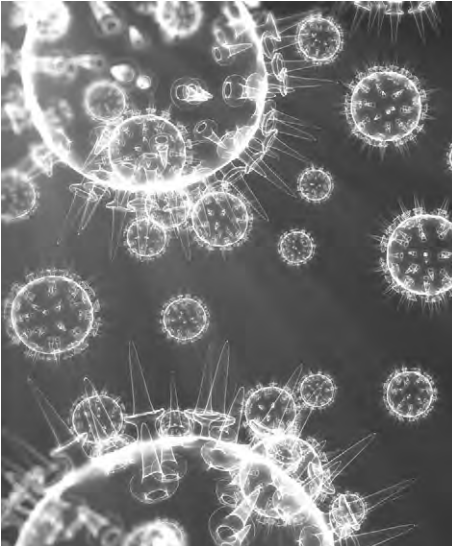
Get connected. Learn more at cap.org

Less complicated
More accurate

Less time
entering results

**More time for
patient testing**

LESS = MORE



As laboratory medicine changes, the CAP supports your needs.

- Compare multiple instruments testing for a wide range of respiratory viruses (ID3Q).
- Elevate your laboratory's preanalytical processing steps for tissue and slide preparation of cell blocks (HQCLB) and targeted therapy (HQTAR), thus ensuring quality staining.
- Assess your staff's technical competency for body fluid review (QPB10).

New Developments

Quality Management Tools

Subsection	Name	Program Code	Page
Short-Term Quality Studies and Competency Assessments	Non-Physician Care Team Satisfaction With Clinical Laboratory Services	QP231	27
Short-Term Quality Studies and Competency Assessments	Technical Competency Assessment of Body Fluid Review	QPB10	28

Quality Cross Check

Subsection	Name	Program Code	Page
Microbiology	Quality Cross Check—Nucleic Acid Amplification, Respiratory Limited	ID3Q	49

Instrumentation Verification Tools

Subsection	Name	Program Code	Page
Calibration Verification/Linearity	High-Sensitivity Troponin I Calibration Verification/Linearity	LN48	135

Hematology and Clinical Microscopy

Subsection	Name	Program Code	Page
Hematology	Hematology Automated Differential Series	FH17/FH17P	141

Coagulation

Subsection	Name	Program Code	Page
Coagulation	Expanded Coagulation Factors	ECF	166

Microbiology

Subsection	Name	Program Code	Page
Bacteriology	Carbapenemase Detection	CRE	187
Virology	Mpox Virus	MPOX	203

Transfusion Medicine, Viral Markers, and Parentage Testing

Subsection	Name	Program Code	Page
Transfusion Medicine	Direct Antiglobulin Testing—Automated	ADAT	236

Genetics and Molecular Pathology

Subsection	Name	Program Code	Page
Cytogenetics	CAP/ACMG Fluorescence In Situ Hybridization for Paraffin-Embedded Tissue ALK Rearrangement in Lung	CYALK	255
Next-Generation Sequencing	Next-Generation Sequencing Solid Tumor Bioinformatics Hybrid	NGSB4	268
Next-Generation Sequencing	Next-Generation Sequencing Hematologic Malignancies Bioinformatics Hybrid	NGSB5	270

Anatomic Pathology

Subsection	Name	Program Code	Page
Surgical Pathology	CAP/NSH HistoQIP Cell Block Preparations	HQCLB	287
Surgical Pathology	CAP/NSH HistoQIP Targeted Therapy	HQTAR	288

Ensure precise results across all your SARS-CoV-2 testing platforms.

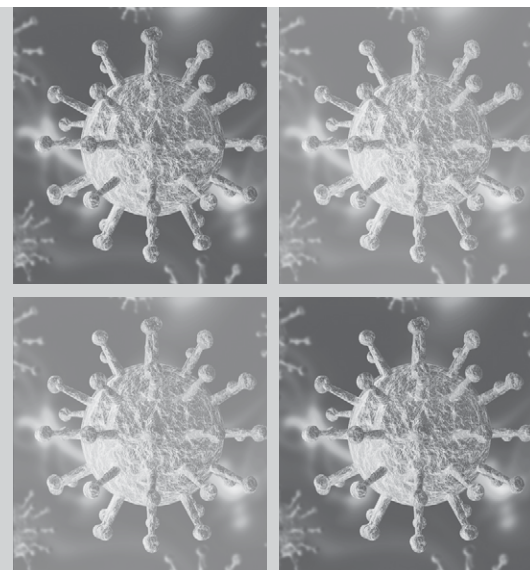
- Perform testing on multiple assays at once
- Receive enough specimen to test up to three assays with three challenges per mailing
- Receive customized reports that include peer group evaluations and assay comparability statistics

Quality Cross Check—SARS-CoV-2 Molecular (COV2Q)

Quality Cross Check—SARS-CoV-2 Antigen (COVAQ)

Quality Cross Check—SARS-CoV-2 Serology (COVSQ)

Add them to your order.



2022 New Programs

Name	Program Code	Page
Continuing Education		
Informatics Essentials for Pathologists	ICBE/ICBE1	15
Risk Management	QMEDRISK	19
Quality Management Tools		
Technical Competency Assessment of Peripheral Blood Smears	QPC10/QPC25	29
Quality Cross Check		
Quality Cross Check—Hematology	FH13Q	45
Instrumentation Verification Tools		
High-Sensitivity Troponin T Calibration Verification/Linearity	LN47	135
Coagulation		
Viscoelastic Testing—Whole Blood	VES1	170
Microbiology		
Joint Infection Panel	JIP	208
Genetics and Molecular Pathology		
Next-Generation Sequencing Hematologic Malignancies Bioinformatics	NGSB3	269
Next-Generation Sequencing Undiagnosed Disorders—Trio Analysis	NGSET	272
Copy Number Variant—Solid Tumor	CNVST	273
Tumor Mutational Burden	TMB	273
Anatomic Pathology		
p53 Immunohistochemistry Tissue Microarray	P53	296



We support laboratory professionals. Maintain your certification with Surveys continuing education (CE).

- Offer your staff more than 100 CE credits.
- Advance skills with education activities developed by more than 600 physicians and doctoral scientists with expertise in pathology and laboratory medicine.
- Meet certification and licensure requirements with CE across multiple disciplines.

Continuing Education

Continuing Education Programs.....	8
Competency Assessment Hub.....	16
QMEd™ Online Educational Courses	19

Program Changes

Informatics Case-Based Education (ICBE/ICBE1) is now Informatics Essentials for Pathologists (ICBE/ICBE1)	15
Competency Assessment Program is now Competency Assessment Hub.....	16

Continuing Education Programs

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



CME (Continuing Medical Education for Physicians)

Accreditation

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

CME Category 1

The CAP designates these 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.



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.

This activity is approved for continuing education credit in California and Florida.

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).



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	C1, C3/C3X, C4, CZ/CZX/CZ2X, Z	Chemistry	58-60
Quality Cross Check—Whole Blood Glucose	WBGQ	Chemistry/Quality Cross Check	41
Blood Gas	AQ, AQ2, AQ3, AQ4	Chemistry	96
Special Chemistry	M, OLI, LPE, SPE, UBJP	Chemistry	78, 80
Coagulation—Limited	CGB, CGL, CGDF	Coagulation	164
Cytogenetics	CY	Cytogenetics	254
Hematology—Basic	HE, HEP	Hematology and Clinical Microscopy	140
Blood Cell Identification, Photographs	BCP, BCP2	Hematology and Clinical Microscopy	144
Hematology Automated Differential Series	FH1-FH4, FH9, FH10, FH13, FH16, FH17	Hematology and Clinical Microscopy	141
Virtual Body Fluid	VBF	Hematology and Clinical Microscopy	154
Bone Marrow Cell Differential	BMD	Hematology and Clinical Microscopy	144
Immunology	ANA, ASO, CRP, HCG, IM, RF/RFX, RUB/RUBX, IL, IG/IGX, S2, S4, S5, AHT, CCP, RDS, G, COVS	Immunology and Flow Cytometry	216-218, 220-222
Bacteriology	D	Microbiology	177
Mycology and Aerobic Actinomycetes	F	Microbiology	195
Limited Bacteriology	D1, D2, D3, D5, D6, D8, MC3, MC4, RMC	Microbiology	179-181, 183-184
Embryology	EMB	Reproductive Medicine	161
Sperm Count, Motility, Morphology, and Viability	SMCD, SM1CD, SM2CD	Reproductive Medicine	160
Semen Analysis	SC, SC1, PV, PV1, SM, SV, ASA	Reproductive Medicine	160
Toxicology	FTC, NOB, OFD, T, THCB, UDC, UT	Toxicology	100, 104-105, 109-111
Transfusion Medicine	J, JE1, EXM, EXM2, J1, JAT, JATE1	Transfusion Medicine	230-231, 233

Surveys Self-Reported Training Opportunities

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

Self-Reported Training Opportunities*

Program Name	Program Code	Source	Catalog Page(s)
Quality Management Tools			
QP231 - Non-Physician Care Team Satisfaction With Clinical Laboratory Services NEW	QP231	Expanded Participant Summary	27
QPB10 - Technical Competency Assessment of Body Fluid Review NEW	QPB10	Data Analysis and Critique	28
QPC10, QPC25 - Technical Competency Assessment of Peripheral Blood Smears	QPC10, QPC25	Data Analysis and Critique	29
QPD10, QPD25 - Technical Competency Assessment of Gram Stains	QPD10, QPD25	Data Analysis and Critique	30
Hematology and Clinical Microscopy			
Blood Cell Identification, Photographs	BCP, BCP2	Participant Summary	144
Bone Marrow Cell Differential	BMD	Participant Summary	144
Expanded Virtual Peripheral Blood Smear	EHE1	Participant Summary	149
Hematology Automated Differential Series	FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Participant Summary	141
Hematology—Basic	HE, HEP	Participant Summary	140
Hemoglobinopathy	HG	Participant Summary	145
Virtual Body Fluid	VBF	Participant Summary	154
Virtual Peripheral Blood Smear	VPBS	Participant Summary	149
Clinical Microscopy	CMP, CMMP, CMP1	Participant Summary	151-152
Microbiology			
Blood Parasite	BP	Participant Summary/Final Critique	199
Expanded Bacteriology	DEX	Participant Summary/Final Critique	178
Yeast	F1	Participant Summary/Final Critique	195
Parasitology	P	Participant Summary/Final Critique	198
Ticks, Mites, and Other Arthropods	TMO	Participant Summary	199
Worm Identification	WID	Participant Summary	199
Toxicology			
Drug Monitoring for Pain Management	DMPM	Participant Summary	112

*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) is the board certification program that involves continuous professional development and ensures that an American Board of Pathology (ABPath) 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 ABPath 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 CC Improvement in Medical Practice (IMP) (formerly Part IV) at the laboratory or the individual levels. Programs that meet IMP 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 IMP.

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.

Education Programs

Program Name	Program Code	Maximum AMA PRA CME Category 1 Credits Annually	Maximum CE Credits Annually	Format	Catalog Page
Autopsy Pathology*	AUP/AUP1	12.5	NA	Online (DigitalScope®)	301
Clinical Pathology Improvement Program*	CPIP/CPIP1	15	NA	Online	14
Digital Slide Program— Dermatopathology*	DPATH/DPATH1	15	NA	Online (DigitalScope)	302
Digital Slide Program in FNA*	FNA/FNA1	10	10	Online (DigitalScope)	311
Fine-Needle Aspiration Glass Slide	FNAG/FNAG1	10	10	Glass Slides	312
Forensic Pathology*	FR/FR1	12.5	12.5	Online	314
Hematopathology Online Education*	HPATH/HPATH1	12.5	12.5	Online (DigitalScope)	150
Informatics Essentials for Pathologists*	ICBE/ICBE1	4	NA	Online	15
Nongynecologic Cytopathology Education**	NGC/NGC1	25	25	Glass Slides With Online Cases (DigitalScope)	310
Neuropathology Program*	NP/NP1	10	NA	Online (DigitalScope)	304
Gynecologic Cytopathology PAP Education Program***	PAPCE/APAPCE PAPJE/APAPJE PAPKE/APAPKE PAPLE/APAPLE PAPME/APAPME Series 1 or 2	8	8	Glass Slides	306
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	305

Continued on the next page

*Program is available for purchase online. Go to cap.org and choose the Education 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 the glass slides.

Education Programs continued

Program Name	Program Code	Maximum AMA PRA CME Category 1 Credits Annually	Maximum CE Credits Annually	Format	Catalog Page
Performance Improvement Program in Surgical Pathology	PIP/PIP1	40	NA	Glass Slides With Online Cases (DigitalScope)	283
Online Performance Improvement Program in Surgical Pathology*	PIPW/PIPW1	40	NA	Online (DigitalScope)	282
Nongynecologic Cytopathology Intraoperative Touch Imprint/ Crush Preparation Program*	TICP/TICP1	10	10	Online (DigitalScope)	309
Virtual Biopsy Program*	VBP/VBP1	25	NA	Online (DigitalScope)	284

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

System Requirements

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

For the most up-to-date information on system requirements, go to cap.org and click **Browser and Operating System Requirements**, located at the bottom of the homepage. 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.

Identify and Control Risks in Your Laboratory

The QMED online course Risk Management provides a realistic case study as well as video commentary by CAP pathologists, inspectors, and ISO 15189 assessors. It shows you how to:

- Find, prioritize, and control risks
- Use common tools
- Assess how your laboratory's culture is affecting risks

Includes an Excel-based [Risk Register Tool](#), which helps you prioritize and keep track of risks.

See the Continuing Education section.
Add QMEDRISK to your order.

“Managing risks is a mindset that needs to be present throughout the laboratory... This course will help you manage risk to a level that is acceptable to our physicians, our patients, and our administration.”

Dr. Gaurav Sharma, MD, FCAP
Division Head of Regional Laboratories
Henry Ford Health System

New for 2023: Access CPIP cases when and where it's convenient via PC or personal mobile device.

Pathologists can keep abreast of current scientific knowledge with interactive, case-based learning to address both common and esoteric issues faced in the laboratory.

CP/IP supports pathologists who do principally clinical pathology as well as those who do primarily anatomic pathology but cover clinical pathology. A diverse portfolio of real-life case scenarios, including images and clinical background, help pathologists to stay current on issues and advances in the laboratory.

Designed for pathologists, by pathologists. Each case is developed and peer-reviewed, ensuring learnings are practical and easily applied to work. Thought-provoking questions with feedback and multiple choice knowledge checks assess and confirm diagnostic skills. Participants may apply 1.25 CME credits for each CPIP toward the ABPath's Continuing Certification (CC) requirements.

Clinical Pathology Improvement Program CP/IP/CP/IP1

Program Name	Program Code	Cases per Year
	CP/IP/CP/IP1	
Online cases in clinical pathology	■	12

Consider CPIP for:

- Medical directors seeking to continuously improve the clinical pathology knowledge and collective skills of their pathology team.
- Pathologists with clinical and/or laboratory management responsibilities.
- Pathologists seeking CME CC credits in clinical pathology.
- Subspecialty clinical pathologists who need to keep current.

Discipline	Case Schedule (subject to change)	Month 2023
Laboratory Management	Occurrence management	January
Chemistry	Hypoxemia	February
Transfusion Medicine	Merging laboratories and implications for blood banks	March
Microbiology	<i>C. difficile</i>	April
Transfusion Medicine	Platelet refractoriness	May
Molecular Pathology	Fetal aneuploidy	June
Chemistry	Hemoglobin A _{1c}	July
Microbiology	Microbiology checklist breakpoints	August
Hematology	Monocytosis	September
Cytogenetics	B-Lymphoblastic leukemia/lymphoma	October
Molecular Pathology	Pitfalls/limitations of molecular methodologies	November
Transfusion Medicine	von Willebrand Disease	December

To learn more visit cap.org and search CPIP.

Program Information

- CPIP - One online clinical laboratory case per month
- CPIP1 - Additional pathologist (within the same institution) reporting option with CME credit; must order in conjunction with CPIP
- Earn a maximum of 15 CME credits (*AMA PRA Category 1 Credits™*) per year
- Twelve cases per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Informatics Essentials for Pathologists (ICBE/ICBE1)

Every pathologist, no matter their background or career track, will take a leadership role in the laboratory, whether as section head, project leader, or laboratory medical director. The pathologist's role involves guiding a complex interface between technology, staff, workflow processes, and data management. The Informatics Essentials for Pathologists program prepares pathologists to keep current on technology challenges faced by pathologists in their practice. With a focus on practical application of informatics principles to real-life scenarios, this case-based program offers content authored by pathologists, for pathologists. It helps pathologists apply their learnings to their decisions to implement meaningful changes for present and future problems. Issues in practice addressed include topics such as cybersecurity, software implementations and upgrades, laboratory test ordering issues, regulatory compliance, and analysis of patient population data through laboratory testing. Participants may earn CME credits for each case completed.

Informatics Essentials for Pathologists ICBE/ICBE1

Program Name	Program Code	Cases per Year
	ICBE/ICBE1	
Online cases in clinical informatics	■	4 (One per quarter. See below.)

Additional Information

Consider the ICBE program if you are a:

- Medical director seeking to improve the informatics knowledge and collective skills of the pathology team.
- Pathologist with an interest in learning informatics for leadership roles.
- Pathologist with informatics and/or laboratory management responsibilities.
- Pathologist with section head responsibility wanting to use informatics to improve operations in their team.
- Pathologist seeking CME credits in clinical informatics.

Program Information

- ICBE - One online clinical informatics case per quarter
- ICBE1 - Reporting option with CME credit for each additional pathologist (within the same institution); must order in conjunction with ICBE
- Earn a maximum of 4 CME credits (AMA PRA Category 1 Credits) per year
- Four cases per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Case Schedule*	Month 2023
Identifying the best telepathology solution for your laboratory	February
Implementing a digital pathology system	May
Investigating barcode misreads	August
Preventing cyberattacks	November

*Subject to change

To learn more, visit cap.org and search Informatics.

Competency Assessment Hub

An updated program with new features helps you avoid the deficiency.

Competency Assessment Hub

Competency Assessment Hub replaces our Competency Assessment Program with a single central utility for laboratories to ensure they meet CLIA competency assessment requirements and fulfill laboratory professional continuing education (CE) needs. Built on MediaLab's platform, the CAP's Competency Assessment Hub helps keep you in compliance by managing your personnel's competency assessment performance and records.

- **New interface.** Competency Assessment Hub's updated interface is intuitive and easy to use.
- **New health care network access.** This additional option can offer your entire network access under a single subscription.
- **New question bank.** Design your own assessment courses to demonstrate problem-solving skills customized to your laboratory's written procedures.
- **High-quality Pro courses.** Your laboratory staff can earn PACE CE credits in a variety of disciplines and courses.
- **Same tools.** ChecklistBuilder, CourseBuilder, and Competency Profiles can ensure convenient documentation for all six areas of competency as defined by CLIA and the CAP Laboratory Accreditation Program.
- **Same reporting.** With just a few clicks, administrators can stay on top of documentation and records to track progress toward required dates and training for all staff members.
- **Same instrument-specific checklists.** More than 130 standard checklists help you meet your laboratory's documentation needs.
- **Easy access.** The Competency Assessment Hub is cloud based, so it's available 24/7 from any PC, laptop, or tablet—wherever you have an Internet connection.

Add Safety & Compliance Courses Especially Developed for the Laboratory

As an add-on option, Competency Assessment Hub offers a package of seven complementary safety and compliance courses with PACE CE credits—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

With the Competency Assessment Hub, you can keep your laboratory organized and inspection-ready every day of the year. Choose the Competency Assessment Hub subscription that best fits your laboratory or network. Please refer to the ordering information and course descriptions on the following pages. For more information, visit cap.org and choose Competency Assessment Hub from the Education Main Page via the Education tab.

Number of Users*	Competency Assessment Hub	Competency Assessment Hub With Optional Safety & Compliance Courses**
2 to 50	CA0050	CA0050 + XCA0050
51 to 250	CA0250	CA0250 + XCA0250
251 to 500	CA0500	CA0500 + XCA0500
501 to 1000	CA1000	CA1000 + XCA1000
1001 to 1500	CA1500	CA1500 + XCA1500

*For subscriptions for single users or more than 1500 users, please contact the CAP for more information.

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

2023 Pro Courses

2

Continuing Education

Blood Bank/Transfusion Medicine

- ABO typing discrepancies
- Antibody screen and identification
- Direct antiglobulin test
- Blood components—storage, handling, and selection
- Transfusion reactions
- Quality control in the blood bank laboratory

Chemistry

- Cardiac biomarkers
- Liver and renal testing
- Electrolytes, acid base, and anion gap
- Clinical toxicology
- Therapeutic drug monitoring
- Chemistry QC, calibration, and reportable range

Hematology/Coagulation

- Erythrocyte morphology
- Erythrocyte inclusions
- White blood cells
- White blood cell inclusions
- Common coagulation tests
- Platelet testing, morphology, and disorders

Histology

- Immunohistochemistry—part 1
- Immunohistochemistry—part 2
- Special stains
- Histology specimen handling
- Quality management in histology
- Safety issues in the histology laboratory

Immunology

- Hepatitis testing
- Qualitative HIV testing
- Human chorionic gonadotropin and fetal fibronectin
- Rapid serology kit tests
- Molecular amplification methods for detection of infectious diseases
- Monitoring the testing process in immunology

Microbiology

- Gram stain: organism detection and differentiation
- Urine and body fluid cultures
- Genital tract pathogens
- Blood cultures
- Microbiology of the gastrointestinal tract
- The microbiology of wounds

Phlebotomy/Specimen Processing

- Venipuncture
- Challenges of phlebotomy: pediatric blood collection, alternate sites, and difficult draws
- Phlebotomy professionalism and ethics
- Common pitfalls in specimen processing
- Specimen collection for workplace urine drug testing programs and forensic drug and alcohol testing
- General specimen handling and transportation requirements

Point-of-Care Testing

- Urine dipstick
- Whole blood prothrombin time and INR (PT/INR) testing
- Whole blood glucose testing
- Cardiac biomarkers
- Blood gas testing
- Provider-performed microscopy and limited waived testing

Quality Programs/Management

- New instrument method validation
- Monitoring the quality control program
- Document control
- Investigating occurrences (occurrence reports, root cause analysis, and corrective action)
- Competency evaluation
- Development and implementation of a quality management program

Safety

- General laboratory safety
- Bloodborne pathogens
- Laboratory waste and spill management
- Fire and electrical safety
- Hazardous chemicals
- SARS-CoV-2/COVID: biosafety precautions
- Ergonomics

Urinalysis/Body Fluids

- Physical and chemical urinalysis
- Microscopic urinalysis—part 1
- Microscopic urinalysis—part 2, crystals and casts
- Cerebrospinal fluid analysis
- Serous and synovial fluids
- Semen analysis

Safety & Compliance Courses

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

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

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

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

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

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

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

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

Enhance the culture of patient safety in your laboratory.

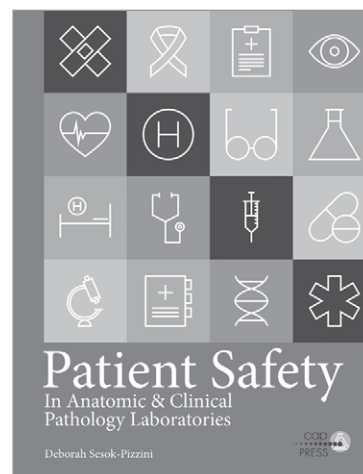
This informative guide will not only help you connect the culture of patient safety in your laboratory to the overall goals of your health care enterprise, but it will also help you:

- Improve colleague communication, handoffs, and transitions
- Use technology to improve laboratory patient safety
- Learn how cognitive bias can contribute to patient safety errors
- 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 it 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™ 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
- Self-assess your current QMS against international quality standards
- Interpret ISO 15189 requirements
- Perform internal audits using tracer audit and process audit methods
- Implement and refine occurrence management with root cause analysis

Course Information

- Delivered online via interface that allows you to pause, resume where you left off, and learn at your own pace
- Mobile-friendly so that you can learn where and when you want
- Accessible a minimum of twelve months
- Includes continuing education (CE) credit
- Individual learners can use their own login and will have their own bookmarking when they leave and return to the course

About the Courses

Risk Management

Order *QMEDRISK*

Learn how the different elements of the quality management system—eg, internal audit, data analysis—play a role in identifying and controlling risk. Learn best practices for managing your risks, as well as practical tools that apply to all phases of the risk management process. Included is a case example showing how high-level risk assessment can be integrated into management review.

4 CE credits available

Quality Culture

Order *QMEDQCUL*

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 *QMEDROOT*

Learn real-world methodology to conduct a root cause analysis, along with the tools necessary to implement it. You will even perform key steps based on a participant case study. Choose further examples to study based on the kind of laboratory in which you work, eg, hospital, reference, or contract research organization. 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 QMEDMIST*

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 QMEDAUDT*

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 QMEDMGMT*

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 QMEDMANL*

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 QMEDDOCU*

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. The CAP's ISO 15189 assessors provide commentary on common pitfalls and best practices.

2 CE credits available

QMS Implementation Roadmap*Order QMEDROAD*

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 QMEDWALK

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

Take your quality system to the next level

The CAP 15189SM Accreditation Program provides accreditation to ISO 15189, an international standard to recognize quality and competence in medical laboratories.

Our program offers:

- A distinct approach, using the CAP Laboratory Accreditation Program as a foundation
- Dedicated, expert assessors who specialize in ISO 15189
- Unique, tailored education and quality tools developed with pathologist input
- A personalized, flexible accreditation process

Contact us to learn more today at cap15189@cap.org.



Insight at a Glance.

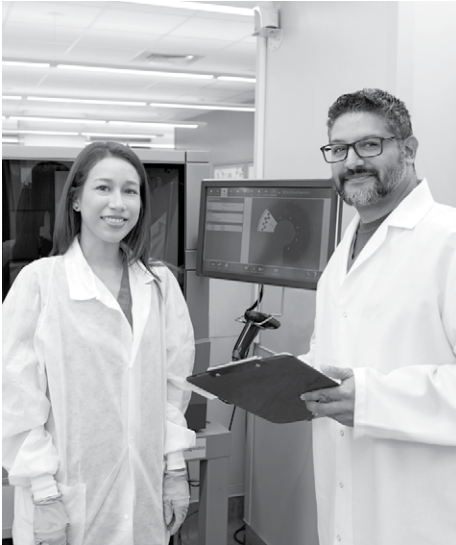


In just seconds, the **CAP's Performance Analytics Dashboard** provides valuable insights into your laboratory's performance, so you can focus energy on areas that need immediate attention while filtering out distractions. Updated daily, this complimentary performance monitoring tool offers a single comprehensive view of your CAP proficiency testing (PT) results and accreditation status. Reduce the stress of managing today's laboratory with fast access to performance data for a single laboratory or network.

View your laboratory's Performance Analytics Dashboard by accessing e-LAB Solutions Suite from cap.org.

3

Quality Management Tools



Manage the competency assessment of your laboratory staff.

Learn how the CAP can help you meet your regulatory requirements for assessment of staff technical competency for:

- Body fluids (QPB10).
- Gram stains (QPD10/QPD25).
- Peripheral blood smears (QPC10/QPC25).

Quality Management Tools

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New Programs **NEW**

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Discontinued Programs

- Antimicrobial Susceptibility Testing: Monitoring and Trend Analysis (QP211)
- Laboratory Staffing Ratios (QP222)

Quality Management Tools

3

Quality Management Tools

Benchmark outside of your laboratory.

The CAP's Quality Management Tools can improve your total testing process by providing a convenient solution to measure and document improvements to processes within your laboratory's quality management system.

- **Short-Term Quality Studies and Competency Assessments** provide opportunities to check performance indicators to keep your laboratory and staff current.
- **Continuous Quality Monitors** examine performance indicators such as turnaround time and patient identification errors throughout the year.

Available for both clinical and anatomic pathology laboratories, Quality Management Tools examine preanalytic, analytic, and postanalytic phases, helping participants to:

- **Establish realistic goals** by comparing performance against institutions with comparable demographics
- **Monitor progress** through unique and robust quality indicators on a periodic basis
- **Make effective decisions** based on practical and in-depth quality management reports
- **Improve efficiencies** to allow time for more patient-centric activities
- **Easily integrate** quality improvement into your daily work processes
- **Meet checklist requirements** of the CAP Laboratory Accreditation Program and standards of The Joint Commission.

Purchase combination packages and save.

2023 Short-Term Quality Studies and Competency Assessments

Module/Package	Program Code
Individual QP Studies	QP231, QPB10, QPC10, QPD10, QPC25, QPD25
Four Quality Management Tools (QP231, QPB10, QPC10, QPD10)	PRO

2023 Continuous Quality Monitors

Module/Package	Program Code
Individual Continuous Quality Monitors	QT1, QT2, QT3, QT4, QT5, QT7, QT8, QT10, QT15, QT16, QT17
Clinical Pathology Module—Includes all 10 CP QT Monitors	QTC
Combined CP/AP Module—Includes all 11 QT Monitors	QTP

Complement your quality management program needs.

	Testing Phase			Discipline		Purpose					
	Preanalytic	Analytic	Postanalytic	Anatomic Pathology	Clinical Pathology	Turnaround Time	Patient Safety	Microbiology	Transfusion Medicine	Chemistry/Hematology	Customer Satisfaction
Select from the following studies to support your quality improvement initiatives.											
Non-Physician Care Team Satisfaction With Clinical Laboratory Services (QP231) NEW	■	■	■		■	■					■
Technical Competency Assessment of Body Fluid Review (QPB10) NEW		■			■		■			■	
Technical Competency Assessment of Peripheral Blood Smears (QPC10/QPC25)		■			■		■			■	
Technical Competency Assessment of Gram Stains (QPD10/QPD25)		■			■		■	■			
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)	■	■	■	■			■				■
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, laboratory staff and leaders to regularly collect and analyze performance data (PI.01.01.01, PI.03.01.01, LD.03.06.01, LD.03.07.01). CLIA requires laboratories to monitor, assess, and correct problems identified in preanalytic, analytic, and postanalytic systems (§493.1249, §493.1289, §493.1299).

Short-Term Quality Studies and Competency Assessments

Implement quality monitoring—Use these short-term, comprehensive quality studies and competency assessments to learn how to start monitoring and measuring key processes that may not be commonly monitored in your laboratory. These assessments also analyze emerging industry trends and topics to keep your laboratory ahead of the curve.

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

Strengthen your quality assessment expertise—The CAP's pathologist experts provide in-depth discussions 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 for further analysis.

Participating laboratories receive:

- User Guide
- Templates and instructions for data collection
- Individual report and report interpretation guide
- Expanded Participant Summary for competency programs with all-laboratories study results and case information, or Data Analysis and Critique that includes data distributions and initial analysis of laboratory practices and commentaries from pathologist experts on improvement opportunities

COLLEGE of AMERICAN PATHOLOGISTS							Technical Competency Assessment on Peripheral Blood Smear Review Quality Management Report: Institution Report			QP20XX
Institution score summary										Performance Distribution
Case	No. of tech. scores	Min-max scores	Average score %	No. Labs	All Institutions % (all of total)	90th Percentile (of total)	50th Percentile (of total)	10th Percentile (of total)		
1	10	80-100	82.0	91	46.7	67.5	83.0			
2	10	80-100	88.0	91	60.0	77.5	88.0			
3	11	40-100	84.4	88	60.0	80.0	92.0			
4	10	70-100	98.0	91	66.0	93.0	100.0			
5	10	80-100	88.0	90	67.3	81.1	88.3			
Avg tech. scores	10	72.0-88.0	83.8	89	67.4	78.9	85.8			
Technologist score summary										
Technologist	Case 1 AML with monocytic differentiation	Case 2 CML	Case 3 Microangiopathic hemolytic anemia	Case 4 Normal	Case 5 CMML	Average technologist score				
1	60	100	100	70	90	84.0				
2	80	80	—	100	90	87.5				
3	90	80	80	100	90	92.0				
4	60	100	80	100	90	86.0				
5	60	80	80	100	90	82.0				
6	50	100	100	100	80	86.0				
7	80	100	100	90	90	88.0				
8	60	80	40	100	80	72.0				
9	90	80	80	100	90	82.0				
10	60	80	100	100	90	86.0				
Tech. average	62.0	88.0	84.4	96.0	88.0	83.8				

Note: Scores are based on a maximum of 100 points.
 CAP Member: 133660
 Report Date: 04/20/21
 CAP Member: 1111-01-01
 Page 1 of 1

Non-Physician Care Team Satisfaction With Clinical Laboratory Services QP231

Introduction

Assessing non-physician satisfaction with laboratory services provides valuable information for targeting quality improvement activities. The CAP's Laboratory Accreditation Program requires institutions to measure customer satisfaction. This study is intended to assist laboratory management in measuring satisfaction of services by non-physician medical staff that interact with the laboratory, such as bedside nurses, nurse practitioners, and other advanced practice nurses, physician assistants, radiology technologists, clinical pharmacists, and respiratory therapists. Weekly customer feedback reports may assist laboratory staff to timely address reported customer issues, identify areas for improvement, and understand client needs to address to improve satisfaction by non-physician care team members with laboratory services.

Enrollment will meet CAP Checklist Statements GEN.20316, GEN.20335, and assist in meeting The Joint Commission Standards and Elements of Performance for LD.03.01.01, leaders regularly evaluate the culture of safety and quality, and LD.03.02.01, the laboratory uses data and information to guide leadership decisions regarding safety and quality of laboratory services.

Objectives

This Quality Management Tool (QMT) will assess non-physician satisfaction with clinical laboratory services and help find areas to target for improvement. The focus of this QMT is on care providers other than physicians who frequently order tests, access laboratory results, and interact with laboratory staff. Participation in this QMT will assist your organization in meeting accreditation requirements, evaluate laboratory services, and understand client needs to ensure future satisfaction of care team members with your services.

Data Collection

The laboratory will send a request to their non-physician health care team customers to complete a satisfaction survey regarding their experience across various clinical laboratory service categories including turnaround time, critical value notification, diagnostic accuracy, communication, accessibility, responsiveness, and courtesy.

The surveys are provided to program enrollees in two formats: Online distribution with direct survey data transmission to the CAP (preferred), or via hard-copy response forms requiring the study coordinator to manually enter all survey respondent data. Participants who use the online survey may submit an unlimited number of electronic survey responses, and will receive cumulative customer feedback reports in e-LAB Solutions Suite each week of the study period. Participants who utilize the hard-copy distribution option may submit up to 50 non-physician healthcare team surveys. Participants will also provide responses to a general practices questionnaire.

Performance Indicators

To meet your staff technical competency assessment requirements:

- Overall mean satisfaction score for clinical laboratory services
- Mean satisfaction scores for specific services

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

Technical Competency Assessment of Body Fluid Review QPB10

Introduction

Laboratories receive a variety of body fluids for evaluation that technologists review. Technical staff must maintain their identification skills of these specimens, and laboratories are required to provide education, and assess competency and consistency of reporting morphology amongst staff of body fluid cell identification on an annual basis.

Objectives

This study will 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 body fluid cell counts and identification of other body fluid features. Results of this study will assist individuals, the laboratory director, and manager with areas to focus on for improvement and education.

The study will help management meet applicable Clinical Laboratory Improvement Amendments (CLIA), CAP Laboratory Accreditation, and The Joint Commission laboratory requirements for personnel competency requirements and consistency of reporting amongst staff.*

Data Collection

Technologists will access a series of online, whole slide images to assess their ability to perform cell differentials on Wright-stained body fluids and identify miscellaneous cells and inclusions in cytocentrifuged preparations. Participants will provide additional information about their competency assessment programs, continuing education, and professional background.

Information will be collected from each site regarding minimum qualifications and experience requirements of their technologists, their ongoing educational programs and requirements, as well as relevant procedures and policies.

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 cells, and other items present in normal and abnormal cases in comparison to consensus responses
- Overall laboratory score based on the facility's individual technologist performance(s)

Reports are provided at institution and technologist levels. A summary of responses to the general questions will be provided for participants.

Program Information

To meet your staff technical competency assessment requirements:

- Each QPB10 order includes kits with result forms for up to 10 technologists
- Multiple kits may be purchased to accommodate quantity needed

*Applicable Requirements

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Checklist statements GEN.55500 Competency Assessment of Testing Personnel, and HEM.35566, consistency of morphologic observation among personnel performing blood fluid cell differentials at least annually.
- The Joint Commission Standards HR. 01.05.03, 01.06.01, 01.07.01, LD.04.05.03, and 04.05.05 regarding in-service training, continuing education, competency, and evaluation of hospital personnel

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

Technical Competency Assessment of Peripheral Blood Smears QPC10/QPC25

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.

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 assessments. The evaluation provided will assist in the construction of individual educational programs for the technical staff and show areas that need focused review and improvement. The study will help management meet applicable CLIA, CAP Laboratory Accreditation, and The Joint Commission laboratory requirements for personnel competency requirements and consistency of reporting amongst staff.*

Data Collection

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. Technologists will provide information about their continuing education and professional background. Information will be collected from each site regarding their institution's minimum continuing education requirements for their technologists in hematology and relevant procedures and policies related to peripheral blood smear assessment.

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)

Reports are provided at institution and technologist levels. A summary of responses to the general questions will be provided for participants.

Program Information

To meet your staff technical competency assessment requirements:

- Result forms for up to 10 technologists (QPC10)
- Result forms for up to 25 technologists (QPC25)
- Multiple kits may be purchased to accommodate quantity needed

*Applicable Requirements

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Checklist statements GEN.55500 Competency Assessment of Testing Personnel
- HEM.34400, consistency of morphologic observation among personnel performing blood cell microscopy at least annually
- The Joint Commission Standards HR.01.05.03, 01.06.01, 01.07.01, LD.04.05.03, and 04.05.05 regarding in-service training, continuing education, competency, and evaluation of hospital personnel

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

Technical Competency Assessment of Gram Stains QPD10/QPD25

Introduction

Gram stain is a commonly performed bacterial stain in clinical microbiology laboratories. It is often the starting point guiding microbiological workup and initial clinical diagnosis and therapy. It is important for technologists who read Gram stains to provide an accurate interpretation based on reaction type and microscopic morphology in order to provide presumptive identifications and quantification of bacteria and fungi in clinical specimens.

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 morphological assessment of Gram stains. Participation in this study will help management assess the technologist's ability to evaluate Gram stains using online, whole slide images. These cases provide a standardized review and evaluation for each technologist. The study will help management meet applicable CLIA, CAP Laboratory Accreditation, and The Joint Commission laboratory requirements for personnel competency requirements and consistency of reporting amongst staff.*

Data Collection

A series of online, whole slide images of Gram stained smears using DigitalScope technology will be provided to each participating institution to assess technologists' ability to detect various microorganisms. Technologists will provide information about their work experience related to Gram stains, continuing education, and professional background. Information will be collected from each laboratory site to provide information about their continuing education requirements in microbiology, and relevant laboratory procedures and policies related to Gram stain assessment.

Performance Indicators

- Individual technologist score (%) for each Gram stain case, and overall based on a standardized competency assessment method
- Overall laboratory score based on the facility's individual technologist performance(s)

Reports are provided at institution and technologist levels. A summary of responses to the general questions will be provided for participants.

Program Information

To meet your staff technical competency assessment requirements:

- Result forms for up to 10 technologists (QPD10)
- Result forms for up to 25 technologists (QPD25)
- Multiple kits may be purchased to accommodate quantity needed

*Participation in this study helps laboratories meet:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Microbiology Checklist statement MIC.11060, Culture Result Reporting: Personnel performing Gram stains for this purpose are subject to competency assessment
- CAP Laboratory Accreditation Program Microbiology Checklist statement MIC.11350, Morphologic Observation Evaluation: The laboratory evaluates consistency of morphologic observation among personnel performing Gram, trichrome and other organism stains at least annually
- CAP Laboratory Accreditation Program Checklist statement GEN.55500, Competency Assessment of Testing Personnel
- The Joint Commission Standards HR. 01.05.03, 01.06.01, 01.07.01, LD.04.05.03, and 04.05.05 regarding in-service training, continuing education, competency, and evaluation of hospital personnel

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

Continuous Quality Monitors

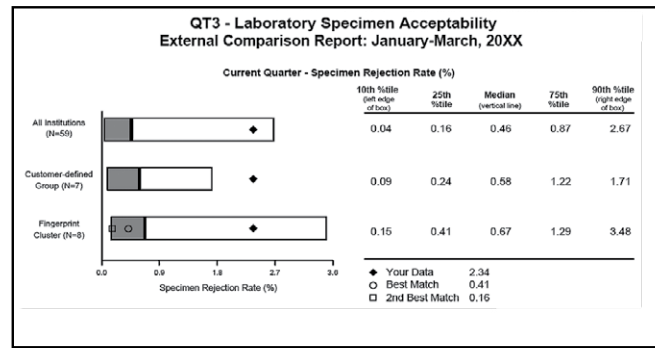
Use these programs to:

- Identify and continuously monitor quality improvement over time
- Measure the effectiveness and impact of implemented changes in key processes

How It Works

Step 1:

Establish realistic benchmarks by comparing your laboratory to others like yours.



Step 2:

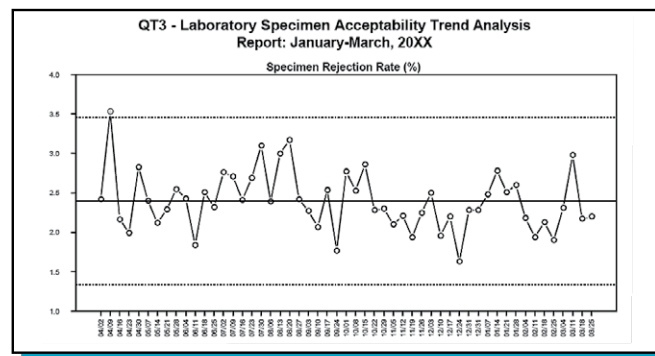
Identify improvement opportunities.

Specimen Rejection Reasons	Your Data (%)	Aggregate Percent*
Specimen hemolyzed	49.5	22.2
Specimen clotted	19.1	14.7
Wrong collection container	8.1	2.0
Contaminated specimen (IV fluid dilution)	7.6	1.9
Requisition does not match specimen	5.6	1.5
Unlabeled specimen	5.6	0.7
Wrong temperature	1.2	0.6
Insufficient specimen quantity	1.2	12.6
Other reason	1.1	32.8
Mislabeled specimen	0.5	1.0
Specimen lost/not received	0.4	1.8
Incomp. labeled spec./inadeq. filled-out form	0.3	0.8
Unacceptable variance (delta check)	0.0	5.7
Lipemia or icteric specimen	0.0	0.8
Age of specimen (too old)	0.0	0.7
Wrong date or time collection error	0.0	0.2

* This percent is a breakdown of the 58,475 rejected specimens for this quarter.

Step 3:

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



The individual reports include performance of quality indicators over time, benchmarking information, trends, and suggested areas for improvement.

Participating laboratories receive:

- User Guide
- Templates and instructions for data collection
- Quarterly reports that include fingerprint clusters, customer-defined groups, and all institution comparisons
- Opportunity to connect with your counterparts enrolled in the same program through the Peer Directory

Patient Identification Accuracy QT1

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

Objectives

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

Data Collection

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

Performance Indicator

- Wristband error rate (%)

Performance Breakdown

- Breakdown of wristband error types (%)

Blood Culture Contamination QT2

Despite advances in blood culture practices and technology, false-positive blood culture results due to contaminants continue to be a critical problem. Blood culture contamination rate, the primary indicator of preanalytic performance in microbiology, is associated with increased length of hospital stay, additional expense, and the administration of unnecessary antibiotics.

The CAP and other accrediting organizations require you to monitor and evaluate key indicators of quality for improvement opportunities. Use this monitor to help meet CAP Laboratory Accreditation Checklist statements MIC.22630 and MIC.22635: "The laboratory must determine and regularly review the number of contaminated cultures. Tracking the contamination rate and providing feedback to units and persons drawing cultures is one method that 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. (diphtheroids); 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 in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next 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 study may assist the laboratory in monitoring compliance with CAP Laboratory Accreditation Program General Checklist statement GEN.40825: "There is a system to positively identify all patient specimens, specimen types, and aliquots at all times."

Objective

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

Data Collection

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

Performance Indicator

- Specimen rejection rate (%)

Performance Breakdown

- Breakdown of reasons for rejection (%)

In-Date Blood Product Wastage QT4

Blood for transfusion is a precious resource. At a minimum, wastage of blood that is not out-of-date represents a financial loss to the health care system. More ominously, systemic wastage of blood may reflect an environment of care that is out of control and 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

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

Performance Breakdown

- Breakdown of circumstances of wastage (%)

Look in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next quarter.

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 study helps laboratories meet CAP Laboratory Accreditation Program Cytopathology Checklist statements CYP.01900, 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 in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next 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 Professionalism and courtesy
 - o Waiting time
 - o Patient privacy
 - o Patient comfort
 - o Laboratory hours of operation

Stat Test Turnaround Time Outliers QT8

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

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

- Stat test TAT outlier rate (%)

Performance Breakdowns

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

Look in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next 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 (%)

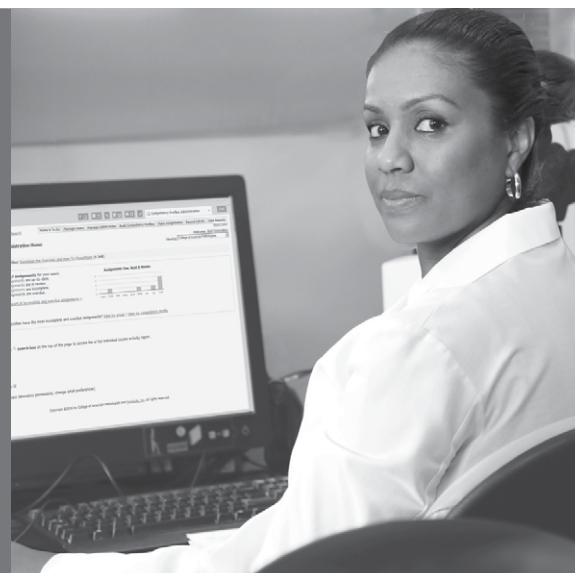
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Troponin Turnaround Times QT15

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 has multiple 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 institutional threshold for the following time intervals:

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

Look in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next quarter.

Corrected Results QT16

The CAP developed this 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 statements GEN.20316, 41310, 41312, and The Joint Commission standard 02.12.01, Elements of Performance 9 and 10, 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 statements GEN.20316, 40700, 40725, 40750 for test order and related information 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

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

Performance Breakdown

- Breakdown of error types (%)

Look in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next quarter.

4

Quality Cross Check



**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.
- Evaluate multiple instruments performing tests for a wide range of respiratory viruses, including influenza, RSV, and SARS-CoV-2 (ID3Q).

New Programs

NEW

Quality Cross Check—Nucleic Acid Amplification, Respiratory Limited (ID3Q) 49

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.

4

Quality Cross Check

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 (PT) 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 programs 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 program CZ analytes on pages 58-60	■	3

This program does not meet regulatory requirements for proficiency testing; see program CZ on pages 58-60. For additional information about the Quality Cross Check program, see page 40.

Quality Cross Check—B-Type Natriuretic Peptides BNPQ

Analyte	Program Code	Challenges per Shipment
	BNPQ	
BNP	■	3
NT-proBNP	■	3

This program does not meet regulatory requirements for proficiency testing; see program BNP or BNP5 on page 63. For additional information about the Quality Cross Check program, see page 40.

Quality Cross Check—Whole Blood Glucose WBGQ

Analyte	Program Code	Challenges per Shipment
	WBGQ	
Glucose	■	3

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

Program Information

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

Program Information

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

Program Information

- Three 2.0-mL whole blood specimens
- Report up to 30 instruments
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year



Quality Cross Check—Body Fluid Chemistry FLDQ

Analyte	Program Code	Challenges per Shipment
	FLDQ	
Albumin	■	3
Amylase	■	3
CA19-9	■	1
Carcinoembryonic antigen (CEA)	■	1
Cholesterol	■	3
Creatinine	■	3
Glucose	■	3
Lactate	■	3
Lactate dehydrogenase (LD)	■	3
pH	■	3
Protein, total	■	3
Triglycerides	■	3
Urea nitrogen	■	1

This program does not meet regulatory requirements for proficiency testing; see program FLD on page 76. For additional information about the Quality Cross Check program, see page 40.

Program Information

- Three 3.0-mL simulated liquid body fluid specimens in duplicate
- Report up to three instruments
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Quality Cross Check—Hemoglobin A_{1c} GHQ

Analyte	Program Code	Challenges per Shipment
	GHQ	
Hemoglobin A _{1c}	■	3

This program does not meet regulatory requirements for proficiency testing; see program GH5 on page 67. 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

Quality Cross Check—Cardiac Markers CRTQ

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

This program does not meet regulatory requirements for proficiency testing; see program CRT on page 64. For additional information about the Quality Cross Check program, see page 40.

Program Information

- 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)	■	3

This program does not meet regulatory requirements for proficiency testing; see program ING on page 90. 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
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

4

Quality Cross Check

World-class recognition deserves to be displayed.



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

Blood Gas, Critical Care, and Oximetry

Quality Cross Check—Blood Oximetry SOQ

Analyte	Program Code	Challenges per Shipment
	SOQ	
Carboxyhemoglobin	■	3
Hematocrit, estimated	■	3
Hemoglobin, total	■	3
Methemoglobin	■	3
Oxyhemoglobin	■	3

This program does not meet regulatory requirements for proficiency testing; see program SO on page 98. 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	Program Code				Challenges per Shipment
	AQQ	AQ2Q	AQ3Q	AQ4Q	
Calcium, ionized	■	■	■	■	3
Chloride	■	■	■	■	3
Hematocrit	■	■	■	■	3
Hemoglobin, estimated	■	■	■	■	3
Lactate	■	■	■	■	3
Magnesium, ionized	■	■			3
pCO ₂	■	■	■	■	3
pH	■	■	■	■	3
pO ₂	■	■	■	■	3
Potassium	■	■	■	■	3
Sodium	■	■	■	■	3
Creatinine		■		■	3
Glucose		■		■	3
Urea nitrogen (BUN)		■		■	3

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 programs AQ and AQ2-AQ4 on page 96. For additional information about the Quality Cross Check program, see page 40.

Program Information

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

Hematology and Clinical Microscopy

Quality Cross Check—Hematology FH3Q, FH4Q, FH9Q, FH13Q

Analyte/Procedure	Program Code				Challenges per Shipment
	FH3Q	FH4Q	FH9Q	FH13Q	
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	■	■	■	■	3
Red blood cell count	■	■	■	■	3
WBC differential	■	■	■	■	3
White blood cell count	■	■	■	■	3

These programs do not meet regulatory requirements for proficiency testing; see the FH Series on page 141. For additional information about the Quality Cross Check program, see page 40.

Program Information

- FH3Q, FH4Q, FH9Q, FH13Q - Three 2.5-mL whole blood specimens in vials with pierceable caps
- Report up to three instruments
- For method compatibility, see instrument matrix on page 143
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Quality Cross Check—Reticulocyte RTQ, RT3Q, RT4Q

Instrument/Method	Program Code			Challenges per Shipment
	RTQ	RT3Q	RT4Q	
Abbott Alinity hq, Abbott Cell-Dyn 4000, Sapphire, Siemens ADVIA 120/2120, and all other automated and manual methods	■			3
Coulter Gen-S™, HmX, LH 500, LH 700 series, MAXM, STKS, UniCel DxH series		■		3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-L series, XN-series (includes RL App), XT-2000i, XT-4000i			■	3

These programs do not meet regulatory requirements for proficiency testing; see the RT Series on page 146. For additional information about the Quality Cross Check program, see page 40.

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

Quality Cross Check—Urinalysis CMQ

Analyte	Program Code	Challenges per Shipment
	CMQ	
Bilirubin	■	3
Blood or hemoglobin	■	3
Glucose	■	3
hCG urine, qualitative	■	3
Ketones	■	3
Leukocyte esterase	■	3
Nitrite	■	3
Osmolality	■	3
pH	■	3
Protein, qualitative	■	3
Reducing substances	■	3
Specific gravity	■	3
Urobilinogen	■	3

This program does not meet regulatory requirements for proficiency testing; see programs CMP and CMP1 on page 151. For additional information about the Quality Cross Check program, see page 40.

Program Information

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

Quality Cross Check—Occult Blood OCBQ

Analyte	Program Code	Challenges per Shipment
	OCBQ	
Occult blood	■	3

This program does not meet regulatory requirements for proficiency testing; see program OCB on page 157. 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

4

Quality Cross Check

Color Atlas of Hematology—Peripheral Blood Color Atlas of Hematology—Bone Marrow

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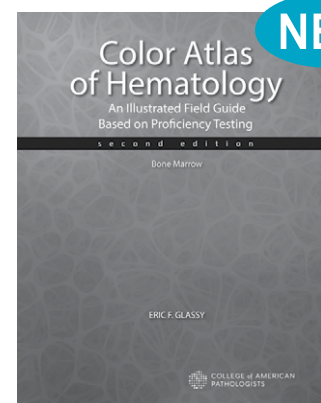
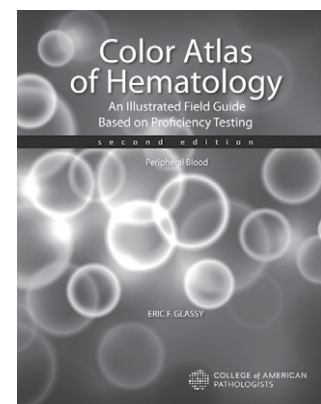
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Coagulation

Quality Cross Check—Coagulation CGLQ

Analyte	Program Code		Challenges per Shipment
	CGLQ		
Activated partial thromboplastin time	■		3
Fibrinogen	■		3
Prothrombin time	■		3
D-dimer	■		2
Fibrin(ogen) degradation products, plasma	■		1
Fibrin(ogen) degradation products, serum	■		1

This program does not meet regulatory requirements for proficiency testing; see program CGL on page 164. For additional information about the Quality Cross Check program, see page 40.

Program Information

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

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

Instrument/Cartridge	Program Code					Challenges per Shipment
	CTQ	CT1Q	CT2Q	CT3Q	CT5Q	
Helena Actalyke®	■					3
ITC Hemochron® CA510/FTCA510	■					3
ITC Hemochron FTK-ACT	■					3
ITC Hemochron Jr. Signature/ACT+				■		3
ITC Hemochron Jr. Signature/ACT-LR			■			3
ITC Hemochron P214/P215	■					3
i-STAT Celite® and Kaolin ACT					■	3
Medtronic Hemotec ACT/ACTII/ACT Plus® HR-ACT		■				3
Medtronic Hemotec ACT/ACTII/ACT Plus LR-ACT		■				3
Medtronic Hemotec ACT/ACTII/ACT Plus R-ACT		■				3
Medtronic Hepcon HMS Plus		■				3

These programs do not meet regulatory requirements for proficiency testing; see programs CT-CT3 and CT5 on page 168. 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

Microbiology

Quality Cross Check—SARS-CoV-2 Molecular COV2Q

Analyte	Program Code	Challenges per Shipment
	COV2Q	
SARS-CoV-2	■	3

This program does not meet regulatory requirements for proficiency testing; see program COV2 on page 203. For additional information about the Quality Cross Check program, see page 40.

Program Information

- Three 3.2-mL non-infectious liquid specimens that contain the whole SARS-CoV-2 genome
- Designed for molecular techniques
- Report up to three instruments
- Two shipments per year

Quality Cross Check—SARS-CoV-2 Antigen COVAQ

Analyte	Program Code	Challenges per Shipment
	COVAQ	
SARS-CoV-2 Antigen	■	3

This program does not meet regulatory requirements for proficiency testing; see program COVAG on page 203. For additional information about the Quality Cross Check program, see page 40.

Program Information

- Three 0.5-mL simulated respiratory specimens in triplicate
- Report up to three instruments
- Two shipments per year

Quality Cross Check—Nucleic Acid Amplification, Respiratory Limited ID3Q

NEW

Analyte	Program Code	Challenges per Shipment
	ID3Q	
Influenza A virus	■	3
Influenza B virus	■	3
Respiratory syncytial virus (RSV)	■	3
SARS-CoV-2	■	3

This program does not meet regulatory requirements for proficiency testing; see program ID3 on page 205. For additional information about the Quality Cross Check program, see page 40.

Program Information

- Three 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Report up to three instruments
- Two shipments per year

Immunology

4

Quality Cross Check

Quality Cross Check—SARS-CoV-2 Serology COVSQ

Analyte	Program Code	Challenges per Shipment
	COVSQ	
SARS-CoV-2 antibodies (Total, IgG, IgM)	■	3

This program does not meet regulatory requirements for proficiency testing; see program COVS on page 222. For additional information about the Quality Cross Check program, see page 40.

Program Information

- Three 1.0-mL serum specimens
- Report up to three instruments
- Two shipments per year

Transfusion Medicine

Quality Cross Check—Transfusion Medicine JATQ

Procedure	Program Code	Challenges per Shipment
	JATQ	
ABO grouping	■	3
Antibody detection	■	3
Rh typing	■	3

This program does not meet regulatory requirements for proficiency testing; see program JAT on page 231. For additional information about the Quality Cross Check program, see page 40.

Program Information

- Three 6.0-mL 13% -17% whole blood specimens
- May be used with automated and manual procedures
- Two shipments per year

4

Quality Cross Check

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:

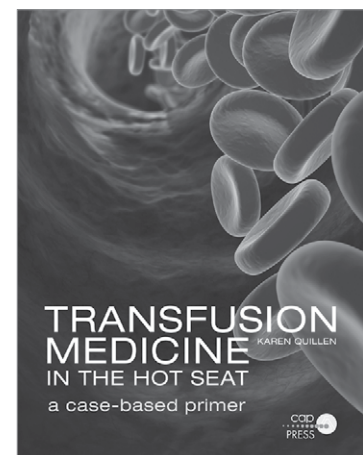
- Antibodies
- Blood Components
- Complications

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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5

Point-of-Care Programs



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

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

Point-of-Care Programs

POC Competency Challenges help POC coordinators streamline operator education (initial training and ongoing competency). These programs include standardized specimens that can not only be used to train operators and assess competency, but also to evaluate/troubleshoot instrument and method performance for waived and non-waived tests.

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	Program Code				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

POC Competency Challenges POC6, POC7, POC8, POC9

Program Name	Program Code				Challenges per Shipment
	POC6	POC7	POC8	POC9	
PT/INR, Roche CoaguChek Pro II, 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

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® B, HemoCue 201, and Stanbio HemoPoint® H2 instruments
- POC8 - One 1.5-mL positive liquid specimen for influenza A; one 1.5-mL positive liquid specimen for influenza B
- POC9 - One positive 2.0-mL fecal specimen
- Each program provides material to test up to 10 staff
- Shipments available upon request

POC Competency Challenges POC10, POC11, POC12

Program Name	Program Code			Challenges per Shipment
	POC10	POC11	POC12	
Blood Gases Competency	■			10
Blood Gases, i-STAT® Competency		■		10
Point-of-Care Cardiac Markers Competency			■	10

Program Information

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

Expand Your Expertise With Root Cause Analysis

The QMED online course Root Cause Analysis was developed with pathologist input and is infused with real-world laboratory examples, giving you confidence in:

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- Recognizing common pitfalls
- Performing key steps
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Jim Ellis
Managing Partner
MME Consulting, LLC

POC Competency Challenges POC14, POC15, POC16

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

Program Information

- POC14 - Five abnormal 1.7-mL lyophilized whole blood specimens with five corresponding diluents and one calcium chloride diluent vial; compatible with Medtronic Hemotec 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

6

General Chemistry and Therapeutic Drug Monitoring



When you transmit quantitative PT results directly to the CAP, less equals more.

- Spend less time manually entering PT results and more time on other priorities.
- Reduce clerical errors and make the PT process more like patient testing.
- Learn more about reporting your PT results using direct transmission at cap.org.

General Chemistry and Therapeutic Drug Monitoring

General Chemistry and Therapeutic Drug Monitoring.....	58
Urine Chemistry	72
Special Chemistry	75

Program Changes

Plasma Cardiac Markers (PCARM/PCARMX) is now called Point-of-Care Cardiac Markers	69
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General Chemistry and Therapeutic Drug Monitoring

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

6

General Chemistry and Therapeutic Drug Monitoring

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)	■	■		■		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

*General Chemistry and Therapeutic Drugs programs do not fulfill the neonatal bilirubin proficiency testing requirements for the CAP Accreditation Programs. See programs NB, NB2, on page 69.

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 multiple instrument reporting options, see the Quality Cross Check program, CZQ, on page 60



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	
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 ₂)	■	■	■	■		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 multiple instrument reporting options, see the Quality Cross Check program, CZQ, on page 60



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 multiple 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 program CZ analytes on pages 58-60	■	3

This program does not meet regulatory requirements for proficiency testing; see program CZ on pages 58-60. For additional information about the Quality Cross Check program, see page 40.

The Quality Cross Check Program:

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

Program Information

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

Harmonized Thyroid ABTH

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

Additional Information

- Analytes will be evaluated using harmonization.
- Specimens are collected by a modified application of Clinical and Laboratory 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 frozen human serum specimens
- Two shipments per year

CAP/AACC Immunosuppressive Drugs CS

Analyte	Program Code	Challenges per Shipment
	CS	
Cyclosporine	■	3
Sirolimus (rapamycin)	■	3
Tacrolimus	■	3

Program Information

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

AACC

Antifungal Drugs Monitoring AFD

Procedure	Program Code	Challenges per Shipment
	AFD	
Fluconazole	■	3
Itraconazole	■	3
Posaconazole	■	3
Voriconazole	■	3

Program Information

- Three 2.0-mL serum specimens
- For laboratories performing quantitative analysis of anti-fungal 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	■	3

Program Information

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

Therapeutic Drug Monitoring—Extended ZE

Analyte	Program Code	Challenges per Shipment
	ZE	
Clozapine	■	3
Gabapentin	■	3
Lacosamide	■	3
Lamotrigine	■	3
Levetiracetam	■	3
Oxcarbazepine	■	3
Oxcarbazepine metabolite	■	3
Pregabalin	■	3
Rufinamide	■	3
Teriflunomide	■	3
Topiramate	■	3
Zonisamide	■	3

Program Information

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

Therapeutic Drug Monitoring—Special ZT

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

Program Information

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

Accuracy-Based Lipids ABL

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

*This analyte will be evaluated against the reference method.

Program Information

- Three 1.0-mL human serum specimens
- Conventional and International System of Units (SI) reporting offered
- 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 CAP's Accreditation Programs require all accredited laboratories performing non-waived testing for BNP and NT-proBNP to complete 15 PT challenges per year.
- For i-STAT®, Quidel Triage, and Pathfast, use Point-of-Care Cardiac Markers programs PCARM or PCARMX.
- For second instrument reporting options, see the Quality Cross Check program, BNPQ, below.

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

Quality Cross Check—B-Type Natriuretic Peptides BNPQ

Analyte	Program Code	Challenges per Shipment
	BNPQ	
BNP	■	3
NT-proBNP	■	3

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

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

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.

Cardiac Markers CRT, CRTI, HCRT, HCRTI

Analyte	Program Code				Challenges per Shipment
	CRT	CRTI	HCRT	HCRTI	
CK-MB, immunochemical	■	■	■	■	5
CK isoenzymes (CK-BB, CK-MB, CK-MM), electrophoretic		■		■	5
LD1, LD2, LD3, LD4, LD5, electrophoretic		■		■	5
LD1/LD2 ratio calculation and interpretation		■		■	5
Myoglobin	■	■	■	■	2
Troponin I	■	■			5
Troponin T	■	■			5
High-sensitivity troponin I			■	■	5
High-sensitivity troponin T			■	■	5

Program Information

- CRT - Five 2.0-mL liquid specimens
- CRTI - Ten 2.0-mL liquid specimens
- HCRT - Five 2.0-mL liquid specimens
- HCRTI - Ten 2.0-mL liquid specimens
- Three shipments per year

Quality Cross Check—Cardiac Markers CRTQ

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

This program does not meet regulatory requirements for proficiency testing; see program CRT on page 64. 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

So You're Going to Collect a Blood Specimen

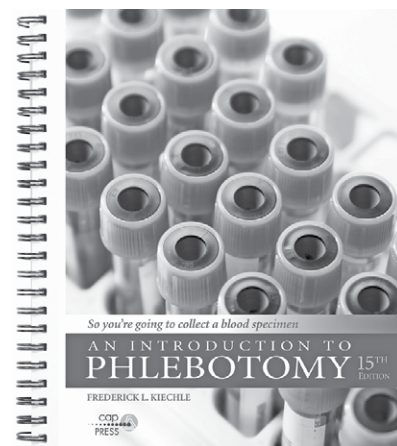
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Troponin Turnaround Times QT15

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 has multiple 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 in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next quarter.

Hemoglobin A_{1c} GH2, GH5

Analyte	Challenges per Shipment	
	Program Code	
	GH2	GH5
Hemoglobin A _{1c}	3	5

Additional Information

- These programs will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- The CAP's Accreditation Programs require all accredited laboratories performing non-waived testing for Hemoglobin A_{1c} to complete 15 PT challenges per year.
- For multiple instrument reporting options, see the Quality Cross Check program, GHQ, below.
- These programs have limited stability. Laboratories outside the US or Canada should consider purchase of GH5I, which has longer stability.

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

Quality Cross Check—Hemoglobin A_{1c} GHQ

Analyte	Program Code	Challenges per Shipment
	GHQ	
Hemoglobin A _{1c}	■	3

This program does not meet regulatory requirements for proficiency testing; see program 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.

Program Information

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

Hemoglobin A_{1c} GH5I

Analyte	Program Code	Challenges per Shipment
	GH5I	
Hemoglobin A _{1c}	■	5

Additional Information

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

Program Information

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

Glycated Serum Albumin GSA

Analyte	Program Code	Challenges per Shipment
	GSA	
Glycated serum albumin	■	3

Program Information

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

High-Sensitivity C-Reactive Protein HSCR

Analyte	Program Code	Challenges per Shipment
	HSCR	
High-sensitivity C-reactive protein	■	3

Program Information

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

Homocysteine HMS

Analyte	Program Code	Challenges per Shipment
	HMS	
Homocysteine	■	3

Program Information

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

Ketones KET

Analyte	Program Code	Challenges per Shipment
	KET	
Beta-hydroxybutyrate	■	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	■	3
Glucose	■	3
HDL cholesterol	■	3
LDL cholesterol	■	3
Triglycerides	■	3

Program Information

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

Neonatal Bilirubin NB, NB2

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

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

Program Information

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

Point-of-Care Cardiac Markers PCARM/PCARMX

Analyte	Program Code		Challenges per Shipment
	PCARM	PCARMX	
BNP	■	■	5
CK-MB	■	■	5
D-dimer	■	■	2
Myoglobin	■	■	2
NT-proBNP	■	■	5
Troponin I	■	■	5

Program Information

- PCARM - Five 1.5-mL liquid EDTA plasma specimens for point-of-care instruments such as Quidel Triage, Pathfast, and i-STAT
- PCARMX - All PCARM specimens in duplicate
- Three shipments per year

Plasma Cardiac Markers International PCARI

Analyte	Program Code	Challenges per Shipment
	PCARI	
Troponin I	■	5

Program Information

- Five 0.29-mL liquid plasma specimens for use with Quidel Triage Cardio2 and Cardio3
- Three shipments per year

Whole Blood Chemistry Compatibility Matrix

Whole Blood Analyzer/Method	Analyte	Compatible Survey Programs	Page
HemoCue®	Glucose	HCC	70
Roche Reflotron®	Cholesterol	C1, C4	58-60
	Glucose		58-60
Cholestech LDX®	Total cholesterol	LCW	68
	HDL cholesterol		68
	Triglycerides		68
	Glucose		68
Whole blood cholesterol meters	Cholesterol	C1, C4, LCW	58-60, 68
Whole blood glucose meters	Glucose	HCC2, WBGQ	70-71
Nova StatSensor®/ StatSensor Xpress™	Creatinine	WBCR	71

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 2.5-mL whole blood specimens; two shipments per year
- Conventional and International System of Units (SI) reporting offered
- 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 2.0-mL whole blood specimens; two shipments per year: B and D
- To verify instrument compatibility, refer to the instrument matrix above

Whole Blood Creatinine WBCR

Analyte	Program Code	Challenges per Shipment
	WBCR	
Creatinine	■	5

Program Information

- 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	■	3

The CAP's Accreditation Programs require 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 Program	Pages
Chemistry/TDM	CZVM	CZ	58-60

Program Information

- Three 2.0-mL whole blood specimens
- Report up to 30 instruments
- Conventional and International System of Units (SI) reporting offered
- 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	■	3
Calcium	■	3
Chloride	■	3
Creatinine	■	3
Glucose	■	3
Magnesium	■	3
Nitrogen, total	■	3
Osmolality	■	3
Phosphorus	■	3
Potassium	■	3
Protein, total	■	3
Sodium	■	3
Urea nitrogen	■	3
Uric acid	■	3
Urine albumin, quantitative	■	3
Urine albumin:creatinine ratio	■	3

Program Information

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

Accuracy-Based Urine ABU

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

Program Information

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

Kidney Stone Risk Assessment KSA

Analyte	Program Code	Challenges per Shipment
	KSA	
Citrate	■	3
Cystine	■	3
Oxalate	■	3

Program Information

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

Urine Chemistry—Special N/NX

Analyte	Program Code	Challenges per Shipment
	N/NX	
3-methoxytyramines	■	3
5-hydroxyindoleacetic acid	■	3
17-hydroxycorticosteroids	■	3
17-ketosteroids	■	3
Aldosterone	■	3
Coproporphyrins	■	3
Cortisol, urinary free	■	3
Dopamine	■	3
Epinephrine	■	3
Homovanillic acid	■	3
Metanephrine	■	3
Norepinephrine	■	3
Normetanephrine	■	3
Uroporphyrin	■	3
Vanillylmandelic acid	■	3

Program Information

- N - Six 10.0-mL lyophilized urine specimens and three 10.0-mL liquid urine specimens
- NX - All lyophilized program 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	■	2

Program Information

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

Porphobilinogen, Urine UPBG

Analyte	Program Code	Challenges per Shipment
	UPBG	
Porphobilinogen	■	3

Program Information

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

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

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

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

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

Urine Chemistry—General, Validated Material

Validated Material	Program Code	Corresponding Program	Page
Urine Chemistry	UVM	U	72

Program Information

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

The CAP is your trusted calibration verification and linearity partner, offering a comprehensive menu of programs for diagnostic confidence.

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

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

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 Shipment
	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

Body Fluid Chemistry FLD

Analyte	Program Code	Challenges per Shipment
	FLD	
Albumin	■	3
Amylase	■	3
CA19-9	■	1
CEA	■	1
Cholesterol	■	3
Creatinine	■	3
Glucose	■	3
Lactate	■	3
Lactate dehydrogenase (LD)	■	3
pH	■	3
Protein, total	■	3
Triglycerides	■	3
Urea nitrogen	■	1

Program Information

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

For multiple instrument reporting options, see the Quality Cross Check program, FLDQ, on page 77.

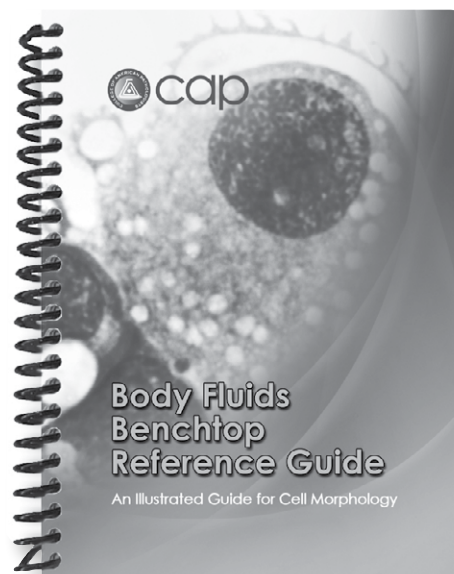
Body Fluids Benchtop Reference Guide

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

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Quality Cross Check—Body Fluid Chemistry FLDQ

Analyte	Program Code	Challenges per Shipment
	FLDQ	
Albumin	■	3
Amylase	■	3
CA19-9	■	1
Carcinoembryonic antigen (CEA)	■	1
Cholesterol	■	3
Creatinine	■	3
Glucose	■	3
Lactate	■	3
Lactate dehydrogenase (LD)	■	3
pH	■	3
Protein, total	■	3
Triglycerides	■	3
Urea nitrogen	■	1

This program does not meet regulatory requirements for proficiency testing; see program FLD on page 76. 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	■	3
Bilirubin	■	3
Calcium	■	3
Chloride	■	3
Lipase	■	3
Potassium	■	3
Sodium	■	3
Uric acid	■	3

Program Information

- Three 3.0-mL simulated liquid body fluid specimens in duplicate
- Report up to three instruments
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Program Information

- 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	■	3
Cadmium, urine	■	3
Cadmium, whole blood	■	3
Creatinine, urine	■	3

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

Program Information

- Three 6.0-mL whole blood specimens and three 12.0-mL urine specimens
- Conventional and International System of Units (SI) reporting offered
- Six shipments per year

Cerebrospinal Fluid Chemistry and Oligoclonal Bands M, OLI

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

Program Information

- M - Three 5.0-mL simulated liquid spinal fluid specimens
- OLI - Three 5.0-mL simulated liquid spinal fluid specimens and three 1.0-mL paired serum specimens; CSF IgG index and synthesis rate calculation challenges for each paired specimen and one online educational pattern interpretation each mailing
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year



Cystatin C CYS

Analyte	Program Code	Challenges per Shipment
	CYS	
Cystatin C	■	2

Program Information

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

Fecal Calprotectin FCAL

Analyte	Program Code	Challenges per Shipment
	FCAL	
Fecal calprotectin	■	3

Program Information

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

Fecal Fat FCFS

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

Program Information

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

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	■	2

Program Information

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

Lipoprotein-Associated Phospholipase A₂ PLA

Analyte	Program Code	Challenges per Shipment
	PLA	
Lipoprotein-associated phospholipase (Lp-PLA ₂) activity	■	2

Program Information

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

Lipoprotein and Protein Electrophoresis LPE, SPE, UBJP

Analyte	Program Code			Challenges per Shipment
	LPE	SPE	UBJP	
Lipoprotein electrophoresis	■			2
IgA, quantitation		■		2
IgG, quantitation		■		2
IgM, quantitation		■		2
M-component (Paraprotein) identification		■		2
Protein, total		■		2
Protein electrophoresis, serum		■		2
Urine Bence Jones protein			■	2

Program Information

- LPE - Two 1.0-mL liquid serum specimens
- SPE - Two 1.0-mL lyophilized serum specimens; one online educational protein electrophoresis challenge per mailing
- 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	■		3

Program Information

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

Plasma Hemoglobin PHG

Analyte	Program Code		Challenges per Shipment
	PHG		
Plasma hemoglobin	■		2

Program Information

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

Procalcitonin PCT

Analyte	Program Code	Challenges per Shipment
	PCT	
Procalcitonin	■	3

Program Information

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

Pseudocholesterase C7

Analyte	Program Code	Challenges per Shipment
	C7	
Pseudocholesterase	■	1

Program Information

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

Salivary Cortisol SALC

Analyte	Program Code	Challenges per Shipment
	SALC	
Salivary cortisol	■	3

Program Information

- Three 2.0-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)	■	3
Prostate-specific antigen (PSA), total	■	3
Sex hormone-binding globulin (SHBG)	■	3
Testosterone	■	3
Thyroid-stimulating hormone (TSH)	■	3

Program Information

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

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	■	3

Program Information

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

Trace Metals R

Analyte	Program Code	Challenges per Shipment
	R	
Aluminum	■	3
Chromium	■	3
Copper	■	3
Manganese	■	3
Selenium	■	3
Zinc	■	3

Program Information

- Three 6.0-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	■	2
Arsenic	■	2
Chromium	■	2
Cobalt	■	2
Copper	■	2
Lead	■	2
Manganese	■	2
Mercury	■	2
Selenium	■	2
Thallium	■	2
Zinc	■	2

Program Information

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

Trace Metals, Whole Blood TMWB

Analyte	Program Code	Challenges per Shipment
	TMWB	
Aluminum	■	3
Arsenic, total	■	3
Chromium	■	3
Cobalt	■	3
Copper	■	3
Manganese	■	3
Mercury	■	3
Selenium	■	3
Thallium	■	3
Zinc	■	3

Program Information

- 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 Shipment
	SW1, SW2, SW4	
Chloride	■	3
Conductivity	■	3

For method compatibility, see chart below.

Sweat Analysis Series Compatibility Matrix

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

Program Information

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

Viscosity V

Analyte	Program Code	Challenges per Shipment
	V	
Viscosity	■	2

Program Information

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

Soluble Transferrin Receptor STFR

Analyte	Program Code	Challenges per Shipment
	STFR	
Soluble transferrin receptor (sTfR)	■	3

Program Information

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

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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 Program	Page
Cerebrospinal Fluid	MVM	M	78

Program Information

- Three 5.0-mL simulated liquid spinal fluid specimens

7

Endocrinology



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.

Endocrinology

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

Ligand—General K/KK

Analyte	Program Code	Challenges per Shipment
	K/KK	
Alpha-fetoprotein (AFP)	■	5
Carcinoembryonic antigen (CEA)	■	5
Cortisol	■	5
Ferritin	■	5
Folate, serum	■	5
Human chorionic gonadotropin (hCG), quantitative	■	5
Immunoglobulin E (IgE)	■	5
Prostate-specific antigen (PSA), total	■	5
p2PSA	■	5
Prostate-specific antigen, complexed (cPSA)	■	5
Prostate-specific antigen (PSA), free	■	5
Prostatic acid phosphatase (PAP)	■	5
Triiodothyronine (T3), free	■	5
Triiodothyronine (T3), total	■	5
T3 uptake and related tests	■	5
Thyroxine (T4), free	■	5
Thyroxine (T4), total	■	5
Thyroid-stimulating hormone (TSH)	■	5
Vitamin B ₁₂	■	5

Program Information

- K - Five 5.0-mL liquid serum specimens
- KK - Five 5.0-mL liquid serum specimens in duplicate
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year

MMA and Active B₁₂ MMA

Analyte/Procedure	Program Code	Challenges per Shipment
	MMA	
Active vitamin B ₁₂	■	3
Methylmalonic acid	■	3

Program Information

- 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 CAP's Accreditation Programs require all accredited laboratories performing non-waived testing for BNP and NT-proBNP to complete 15 PT challenges per year.
- For i-STAT®, Quidel Triage, and Pathfast, use Point-of-Care Cardiac Markers programs PCARM or PCARMX.
- For second instrument reporting options, see the Quality Cross Check program, BNPQ, below.

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

Quality Cross Check—B-Type Natriuretic Peptides BNPQ

Analyte	Program Code	Challenges per Shipment
	BNPQ	
BNP	■	3
NT-proBNP	■	3

This program does not meet regulatory requirements for proficiency testing; see program 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 1.5-mL liquid specimens
- Report up to three instruments
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Sex Hormones Y/YY, DY

Analyte	Program 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 program Y or YY
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Antimüllerian Hormone AMH

Analyte	Program Code		Challenges per Shipment
	AMH		
Antimüllerian hormone	■		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 Shipment
	VITD		
25-OH vitamin D, total	■		3

Program Information

- 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)	■	3
Osteocalcin	■	3

Program Information

- 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 Shipment
	ABVD	
25-OH vitamin D (D2 and D3)	■	3
Calcium	■	3

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

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 and Laboratory 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)	■	2
Creatinine	■	2
Deoxypyridinoline (DPD)	■	2
N-telopeptide (NTx)	■	2

Program Information

- 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		■					3
Vitamin A			■				3
Vitamin E, total				■			3
C-telopeptide					■		3
N-telopeptide						■	3

Program Information

- BMV1-4 - Three 5.0-mL liquid serum specimens for each program
- BMV5, 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	■	3
Gastrin	■	3
Insulin	■	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	■	3
Glucose	■	3
Insulin	■	3

Program Information

- Three 1.0-mL serum specimens
- Conventional and International System of Units (SI) reporting offered
- 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.

Quality Cross Check—Parathyroid Hormone PTHQ

Analyte	Program Code	Challenges per Shipment
	PTHQ	
Parathyroid hormone (PTH)	■	3

This program does not meet regulatory requirements for proficiency testing; see program ING on page 90. For additional information about the Quality Cross Check program, see page 40.

The Quality Cross Check Program:

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

Program Information

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

Second Trimester Maternal Screening FP/FPX

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

The CAP designed these programs for laboratories using AFP and hCG for prenatal screening purposes only. For all other applications, see program K or KK on page 86.

Program Information

- FP - Five 1.0-mL serum specimens; two 1.0-mL simulated amniotic fluid specimens
- FPX - All program FP serum specimens in duplicate; two 1.0-mL simulated amniotic fluid specimens
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year

First Trimester Maternal Screening FP1T, FP1B

Analyte	Program Code		Challenges per Shipment
	FP1T	FP1B	
Total hCG	■		5
Free beta hCG		■	5
PAPP-A	■	■	5

The CAP designed these programs for laboratories using hCG for prenatal screening purposes only. For all other applications, see program K or KK on page 86.

Program Information

- FP1T, FP1B - Five 1.0-mL serum specimens
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year

Noninvasive Prenatal Testing NIPT

Analyte	Program Code	Challenges per Shipment
	NIPT	
Cell-free DNA screening for fetal aneuploidy	■	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 liquid specimens
- Two shipments per year

Erythropoietin EPO

Analyte	Program Code	Challenges per Shipment
	EPO	
Erythropoietin	■	2

Program Information

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

Fetal Fibronectin FF

Analyte	Program Code	Challenges per Shipment
	FF	
Fetal fibronectin	■	2

Program Information

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

Red Blood Cell Folate FOL

Analyte	Program Code	Challenges per Shipment
	FOL	
RBC folate	■	2

Program Information

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

Renin and Aldosterone RAP

Analyte	Program Code	Challenges per Shipment
	RAP	
Aldosterone	■	3
Renin	■	3

Program Information

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

Tumor Markers TM/TMX

Analyte	Program Code	Challenges per Shipment
	TM/TMX	
Adrenocorticotrophic hormone (ACTH)	■	3
Beta-2 microglobulin	■	3
CA 15-3	■	3
CA 19-9	■	3
CA 27.29	■	3
CA 72-4	■	3
CA 125	■	3
Calcitonin	■	3
Thyroglobulin	■	3

Program Information

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

Human Epididymis Protein 4 HUEP

Analyte	Program Code	Challenges per Shipment
	HUEP	
Human epididymis protein 4	■	3

Program Information

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

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

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

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

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

Endocrinology, Validated Materials

Validated Material	Program Code	Corresponding Program	Page
Ligand—General	KVM	K	86
Sex Hormones	YVM	Y	88

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

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8

Blood Gas, Critical Care, and Oximetry



Our programs closely mimic patient testing to ensure accuracy.

- Test specimen levels that reflect clinical decision points.
- Keep current with the latest laboratory best practices with educational content supplied in our participant summary reports.
- Gain confidence in your results by comparing performance against the largest peer groups.

Analyte Additions **NEW**

Critical Care Blood Gas (tCO ₂).....	96
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Blood Gas, Critical Care, and Oximetry

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

Critical Care Blood Gas AQ, AQ2, AQ3, AQ4

Analyte	Program Code				Challenges per Shipment
	AQ	AQ2	AQ3	AQ4	
Calcium, ionized	■	■	■	■	2
Chloride	■	■	■	■	5
Hematocrit	■	■	■	■	5
Hemoglobin, estimated	■	■	■	■	5
Lactate	■	■	■	■	2
Magnesium, ionized	■	■			2
pCO ₂	■	■	■	■	5
pH	■	■	■	■	5
pO ₂	■	■	■	■	5
Potassium	■	■	■	■	5
Sodium	■	■	■	■	5
tCO ₂ <small>NEW</small>	■	■	■	■	5
Creatinine		■		■	5
Glucose		■		■	5
Urea nitrogen (BUN)		■		■	5

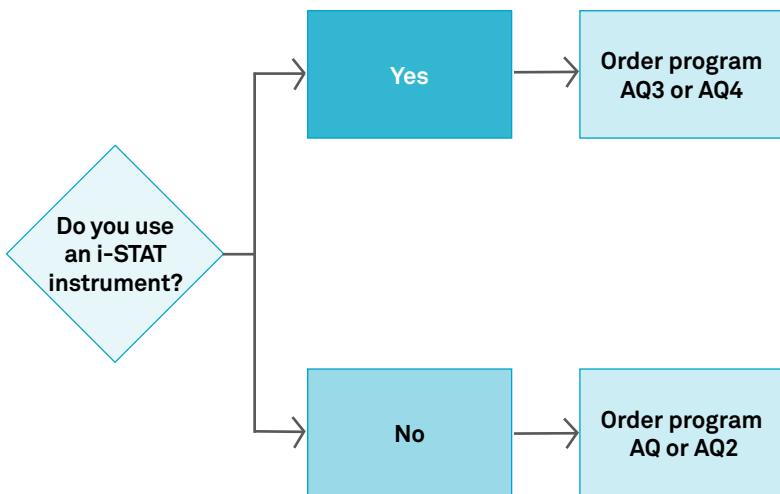
Program Information

- 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®
- 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



For multiple instrument reporting options, see the Quality Cross Check programs, AQQ, AQ2Q, AQ3Q, and AQ4Q, on page 97.

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



Quality Cross Check—Blood Gas AQQ, AQ2Q, AQ3Q, AQ4Q

Analyte	Program Code				Challenges per Shipment
	AQQ	AQ2Q	AQ3Q	AQ4Q	
Calcium, ionized	■	■	■	■	3
Chloride	■	■	■	■	3
Hematocrit	■	■	■	■	3
Hemoglobin, estimated	■	■	■	■	3
Lactate	■	■	■	■	3
Magnesium, ionized	■	■			3
pCO ₂	■	■	■	■	3
pH	■	■	■	■	3
pO ₂	■	■	■	■	3
Potassium	■	■	■	■	3
Sodium	■	■	■	■	3
Creatinine		■		■	3
Glucose		■		■	3
Urea nitrogen (BUN)		■		■	3

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 programs AQ and AQ2-AQ4 on page 96. 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

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

Blood Oximetry S0

Analyte	Program Code	Challenges per Shipment
	S0	
Carboxyhemoglobin	■	5
Hematocrit, estimated	■	5
Hemoglobin, total	■	5
Methemoglobin	■	5
Oxyhemoglobin	■	5

Program Information

- 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 program is not compatible with Oxicom-2000, -2100, or -3000 whole blood oximeters.
- For multiple 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	■	3
Hematocrit, estimated	■	3
Hemoglobin, total	■	3
Methemoglobin	■	3
Oxyhemoglobin	■	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 proficiency testing; see program S0 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.

9 Toxicology



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

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

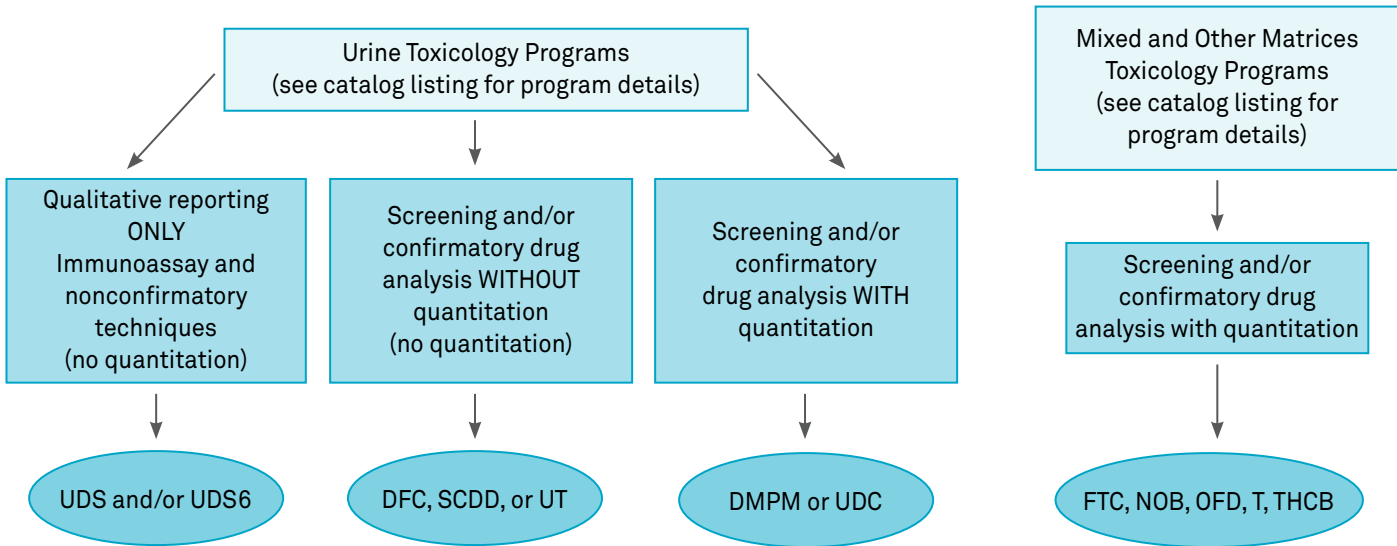
New Analyte/Drug Additions **NEW**

Toxicology (T)	100
Urine Toxicology (UT).....	100
Forensic Toxicology, Criminalistics (FTC)	109

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 programs for your laboratory's testing menu.



Toxicology

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

Program Information

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



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

Program Information

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



T and UT Programs Drug Listing

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

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

*Same compound

CAP/AACC Urine Drug Testing, Screening UDS, UDS6

Analyte	Program Code	
	Challenges per Shipment	
	UDS	UDS6 Limited
6-acetylmorphine (6-AM)	5	3
Acetaminophen	5	3
Amphetamine	5	3
Amphetamine/methamphetamine group	5	3
Barbiturate group	5	3
Benzodiazepine group	5	3
Benzoylcgonine/cocaine metabolites	5	3
Buprenorphine and metabolites	5	3
Cannabinoids	5	3
Ethanol	5	3
Fentanyl	5	3
Hydrocodone	5	3
Lysergic acid diethylamide (LSD)	5	3
Meperidine	5	3
Meprobamate/carisoprodol	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	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 non-confirmatory techniques only
- Participants will have access to the AACC quarterly newsletter, *Clinical & Forensic Toxicology News*



Urine Drug Adulterant/Integrity DAI

Analyte	Program Code	Challenges per Shipment
	DAI	
Creatinine	■	3
Glutaraldehyde	■	3
Nitrite	■	3
Oxidants	■	3
pH	■	3
Specific gravity	■	3

Program Information

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

Give the CAP's complimentary Sample Exchange Registry service a try!

Sign up for this unique and complimentary service for those rare analytes for which proficiency testing is not yet available. This service now includes all clinical laboratory disciplines.

- The CAP connects laboratories 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 laboratories 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.

Visit cap.org and from the Laboratory Improvement tab, choose Proficiency Testing > Sample Exchange Registry.

CAP/AACC Forensic Urine Drug Testing, Confirmatory UDC

Analyte	Program Code	Challenges per Shipment
	UDC	
6-acetylmorphine (6-AM)	■	10
Alpha-hydroxyalprazolam	■	10
Amphetamine	■	10
Benzoylcegonine	■	10
Buprenorphine	■	10
Butalbital	■	10
Codeine	■	10
Delta-9-THC-COOH	■	10
Fentanyl	■	10
Hydrocodone	■	10
Hydromorphone	■	10
Lorazepam	■	10
Methadone	■	10
Methadone metabolite (EDDP)	■	10
Methamphetamine	■	10
Methaqualone	■	10
Methylenedioxyamphetamine (MDA)	■	10
Methylenedioxyethylamphetamine (MDEA)	■	10
Methylenedioxymethamphetamine (MDMA)	■	10
Morphine	■	10
Norbuprenorphine	■	10
Nordiazepam	■	10
Norfentanyl	■	10
Norpropoxyphene	■	10
Oxazepam	■	10
Oxycodone	■	10
Oxymorphone	■	10
Phencyclidine	■	10
Phenobarbital	■	10
Propoxyphene	■	10
Secobarbital	■	10
Temazepam	■	10
Adulterant/Integrity Indicator		
Creatinine	■	10
pH	■	10
Specific gravity	■	10

Program Information

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



Oral Fluid for Drugs of Abuse OFD

Analyte	Program Code	Challenges per Shipment
	OFD	
Amphetamine Group	■	5
Amphetamine	■	5
Methamphetamine	■	5
Methylenedioxyamphetamine (MDA)	■	5
Methylenedioxymethamphetamine (MDMA)	■	5
Benzodiazepine Group	■	5
Alprazolam	■	5
Diazepam	■	5
Nordiazepam	■	5
Oxazepam	■	5
Temazepam	■	5
Buprenorphine	■	5
Buprenorphine and norbuprenorphine	■	5
Cocaine and/or metabolite	■	5
Benzoylcegonine	■	5
Cocaine	■	5
Cannabinoids	■	5
Delta-9-THC	■	5
Delta-9-THC-COOH	■	5
Cotinine	■	5
Fentanyl and/or metabolite	■	5
Fentanyl	■	5
Norfentanyl	■	5
Methadone	■	5
Opiate Group	■	5
6-acetylmorphine (6-AM)	■	5
Codeine	■	5
Hydrocodone	■	5
Hydromorphone	■	5
Morphine	■	5
Oxycodone	■	5
Oxymorphone	■	5
Phencyclidine (PCP)	■	5

Program Information

- 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	■	3
Chloride	■	3
Creatinine	■	3
Ethanol	■	3
Glucose	■	3
Potassium	■	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

Serum Drug Screening SDS

Analyte	Program Code	Challenges per Shipment
	SDS	
Acetaminophen, quantitative	■	3
Acetone, semiquantitative and qualitative	■	3
Barbiturate group, qualitative	■	3
Benzodiazepine group, qualitative	■	3
Salicylate, quantitative	■	3
Total tricyclic antidepressants, qualitative	■	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	■	■	5
Ethanol, quantitative	■	■	5
Ethylene glycol, qualitative and quantitative	■	■	5
Isopropanol, quantitative	■	■	5
Methanol, quantitative	■	■	5

Program Information

- 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

AACC

Ethanol Biomarkers ETB

Analyte	Program Code	Challenges per Shipment
	ETB	
Ethyl glucuronide (EtG), qualitative and quantitative	■	3
Ethyl sulfate (EtS), quantitative	■	3

Program Information

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

CAP/AACC Blood Lead BL

Analyte	Program Code	Challenges per Shipment
	BL	
Lead	■	5

This program 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

AACC

Cadmium CD

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

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

Program Information

- Three 6.0-mL whole blood specimens and three 12.0-mL urine specimens
- Conventional and International System of Units (SI) reporting offered
- Six shipments per year

Nicotine and Tobacco Alkaloids NTA

Analyte	Program Code	Challenges per Shipment
	NTA	
Anabasine	■	3
Cotinine	■	3
Nicotine	■	3

Program Information

- 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 R

Analyte	Program Code	Challenges per Shipment
	R	
Aluminum	■	3
Chromium	■	3
Copper	■	3
Manganese	■	3
Selenium	■	3
Zinc	■	3

Program Information

- Three 6.0-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	■	2
Arsenic	■	2
Chromium	■	2
Cobalt	■	2
Copper	■	2
Lead	■	2
Manganese	■	2
Mercury	■	2
Selenium	■	2
Thallium	■	2
Zinc	■	2

Program Information

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

Trace Metals, Whole Blood TMWB

Analyte	Program Code	Challenges per Shipment
	TMWB	
Aluminum	■	3
Arsenic, total	■	3
Chromium	■	3
Cobalt	■	3
Copper	■	3
Manganese	■	3
Mercury	■	3
Selenium	■	3
Thallium	■	3
Zinc	■	3

Program Information

- 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	■	5

Program Information

- Five 20.0-mL whole blood specimens
- For crime and hospital laboratories that have forensic toxicology divisions performing qualitative and quantitative analysis of drugs in whole blood specimens
- Three shipments per year



FTC Program Drug Listing

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

6-acetylmorphine (6-AM)	Desmethylsertraline	Methylenedioxyamphetamine (MDA)	Oxymorphone
7-aminoclonazepam	Dextromethorphan	Methylenedioxymethamphetamine (MDMA)	Paroxetine
7-aminoflunitrazepam	Diazepam	Methylenedioxypropylvalerone (MDPV)	Pentobarbital
7-hydroxymitragynine	Dihydrocodeine	Methylphenidate	Phencyclidine
Acetaminophen	Diltiazem	Metoprolol	Phenethylamine
Alpha-hydroxyalprazolam	Diphenhydramine	Midazolam NEW	Pheniramine
Alprazolam	Doxepin	Mirtazapine	Phenobarbital
Amitriptyline	Doxylamine	Mitragynine (Kratom)	Phentermine
Amphetamine	Duloxetine	Morphine*	Phenylephrine
Aripiprazole	Ecgonine ethyl ester	N-desmethyltramadol	Phenytoin
Atenolol	Ecgonine methyl ester	Naproxen	Pregabalin
Atropine	Ephedrine	Norbuprenorphine	Propoxyphene
Benzoyllecgonine	Fentanyl*	Norchlordiazepoxide	Propranolol
Brompheniramine	Flunitrazepam	Norclomipramine	Pseudoephedrine
Buprenorphine	Fluoxetine	Norcodeine	Quetiapine
Bupropion	Gabapentin	Norcyclobenzaprine	Quinine
Butalbital	Gamma-hydroxybutyrate (GHB)	Nordiazepam	Ranitidine
Carbamazepine	Hydrocodone	Nordoxepin	Ritalinic acid NEW
Carbamazepine-10, 11-epoxide	Hydromorphone	Norfentanyl	Salicylate
Carisoprodol	Hydroxybupropion	Norfluoxetine	Sertraline
Chlordiazepoxide	Hydroxyzine	Norketamine	Strychnine
Chlorpheniramine	Ibuprofen	Normeperidine	Tapentadol NEW
Citalopram	Imipramine	Normirtazapine	Temazepam
Clomipramine	Ketamine	Noroxycodone	Topiramate
Clonazepam	Lamotrigine	Norpropoxyphene	Tramadol
Clozapine	Levetiracetam	Norsertaline	Trazodone
Cocaethylene	Lidocaine	Nortrimipramine	Trimipramine
Cocaine	Lorazepam	Nortriptyline	Valproic acid
Codeine	Lysergic acid diethylamide (LSD)	Norverapamil	Venlafaxine
Cyclobenzaprine*	Meperidine*	O-desmethyltramadol	Verapamil
Delta-9-THC	Mephedrone	Olanzapine	Zolpidem
Delta-9-THC-COOH	Meprobamate	Oxazepam	
Demoxepam	Methadone	Oxycodone	
Desipramine	Methadone metabolite (EDDP)		
Desmethylclomipramine	Methamphetamine		

*and/or metabolite(s)

Synthetic Cannabinoid/Designer Drugs SCDD

Analyte	Program Code	Challenges per Shipment
	SCDD	
Synthetic cannabinoid/designer drugs	■	3

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
	THCB	
Delta-9-THC	■	3
Delta-9-THC-COOH	■	3
11-hydroxy-THC	■	3

Program Information

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



Antifungal Drugs Monitoring AFD

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

Program Information

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

9

Toxicology

Clinical Toxicology Testing: A Guide for Laboratory Professionals, Second Edition

This book is a practical guide to directing hospital toxicology laboratory operations. This 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.

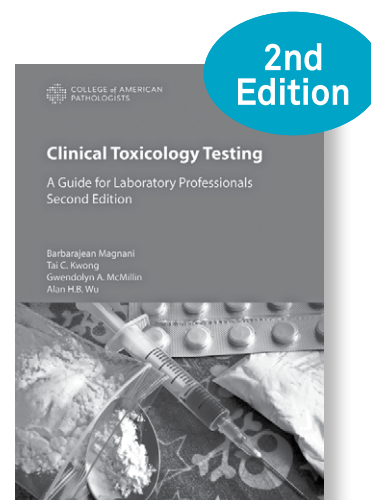
Contents include:

- 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

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: PUB227
Softcover; 2020

Drug Monitoring for Pain Management DMPM

Analyte	Program Code	Challenges per Shipment
	DMPM	
See drug listing below	■	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

DMPM Program Drug Listing

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

9

Toxicology

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

Drug-Facilitated Crime DFC

Analyte	Program Code	Challenges per Shipment
	DFC	
See drug listing below	■	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 drug-facilitated crimes, which target drugs at much lower concentrations than in other toxicology programs
- Two shipments per year

DFC Program Drug Listing

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

4-hydroxytriazolam	Fluoxetine	Nortriptyline
7-aminoclonazepam	Gabapentin	Norvenlafaxine
7-aminoflunitazepam	Gamma hydroxybutyrate (GHB)	O-desmethyltramadol
Alpha-hydroxyalprazolam	Hydrocodone	Oxazepam
Amitriptyline	Hydromorphone	Oxycodone
Amobarbital	Hydroxyzine	Oxymorphone
Amphetamine	Imipramine	Paroxetine
Benzoylcegonine	Ketamine	Pentobarbital
Bromazepam	Lorazepam	Phencyclidine (PCP)
Brompheniramine	Meperidine	Phenobarbital
Butalbital	Meprobamate	Phenytoin
Carisoprodol	Meta-chlorophenylpiperazine (m-CPP)	Promethazine
Chlorpheniramine	Methadone	Propoxyphene
Citalopram/escitalopram	Methadone metabolite (EDDP)	Quetiapine
Clobazam	Methamphetamine	Scopolamine
Clonidine	Methylenedioxyamphetamine (MDA)	Secobarbital
Clozapine	Methylenedioxymethamphetamine (MDMA)	Sertraline
Codeine	Midazolam	Tapentadol
Cyclobenzaprine	Morphine	Temazepam
Delta-9-THC-COOH	Norbuprenorphine	Tetrahydrozoline
Desipramine	Nordoxepin	Topiramate
Dextromethorphan	Norfentanyl	Tramadol
Diphenhydramine	Norfluoxetine	Valproic acid
Doxepin	Norketamine	Venlafaxine
Doxylamine	Normeperidine	Zaleplon
Estazolam	Norpropoxyphene	Ziprasidone
Etizolam	Norsertaline	Zolpidem
Fentanyl		Zopiclone/Eszopiclone

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

Use the same material that is sent in the Surveys program 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 Program	Page
Urine Drug Testing, Screening	UDSM	UDS	102

Program Information

- Five 10.0-mL liquid urine specimens
- Three 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:

- Cite or Recommend? Know Before you Go!
- What Did You REALLY Mean? How to Write a Good Deficiency

- Summation Solutions
- Inspecting Laboratory Director Responsibility: Delegation Junction What’s Your Function?
- Inspecting Competency Assessment: Busting the Myths
- Inspecting Method Validation/ Verification Studies

Access more than 20 concentrated topics related to laboratory inspections.



10 Accuracy-Based Programs



Make accuracy your number one focus.

- Accuracy-Based Programs use challenge specimens that are matrix-related, bias-free, and have target values traceable to certified reference materials.
- Only the CAP's Accuracy-Based Programs allow laboratories to compare their test results with reference method results.

Accuracy-Based Programs

Accuracy-Based Programs.....	116
Validated Materials.....	120

Accuracy-Based Programs

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

Accuracy-Based Lipids ABL

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

*This analyte will be evaluated against the reference method.

Program Information

- Three 1.0-mL human 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 Shipment
	ABVD	
25-OH vitamin D (D2 and D3)	■	3
Calcium	■	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 and Laboratory 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	■	3
Cortisol	■	3
Estradiol	■	3
Follicle-stimulating hormone (FSH)	■	3
Luteinizing hormone (LH)	■	3
Prostate-specific antigen (PSA), total	■	3
Sex hormone-binding globulin (SHBG)	■	3
Testosterone	■	3
Thyroid-stimulating hormone (TSH)	■	3

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

Program Information

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

Accuracy-Based Urine ABU

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

Program Information

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

10

Accuracy-Based Programs

Identify and Control Risks in Your Laboratory

The QMED online course Risk Management provides a realistic case study as well as video commentary by CAP pathologists, inspectors, and ISO 15189 assessors. It shows you how to:

- Find, prioritize, and control risks
- Use common tools
- Assess how your laboratory's culture is affecting risks

Includes an Excel-based [Risk Register Tool](#), which helps you prioritize and keep track of risks.

See the Continuing Education section. Add QMEDRISK to your order.

“Managing risks is a mindset that needs to be present throughout the laboratory... This course will help you manage risk to a level that is acceptable to our physicians, our patients, and our administration.”

Dr. Gaurav Sharma, MD, FCAP
Division Head of Regional Laboratories
Henry Ford Health System

Creatinine Accuracy Calibration Verification/Linearity LN24

Analyte	Program Code	
	LN24	LN24 Target Range
Creatinine	■	0.6–4.0 mg/dL
Estimated glomerular filtration rate (eGFR)	■	

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

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.

Program Information

- Six 1.0-mL human serum specimens
- 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	■	3
Triiodothyronine (T3), total	■	3
Thyroxine (T4), free	■	3
Thyroxine (T4), total	■	3
Thyroid-stimulating hormone (TSH)	■	3

Additional Information

- Analytes will be evaluated using harmonization.
- Specimens are collected by a modified application of Clinical and Laboratory 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 frozen human serum specimens
- Two shipments per year

Hemoglobin A_{1c} Accuracy Calibration Verification/Linearity LN15

Analyte	Program Code	
	LN15	LN15 Target Range
Hemoglobin A _{1c}	■	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

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.

Hemoglobin A_{1c} GH2, GH5

Analyte	Challenges per Shipment	
	Program Code	
	GH2	GH5
Hemoglobin A _{1c}	3	5

Additional Information

- These programs will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- The CAP's Accreditation Programs require all accredited laboratories performing non-waived testing for Hemoglobin A1c to complete 15 PT challenges per year.
- For multiple instrument reporting options, see the Quality Cross Check program, GHQ on page 42.
- These programs have limited stability. Laboratories outside the US or Canada should consider purchase of GH5I, which has longer stability.

Program Information

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

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

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

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.

Program Information

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

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 Program	Page
General Chemistry and Therapeutic Drugs	CZVM	CZ	58-60
Cerebrospinal Fluid	MVM	M	78
Urine Chemistry—General	UVM	U	72

Coagulation—Limited, Validated Material

Validated Material	Validated Material Code	Corresponding Program	Page
Coagulation—Limited	CGM	CGL	164

Endocrinology, Validated Materials

Validated Material	Validated Material Code	Corresponding Program	Page
Ligand—General	KVM	K	86
Sex Hormones	YVM	Y	88

Toxicology, Validated Material

Validated Material	Validated Material Code	Corresponding Program	Page
Urine Drug Testing, Screening	UDSM	UDS	102

11 Instrumentation Verification Tools



Ensure your instrument and method are performing to their optimal levels.

Verify your analytical measurement range for cardiac markers using our newest calibration verification/linearity programs for:

- High-sensitivity Troponin I (LN48).
- High-sensitivity Troponin T (LN47).

Instrumentation Verification Tools

Calibration Verification/Linearity	122
Instrumentation Quality Management Programs.....	136

New Programs **NEW**

High-Sensitivity Troponin I Calibration Verification/Linearity (LN48)	135
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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
 - 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 expedited 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 Program	Page No.
LN2 - Chemistry, Lipid, Enzyme CVL	124	C1, C3/C3X, C4, CZ/CZX/CZ2X	58-60
LN2BV - Chemistry, Lipid, Enzyme all Beckman (except AU), Vitros CVL	124		
LN3 - Therapeutic Drug Monitoring CVL	125	CZ/CZX/CZ2X/Z	58-60
LN5 - Ligand CVL	125	K/KK	86
LN5S - Ligand all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM CVL	125		
LN6 - Urine Chemistry CVL	126	U	72
LN7 - Immunology CVL	126	IG/IGX	216
LN8 - Reproductive Endocrinology CVL	127	Y/YY	88
LN9 - Hematology CVL	127	FH series, HE series	140-141
LN11 - Serum Ethanol CVL	127	AL2	106
LN12 - C-Reactive Protein CVL	128	CRP	216
LN13, LN13C - Blood Gas/Critical Care CVL	128	AQ, AQ2, AQ3, AQ4	96
LN15 - Hemoglobin A _{1c} Accuracy CVL	128	GH2, GH5	67
LN16 - Homocysteine CVL	129	HMS	68
LN17 - Whole Blood Glucose CVL	129		
LN18, LN19 - Reticulocyte CVL	129	RT, RT2, RT3, RT4	146
LN20 - Urine Albumin CVL	130	U	72
LN21 - High-Sensitivity C-Reactive Protein CVL	130	HSCRCP	68
LN22 - Flow Cytometry CVL	130	FL	224
LN23 - Prostate-Specific Antigen CVL	130	K/KK	86
LN24 - Creatinine Accuracy CVL	131	C1, C3/C3X, C4, CZ/CZX/CZ2X	58-60
LN25, LN27 - Troponin I and T CVL	131	CRT, CRTI	64
LN30 - B-Type Natriuretic Peptides CVL	131	BNP	63
LN31 - Immunosuppressive Drugs CVL	132	CS	61
LN32 - Ammonia CVL	132	C1, C3/C3X, CZ/CZX/CZ2X	58-60
LN33 - Serum Myoglobin CVL	132	CRT, CRTI	64
LN34 - Tumor Markers CVL	132	TM/TMX	93
LN35 - Thrombophilia CVL	133	CGS2	167
LN36 - Heparin CVL	133	CGS4	167
LN37 - von Willebrand Factor Antigen CVL	133	CGS3	167
LN38 - CMV Viral Load CVL	133	VLS, VLS2	206
LN39 - HIV Viral Load CVL	133	HIVG, HV2	206
LN40 - Vitamin D CVL	134	VITD	88
LN41 - Procalcitonin CVL	134	PCT	81
LN42 - D-Dimer CVL	134	CGL, CGDF	164
LN44 - Fibrinogen CVL	134	CGL	164
LN45 - HCV Viral Load CVL	133	HCV2	205
LN46 - C-Peptide/Insulin CVL	135	ING	90
LN47 - High-Sensitivity Troponin T CVL	135	HCRT, HCRTI	64
LN48 - High-Sensitivity Troponin I CVL NEW	135	HCRT, HCRTI	64

All CVL programs 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	LN2BV			Units
		LN2 (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 ₂	■		7–42		mmol/L
Creatinine	■		0.8–34.0		mg/dL
Glucose	■		20–750		mg/dL
Iron	■		10–950		µg/dL
Magnesium	■		0.5–9.0		mg/dL
Osmolality	■		200–600		mOsm/kg H ₂ 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	■	20–1,200	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
- Conventional and International System of Units (SI) reporting offered
- 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

Analyte	Program Code	
	LN3	LN3 Target Ranges
Acetaminophen	■	20–350 µg/mL
Amikacin	■	2–45 µg/mL
Carbamazepine	■	2–25 µg/mL
Digoxin	■	0.5–4.4 ng/mL
Gentamicin	■	1–11 µg/mL
Lidocaine	■	1–10 µg/mL
Lithium	■	0.3–4.0 mmol/L
Phenobarbital	■	8–80 µg/mL
Phenytoin	■	5–35 µg/mL
Salicylate	■	7–90 mg/dL
Theophylline	■	5–35 µg/mL
Tobramycin	■	1–10 µg/mL
Valproic acid	■	15–140 µg/mL
Vancomycin	■	7–85 µg/mL

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

Program Information

- Six 4.0-mL liquid serum specimens
- A seventh 4.0-mL liquid serum specimen for acetaminophen, carbamazepine, and vancomycin
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Ligand Calibration Verification/Linearity LN5, LN5S

Analyte	Program Code	Target Ranges	
		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	■	1–65 µg/dL	
Ferritin	■	2–1,100 ng/mL	
Folate	■	1.3–20.0 ng/mL	
Human chorionic gonadotropin (hCG)	■	5–14,000 mIU/mL	
Triiodothyronine (T3), total	■	0.5–7.0 ng/mL	
Thyroxine (T4), total	■	1–80 µg/dL	
Thyroid-stimulating hormone (TSH)	■	0.01–100.00 µIU/mL	
Vitamin B ₁₂	■	100–2,200 pg/mL	

*The LN5S CVL will allow Siemens ADVIA (Centaur, XP, and CP) and Atellica IM 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) and Atellica IM users
- LN5S - Thirteen 4.0-mL liquid serum specimens; appropriate for Siemens ADVIA (Centaur, XP, and CP) and Atellica IM users
- Conventional and International System of Units (SI) reporting offered
- 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.

Urine Chemistry Calibration Verification/Linearity LN6

Analyte	Program Code	
	LN6	LN6 Target Ranges
Amylase	■	40–2,500 U/L
Calcium	■	5–30 mg/dL
Chloride	■	20–300 mmol/L
Creatinine	■	20–540 mg/dL
Glucose	■	25–640 mg/dL
Osmolality	■	30–1,800 mOsm/kg H ₂ O
Phosphorus	■	15–225 mg/dL
Potassium	■	7–225 mmol/L
Protein, total	■	10–210 mg/dL
Sodium	■	20–310 mmol/L
Urea nitrogen/Urea	■	20–2,000 mg/dL
Uric acid	■	6–200 mg/dL

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

Program Information

- Twenty 4.0-mL liquid simulated urine specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Immunology Calibration Verification/Linearity LN7

Analyte	Program Code	
	LN7	LN7 Target Ranges
Alpha-1 antitrypsin	■	35–500 mg/dL
Complement C3	■	21–420 mg/dL
Complement C4	■	5–125 mg/dL
IgA	■	32–650 mg/dL
IgG	■	160–3,800 mg/dL
IgM	■	25–550 mg/dL
Transferrin	■	50–750 mg/dL

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

Program Information

- Seven 2.0-mL liquid serum specimens
- Conventional and International System of Units (SI) reporting offered
- 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.

Reproductive Endocrinology Calibration Verification/Linearity LN8

Analyte	Program Code	
	LN8	LN8 Target Ranges
Estradiol	■	25–4,500 pg/mL
Follicle-stimulating hormone (FSH)	■	3–190 mIU/mL
Human chorionic gonadotropin (hCG)	■	5–8,000 mIU/mL
Luteinizing hormone (LH)	■	2–190 mIU/mL
Progesterone	■	1–50 ng/mL
Prolactin	■	3–315 ng/mL
Testosterone	■	20–1,500 ng/dL

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

Program Information

- Seven 4.0-mL liquid serum specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Hematology Calibration Verification/Linearity LN9

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

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

Program Information

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

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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.

Program Information

- Seven 3.0-mL liquid serum specimens
- Conventional and International System of Units (SI) reporting offered
- 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.

C-Reactive Protein Calibration Verification/Linearity LN12

Analyte	Program Code	
	LN12	LN12 Target Range
C-reactive protein	■	7–316 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 130.

Program Information

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

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

Analyte	Program Code		Program Code	
	LN13	LN13 Target Ranges	LN13C	LN13C Target Ranges
pCO ₂	■	12–91 mm Hg	■	12–91 mm Hg
pH	■	6.83–7.82	■	6.83–7.82
pO ₂	■	18–490 mm Hg	■	18–490 mm Hg
Calcium, ionized			■	0.15–3.30 mmol/L
Chloride			■	62–148 mmol/L
Glucose			■	10–465 mg/dL
Lactate			■	0.2–18.0 mmol/L
Potassium			■	0.5–10.7 mmol/L
Sodium			■	83–172 mmol/L

Program Information

- LN13, LN13C - Ten 2.5-mL ampules of aqueous specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Hemoglobin A_{1c} Accuracy Calibration Verification/Linearity LN15

Analyte	Program Code	
	LN15	LN15 Target Range
Hemoglobin A _{1c}	■	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

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.

Homocysteine Calibration Verification/Linearity LN16

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

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

Program Information

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

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

- Five 2.0-mL liquid whole blood specimens
- Report up to 10 different ancillary testing sites or instruments
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Reticulocyte Calibration Verification/Linearity LN18, LN19

Instrument/Method	Program Code		Program Code	
	LN18	LN18 Target Range	LN19	LN19 Target Range
Coulter Gen-S™, LH 500, LH 700 series, and UniCel DxH			■	0.3%–27.0%
All other instruments	■	0.3%–24.0%		

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

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
- Conventional and International System of Units (SI) reporting offered
- 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.

Urine Albumin Calibration Verification/Linearity LN20

Analyte	Program Code	
	LN20	LN20 Target Ranges
Urine albumin	■	10–350 mg/L
Urine creatinine	■	20–500 mg/dL
Urine albumin/creatinine ratio	■	

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

The urine albumin/creatinine ratio results will be evaluated with a calculation verification comparison.

Program Information

- Six 5.0-mL urine specimens
- Conventional and International System of Units (SI) reporting offered
- 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	■	0.5–18.0 mg/L

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

Program Information

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

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
CD3+/CD8+ T lymphocytes absolute	■	250–1,600 cells/μL

Program Information

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

Prostate-Specific Antigen Calibration Verification/Linearity LN23

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

Program Information

- Twelve 1.0-mL liquid serum specimens
- Conventional and International System of Units (SI) reporting offered
- 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.

Creatinine Accuracy Calibration Verification/Linearity LN24

Analyte	Program Code	
	LN24	LN24 Target Range
Creatinine	■	0.6–4.0 mg/dL
Estimated glomerular filtration rate (eGFR)	■	

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

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.

Program Information

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

Troponin Calibration Verification/Linearity LN25, LN27

Analyte	Program Code		Program Code	
	LN25	LN25 Target Range	LN27	LN27 Target Range
Troponin I	■	0.1–65.0 ng/mL		
Troponin T			■	0.1–27.0 ng/mL

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

LN25 and LN27 are not appropriate for reporting high-sensitivity troponin. For reporting high-sensitivity troponin T, use LN47 on page 135. For reporting high-sensitivity troponin I, use LN48 on page 135.

Program Information

- LN25 - Seven 2.0-mL liquid serum specimens
- LN27 - Six 2.0-mL liquid serum specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

B-Type Natriuretic Peptides Calibration Verification/Linearity LN30

Analyte	Program Code	
	LN30	LN30 Target Ranges
BNP	■	18–5,000 pg/mL
NT-proBNP	■	35–22,500 pg/mL

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

Program Information

- Six 1.0-mL liquid plasma specimens
- Conventional and International System of Units (SI) reporting offered
- 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.

Immunosuppressive Drugs Calibration Verification/Linearity LN31

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

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

Program Information

- Seven 2.0-mL liquid whole blood hemolysate specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Ammonia Calibration Verification/Linearity LN32

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

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

Serum Myoglobin Calibration Verification/Linearity LN33

Analyte	Program Code	
	LN33	LN33 Target Range
Myoglobin	■	25–900 ng/mL

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

Program Information

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

Tumor Markers Calibration Verification/Linearity LN34

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

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
- Conventional and International System of Units (SI) reporting offered
- 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.

Coagulation Calibration Verification/Linearity LN35, LN36, LN37

Analyte	Program Code			Target Ranges
	LN35	LN36	LN37	
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

- LN35, LN37 - Six 1.0-mL frozen plasma specimens per mailing
- LN36 - Twelve 1.0-mL frozen plasma specimens per mailing, which include six for low molecular weight heparin and six for unfractionated heparin
- Two shipments per year; ships on dry ice

Viral Load Calibration Verification/Linearity LN38, LN39, LN45

Analyte	Program Code			Target Ranges
	LN38*	LN39	LN45	
CMV viral load	■			316.0–1.0M IU/mL
HIV viral load		■		50.0–5.0M IU/mL
HCV viral load			■	50–280M IU/mL

*The biohazard warning applies to program 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)



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.

Vitamin D Calibration Verification/Linearity LN40

Analyte	Program Code	
	LN40	LN40 Target Range
25-OH vitamin D, total	■	10–135 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
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

Procalcitonin Calibration Verification/Linearity LN41

Analyte	Program Code	
	LN41	LN41 Target Range
Procalcitonin	■	0.3–175.0 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

D-Dimer Calibration Verification/Linearity LN42

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

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

Fibrinogen Calibration Verification/Linearity LN44

Analyte	Program Code	
	LN44	LN44 Target Range
Fibrinogen	■	80–900 mg/dL

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

Program Information

- Six 1.0-mL frozen plasma specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year; ships on dry ice

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.

C-Peptide/Insulin Calibration Verification/Linearity LN46

Analyte	Program Code	
	LN46	LN46 Target Ranges
C-Peptide	■	0.2–35.0 ng/mL
Insulin	■	0.6–800.0 μ IU/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
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

High-Sensitivity Troponin T Calibration Verification/Linearity LN47

Analyte	Program Code	
	LN47	LN47 Target Range
High-sensitivity troponin T	■	10–9,000 ng/L

Program Information

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

High-Sensitivity Troponin I Calibration Verification/Linearity LN48

NEW

Analyte	Program Code	
	LN48	LN48 Target Range
High-sensitivity troponin I	■	10–25,000 ng/L

Program Information

- Six 2.0-mL serum specimens
- 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.

Instrumentation Quality Management Programs

Instrumentation I

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

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) program specimens may contain corrosive or toxic substances, environmental hazards, or irritants.

The CAP is your trusted calibration verification and linearity partner, offering a comprehensive menu of programs for diagnostic confidence.

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

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

Interfering Substance IFS			
Analyte	Program Code		
	IFS		
	Bilirubin Interferent	Hemoglobin Interferent	Lipid Interferent
Alanine aminotransferase (ALT/SGPT)	■	■	■
Albumin	■	■	■
Alkaline phosphatase	■	■	■
Amylase	■	■	■
Aspartate aminotransferase (AST/SGOT)	■	■	■
Calcium	■	■	■
Chloride	■	■	■
CK-2 (MB) mass	■	■	■
Creatine kinase (CK)	■	■	■
Creatinine	■	■	■
Gamma glutamyl transferase (GGT)	■	■	■
Glucose	■	■	■
Iron	■	■	■
Lactate dehydrogenase (LD)	■	■	■
Lipase	■	■	■
Magnesium	■	■	■
Osmolality	■	■	■
Phosphorus	■	■	■
Potassium	■	■	■
Protein, total	■	■	■
Sodium	■	■	■
Urea nitrogen (BUN)	■	■	■
Uric acid	■	■	■

The material expires December 1, 2023.

Program Information

- Eighteen 10.0-mL liquid serum specimens
- Designed for verifying manufacturing interference specifications and investigating discrepant results caused by interfering substances
- Submit results any time prior to the material's expiration date
- One shipment per year

Serum Carryover SCO

Analyte	Program Code
	SCO
Creatinine	■
hCG	■
Lactate dehydrogenase (LD)	■
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
	UTC0
Benzoylcegonine	■
Delta-9-THC-COOH	■
Opiates	■
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

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12 Hematology and Clinical Microscopy



Performance Analytics Dashboard provides valuable insights into your laboratory's performance.

The complimentary dashboard helps you manage your CAP PT and accreditation performance.

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Hematology and Clinical Microscopy

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New Programs

NEW

Hematology Automated Differential Series (FH17/FH17P).....	141
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Hematology

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

Hematology—Basic HE, HEP			
Analyte/Procedure	Program Code		Challenges per Shipment
	HE	HEP	
Blood cell identification		■	10
Hematocrit	■	■	5
Hemoglobin	■	■	5
MCV, MCH, and MCHC	■	■	5
MPV	■	■	5
Platelet count	■	■	5
RDW	■	■	5
Red blood cell count	■	■	5
White blood cell count	■	■	5

Program Information

- HE, HEP - Five 3.0-mL whole blood specimens
- HEP - Ten images, each available as photographs and online images
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



12

Hematology and Clinical Microscopy

Color Atlas of Hematology—Peripheral Blood Color Atlas of Hematology—Bone Marrow

The second edition of *Color Atlas of Hematology* has now expanded to two volumes, with the addition of bone marrow pathology.

Volume 1 presents keen insights into peripheral blood pathology. Link to 18 engaging videos. View 100+ peripheral blood smears online with DigitalScope® technology.

Volume 2 is a useful and instructional reference guide to bone marrow pathology. Explore the detailed “A Closer Look At...” sections. Access the links to interactive slide images.

Vol 1. Peripheral Blood

Item number: PUB222 Hardcover; 480 pages; 2018

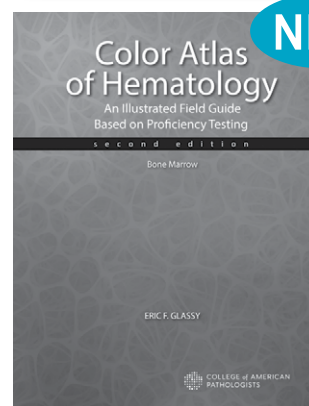
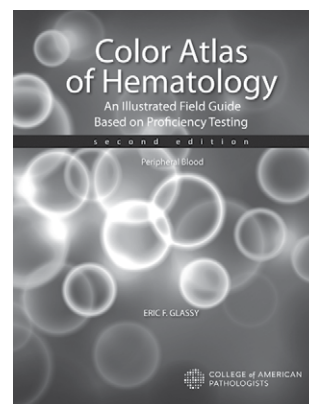
Vol 2. Bone Marrow

Item number: PUB229 Hardcover; 370 pages; 2022

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Hematology Automated Differential Series FH1-FH4, FH9-FH10, FH13, FH16-FH17, FH1P-FH4P, FH9P-FH10P, FH13P, FH16P-FH17P

Analyte/Procedure	Program Code				Challenges per Shipment
	FH1-FH4, FH9-FH10, FH16- FH17 NEW	FH1P-FH4P, FH9P-FH10P, FH16P- FH17P NEW	FH13	FH13P	
Blood cell identification		■		■	10
Hematocrit	■	■	■	■	5
Hemoglobin	■	■	■	■	5
Immature granulocyte (IG)	■	■			5 (FH9 and FH17)
Immature platelet fraction (IPF)/reticulated platelet (RP)	■	■			5 (FH9 and FH17)
Large unstained cell (LUC)	■	■			5 (FH4 only)
MCV, MCH, and MCHC	■	■	■	■	5
MPV	■	■	■	■	5
Nucleated red blood cell count (nRBC)	■	■	■	■	5 (FH3, FH9, FH13, FH16, and FH17)
Platelet count	■	■	■	■	5
RDW	■	■	■	■	5
Red blood cell count	■	■	■	■	5
White blood cell count	■	■	■	■	5
WBC differential	■	■	■	■	5

For multiple instrument reporting options, see the Quality Cross Check programs, FH3Q, FH4Q, FH9Q, and FH13Q, on page 142.

Program Information

- FH1-4, FH10, FH16-17, FH1P-4P, FH10P, FH16P-17P - Five 2.5-mL whole blood specimens in vials with pierceable caps
- FH9, FH13, FH9P, FH13P - Five 2.0-mL whole blood specimens in vials with pierceable caps
- FHP series - Ten images, each available as photographs and online images
- For method compatibility, see instrument matrix on page 143
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



Quality Cross Check—Hematology FH3Q, FH4Q, FH9Q, FH13Q

Analyte/Procedure	Program Code				Challenges per Shipment
	FH3Q	FH4Q	FH9Q	FH13Q	
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	■	■	■	■	3
Red blood cell count	■	■	■	■	3
WBC differential	■	■	■	■	3
White blood cell count	■	■	■	■	3

These programs do not meet regulatory requirements for proficiency testing; see the FH Series on page 141. For additional information about the Quality Cross Check program, see page 40.

Program Information

- FH3Q, FH4Q, FH9Q, FH13Q - Three 2.5-mL whole blood specimens in vials with pierceable caps
- Report up to three instruments
- For method compatibility, see instrument matrix on page 143
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

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.

Hematology Automated Differential Series, Instrument Matrix

Instrument	FH and FHQ Series								
	FH1	FH2	FH3/ FH3Q	FH4/ FH4Q	FH9/ FH9Q	FH10	FH13/ FH13Q	FH16/ FH3Q	FH17
Abbott Cell-Dyn® 1200, 1400, 1600, 1700, Emerald™	■								
Horiba ABX 9000+, 9018+, 9020+	■								
Sysmex K-series, K-1000/KCP-1, KX-21/21N, pocH-100i, XP-series	■								
CDS/Medonic M-series		■							
Coulter® Ac-T, diff/diff 2™ MD 2/8/10/16, ONYX™, S880, S-plus V, ST, STKR, T-series		■							
Drew Scientific DC-18, I-1800, DREW3, EXCELL 10/16/18		■							
Horiba ABX Micros		■							
Mindray BC-2800, 3000/3200 series		■							
Siemens ADVIA® 360		■							
Abbott Cell-Dyn 3000, 3500, 3700, 4000, Emerald 22/AL, Ruby™, Sapphire™			■						
Biosystems SA HA3/HA5			■						
Drew Scientific EXCELL 22, 2280			■						
Orphee Mythic 18, 22 AL, 22 OT, 60			■						
Siemens ADVIA 560			■						
Siemens ADVIA 120, 120 w/SP1, 2120				■					
Abbott Alinity hq, Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100D/L (Blood Center), XE-2100L, XE-5000, XN-series (includes RL App), XN-L series, XS-500i, XS-800i, XS-1000i, XS-1000i-AL, XS-1000iC, XT-1800i, XT-2000i, XT-4000i					■				
Coulter Ac-T 5diff (AL, CP, OV)						■			
DIRUI BF series						■			
Horiba ABX Pentra 60, 80, 120, Pentra DF Nexus						■			
Coulter LH 750, LH 755, LH 780, LH 785, UniCel DxH series (except DxH 500 series)							■		
Coulter DxH 500 series								■	
Horiba Yumizen H500/550, H1500/2500								■	
Mindray BC-700, BC-720, BC-760, BC-780, BC-6000, BC-6000Plus, BC-6100, BC-6100Plus, BC-6200, BC-6200Plus, BC-6600, BC-6600Plus, BC-6700, BC-6800, BC-6800Plus, BC-7500 CRP									■

Blood Cell Identification, Photographs BCP, BCP2

Procedure	Program Code		Challenges per Shipment
	BCP	BCP2	
Blood cell identification	■	■	5
Educational challenge(s)	■	■	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 Shipment
	BP		
Blood parasite identification (thin/thick film sets*)	■		5

*This program will include corresponding thick films when available.

Program Information

- Five Giemsa-stained blood film sets, photographs, and/or online images
- Percent parasitemia reporting is provided when appropriate for educational purposes
- A variety of blood parasites, including *Plasmodium*, *Babesia*, *Trypanosoma*, and filarial worms
- Three shipments per year

Bone Marrow Cell Differential BMD

Procedure	Program Code		Challenges per Shipment
	BMD		
Bone marrow differential	■		1
Bone marrow cell identification	■		5

Additional Information

- Examine an online, whole slide image that includes a manual 500 count bone marrow differential 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® technology
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Erythrocyte Sedimentation Rate ESR, ESR1, ESR2, ESR3

Procedure	Program Code				Challenges per Shipment
	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®, miniiSED®				■	3

Program Information

- ESR, ESR1 - Three 6.0-mL whole blood specimens
- ESR2 - Three 3.0-mL latex bead specimens
- ESR3 - Three 3.5-mL whole blood specimens
- Two shipments per year

Fetal Red Cell Detection HBF

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

Program Information

- Two 1.2-mL liquid whole blood specimens
- Not designed for F cell quantitation
- Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope technology
- Two shipments per year

Hemoglobinopathy HG

Procedure	Program Code	Challenges per Shipment
	HG	
Hemoglobin identification and quantification	■	4
Educational dry challenges	■	2
Hemoglobin A ₂ quantitation	■	4
Hemoglobin F quantitation	■	1
Sickling test, qualitative	■	4

Program Information

- Four 0.5-mL stabilized red blood cell specimens
- Two educational dry challenges (case histories, electrophoresis patterns, and clinical interpretation questions)
- Two shipments per year

Rapid Total White Blood Cell Count RWBC

Procedure	Program Code	Challenges per Shipment
	RWBC	
Rapid total white blood cell count	■	5

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	Program Code				Challenges per Shipment
	RT	RT2	RT3	RT4	
Abbott Alinity hq, Abbott Cell-Dyn 4000, Sapphire, Siemens ADVIA 120/2120, and all other automated and manual methods	■				3
Abbott Cell-Dyn 3500, 3700, Ruby		■			3
Coulter Gen-S™, HmX, LH 500, LH 700 series, MAXM, STKS, UniCel DxH series			■		3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-L series, XN-series (includes RL App), XT-2000i, XT-4000i				■	3
Pierceable caps			■	■	3

For specific program testing components, see reticulocyte matrix on next page.

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 Alinity hq, Abbott Cell-Dyn 4000, Sapphire, Siemens ADVIA 120/2120, and all other automated and manual methods	■			3
Coulter Gen-S™, HmX, LH 500, LH 700 series, MAXM, STKS, UniCel DxH series		■		3
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-L series, XN-series (includes RL App), XT-2000i, XT-4000i			■	3

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

The Quality Cross Check Program:

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

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

Reticulocyte, Matrix

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

Sickle Cell Screening SCS

Procedure	Program Code	Challenges per Shipment
	SCS	
Sickling test, qualitative	■	3

Program Information

- Three 1.0-mL whole blood specimens
- Two shipments per year

Transfusion-Related Cell Count TRC

Procedure	Program Code	Challenges per Shipment
	TRC	
Platelet count (platelet-rich plasma)	■	5
WBC count	■	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 leukocyte-reduced platelet material
- Two 1.0-mL vials leukocyte-reduced red blood cells
- Three shipments per year

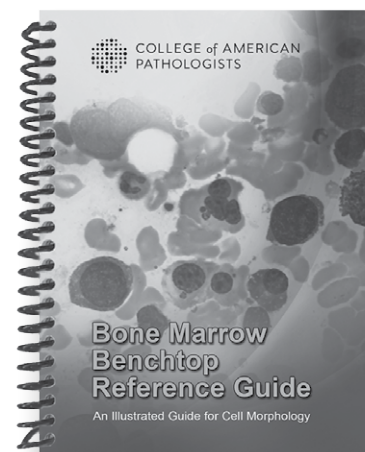
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Item number: BMBRG
Spiral bound; 2018

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 2.5-mL whole blood specimens; two shipments per year
- Conventional and International System of Units (SI) reporting offered
- 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 2.0-mL whole blood specimens; two shipments per year: B and D

- To verify instrument compatibility, refer to the instrument matrix on page 70

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Virtual Peripheral Blood Smear VPBS

Procedure	Program Code	Challenges per Shipment
	VPBS	
WBC differential	■	3
Platelet estimate	■	3
RBC morphology	■	3
Blood cell identification	■	15

Additional Information

- Examine online, whole slide images that include a manual 100 white blood cell differential count and annotated cells for identification.
- Evaluate and identify red blood cell (RBC) morphology and identify specific white blood cells (WBC) in peripheral blood.
- Recognize and integrate problem-solving skills through the use of interpretive questions found throughout the discussion.
- See system requirements on page 13.

Program Information

- Three online, peripheral blood whole slide images that include 15 annotated cells for identification
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

Expanded Virtual Peripheral Blood Smear EHE1

Procedure	Program Code	Challenges per Shipment
	EHE1	
WBC differential	■	2
Platelet estimate	■	2
RBC morphology	■	2
WBC morphology	■	2
Blood cell identification	■	10

Additional Information

- More challenging and/or complex testing than the Virtual Peripheral Blood Smear (VPBS) program.
- Examine online, whole slide images that include a manual 100 white blood cell differential count and annotated cells for identification.
- Comprehensive case studies.
- Recognize and integrate problem-solving skills through the use of interpretive questions found throughout the 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 [via email](#) when the activity is available

Hematopathology Online Education HPATH/HPATH1

Program	Program Code	Challenges per Shipment
	HPATH/HPATH1	
Hematopathology online case review	■	5

Additional Information

HPATH prepares pathologists, hematopathologists, and hematologists to succeed by providing ongoing diagnostic learning 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.
- Each case includes assessment questions.
- See system requirements on page 13.

Program Information

- HPATH - Five diagnostic challenges/online, whole slide images with clinical history; reporting with CME credit is available for one pathologist/hematologist; for additional pathologist/hematologist, order HPATH1
- HPATH1 - Reporting option with CME credit for each additional pathologist/hematologist (within the same institution); must order in conjunction with program HPATH
- Earn a maximum of 12.5 CME credits (AMA *PRA Category 1 Credits™*) per pathologist and a maximum of 12.5 CE credits per hematologist for completion of an entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Clinical Microscopy

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

Urinalysis and Clinical Microscopy **CMP, CMP1**

Analyte/Procedure	Program Code		Challenges per Shipment
	CMP	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
pH	■	■	3
Protein, qualitative	■	■	3
Reducing substances	■	■	3
Specific gravity	■	■	3
Urine sediment photographs	■	■	3
Urobilinogen	■	■	3

For multiple instrument reporting options, see the Quality Cross Check program, CMQ, on page 152.

Program Information

- **CMP** - Three 10.0-mL liquid urine specimens; for use with all instruments except Beckman Coulter DxU 810c IRIS and IRIS iCHEM; six images, each available as photographs and online images
- **CMP1** - Three 10.0-mL liquid urine specimens; for use with Beckman Coulter DxU 810c IRIS and IRIS iCHEM instruments only, urinalysis; six images, each available as photographs and online images
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

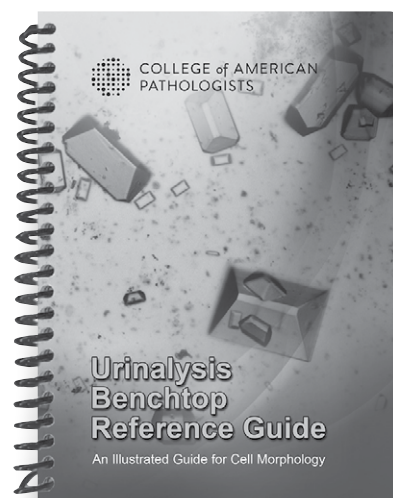
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Item number: UABRG
Spiral bound; 38 pages;
34 images; 2014

Quality Cross Check—Urinalysis CMQ

Analyte	Program Code	Challenges per Shipment
	CMQ	
Bilirubin	■	3
Blood or hemoglobin	■	3
Glucose	■	3
hCG urine, qualitative	■	3
Ketones	■	3
Leukocyte esterase	■	3
Nitrite	■	3
Osmolality	■	3
pH	■	3
Protein, qualitative	■	3
Reducing substances	■	3
Specific gravity	■	3
Urobilinogen	■	3

This program does not meet regulatory requirements for proficiency testing; see programs CMP and CMP1 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.

Program Information

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

Clinical Microscopy Miscellaneous Photopage CMMP

Procedure	Program Code	Challenges per Shipment
	CMMP	
Fern test (vaginal)	■	1
KOH preparation (skin)	■	1
Nasal smear	■	1
Pinworm preparation	■	1
Spermatozoa	■	1
Stool for leukocytes	■	1
Urine sediment photographs	■	3
Vaginal wet preparation photographs (for clue cells, epithelial cells, trichomonas, or yeast)	■	1

Program Information

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

Amniotic Fluid Leakage AFL

Procedure	Program Code	Challenges per Shipment
	AFL	
pH interpretation	■	3

Program Information

- Three 2.0-mL liquid specimens
- For use with nitrazine paper and the Amniotest™
- Two shipments per year

Automated Body Fluid Series ABF1, ABF2, ABF3

Procedure	Program Code			Challenges per Shipment
	ABF1	ABF2	ABF3	
Red blood cell fluid count	■	■	■	2
Total nucleated cell/WBC fluid count	■	■	■	2

Program Information

- Two 3.0-mL simulated body fluid specimens
- Two shipments per year

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	■		
Coulter LH 700 series, Unicl DxH series		■	
Sysmex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-series, XN-L series, XT-1800i, XT-2000i, XT-4000i		■	
Beckman Coulter Iris iQ®200, DxU 800 Iris series			■

Virtual Body Fluid VBF

Procedure	Program Code		Challenges per Shipment
	VBF		
Body fluid cell differential	■		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 [via email](#) when the activity is available



Automated Urine Microscopy UAA, UAA1

Analyte	Program Code		Challenges per Shipment
	UAA	UAA1	
Casts, semiquantitative/qualitative	■	■	2
Crystals, semiquantitative/qualitative	■		2
Epithelial cells, semiquantitative/qualitative		■	2
Red blood cells, quantitative/qualitative	■	■	2
White blood cells, quantitative/qualitative	■	■	2

For method compatibility, see instrument matrix below.

Program Information

- 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	X	
DxU Iris 800 series	X	
IRIS iQ200	X	
Roche cobas u701	X	
ARKRAY Aution Hybrid		X
77 Elektronika		X
Siemens Atellica UAS 800		X
Sysmex UF 50, 100, 500i, 1000i, 3000/4000/5000, Sysmex UX 2000		X

Crystals BCR, BFC, URC

Procedure	Program Code			Challenges per Shipment
	BCR	BFC	URC	
Bile crystal identification	■			2
Body fluid crystal identification		■		2
Urine crystal identification			■	2

Program Information

- BCR - Two photographs
- BFC - Two 1.5-mL simulated body fluid specimens (eg, synovial fluid)
- URC - Two 1.5-mL urine specimens
- Two shipments per year

Dipstick Confirmatory DSC

Analyte	Program Code		Challenges per Shipment
	DSC		
Bilirubin	■		2
Protein	■		2

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

Fecal Fat FCFS

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

Program Information

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

Fetal Hemoglobin APT

Analyte	Program Code		Challenges per Shipment
	APT		
Fetal hemoglobin (gastric fluid or stool)	■		2

Program Information

- Two 1.2-mL simulated body fluid specimens
- Two shipments per year

Gastric Occult Blood GOCB

Analyte	Program Code		Challenges per Shipment
	GOCB		
Gastric occult blood	■		3
Gastric pH	■		3

Program Information

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

Glucose-6-Phosphate Dehydrogenase G6PDS

Analyte	Program Code	Challenges per Shipment
	G6PDS	
G6PD, qualitative and quantitative	■	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	■	3
Red blood cell fluid count	■	3
Total nucleated cell/WBC fluid count	■	3

Program Information

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

This program has limited stability. Laboratories outside the US or Canada should consider purchase of HFCl, which has longer stability.

Hemocytometer Fluid Count, International HFCl

Procedure	Program Code	Challenges per Shipment
	HFCl	
Body fluid differential	■	2
Red blood cell fluid count	■	3
Total nucleated cell/WBC fluid count	■	3

Program Information

- Three 2.0-mL simulated body fluid specimens; two online, whole slide images for 2- and 5-part differential
- Powered by DigitalScope technology
- Designed for laboratories outside the US or Canada that have experienced significant shipping and receiving issues and need longer program stability
- Two shipments per year

Additional Information

- This program meets the CAP's Accreditation Program requirements.
- Examine online, whole slide images that include a manual differential count.
- See system requirements on page 13.

Lamellar Body Count LBC

Procedure	Program Code	Challenges per Shipment
	LBC	
Lamellar body count	■	3

Program Information

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

Occult Blood OCB

Analyte	Program Code	Challenges per Shipment
	OCB	
Occult blood	■	3

For multiple instrument reporting options, see the Quality Cross Check program, OCBQ, below.

Quality Cross Check—Occult Blood OCBQ

Analyte	Program Code	Challenges per Shipment
	OCBQ	
Occult blood	■	3

This program does not meet regulatory requirements for proficiency testing; see program OCB 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.

Fetal Membranes/Preterm Labor ROM1

Procedure	Program Code	Challenges per Shipment
	ROM1	
Fetal membranes/preterm labor	■	3

Special Clinical Microscopy SCM1, SCM2

Analyte/Procedure	Program Code		Challenges per Shipment
	SCM1	SCM2	
Urine hemosiderin, Prussian blue	■		3
Urine eosinophils, Wright stain		■	3

Program Information

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

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

Program Information

- SCM1, SCM2 - 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
	TMO	
Tick, mite, and arthropod identification	■	3

Program Information

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

Urine hCG UHCG

Procedure	Program Code	Challenges per Shipment
	UHCG	
Urine hCG, qualitative	■	5

Program Information

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

Urine Albumin and Creatinine, Semiquant UMC

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

Program Information

- Two 3.0-mL liquid urine specimens
- For use with dipstick and semiquantitative methods only
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

For quantitative reporting, refer to program U, page 72.

Worm Identification WID

Procedure	Program Code	Challenges per Shipment
	WID	
Worm identification	■	3

Program Information

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

13 Reproductive Medicine



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Reproductive Medicine

Andrology and Embryology.....	160
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Andrology and Embryology

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Semen Analysis SC, SC1, PV, PV1, SM, SV, ASA								
Procedure	Program Code							Challenges per Shipment
	SC	SC1	PV	PV1	SM	SV	ASA	
Sperm count and presence/absence (manual methods)	■							2
Sperm count (automated methods)		■						2
Postvasectomy sperm count and presence/absence (manual methods)			■					2
Postvasectomy sperm count (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-nigrosin-stained slides
- ASA - Two 0.3-mL serum specimens
- Two shipments per year



Sperm Count, Motility, Morphology, and Viability SMCD, SM1CD, SM2CD				
Procedure	Program Code			Challenges per Shipment
	SMCD	SM1CD	SM2CD	
Sperm count	■			2
Sperm motility/forward progression	■			2
Sperm classification		■		10
Sperm morphology		■		2
Sperm viability			■	2

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 powered by DigitalScope® technology
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Embryology EMB

Procedure	Program Code	Challenges per Shipment
	EMB	
Embryo transfer and quality assessment (three- and five-day-old embryos)	■	4

Program Information

- Two online sets of five video clips
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Sex Hormones Y/YY, DY

Analyte	Program 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 program Y or YY
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

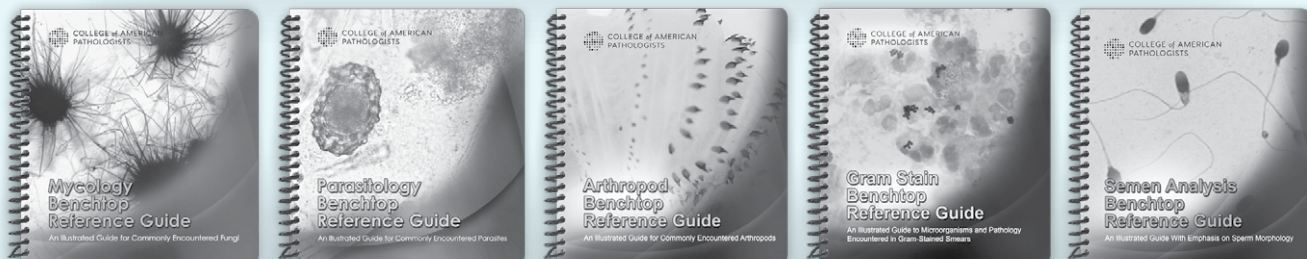
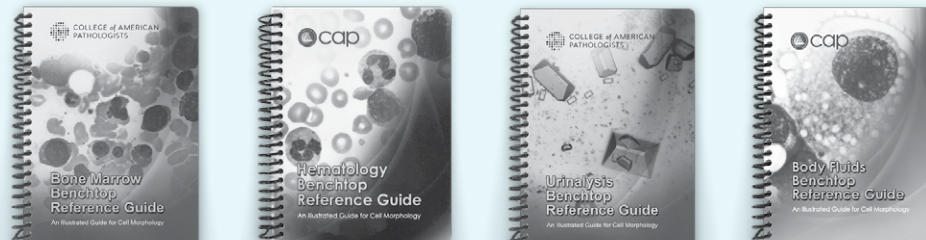
Antimüllerian Hormone AMH

Analyte	Program Code	Challenges per Shipment
	AMH	
Antimüllerian hormone	■	3

Program Information

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

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14 Coagulation



Provide for patient care and safety.

The CAP continues to support laboratory quality initiatives through the development, maintenance, and enhancement of effective proficiency testing programs for coagulation, including our newest programs:

- Expanded Coagulation Factors (ECF).
- Viscoelastic Testing—Whole Blood (VES1).

New Programs **NEW**

Expanded Coagulation Factors (ECF)	166
--	-----

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 per 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
Fibrin monomer		■	■	2

*Participants reporting INR results will receive a special evaluation to assess the INR calculation. For multiple instrument reporting options, see the Quality Cross Check program, CGLQ, on page 165.

Program Information

- CGB - Five 1.0-mL lyophilized plasma specimens
- CGL - Seven 1.0-mL lyophilized plasma specimens and one 2.0-mL serum specimen
- CGDF - One 2.0-mL serum specimen; two 1.0-mL lyophilized plasma specimens
- One 1.0-mL liquid plasma specimen will replace one 1.0-mL lyophilized plasma specimen for D-dimer testing in CGL and CGDF in one shipment per year
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



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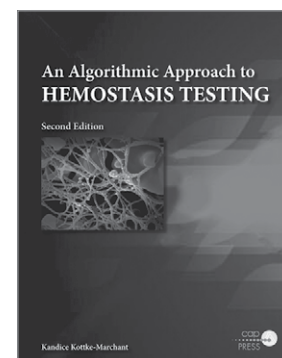
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Quality Cross Check—Coagulation CGLQ

Analyte	Program Code	Challenges per Shipment
	CGLQ	
Activated partial thromboplastin time	■	3
Fibrinogen	■	3
Prothrombin time	■	3
D-dimer	■	2
Fibrin(ogen) degradation products, plasma	■	1
Fibrin(ogen) degradation products, serum	■	1

This program does not meet regulatory requirements for proficiency testing; see program CGL 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

- Three 1.0-mL lyophilized plasma specimens in triplicate, two 1.0-mL lyophilized 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	Prekallikrein
Activated partial thromboplastin time	Protein C
Activated protein C resistance	Protein S
Alpha-2-antiplasmin	Prothrombin time
Antithrombin activity/antigen	Reptilase time
Dilute prothrombin time	Thrombin time
Factors II, V, VII, VIII, IX, X, XI, XII, and XIII	von Willebrand factor activity:
Fibrinogen antigen	- Collagen binding
Heparin-induced thrombocytopenia (HIT)	- Glycoprotein I _b binding
Plasminogen activator inhibitor	- Ristocetin cofactor
Plasminogen activity/antigen	von Willebrand factor antigen

NEW

Expanded Coagulation Factors ECF

Analyte/Procedure	Program Code	Challenges per Shipment
	ECF	
Factor II	■	3
Factor V	■	3
Factor VII	■	3
Factor VIII clot based	■	3
Factor VIII chromogenic	■	3
Factor IX	■	3
Factor X clot based	■	3
Factor X chromogenic	■	3
Factor XI	■	3
Factor XII	■	3
Factor XIII	■	3
Reptilase time	■	3
Thrombin time	■	3

Program Information

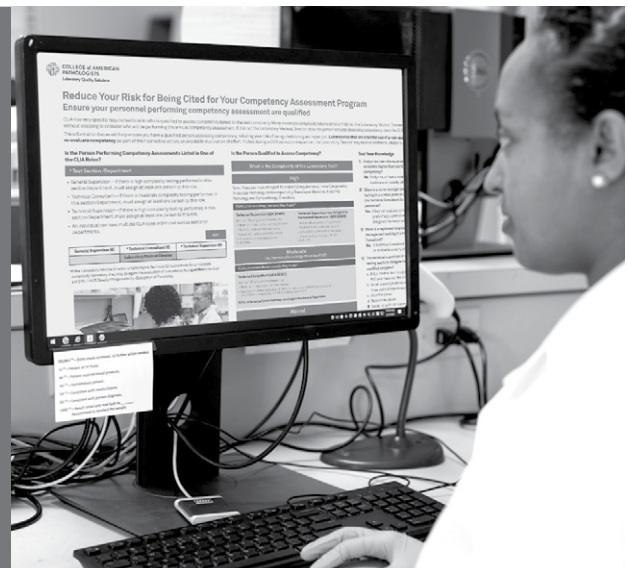
- Three 1.0-mL lyophilized plasma specimens (three vials each)
- Two shipments per year

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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 Studies Module						
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 Module						
Factor VIII assay			2			
von Willebrand factor (antigen, activity, multimers)			2			
Factor VIII inhibitor			2			
Heparin Module						
Heparin activities using methodologies including Anti-Xa (unfractionated, low molecular weight, and hybrid curve)				3		
Thrombin time				3		
Heparin-Induced Thrombocytopenia Module						
Appropriate with methods such as Immucor Lifecodes PF4 IgG and Immucor 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 164.

Program Information

- CGS1, CGS2, CGS3 - Two 2.0-mL lyophilized plasma specimens
- CGS4 - Three 1.0-mL lyophilized plasma specimens
- CGS5 - Two 60.0- μ L serum specimens
- CGS7 - Three 1.0-mL lyophilized plasma specimens in duplicate
- Two shipments per year

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

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

*Not appropriate for meeting regulatory requirements, see page 164.

Program Information

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

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

Instrument/Cartridge	Program Code					Challenges per Shipment
	CT	CT1	CT2	CT3	CT5	
Helena Actalyke®	■					3
ITC Hemochron® CA510/FTCA510	■					3
ITC Hemochron FTK-ACT	■					3
ITC Hemochron Jr. Signature/ACT+				■		3
ITC Hemochron Jr. Signature/ACT-LR			■			3
ITC Hemochron P214/P215	■					3
i-STAT® Celite® and Kaolin ACT					■	3
Medtronic Hemotec ACT/ACTII/ACT Plus® HR-ACT		■				3
Medtronic Hemotec ACT/ACTII/ACT Plus LR-ACT		■				3
Medtronic Hemotec ACT/ACTII/ACT Plus R-ACT		■				3
Medtronic Hepcon HMS Plus		■				3

For multiple instrument reporting options, see the Quality Cross Check programs, CTQ-CT3Q and CT5Q, on page 169.

Program Information

- CT - Three 3.0-mL lyophilized whole blood specimens with corresponding diluents
- CT1 - Three 1.7-mL lyophilized whole blood specimens with corresponding diluents
- CT2 - Three 0.5-mL lyophilized whole blood/diluent ampules
- CT3 - Three 0.5-mL lyophilized whole blood/diluent ampules
- CT5 - Three 1.7-mL lyophilized whole blood specimens with corresponding diluents
- Two shipments per year

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

Instrument/Cartridge	Program Code					Challenges per Shipment
	CTQ	CT1Q	CT2Q	CT3Q	CT5Q	
Helena Actalyke®	■					3
ITC Hemochron® CA510/FTCA510	■					3
ITC Hemochron FTK-ACT	■					3
ITC Hemochron Jr. Signature/ACT+				■		3
ITC Hemochron Jr. Signature/ACT-LR			■			3
ITC Hemochron P214/P215	■					3
i-STAT Celite® and Kaolin ACT					■	3
Medtronic Hemotec ACT/ACTII/ACT Plus® HR-ACT		■				3
Medtronic Hemotec ACT/ACTII/ACT Plus LR-ACT		■				3
Medtronic Hemotec ACT/ACTII/ACT Plus R-ACT		■				3
Medtronic Hepcon HMS Plus		■				3

These programs do not meet regulatory requirements for proficiency testing; see programs CT-CT3 and CT5 on page 168. 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	Program Code		Challenges per Shipment
	PF	PF1	
Platelet aggregation	■		2
PFA-100		■	2
Helena Plateletworks®		■	2

These programs require the draw of a normal donor sample.

Program Information

- PF, PF1 - Five 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® 5000, TEG 6s, ROTEM® delta	■		2

Program Information

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

Viscoelastic Testing—Whole Blood VES1

Instrument	Program Code		Challenges per Shipment
	VES1		
Hemosonics Quantra®, ROTEM® sigma	■		2

This program requires the draw of a normal donor sample.

Program Information

- Four 3.2% sodium citrate vacuum tubes; two 4.0-mL pierceable cap tubes
- Two shipments per year

Coagulation Calibration Verification/Linearity LN35, LN36, LN37

Analyte	Program Code			Target Ranges
	LN35	LN36	LN37	
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

- LN35, LN37 - Six 1.0-mL frozen plasma specimens per mailing
- LN36 - Twelve 1.0-mL frozen plasma specimens per mailing, which include six for low molecular weight heparin and six for unfractionated heparin
- Two shipments per year; ships on dry ice

D-Dimer Calibration Verification/Linearity LN42

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

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

Fibrinogen Calibration Verification/Linearity LN44

Analyte	Program Code	
	LN44	LN44 Target Range
Fibrinogen	■	80–900 mg/dL

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

Program Information

- Six 1.0-mL frozen plasma specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year; ships on dry ice

Drug-Specific Platelet Aggregation PIA/PIAX

Procedure	Program Code		Challenges per Shipment
	PIA	PIAX	
Aspirin assay	■	■	3
PRU test	■	■	3

Program Information

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

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

Analyte	Challenges per Shipment				
	Program Code				
	WP3	WP4	WP6	WP9	WP10
International normalized ratio (INR)	5	5	5	5	3
Prothrombin time	5	5	5	5	–

For method compatibility, see instrument matrix below.

Program Information

- WP3 - Five 1.0-mL lyophilized plasma specimens with corresponding diluents
- WP4, WP6 - Five 0.5-mL unitized lyophilized blood specimens
- WP9 - Five 0.3-mL lyophilized plasma specimens
- Three shipments per year
- WP10 - Three 0.3-mL lyophilized plasma specimens with corresponding diluents; two shipments per year

Whole Blood Coagulation, Instrument Matrix

Instrument	Program Code				
	WP3	WP4	WP6	WP9	WP10
Abbott CoaguSense™	■				
IL GEM PCL		■	■		
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, XS Pro, and CoaguChek Pro II				■	
Roche CoaguChek XS System					■
Siemens Xprecia Stride				■	

Platelet Mapping PLTM

Analyte	Program Code	Challenges per Shipment
	PLTM	
AA % aggregation/inhibition	■	2
ADP % aggregation/inhibition	■	2

This program requires the draw of a normal donor sample.

Program Information

- One 3.2% sodium citrate and two heparin vacuum tubes; two 3.5-mL plastic tubes; one vial of 0.2M CaCl₂
- For use with the Haemonetics Platelet Mapping[®] assay
- 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
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- Identify potential proficiency testing failures

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

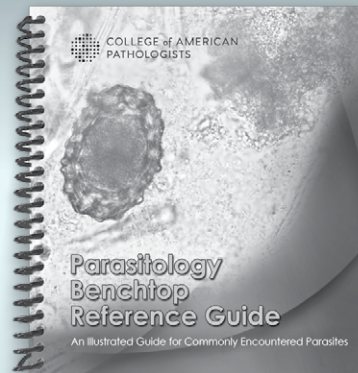
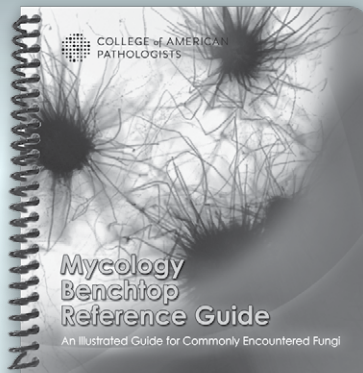
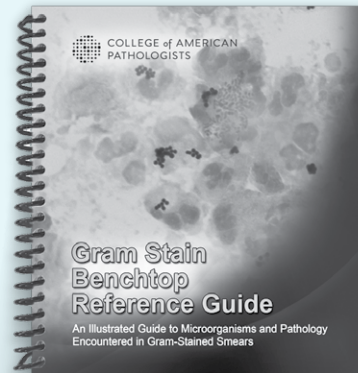
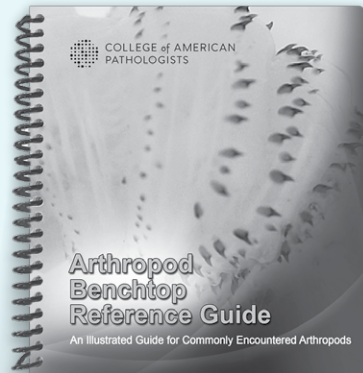
Coagulation—Limited, Validated Material

Validated Material	Program Code	Corresponding Program	Page
Coagulation	CGM	CGL	164

Program Information

- Seven 1.0-mL lyophilized plasma specimens and one 2.0-mL serum specimen; three shipments per year
- One 1.0-mL liquid plasma specimen will replace one 1.0-mL lyophilized plasma specimen for D-dimer testing in one shipment per year

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15 Microbiology



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Microbiology

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New Programs

NEW

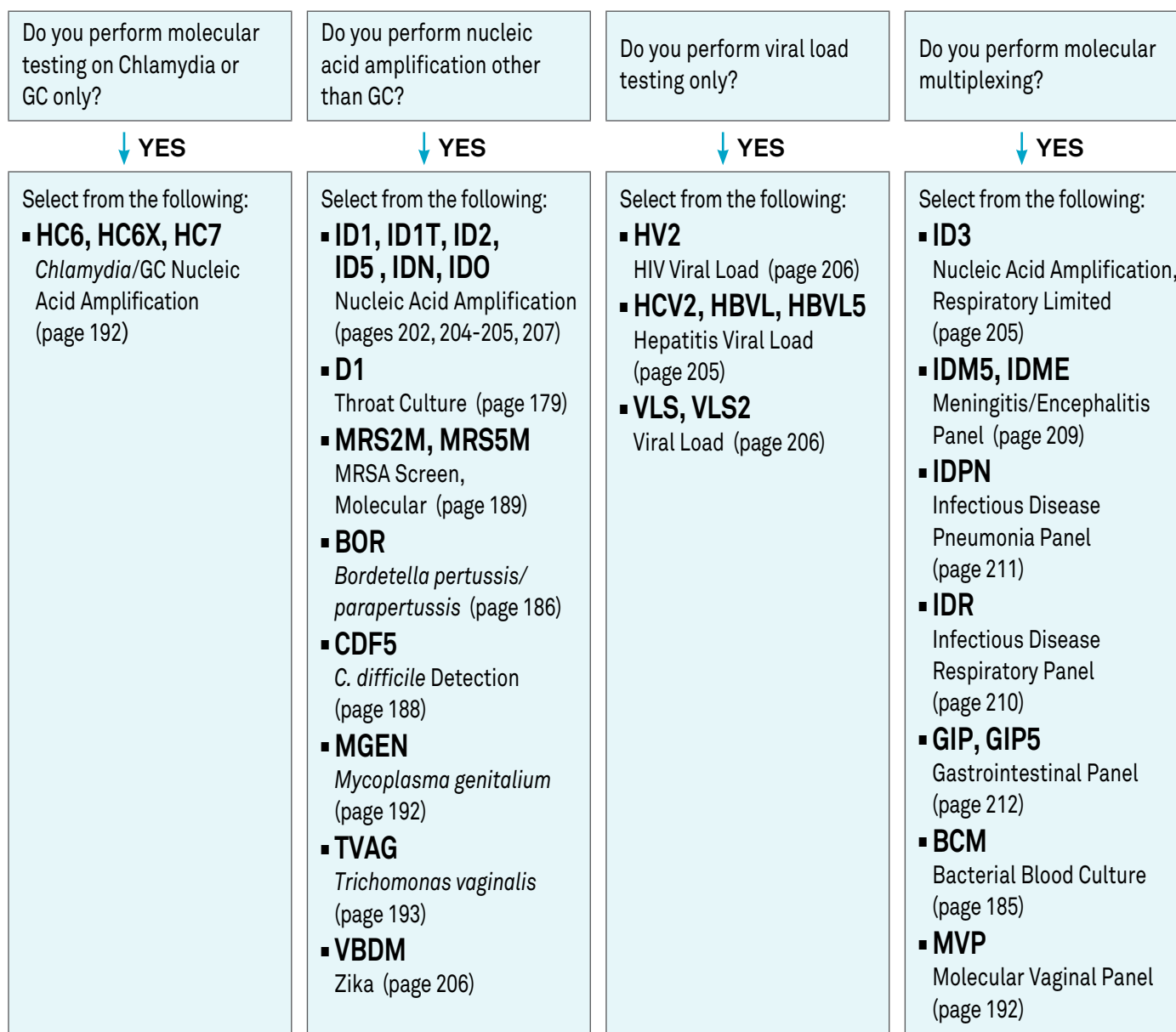
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Microbiology

- Participants must report a minimum of five specimens, three times per year to meet CLIA requirements for each of the subspecialties of microbiology (Bacteriology, Mycobacteriology*, Mycology, Parasitology, and Virology), for regulated testing
*Mycobacteriology requires five specimens, two times per year
- CLIA regulated tests are bolded
- If any of the tests performed become(s) waived by the FDA mid-year, your laboratory is responsible for maintaining five challenges per test event for the remaining non-waived tests in that subspecialty

Guide to Molecular Microbiology Testing

Use this flowchart as a guide for ordering the appropriate Molecular Microbiology programs 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 program.



Bacteriology

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

Guide for Ordering Regulated Bacteriology Programs

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 program.

Bacteriology D		
Procedure	Program Code	Challenges per Shipment
	D	
Antimicrobial susceptibility testing	■	1 graded, 1 ungraded
Bacterial antigen detection	■	2
Bacterial identification	■	5
Gram stain	■	1

Additional Information

Antigen detection challenges will be included in the following shipments:

- Shipment A: *C. difficile* antigen/toxin* and spinal fluid meningitis panel
- Shipment B: Spinal fluid meningitis panel and Group A *Streptococcus*
- Shipment C: *C. difficile* antigen/toxin* and Group A *Streptococcus*

*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 *Clostridioides (Clostridium) difficile*, for use with rapid or molecular testing methods

- Three shipments per year



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

Expanded Bacteriology DEX

Analyte	Program Code	Challenges per Shipment
	DEX	
Bacterial identification	■	2

Additional Information

Expanded Bacteriology (DEX) is an educational opportunity that provides:

- Culture and susceptibility testing challenges for microbiology laboratories that perform complete identification and susceptibility of bacterial isolates including less common or problematic bacteria
- More exposure to emerging bacterial pathogens and novel resistance mechanisms
- Ability to recognize and identify organisms that exhibit multiple drug-resistance patterns
- Recovery and identification of mixed pathogens such as yeast, aerobic, and anaerobic bacteria in cultures containing multiple organisms

Program Information

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



Microbiology Bench Tools Competency MBT

Procedure	Program Code	Challenges per Shipment
	MBT	
Bacterial identification	■	6
Antimicrobial susceptibility testing	■	2

Additional Information

Microbiology Bench Tools Competency (MBT) is a supplemental module for competency assessment and an educational resource for microbiology laboratories. The module:

- Provides organisms that challenge the basic elements of testing at the microbiology bench, including direct observation, monitoring, recording, and reporting of test results
- Can be used for both competency and educational purposes, including teaching and training pathology residents, new employees, and medical and MT/MLT students
- Provides identification and susceptibility results for supervisor use

This is not a proficiency testing program and participants will not return results to the CAP.

Program Information

- Six swab specimens with diluents for bacterial identification and susceptibility
- Culture sources will vary with each shipment
- Results will be provided with the kit to assess personnel competency
- Two shipments per year



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

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

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



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 benchtop.

Features include:

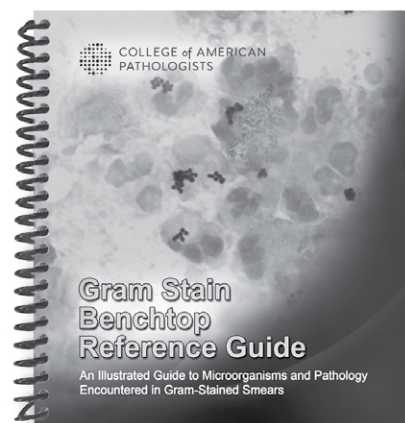
- Theory and application of the Gram stain
- Detailed descriptions of microbial morphology, quantitation, and indicators of pathology
- Examples of more than 35 gram-positive and gram-negative organisms found in blood, body fluids, CSF, urine, and the genital and respiratory tracts
- Seven tabbed sections for easy reference

This sturdy, spiral-bound, laminated guide is conveniently sized at 6½" x 7".

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

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Microbiology



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	■	1
GC culture	■	2
Gram stain	■	2
Group A <i>Streptococcus</i> antigen detection*	■	1
Throat culture	■	3
Urine culture	■	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.

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 culture-based methods
- Three shipments per year



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

Urine Colony Count MC3, MC4

Procedure	Challenges per Shipment	
	Program Code	
	MC3	MC4
Urine colony count/urine culture identification	2	5
Group A <i>Streptococcus</i> antigen detection*		3
Throat culture		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.

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 culture-based methods
- Three shipments per year



Gram Stain D5

Procedure	Program Code	Challenges per Shipment
	D5	
Gram stain	■	5

Program Information

- Five air-dried, methanol-fixed unstained glass slides
- Three shipments per year



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

Technical Competency Assessment of Gram Stains QPD10/QPD25

Introduction

Gram stain is a commonly performed bacterial stain in clinical microbiology laboratories. It is often the starting point guiding microbiological workup and initial clinical diagnosis and therapy. It is important for technologists who read Gram stains to provide an accurate interpretation based on reaction type and microscopic morphology in order to provide presumptive identifications and quantification of bacteria and fungi in clinical specimens.

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 morphological assessment of Gram stains. Participation in this study will help management assess the technologist's ability to evaluate Gram stains using online, whole slide images. These cases provide a standardized review and evaluation for each technologist. The study will help management meet applicable CLIA, CAP Laboratory Accreditation, and The Joint Commission laboratory requirements for personnel competency requirements and consistency of reporting amongst staff.*

Data Collection

A series of online, whole slide images of Gram stained smears using DigitalScope technology will be provided to each participating institution to assess technologists' ability to detect various microorganisms. Technologists will provide information about their work experience related to Gram stains, continuing education, and professional background. Information will be collected from each laboratory site to provide information about their continuing education requirements in microbiology, and relevant laboratory procedures and policies related to Gram stain assessment.

Performance Indicators

- Individual technologist score (%) for each Gram stain case, and overall based on a standardized competency assessment method
- Overall laboratory score based on the facility's individual technologist performance(s)

Reports are provided at institution and technologist levels. A summary of responses to the general questions will be provided for participants.

Program Information

To meet your staff technical competency assessment requirements:

- Result forms for up to 10 technologists (QPD10)
- Result forms for up to 25 technologists (QPD25)
- Multiple kits may be purchased to accommodate quantity needed

*Participation in this study helps laboratories meet:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Microbiology Checklist statement MIC.11060, Culture Result Reporting: Personnel performing Gram stains for this purpose are subject to competency assessment
- CAP Laboratory Accreditation Program Microbiology Checklist statement MIC.11350, Morphologic Observation Evaluation: The laboratory evaluates consistency of morphologic observation among personnel performing Gram, trichrome and other organism stains at least annually
- CAP Laboratory Accreditation Program Checklist statement GEN.55500, Competency Assessment of Testing Personnel
- The Joint Commission Standards HR.01.05.03, 01.06.01, 01.07.01, LD.04.05.03, and 04.05.05 regarding in-service training, continuing education, competency, and evaluation of hospital personnel

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

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

- Virtual Gram Stain Basic Competency (VGS1) is for general and new laboratory technologists/technicians. Participants will assess the quality of specimens and stains and will report artifacts and detailed gram-positive and gram-negative morphology. Challenges will include specimens such as CSF, body fluids, and positive blood cultures.
- Virtual Gram Stain Advanced Competency (VGS2) is for experienced laboratory technologists/technicians and microbiologists. Participants will receive challenging images of sputum, body fluids, and other specimens to assess the quality, quantity, and typical morphology of both gram-positive and gram-negative organisms appropriate for the site.
- See system requirements on page 13.

Program Information

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

Rapid Group A Strep Antigen Detection D6

Procedure	Program Code		Challenges per Shipment
	D6		
Group A <i>Streptococcus</i> antigen detection*	■		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

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



Rapid Group A Strep Antigen Detection, Waived D9

Procedure	Program Code		Challenges per Shipment
	D9		
Group A <i>Streptococcus</i> antigen detection	■		2

Program Information

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

Group B Strep Detection D8

Analyte	Program Code	Challenges per Shipment
	D8	
Group B <i>Streptococcus</i>	■	5

Program Information

- Five swab specimens with diluents
- Compatible with molecular- and culture-based methods
- Three shipments per year



Bacterial Antigen Detection LBAS, SBAS

Procedure	Program Code		Challenges per Shipment
	LBAS	SBAS	
<i>Legionella pneumophila</i> antigen detection	■		2
<i>Streptococcus pneumoniae</i> antigen detection		■	2

Program Information

- LBAS, SBAS - Two 0.5-mL liquid simulated clinical specimens
- Two shipments per year

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Microbiology

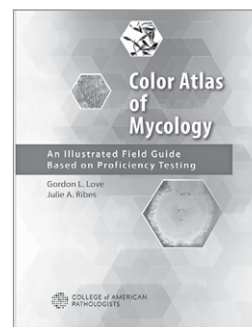
Color Atlas of Mycology

Built on more than 15 years of proficiency testing data, this resource book assists in the laboratory identification of fungi using the most recent taxonomic classifications. This book merges in vitro mycology (colonies on plated media/LPAB preparations) with in vivo mycology (histology/cytology).

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

Blood Culture BCS

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

Program Information

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



Blood Culture, *Staphylococcus aureus* BCS1

Analyte	Program Code	Challenges per Shipment
	BCS1	
<i>Staphylococcus aureus</i> /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



Bacterial Blood Culture, Molecular BCM

Procedure	Program Code	Challenges per Shipment
	BCM	
Blood culture bacterial identification	■	5

Program Information

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

Additional Information

- This program is for the identification of gram-positive and gram-negative organisms, including common resistance mechanisms isolated from blood culture bottles.
- This program is not for the inoculation of blood culture bottles.



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

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 statements MIC.22630 and MIC.22635: “The laboratory must determine and regularly review the number of contaminated cultures. Tracking the contamination rate and providing feedback to units and persons drawing cultures is one method that 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. (diphtheroids); 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 in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next quarter.

Bordetella pertussis/parapertussis, Molecular BOR

Analyte	Program Code	Challenges per Shipment
	BOR	
<i>Bordetella pertussis</i>	■	3
<i>Bordetella parapertussis</i>	■	3

Program Information

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

NEW

Carbapenemase Detection CRE

Procedure	Program Code	Challenges per Shipment
	CRE	
Resistance mechanism detection	■	3

Program Information

- Three swab specimens containing live organisms
- Designed for molecular and phenotypic testing methods
- Challenge isolates may include Enterobacterales, *Pseudomonas*, or *Acinetobacter*
- Two shipments per year



Carbapenem-resistant Organisms CRO

Analyte	Program Code	Challenges per Shipment
	CRO	
KPC	■	3
IMP	■	3
NDM	■	3
OXA-48	■	3
VIM	■	3

Program Information

- Three 130- μ L specimens
- Designed for molecular techniques
- Compatible with Cepheid GeneXpert
- Two shipments per year

Campylobacter CAMP

Analyte	Program Code	Challenges per Shipment
	CAMP	
<i>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



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Microbiology



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

C. difficile, 2 Challenge CDF2

Analyte	Program Code	Challenges per Shipment
	CDF2	
<i>Clostridioides (Clostridium) difficile</i> antigen/toxin	■	2

Program Information

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

C. difficile, 5 Challenge CDF5

Analyte	Program Code	Challenges per Shipment
	CDF5	
<i>Clostridioides (Clostridium) difficile</i> antigen/toxin	■	5

Program Information

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

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	
<i>C. trachomatis</i> antigen detection (DFA)	■		5
<i>C. trachomatis</i> antigen detection (EIA)		■	5

Program Information

- HC1 - Five 5-well slide specimens; for the detection of chlamydial elementary bodies by DFA
- HC3 - Five 2.0-mL liquid specimens for *Chlamydia* antigen testing by EIA
- Three shipments per year

Fecal Lactoferrin FLAC

Analyte	Program Code	Challenges per Shipment
	FLAC	
Fecal lactoferrin	■	3

Program Information

- Three 0.5-mL simulated stool specimens
- For use with rapid methods
- Two shipments per year

Helicobacter pylori Antigen, Stool HPS

Procedure	Program Code	Challenges per Shipment
	HPS	
<i>Helicobacter pylori</i> antigen detection	■	2

Program Information

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



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

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	■	5

Program Information

- Five swab specimens with diluents
- For laboratories performing culture-based testing only or using culture and molecular testing
- Three shipments per year



MRSA Screen, Molecular, 5 Challenge MRS5M

Procedure	Program Code	Challenges per Shipment
	MRS5M	
MRSA/MSSA/SA detection	■	5

Program Information

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



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

Laboratory Preparedness Exercise LPX

Analyte	Program Code	Challenges per Shipment
	LPX	
Bacterial identification	■	3

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 Shipment
	RUR	
Urease	■	3

Program Information

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

Stool Pathogen SP, SPN, SP1

Analyte	Program Code			Challenges per Shipment
	SP	SPN	SP1	
Adenovirus 40/41	■	■		2
<i>C. difficile</i> antigen/toxin	■	■		2
Rotavirus	■	■		2
Shiga toxin	■			2
Norovirus			■	1

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



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

Shiga Toxin ST

Analyte	Program Code	Challenges per Shipment
	ST	
Shiga toxin	■	2

Program Information

- 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	■	3

Program Information

- Three 1.0-mL liquid specimens
- For OSOM® BVBlue users
- Two shipments per year

Vaginitis Screen VS, VS1

Analyte	Program Code		Challenges per Shipment
	VS*	VS1**	
<i>Candida</i> sp.	■		5
<i>Gardnerella vaginalis</i>	■		5
<i>Trichomonas vaginalis</i>	■	■	5

*The biohazard warning applies to program VS.

**Molecular users are encouraged to use *Trichomonas vaginalis*, Molecular (TVAG), on page 193.

Program Information

- VS - Five swabs for DNA probe technology; BD Affirm™ VP III probe detection method; three shipments per year



- VS1 - Five swabs for methods such as Sekisui OSOM *Trichomonas* Rapid Test, *Trichomonas vaginalis*; three shipments per year



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

Mycoplasma genitalium, Molecular MGEN

Analyte	Program Code	Challenges per Shipment
	MGEN	
<i>Mycoplasma genitalium</i>	■	3

Program Information

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

Molecular Vaginal Panel MVP

Analyte	Program Code	Challenges per Shipment
	MVP	
<i>Candida</i> species group	■	5
<i>Candida krusei</i>	■	5
<i>Candida glabrata</i>	■	5
<i>Trichomonas vaginalis</i>	■	5
Bacterial vaginosis	■	5

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)	■		5
Nucleic acid amplification (NAA/DNA)		■	5

*The biohazard warning applies to programs HC6 and HC6X.

Program Information

- HC6 - Three swab specimens and two 1.0-mL liquid simulated urine specimens
- HC6X - Three swab specimens; two 1.0-mL liquid 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



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

Vaginitis Screen, Virtual Gram Stain VS2

Procedure	Program Code	Challenges per Shipment
	VS2	
Interpretation of gram-stained vaginal smears	■	3

See system requirements on page 13.

Program Information

- Three online, whole slide images
- Powered by DigitalScope technology
- Two activities per year; your CAP shipping contact will be notified via email when the activity is available

Trichomonas vaginalis, Molecular TVAG

Analyte	Program Code	Challenges per Shipment
	TVAG	
<i>Trichomonas vaginalis</i>	■	3

Program Information

- Three 1.5-mL liquid specimens
- Designed for molecular techniques
- Two shipments per year

Vancomycin-resistant *Enterococcus* VRE

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

Program Information

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



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

Mycobacteriology

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

Mycobacteriology E

Procedure	Program Code	Challenges per Shipment
	E	
Acid-fast smear	■	1
Antimycobacterial susceptibility testing	■	1 graded, 1 ungraded
Mycobacterial identification*	■	5

*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	■	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 MTR5, MTBR

Procedure	Challenges per Shipment	
	Program Code	
	MTR5	MTBR
<i>Mycobacterium tuberculosis</i> detection	5	3
Rifampin resistance	5	3

Program Information

- MTR5 - Five 1.25-mL simulated sputum specimens for use with molecular methods
- MTBR - Three 1.25-mL simulated sputum specimens for use with molecular methods
- Not suitable for culture
- Two shipments per year



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

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	■	1
Cryptococcal antigen detection	■	2 per year
Mold and 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 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	■	1
Cryptococcal antigen detection	■	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 molecular- and culture-based methods
- Three shipments per year



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

Candida Culture F3

Procedure	Program Code	Challenges per Shipment
	F3	
Yeast identification	■	5

Program Information

- Five loops for culture with diluents in duplicate
- For laboratories identifying *Candida* sp. only
- Identification of *Candida* species may be performed by culture, molecular, and rapid methods
- Three shipments per year

**Yeast Blood Culture, Molecular YBC**

Procedure	Program Code	Challenges per Shipment
	YBC	
Blood culture yeast identification	■	5

Program Information

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

Additional Information

- This program is for identification of fungal organisms such as yeast isolated from blood culture bottles.
- This program is not for the inoculation of blood culture bottles.

Cryptococcal Antigen Detection CRYP

Procedure	Program Code	Challenges per Shipment
	CRYP	
Cryptococcal antigen	■	5

Program Information

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

Galactomannan FGAL

Analyte	Program Code	Challenges per Shipment
	FGAL	
Galactomannan - <i>Aspergillus</i>	■	3

Program Information

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



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

Fungal Serology FSER

Procedure	Program Code	Challenges per Shipment
	FSER	
Serological detection of specific fungal antibodies	■	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

Fungal Smear FSM

Procedure	Program Code	Challenges per Shipment
	FSM	
KOH preparation/calcofluor white	■	3

Program Information

- Three unstained slides
- Two shipments per year

India Ink IND

Procedure	Program Code	Challenges per Shipment
	IND	
India ink	■	2

Program Information

- Two liquid specimens
- Two shipments per year

Pneumocystis jirovecii PCP1, PCP2, PCP4

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

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			
	P	P3	P4	P5
Fecal suspension (wet mount)	2	5	2	
Fecal suspension (<i>Giardia</i> and <i>Cryptosporidium</i> 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 programs 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

Blood Parasite BP

Procedure	Program Code	Challenges per Shipment
	BP	
Blood parasite identification (thin/thick film sets*)	■	5

*This program will include corresponding thick films when available.

Program Information

- Five Giemsa-stained blood film sets, photographs, and/or online images
- Percent parasitemia reporting is provided when appropriate for educational purposes
- 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	■	3
<i>Plasmodium falciparum</i> only	■	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.

Program Information

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

Expanded Parasitology PEX

Procedure	Program Code	Challenges per Shipment
	PEX	
Parasite identification	■	3

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

Program 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
	TMO	
Tick, mite, and arthropod identification	■	3

Program Information

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

Worm Identification WID

Procedure	Program Code	Challenges per Shipment
	WID	
Worm identification	■	3

Program Information

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

Virology

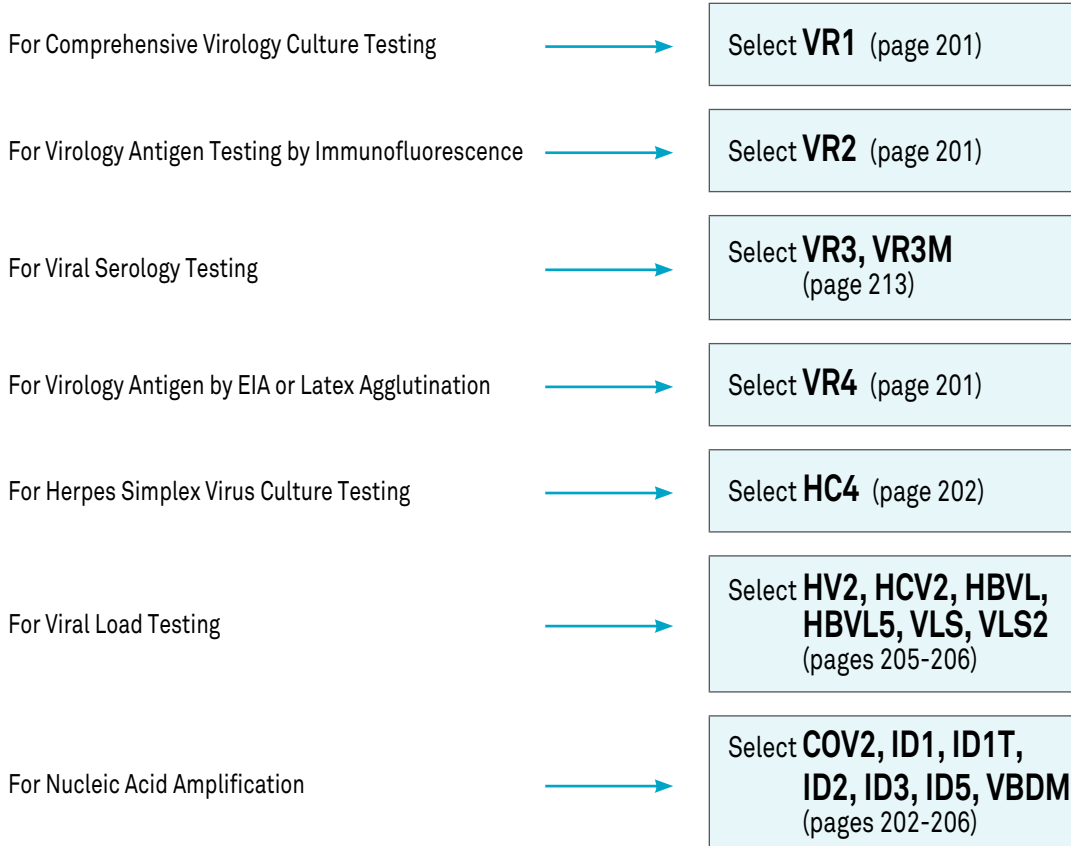
Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Guide for Ordering Regulated Virology Programs

Program Code	Procedure	
	Viral Identification	Viral Antigen Detection
VR1	■	
VR2		■
VR4		■
HC4	■	
ID3	■	
ID5	■	

Guide to Virology Testing

Use this flowchart as a guide for ordering the appropriate Virology programs 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 (Country code: 1) Option 1.



Virology Culture VR1

Procedure	Program Code	Challenges per Shipment
	VR1	
<i>Chlamydia trachomatis</i> culture	■	1
Viral isolation/identification	■	5

Program Information

- 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		
		A	B	C
	VR2			
Adenovirus antigen	■	1	1	
Cytomegalovirus antigen	■	1	1	
Herpes simplex virus (HSV) antigen	■		1	1
Influenza A antigen	■	1		1
Influenza B antigen	■		1	
Parainfluenza antigen	■	1		1
Respiratory syncytial virus (RSV) antigen	■	1		1
Varicella-zoster antigen	■		1	1
Educational challenge	■	1		

Program Information

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

Virology Antigen Detection (Non-DFA) VR4

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

Program Information

- Five 1.5-mL specimens
- For use with enzyme immunoassay and/or latex agglutination methods
- Specimens not designed for molecular methods
- Three shipments per year



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

Herpes Simplex Virus HC4

Procedure	Program Code	Challenges per Shipment
	HC4	
Herpes simplex virus culture	■	5

Program Information

- Five 0.5-mL lyophilized specimens
- Three shipments per year



Human Papillomavirus HPV

Analyte	Program Code	Challenges per Shipment
	HPV	
Human papillomavirus	■	2

For laboratories using Digene, SurePath, and/or ThinPrep collection media, see page 308.

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	Program 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		■	1
JC virus		■	1

Program Information

- ID1- Eight 1.0-mL liquid specimens
- ID1T - Two 1.0-mL liquid specimens
- Two shipments per year



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

NEW**Mpox Virus MPOX**

Procedure	Program Code	Challenges per Shipment
	MPOX	
Mpox virus detection	■	3

This program is only available to customers within the US.

Program Information

- Three 1.0-mL simulated body fluid specimens that contain whole killed virus
- A549 cells included in each specimen
- For laboratories using molecular tests
- Two shipments per year

SARS-CoV-2 Molecular COV2

Analyte	Program Code	Challenges per Shipment
	COV2	
SARS-CoV-2	■	3

For multiple instrument reporting options, see the Quality Cross Check program, COV2Q, below.

Program Information

- Three 1.5-mL liquid simulated respiratory specimens
- Designed for molecular techniques
- Whole genome with sequence targets across all the assay platforms
- Qualitative and quantitative reporting options available
- Two shipments per year

Quality Cross Check—SARS-CoV-2 Molecular COV2Q

Analyte	Program Code	Challenges per Shipment
	COV2Q	
SARS-CoV-2	■	3

This program does not meet regulatory requirements for proficiency testing; see program COV2 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 3.2-mL non-infectious liquid specimens that contain the whole SARS-CoV-2 genome
- Designed for molecular techniques
- Report up to three instruments
- Two shipments per year

SARS-CoV-2 Antigen COVAG

Analyte	Program Code	Challenges per Shipment
	COVAG	
SARS-CoV-2 antigen	■	3

For multiple instrument reporting options, see the Quality Cross Check program, COVAQ, on page 204.

Program Information

- Three 0.5-mL simulated respiratory specimens
- Designed for antigen test
- Two shipments per year

Quality Cross Check—SARS-CoV-2 Antigen COVAQ

Analyte	Program Code	Challenges per Shipment
	COVAQ	
SARS-CoV-2 Antigen	■	3

This program does not meet regulatory requirements for proficiency testing; see program COVAG on page 203. 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 0.5-mL simulated respiratory specimens in triplicate
- Report up to three instruments
- Two shipments per year

SARS-CoV-2 Serology COVS

Analyte	Program Code	Challenges per Shipment
	COVS	
SARS-CoV-2 antibody (total, IgG, IgM, and IgA)	■	3

For multiple instrument reporting options, see the Quality Cross Check program, COVSQ, on page 50.

Program Information

- Three 0.5-mL serum specimens
- Appropriate for assays that detect antibodies to nucleocapsid, spike, combined antigen (nucleocapsid and spike), and the receptor binding domain of the spike protein
- Two shipments per year



Nucleic Acid Amplification, Respiratory ID2

Analyte	Program Code	Challenges per Shipment
	ID2	
Adenovirus	■	1
Coronavirus/Rhinovirus*	■	1
Human metapneumovirus	■	1
Influenza virus*	■	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 (does not include SARS-CoV-2)
- Shipment B: Rhinovirus and Influenza B

Program Information

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

Nucleic Acid Amplification, Respiratory Limited ID3

Analyte	Program Code	Challenges per Shipment
	ID3	
Influenza A virus	■	5
Influenza B virus	■	5
Respiratory syncytial virus (RSV)	■	5
SARS-CoV-2*	■	5

*SARS-CoV-2 does not contain human genome material or sequences from human RNase P gene.

For multiple instrument reporting options, see the Quality Cross Check program ID3Q, below.

Program Information

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

Quality Cross Check—Nucleic Acid Amplification, Respiratory Limited ID3Q

NEW

Analyte	Program Code	Challenges per Shipment
	ID3Q	
Influenza A virus	■	3
Influenza B virus	■	3
Respiratory syncytial virus (RSV)	■	3
SARS-CoV-2	■	3

This program does not meet regulatory requirements for proficiency testing; see program ID3 above. For additional information about the Quality Cross Check program, see page 40.

Program Information

- Three 1.0-mL liquid specimens
- Designed for molecular multiplex panel users
- Report up to three instruments
- Two shipments per year

HSV, VZV—Molecular ID5

Analyte	Program Code	Challenges per Shipment
	ID5	
Herpes simplex virus	■	5
Varicella-zoster virus	■	5

Program Information

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

Hepatitis Viral Load HCV2, HBVL, HBVL5

Procedure	Challenges per Shipment		
	Program Code		
	HCV2	HBVL	HBVL5
HCV genotyping	1		
HCV, qualitative	1		
HCV viral load	5		
HBV viral load		3	5

Program Information

- 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	Program 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 liquid 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
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

Viral Load Calibration Verification/Linearity LN38, LN39, LN45

Analyte	Program Code			Target Ranges
	LN38*	LN39	LN45	
CMV viral load	■			316.0–1.0M IU/mL
HIV viral load		■		50.0–5.0M IU/mL
HCV viral load			■	50–280M IU/mL

*The biohazard warning applies to program 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	■		3

Program Information

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



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

Multidiscipline Microbiology

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

Guide for Ordering Regulated Molecular Multidiscipline Programs

Program Code	Procedure	
	Bacterial Identification	Viral Identification
IDR	■	■
GIP5	■	■
IDM5	■	■
IDPN	■	■

Nucleic Acid Amplification, Organisms IDO, IDN

Analyte/Procedure	Program Code		Challenges per Shipment
	IDO	IDN	
<i>Bordetella pertussis/parapertussis</i>	■	■	1
<i>Legionella pneumophila/Chlamydia pneumoniae*</i>	■	■	1
Methicillin-resistant <i>Staphylococcus aureus</i>	■	■	1
Molecular typing (bacterial isolates)	■	■	1
<i>Mycobacterium tuberculosis</i>	■		1
<i>Mycoplasma pneumoniae</i>	■	■	1
Vancomycin-resistant <i>Enterococcus</i>	■	■	1

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

- Shipment A: *Chlamydia pneumoniae*
- Shipment 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



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

Joint Infection Panel JIP

Analyte	Program Code	Challenges per Shipment
	JIP	
<i>Anaerococcus prevotii/vaginalis</i>	■	5
<i>Bacteroides fragilis</i>	■	5
<i>Candida albicans</i>	■	5
<i>Citrobacter</i> spp.	■	5
<i>Cutibacterium avidum/granulosum</i>	■	5
<i>Enterobacter cloacae</i> complex	■	5
<i>Enterococcus faecalis</i>	■	5
<i>Enterococcus faecium</i>	■	5
<i>Escherichia coli</i>	■	5
<i>Finegoldia magna</i>	■	5
<i>Haemophilus influenzae</i>	■	5
<i>Kingella kingae</i>	■	5
<i>Klebsiella aerogenes</i>	■	5
<i>Klebsiella pneumoniae</i> group	■	5
<i>Morganella morganii</i>	■	5
<i>Neisseria gonorrhoeae</i>	■	5
<i>Parvimonas micra</i>	■	5
<i>Peptoniphilus</i> spp.	■	5
<i>Peptostreptococcus anaerobius</i>	■	5
<i>Proteus</i> spp.	■	5
<i>Pseudomonas aeruginosa</i>	■	5
<i>Salmonella</i> spp.	■	5
<i>Serratia marcescens</i>	■	5
<i>Staphylococcus aureus</i>	■	5
<i>Staphylococcus lugdunensis</i>	■	5
<i>Streptococcus agalactiae</i>	■	5
<i>Streptococcus pneumoniae</i>	■	5
<i>Streptococcus pyogenes</i>	■	5

Program Information

- Five 0.5-mL liquid specimens
- Designed for molecular multiplex panel users
- Program challenges may contain the following antimicrobial resistance genes on a rotational basis: CTX-M, IMP, KPC, *mecA/C* and MREJ, NDM, OXA-48-like, *vanA/B*, and VIM
- Three shipments per year

Meningitis/Encephalitis Panel IDM5, IDME

Analyte	Challenges per Shipment	
	Program Code	
	IDM5	IDME
<i>Escherichia coli</i> K1	5	3
<i>Haemophilus influenzae</i>	5	3
<i>Listeria monocytogenes</i>	5	3
<i>Neisseria meningitidis</i>	5	3
<i>Streptococcus agalactiae</i>	5	3
<i>Streptococcus pneumoniae</i>	5	3
Cytomegalovirus (CMV)	5	3
Enterovirus	5	3
Herpes simplex virus 1 (HSV-1)	5	3
Herpes simplex virus 2 (HSV-2)	5	3
Human herpesvirus 6 (HHV-6)	5	3
Human parechovirus	5	3
Varicella-zoster virus (VZV)	5	3
<i>Cryptococcus neoformans/gattii</i>	5	3

Note: Only IDM5 analytes in **bold** type will meet CMS requirements for bacteriology and virology identification. For programs that include more than one sub-specialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each sub-specialty your laboratory performs.

Program Information

- IDM5 - Five 1.0-mL liquid specimens; three shipments per year
- IDME - Three 1.0-mL liquid specimens; two shipments per year
- Designed for molecular multiplex panel users

Infectious Disease, Respiratory Panel IDR

Analyte	Program Code	Challenges per Shipment
	IDR	
Adenovirus	■	5
Bocavirus	■	5
<i>Bordetella (pertussis, parapertussis, bronchiseptica, holmesii)</i>	■	5
<i>Chlamydia pneumoniae</i>	■	5
Coronavirus	■	5
Human metapneumovirus	■	5
Influenza A	■	5
Influenza B	■	5
<i>Legionella pneumophila</i>	■	5
<i>Mycoplasma pneumoniae</i>	■	5
Parainfluenza	■	5
Respiratory syncytial virus (RSV)	■	5
Rhinovirus/Enterovirus	■	5
SARS-CoV-2*	■	5

*SARS-CoV-2 specimens do not contain human genome material or sequences from the human RNase P gene.

For programs that include more than one sub-specialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each sub-specialty your laboratory performs.

Program Information

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

15

Microbiology

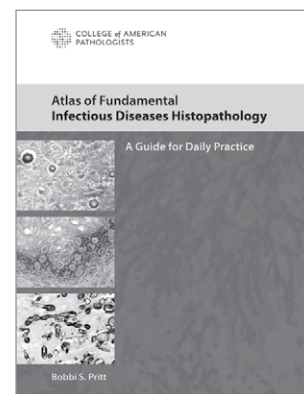
Atlas of Fundamental Infectious Diseases Histopathology

This resource 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 microorganisms, spot infectious disease mimics, and select ancillary methods of detection.

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Infectious Disease, Pneumonia Panel IDPN

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

*Laboratories performing SARS-CoV-2 testing, see the COV2 program on page 203.

Includes antimicrobial resistance genes, as appropriate. For programs that include more than one sub-specialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each sub-specialty your laboratory performs.

Program Information

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

Gastrointestinal Panel GIP5, GIP

Analyte	Challenges per Shipment	
	Program Code	
	GIP5	GIP
Adenovirus	5	3
Astrovirus	5	3
Campylobacter	5	3
<i>Clostridioides (Clostridium) difficile</i> , toxin A/B	5	3
<i>Cryptosporidium</i>	5	3
<i>Cyclospora cayetanensis</i>	5	3
<i>Entamoeba histolytica</i>	5	3
Enteroaggregative <i>E. coli</i> (EAEC)	5	3
Enteropathogenic <i>E. coli</i> (EPEC)	5	3
Enterotoxigenic <i>E. coli</i> (ETEC) LT/ST	5	3
<i>Escherichia coli</i> O157	5	3
<i>Giardia duodenalis (lamblia)</i>	5	3
Norovirus GI/GII	5	3
<i>Plesiomonas shigelloides</i>	5	3
Rotavirus A	5	3
<i>Salmonella</i>	5	3
Sapovirus	5	3
Shiga-like toxin producing <i>E. coli</i> (STEC) <i>stx1/stx2</i>	5	3
<i>Shigella/Enteroinvasive E. coli</i> (EIEC)	5	3
<i>Shigella</i>	5	3
<i>Vibrio cholerae/Vibrio</i> group	5	3
<i>Yersinia enterocolitica</i>	5	3

Program Information

- 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. For programs that include more than one sub-specialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each sub-specialty your laboratory performs.

Infectious Disease Serology

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

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

Program Information

- VR3 - Eight 0.5-mL lyophilized defibrinated plasma specimens
- VR3M - One 0.5-mL lyophilized defibrinated plasma specimen
- Two shipments per year

Tick-Transmitted Diseases TTD			
Analyte	Program Code		Challenges per Shipment
	TTD		
Antibodies to tick-transmitted disease organisms	■		3

Program Information

- Three 0.4-mL liquid specimens
- Designed for the detection of antibodies to *Borrelia burgdorferi*, *Babesia microti*, and *Anaplasma phagocytophilum*
- Two shipments per year

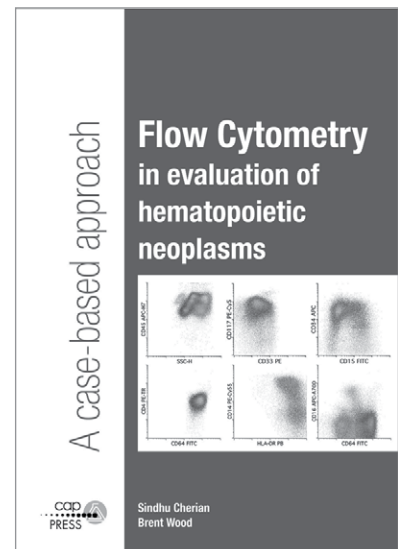
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16 Immunology and Flow Cytometry



Our programs closely mimic patient testing to ensure accuracy.

- Test specimen levels that reflect clinical decision points.
- Keep current with the latest laboratory best practices with educational content supplied in our participant summary reports.
- Gain confidence in your results by comparing your performance against the largest peer groups.

Immunology and Flow Cytometry

Immunology	216
Flow Cytometry	224

Program Changes

Immunology, Special; Immunology Special, Limited; and <i>H. pylori</i> IgG Antibody (S2, S4, S5) challenges per shipment	217
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Immunology

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

Immunology ANA, ASO, CRP, HCG, IM, RF/RFX, RUB/RUBX, IL

Analyte	Program Code								Challenges per Shipment
	ANA	ASO	CRP	HCG	IM	RF/RFX	RUB/RUBX	IL	
Antinuclear antibody (ANA)*	■							■	5
Antistreptolysin O (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. **Only** qualitative results will be reported to CMS. Semiquantitative and/or titer results for these analytes are ungraded/educational in these programs and do not meet regulatory requirements.

Program Information

- ANA, RUB - Five 0.5-mL serum specimens
- ANA - Three online educational pattern interpretation challenges per year
- ASO, HCG, 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 program RF specimens in duplicate
- RUBX - All program RUB specimens in duplicate
- IL - All immunology specimens except RFX and RUBX
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



Immunology, General IG/IGX

Analyte	Program Code	Challenges per Shipment
	IG/IGX	
Alpha-1 antitrypsin	■	5
Complement C3	■	5
Complement C4	■	5
Haptoglobin	■	5
IgA	■	5
IgE	■	5
IgG	■	5
IgM	■	5
Total kappa/lambda ratio	■	5

Program Information

- IG - Ten 1.0-mL serum specimens
- IGX - All program IG specimens in duplicate
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



Immunology, Special; Immunology Special, Limited; and *H. pylori* IgG Antibody S2, S4, S5

Analyte	Program Code			Challenges per Shipment
	S2	S4	S5	
Anticentromere antibody	■			2
Anti-DNA antibody double-stranded	■	■		2
Antiglomerular basement membrane (GBM), IgG antibody	■			2
Antimitochondrial antibody	■			2
Antineutrophil cytoplasmic antibody (ANCA, anti-MPO, anti-PR3)	■			2
Anti-RNP antibody	■			2
Anti-Ro52 antibody	■			2
Anti-Ro60 antibody	■			2
Anti-Sm antibody	■			2
Anti-Sm/RNP antibody	■			2
Antismooth muscle antibody	■			2
Anti-SSA antibody	■			2
Anti-SSB antibody	■			2
Anti-SSA/SSB antibody	■			2
Antithyroglobulin antibody	■	■		2
Antithyroid peroxidase antibody/ Antithyroid microsomal antibody	■	■		2
Ceruloplasmin	■	■		2
Haptoglobin	■	■		2
<i>Helicobacter pylori</i> , IgG antibody	■	■	■	2
IgD	■	■		2
IgG	■	■		2
IgG subclass proteins	■	■		2
Prealbumin (transthyretin)	■	■		2
Total kappa/lambda ratio	■	■		2
Transferrin	■	■		2

Program S2 is not appropriate for antimitochondrial antibody assays that are specific for the M2 antibody. Refer to program H on page 218.

Infectious Mononucleosis, Waived IMW

Analyte	Program Code		Challenges per Shipment
	IMW		
Infectious mononucleosis, waived	■		3

Program Information

- S2 - Twenty-two (0.5- to 1.0-mL) serum specimens
- S4 - Eight (0.5- to 1.0-mL) serum specimens
- S5 - Two 1.0-mL serum specimens
- Two shipments per year



Program Information

- Three 0.6-mL serum specimens
- Two shipments per year

Alpha-2-Macroglobulin A2MG

Analyte	Program Code	Challenges per Shipment
	A2MG	
Alpha-2-macroglobulin	■	3

Program Information

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

Antichromatin Antibody ACA

Analyte	Program Code	Challenges per Shipment
	ACA	
Antichromatin antibody	■	3

Program Information

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

Antifilamentous Actin IgG Antibody FCN

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

Program Information

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

Antihistone Antibody AHT

Analyte	Program Code	Challenges per Shipment
	AHT	
Antihistone antibody	■	3

Program Information

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



Antimitochondrial M2 Antibody H

Analyte	Program Code	Challenges per Shipment
	H	
Antimitochondrial M2 antibody (AMA-M2)	■	2

Program Information

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

Autoimmune Gastritis Markers APC

Analyte	Program Code	Challenges per Shipment
	APC	
Antiparietal cell antibody	■	2
Anti-intrinsic factor antibody	■	2

Program Information

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

Antiphospholipid Antibody ACL

Analyte	Program Code	Challenges per Shipment
	ACL	
Anticardiolipin antibody (polyclonal, IgG, IgM, and IgA)	■	3
Beta-2-glycoprotein I (polyclonal, IgG, IgM, and IgA)	■	3

Program Information

- 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)	■	3
Antiphosphatidylserine antibody (IgG, IgM, and IgA)	■	3
Beta-2-glycoprotein I (polyclonal, IgG, IgM, and IgA)	■	3
Antiphosphatidylserine/prothrombin antibody (aPS/PT)	■	3

Program Information

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

Antiribosomal P Antibody ARP

Analyte	Program Code	Challenges per Shipment
	ARP	
Antiribosomal P antibody	■	3

Program Information

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

Anti-*Saccharomyces cerevisiae* Antibody ASC

Analyte	Program Code	Challenges per Shipment
	ASC	
Anti- <i>Saccharomyces cerevisiae</i> antibody (IgG and IgA)	■	2

Program Information

- 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)	■	■	3
Anti-DGP antibody screen (IgA and IgG)	■	■	3
Antitissue transglutaminase (tTG) antibody (IgA and IgG)	■	■	3
Anti-DGP and anti-tTG antibody screen (IgA and IgG)	■	■	3

Program Information

- CES - Three 0.3-mL serum specimens
- CESX - All program 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, and IgG)	■	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	■	3
Interleukin (IL)-1 beta	■	3
IL-2	■	3
IL-6	■	3
IL-8	■	3
IL-10	■	3
Tumor necrosis factor (TNF)-alpha	■	3
Vascular endothelial growth factor (VEGF)	■	3

Program Information

- Twelve 1.0- to 3.0-mL lyophilized serum specimens
- Two shipments per year

Diagnostic Allergy SE

Analyte/Procedure	Program Code	Challenges per Shipment
	SE	
IgE, multiallergen screen, qualitative	■	5
IgE, total	■	5
Specific allergens	■	25

Program Information

- 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 HSCR

Analyte	Program Code	Challenges per Shipment
	HSCR	
High-sensitivity C-reactive protein	■	3

Program Information

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

Liver-Kidney Microsomal Antibody (Anti-LKM) LKM

Analyte	Program Code	Challenges per Shipment
	LKM	
Anti-LKM	■	2

Program Information

- Two 0.3-mL serum specimens
- Two shipments per year

M. tuberculosis-Stimulated Infection Detection QF

Analyte	Program Code	Challenges per Shipment
	QF	
<i>M. tuberculosis</i>	■	2

This program is appropriate for the QIAGEN QuantiFERON®-TB Gold and Gold Plus, DiaSorin Liaison QuantiFERON-TB Gold Plus, and SD Biosensor Standard methods.

Program Information

- Two 1.0-mL lyophilized serum specimens and one lyophilized mitogen control
- Two shipments per year

Rheumatic Disease Special Serologies RDS

Analyte	Program Code	Challenges per Shipment
	RDS	
Anti-Jo-1 (antihistidyl t-RNA synthetase)	■	1
Anti-Scl-70 (anti-DNA topoisomerase)	■	1

Program Information

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



SARS-CoV-2 Serology COVS

Analyte	Program Code	Challenges per Shipment
	COVS	
SARS-CoV-2 antibody (total, IgG, IgM, and IgA)	■	3

For multiple instrument reporting options, see the Quality Cross Check program, COVSQ, below.

Program Information

- Three 0.5-mL serum specimens
- Appropriate for assays that detect antibodies to nucleocapsid, spike, combined antigen (nucleocapsid and spike), and the receptor binding domain of the spike protein
- Two shipments per year



Quality Cross Check—SARS-CoV-2 Serology COVSQ

Analyte	Program Code	Challenges per Shipment
	COVSQ	
SARS-CoV-2 antibodies (Total, IgG, IgM)	■	3

This program does not meet regulatory requirements for proficiency testing; see program COVS, 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 serum specimens
- Report up to three instruments
- 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 program.

Program Information

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



Total Hemolytic Complement CH50

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

Program Information

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

Viscosity V

Analyte	Program Code	Challenges per Shipment
	V	
Viscosity	■	2

Program Information

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

Serum Free Light Chains SFLC

Analyte	Program Code	Challenges per Shipment
	SFLC	
Kappa serum free light chain	■	3
Lambda serum free light chain	■	3
Kappa/lambda serum free light chain ratio and ratio interpretation	■	3

Program Information

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

Color Atlas of Flow Cytometry

The *Color Atlas of Flow Cytometry* presents more than 70 cases from the CAP flow cytometry proficiency testing program, complete with over 270 images, photomicrographs, dot plots, survey data, and thorough discussions. Overviews of the hematopoietic disorders are also included with each section. Through peer-reviewed cases, practicing pathologists, medical technologists, residents, and students have an opportunity to identify and appreciate disease categories and specific disease entities that are particularly difficult to diagnose correctly in clinical practice.

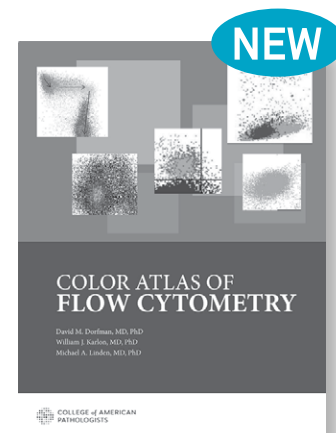
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- T lymphoblastic leukemia and immature T cells
- Myeloid neoplasms
- Mature B-cell neoplasms

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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 programs 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 program FL1 and FL2 specimens
- Three shipments per year

Flow Cytometry—Immunophenotypic Characterization of Leukemia/Lymphoma FL3

Procedure	Program Code		Challenges per Shipment
	FL3		
Leukemia/lymphoma	■		2

Additional Information

- Program FL3 is appropriate for laboratories that perform technical component-only flow cytometry testing.
- This program has stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.

Program Information

- Two 1.1-mL specimens containing a cell line/whole blood mixture simulating leukemia/lymphoma; online images of tissue sections, bone marrow, and/or peripheral blood smears with clinical histories as clinically relevant and/or available
- Online, whole slide images powered by DigitalScope® technology (if applicable)
- Two shipments per year

Flow Cytometry, CD34+ FL4

Analyte	Program Code		Challenges per Shipment
	FL4		
CD34+	■		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	■	3

Program FL5 is for laboratories that receive flow cytometry analyses from referring laboratories to perform the interpretation of patient results.

Program Information

- Three online 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 as clinically relevant and/or available
- Online, whole slide images powered by DigitalScope technology (if applicable)
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

Flow Cytometry—Post-Immunotherapy Analysis FL6

Procedure	Program Code	Challenges per Shipment
	FL6	
Post-immunotherapy flow cytometry analysis	■	3

Program 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 online 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 as clinically relevant and/or available
- Online, whole slide images powered by DigitalScope technology (if applicable)
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

Flow Cytometry—T-Cell Subsets Analysis FL7

Procedure	Program Code	Challenges per Shipment
	FL7	
T-cell subsets analysis	■	2

Program FL7 is appropriate for laboratories that perform T-cell subset analysis for immunodeficiency and immune dysregulation. Reporting will include percentages and absolute counts for naïve and memory T cells, recent thymic emigrants, TCR alpha/beta and TCR gamma/delta T cells, and double negative (TCRalpha/beta+CD3+CD4-CD8-) T cells. Participants may include information on additional markers used in their panel to assess memory T-cell subsets.

Program Information

- Two 3.0-mL whole blood specimens
- Two shipments per year

Flow Cytometry—B-ALL Minimal Residual Disease BALL

Analyte	Program Code	Challenges per Shipment
	BALL	
B-ALL minimal residual disease	■	3

Additional Information

- Program 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 a mixture of Children's Oncology Group (COG) approved B-ALL MRD method and laboratory developed assays.
- This program has stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.

Program Information

- Two 1.1-mL specimens containing a cell line/whole blood mixture simulating B lymphoblastic leukemia/lymphoma minimal residual disease
- One online case consisting of gated dot plots
- Two shipments per year

Flow Cytometry—Mature B-Cell Leukemia/Lymphoma Minimal Residual Disease FL8

Procedure	Program Code	Challenges per Shipment
	FL8	
Mature B-cell leukemia/lymphoma minimal residual disease	■	3

Additional Information

- Program FL8 is intended for laboratories that currently or will begin to perform minimal residual disease (MRD) testing (rare event analysis) for mature B-cell leukemia/lymphoma.
- This program has stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.

Program Information

- Two 1.1-mL specimens containing a cell line/whole blood mixture simulating mature B-cell leukemia/lymphoma minimal residual disease with clinical history and pertinent laboratory data
- One online case with clinical history and gated dot plots
- Two shipments per year

Flow Cytometry—Plasma Cell Myeloma Minimal Residual Disease FL9

Procedure	Program Code	Challenges per Shipment
	FL9	
Plasma cell myeloma minimal residual disease	■	3

Additional Information

- Program FL9 is intended for laboratories that currently or will begin to perform minimal residual disease (MRD) testing (rare event analysis) for plasma cell myeloma.
- This program has stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.

Program Information

- Two 4.5-mL specimens containing a cell line/whole blood mixture simulating plasma cell myeloma minimal residual disease with clinical history and pertinent laboratory data
- One online case with clinical history and gated dot plots
- Two shipments per year

Flow Cytometry—Plasma Cell Neoplasms PCNEO

Analyte	Program Code	Challenges per Shipment
	PCNEO	
Plasma cell neoplasms	■	3

Additional Information

- Program PCNEO is especially helpful for laboratories that have leukemia/lymphoma assays that target plasma cell neoplasms, including cytoplasmic light chain staining.
- This program has stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.

Program Information

- One 1.1-mL specimen containing a cell line/whole blood mixture, simulating a plasma cell neoplasm with clinical history and pertinent laboratory data
- Two online cases consisting of gated dot plots, clinical histories, and pertinent laboratory data
- Each challenge includes online images of tissue sections, bone marrow, and/or peripheral blood smears as clinically relevant and/or available
- Online, whole slide images powered by DigitalScope technology (if applicable)
- Two shipments per year

Flow Cytometry—Immunophenotypic Characterization of Paroxysmal Nocturnal Hemoglobinuria PNH

Analyte	Program Code	Challenges per Shipment
	PNH	
PNH RBC analysis	■	2
PNH WBC analysis	■	2

Additional Information

- The PNH program 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 program is appropriate for high-sensitivity testing ($\leq 0.01\%$ PNH type clone in red cells and/or granulocytes).

Program Information

- Two 0.5-mL whole blood specimens for RBC and WBC analysis
- Two shipments per year

Fetal Red Cell Detection HBF

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

Program Information

- Two 1.2-mL liquid whole blood specimens
- Not designed for F cell quantitation
- Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope technology
- Two shipments per year

Rare Flow Antigen Validation RFAV1, RFAV2, RFAV3

Analyte	Program Code			Challenges per Shipment
	RFAV1	RFAV2	RFAV3	
CD1a	■			1
CD103		■		1
CD30			■	1

Program Information

- RFAV1 - One 1.1-mL cell line specimen
- RFAV2 - One 1.0-mL stabilized specimen
- RFAV3 - One 1.1-mL cell line specimen
- Two shipments per year

Additional Information

- Programs RFAV1, RFAV2, and RFAV3 do not meet the regulatory requirements for proficiency testing.
- These programs meet the CAP Accreditation Checklist item FLO.23737, which requires semiannual testing of antigens.
- RFAV1 and RFAV3 have stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.

ZAP-70/CD49d Analysis by Flow Cytometry ZAP70

Analyte	Program Code	Challenges per Shipment
	ZAP70	
Zeta-chain-associated protein kinase 70	■	3
CD49d	■	3

Program Information

- Three 1.1-mL cell line specimens
- Two shipments per year

Additional Information

- This program 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 program allows assessment of the laboratory's ability to detect CD49d.
- This program has stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.

17 Transfusion Medicine, Viral Markers, and Parentage Testing



As transfusion medicine continues to automate, the CAP continues to introduce new programs to support your evolving proficiency testing needs, such as:

- Direct Antiglobulin Testing—Automated (ADAT).

Transfusion Medicine, Viral Markers, and Parentage Testing

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New Programs

NEW

Direct Antiglobulin Testing—Automated (ADAT)	236
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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	Program 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		
Educational challenge	■		1

Program Information

- One educational challenge, which may consist of a dry 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 program J
- Three shipments per year



Electronic Crossmatch EXM

Procedure	Program Code	Challenges per Shipment
	EXM	
Electronic crossmatch	■	3

Program 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 program J
- Three shipments per year



Transfusion Medicine—Automated JAT

Procedure	Program Code	Challenges per Shipment
	JAT	
ABO grouping	■	5
Antibody detection	■	5
Antibody identification	■	5
Compatibility testing	■	5
Rh typing	■	5

For multiple instrument reporting options, see the Quality Cross Check program, JATQ, on page 232.

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



Transfusion Medicine—Automated Educational Challenge JATE1

Procedure	Program Code	Challenges per Shipment
	JATE1	
Educational challenge	■	1

Program Information

- One educational challenge, which may consist of a dry challenge and/or wet specimen for ABO grouping, Rh typing, antibody detection, antibody identification, and/or compatibility testing
- Must order in conjunction with program JAT
- Three shipments per year



Quality Cross Check—Transfusion Medicine JATQ

Procedure	Program Code	Challenges per Shipment
	JATQ	
ABO grouping	■	3
Antibody detection	■	3
Rh typing	■	3

Program Information

- Three 6.0-mL 13% -17% whole blood specimens
- May be used with automated and manual procedures
- Two shipments per year

This program does not meet regulatory requirements for proficiency testing; see program JAT on page 231. For additional information about the Quality Cross Check program, see page 40.

Stay current with new advances in clinical pathology with CPIP

The **Clinical Pathology Improvement Program (CPIP)** provides peer-reviewed, interactive, case-based learning activities that cover a diverse portfolio of real-life clinical scenarios. Every month, a new online module with images and clinical details is released. As the case is solved in real time, new information is shared. Grow your skills with a full year of CPIP and earn up to 15 CME credits.

Add CPIP/CPIP1 to your Surveys order.



Electronic Crossmatch—Automated EXM2

Procedure	Program Code	Challenges per Shipment
	EXM2	
Electronic crossmatch	■	3

Program 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 program JAT
- Three shipments per year



In-Date Blood Product Wastage QT4

Blood for transfusion is a precious resource. At a minimum, wastage of blood that is not out-of-date represents a financial loss to the health care system. More ominously, systemic wastage of blood may reflect an environment of care that is out of control and 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

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

Performance Breakdown

- Breakdown of circumstances of wastage (%)

Look in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next quarter.

ABO Subgroup Typing ABOSG

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

Program Information

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

Red Blood Cell Antigen Genotyping RAG

Procedure	Program Code	Challenges per Shipment
	RAG	
RBC blood group genotyping for phenotype prediction	■	3

Program Information

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

Red Blood Cell Antigen Typing RBCAT

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

Program Information

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

Program RBCAT is for donor centers and transfusion laboratories performing non-automated/manual red cell phenotyping for the management of patients with complex serology (ie, alloimmunization, sickle cell disease, warm autoimmune hemolytic anemia). Challenges will include antigens such as Rh, Kell, MNSs, Duffy, and Kidd blood group system.

Antibody Titer ABT, ABT1, ABT2, ABT3

Procedure	Program Code				Challenges per Shipment
	ABT	ABT1	ABT2	ABT3	
Anti-A titer	■	■			1
Anti-B titer				■	1
Anti-D titer	■		■		1

Program Information

- ABT - One 2.0-mL specimen for anti-A titer with one corresponding titer cell (3%–4% red blood cell suspension); one 2.0-mL specimen for anti-D titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT1 - One 2.0-mL specimen for anti-A titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT2 - One 2.0-mL specimen for anti-D titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT3 - One 2.0-mL 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 specimen for anti-A titer; one 2.0-mL specimen for anti-D titer
- AABT1 - One 2.0-mL specimen for anti-A titer
- AABT2 - One 2.0-mL specimen for anti-D titer
- AABT3 - One 2.0-mL specimen for anti-B titer
- Two shipments per year

Transfusion-Related Cell Count TRC

Procedure	Program Code	Challenges per Shipment
	TRC	
Platelet count (platelet-rich plasma)	■	5
WBC count	■	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 leukocyte-reduced platelet material
- Two 1.0-mL vials leukocyte-reduced red blood cells
- Three shipments per year

Direct Antiglobulin Testing DAT

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

Program Information

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

Direct Antiglobulin Testing—Automated ADAT

NEW

Procedure	Program Code	Challenges per Shipment
	ADAT	
Direct antiglobulin testing	■	3

Program Information

- Three 4.0-mL 15% red blood cell suspensions
- For use with automated method
- Two shipments per year

Eluate Survey ELU

Procedure	Program Code	Challenges per Shipment
	ELU	
Antibody elution	■	2

Program Information

- 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	■	2
Rosette fetal screen	■	2
Acid elution whole slide image	■	1

Program Information

- Two 1.2-mL liquid whole blood specimens
- Not designed for F cell quantitation
- Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope® technology
- Two shipments per year

Platelet Serology PS

Procedure	Program Code	Challenges per Shipment
	PS	
Antibody detection	■	3
Platelet crossmatch	■	3
Platelet antibody identification	■	3

A low concentration of sodium azide may be present in the specimens and may affect lymphocytotoxicity methods.

Program Information

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

Transfusion Medicine Comprehensive—Competency Assessment TMCA

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

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

Program Information

- Two 3.0-mL 3% red blood cell suspensions
- Two 3.0-mL corresponding serum specimens
- One 3.0-mL donor 3% red blood cell suspension
- Three shipments per year; order shipments individually or for an entire year

Direct Antiglobulin Test—Competency Assessment TMCAD

Procedure	Program Code	Challenges per Shipment
	TMCAD	
Direct antiglobulin testing	■	2

Program TMCAD does not meet the regulatory requirements for proficiency testing.

Program Information

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

Eluate Competency Assessment TMCAE

Procedure	Program Code	Challenges per Shipment
	TMCAE	
Antibody elution	■	2

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

Program Information

- Two 2.0-mL 50% red blood cell suspensions
- Two shipments per year; order shipments individually or for an entire year

Fetal Red Cell Quantitation—Competency Assessment TMCAF

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

Program TMCAF does not meet the regulatory requirements for proficiency testing.

Program Information

- Two 1.2-mL whole blood specimens
- Two online, whole slide images per year with optional grids for cell counting
- Powered by DigitalScope technology
- Two shipments per year; order shipments individually or for an entire year

During your inspection, if it's not documented, it's not compliant.

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- Flexible plans for entire networks or individual laboratories
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Improve your laboratory's readiness for inspection. Add the appropriate Competency Assessment Hub subscription to your order.



Cord Blood and Stem Cell Processing CBT, SCP

Analyte	Program Code		Challenges per Shipment
	CBT	SCP	
Absolute CD3		■	2
Absolute CD34	■	■	2
Bacterial culture	■	■	2
%CD3+		■	2
%CD34+	■	■	2
%CD45+		■	2
CFU-GM	■	■	2
Total CFC	■	■	2
Fungal culture	■	■	2
Hematocrit		■	2
Hemoglobin		■	2
Mononuclear cell count	■	■	2
Nucleated red cells	■		2
Number of CD34 positive events	■	■	2
Number of CD45 positive events		■	2
Total nucleated cells	■	■	2
Viability	■	■	2
WBC count	■	■	2

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.
- These programs have stability of two days or less. The CAP cannot guarantee performance or offer credits for orders placed for shipment outside of the US and Canada.
- See International Shipping information section in the Ordering Information Supplement regarding additional dangerous goods shipping fees.

Program Information

- CBT - Two 2.5-mL cord blood specimens; designed for assays required for the production of umbilical cord blood stem cell programs
- SCP - Two 3.0-mL peripheral blood specimens; designed for laboratories that process and assess the suitability of stem cells
- Two shipments per year



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

Bacterial Detection in Platelets BDP, BDP5

Procedure	Program Code		Challenges per Shipment
	BDP	BDP5	
Bacterial culture and detection systems	■		2
Bacterial culture and detection systems		■	5

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.
- Program 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.
- Program BDP5 is designed for donor centers/laboratories that are performing bacterial detection for the purposes of platelet unit screening and are not associated with a CMS-certified microbiology laboratory with the same CLIA number.
- See International Shipping information section in the Ordering Information Supplement regarding additional dangerous goods shipping fees.

Program Information

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



Bacterial Detection in Platelets, Rapid BDPV, BDPV5

Procedure	Challenges per Shipment	
	Program Code	
	BDPV	BDPV5
CMS certified rapid immunoassay	2	5

Additional Information

- The Centers for Medicare & Medicaid Services (CMS) requires proficiency testing for bacterial detection in platelets.
- Program 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.
- Program BDPV5 is designed for donor centers/laboratories that are performing bacterial detection for the purposes of platelet unit screening and are not associated with a CMS-certified microbiology laboratory with the same CLIA number.
- See International Shipping information section in the Ordering Information Supplement regarding additional dangerous goods shipping fees.

Program Information

- BDPV - Two frozen specimens; two shipments per year
- BDPV5 - Five frozen specimens; three shipments per year
- For use with methods such as Verax Biomedical



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

Expanded Transfusion Medicine Exercises ETME1

Procedure	Program Code	Challenges per Shipment
	ETME1	
Expanded challenges	■	2

Additional Information

Program ETME1 is an educational opportunity that offers:

- More challenging and/or complex antibody identification
- Comprehensive case studies in transfusion medicine
- Simulated collaboration with other professionals, including those within or outside your institution
- A method for determining the laboratory's ability to recognize and integrate problem solving skills in transfusion medicine

The wet challenge may consist of specimens for ABO grouping, Rh typing, antibody detection, antibody identification, compatibility testing, antigen typing, direct antiglobulin testing, antibody titer, and/or antibody elution.

Program Information

- One dry challenge and one wet challenge consisting of a serum specimen(s) and/or red blood cell suspensions
- Two shipments per year

Transfusion Medicine: A Compendium of Educational Cases

Based on more than 10 years of educational material used in proficiency testing from the CAP Transfusion, Apheresis, and Cellular Therapy Committee, this newest book on transfusion medicine consists of 20 cases with multiple-choice questions and answers. Topics covered reflect clinical cases as well as hot topics in transfusion medicine leveraging the clinical experience of 19 highly regarded transfusion medicine experts, all leaders in the field.

Contents include:

- Blood components including plasma, platelets, and red blood cells
- Neonatal/peripartum transfusion medicine
- Special situations such as hemolysis and transplantation
- Regulatory issues

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Softcover; 90 pages; 2020

Viral Markers

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

Viral Markers—Series 1 VM1

Analyte	Program Code	Challenges per Shipment
	VM1	
Anti-HAV (total: IgM and IgG)	■	5
Anti-HAV (IgG)	■	5
Anti-HBc (total: IgM and IgG)	■	5
Anti-HBs	■	5
Anti-HBs, quantitative	■	5
Anti-HCV	■	5
Anti-HIV-1	■	5
Anti-HIV-1/2	■	5
Anti-HIV-2	■	5
HBsAg	■	5

Additional Information

- Do not use program VM1 with rapid anti-HCV, anti-HIV-1, or anti-HIV-1/2 kits. See page 243 for programs appropriate for rapid methods.
- Anti-HIV-1/2, HIV-1 p24 antigen combination assay users should enroll in the VM6 program. VM1 is not appropriate for this assay.

Program Information

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

Viral Markers—Series 2 VM2

Analyte	Program Code	Challenges per Shipment
	VM2	
Anti-HBe	■	5
HBeAg	■	5

Program Information

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

Viral Markers—Series 3 VM3

Analyte	Program Code	Challenges per Shipment
	VM3	
Anti-CMV	■	3
Anti-HTLV-I/II	■	3
HIV-1 p24 antigen	■	3

Program Information

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

Viral Markers—Series 4 VM4

Analyte	Program Code	Challenges per Shipment
	VM4	
Anti- <i>Trypanosoma cruzi</i> (Chagas disease)	■	2

Program Information

- 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

Program Information

- 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 program VM6 specimens in duplicate
- Three shipments per year

Anti-HIV 1/2 AHIV, AHIVW

Analyte/Procedure	Program Code		Challenges per Shipment
	AHIV	AHIVW	
Anti-HIV-1, Anti-HIV-2, Anti-HIV-1/2	■		5
Anti-HIV-1, Anti-HIV-1/2, waived methods only		■	2

Program Information

- AHIV - Five 0.5-mL plasma specimens; three shipments per year
- AHIVW - Two 0.5-mL plasma specimens; two shipments per year

Anti-HCV, Rapid Methods, Waived RHCW

Analyte/Procedure	Program Code	Challenges per Shipment
	RHCW	
Anti-HCV, waived methods only	■	3

Program Information

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

Nucleic Acid Testing NAT

Analyte	Program Code	Challenges per Shipment
	NAT	
Babesia	■	1
HBV	■	5
HCV	■	5
HIV	■	5
West Nile virus	■	5

Program Information

- Five 6.0-mL plasma specimens
- One 1.0-mL whole blood specimen
- 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 Shipment
	VBDM	
Zika virus	■	3

Program Information

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

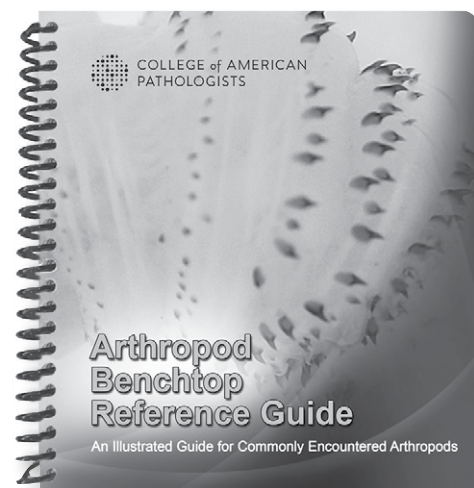
Arthropod Benchtop Reference Guide

- 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
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Item number: ABRG
Spiral bound; 82 pages;
65+ images and tables; 2016

Parentage Testing

Parentage/Relationship Test—Filter Paper PARF

Analyte/Procedure	Program Code	Challenges per Shipment
	PARF	
DNA testing (PCR)	■	4
Calculation challenge (dry challenge)	■	1

Program Information

- DNA testing (PCR) - Four samples per mailing: Two shipments of mother and child specimens on blood-stained filter paper with buccal swabs for two potential fathers; one shipment with all four specimens on blood-stained filter paper
- Reporting for short tandem repeats (STRs), X-STRs, Y-STRs, as well as the conclusions provided
- Three shipments per year

Make critical transfusion decisions with confidence.

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

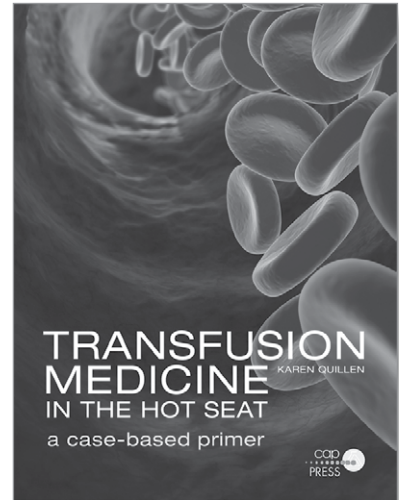
- Antibodies
- Blood Components
- Complications

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

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Softcover; 123 pages; 2016

18 Histocompatibility



Keep your laboratory current with insights from a panel of experts who monitor the latest trends in histocompatibility testing.

- Benefit from the CAP's culture of continuous improvement, which provides direction for updating our proficiency testing programs.
- Ensure your regulatory requirements are covered by continuing to participate in our programs.

Discontinued Programs

HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II) (MXB only)

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/Class II) **MXC, MXE**

Procedure	Program Code		Challenges per Shipment
	MXC	MXE	
Crossmatching (Class I/Class II)	■		8
Antibody screen (Class I/Class II)	■	■	4
Antibody identification (Class I/Class II)	■	■	4

Program Information

- MXC - Four 0.4-mL plasma specimens; two (approximately 6-7 x 10⁶ cells) purified blood lymphocyte specimens
- MXE - Four 0.25-mL plasma specimens; must be ordered in conjunction with program MXC
- 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)	■		5
Molecular HLA-DR, -DQ, and -DP typing (Class II)	■		5

Program Information

- Five 2.0-mL whole blood specimens in CPD or CPD-A
- Serologic equivalents reporting available
- Two shipments per year

HLA-B27 Typing **B27**

Procedure	Program Code		Challenges per Shipment
	B27		
HLA-B27 typing	■		5

Program Information

- Five 2.0-mL whole blood specimens in CPD or CPD-A
- Two shipments per year

Antibody Titer ABT, ABT1, ABT2, ABT3

Procedure	Program Code				Challenges per Shipment
	ABT	ABT1	ABT2	ABT3	
Anti-A titer	■	■			1
Anti-B titer				■	1
Anti-D titer	■		■		1

Program Information

- ABT - One 2.0-mL specimen for anti-A titer with one corresponding titer cell (3%–4% red blood cell suspension); one 2.0-mL specimen for anti-D titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT1 - One 2.0-mL specimen for anti-A titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT2 - One 2.0-mL specimen for anti-D titer with one corresponding titer cell (3%–4% red blood cell suspension)
- ABT3 - One 2.0-mL 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 specimen for anti-A titer; one 2.0-mL specimen for anti-D titer
- AABT1 - One 2.0-mL specimen for anti-A titer
- AABT2 - One 2.0-mL specimen for anti-D titer
- AABT3 - One 2.0-mL specimen for anti-B titer
- Two shipments per year

Monitoring Engraftment ME

Procedure	Program Code	Challenges per Shipment
	ME	
Stem cell monitoring engraftment	■	5

Program Information

- Seven 0.5-mL whole blood specimens
- Designed for laboratories supporting stem cell transplant and laboratories monitoring chimerism after organ transplantation
- Two shipments per year

Transfusion Medicine: A Compendium of Educational Cases

Based on more than 10 years of educational material used in proficiency testing from the CAP Transfusion, Apheresis, and Cellular Therapy Committee, this newest book on transfusion medicine consists of 20 cases with multiple-choice questions and answers. Topics covered reflect clinical cases as well as hot topics in transfusion medicine leveraging the clinical experience of 19 highly regarded transfusion medicine experts, all leaders in the field.

Contents include:

- Blood components including plasma, platelets, and red blood cells
- Neonatal/peripartum transfusion medicine
- Special situations such as hemolysis and transplantation
- Regulatory issues

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Item number: PUB228
Softcover; 90 pages; 2020

HLA Disease Association-Drug Risk DADR1, DADR2

Analyte	Program 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
HLA-DQA1*02		■	3
HLA-DQA1*03		■	3
HLA-DQA1*05		■	3
HLA-DQB1*02:01		■	3
HLA-DQB1*02:02		■	3

Program Information

- DADR1, DADR2 - Three 0.1-mL specimens, each containing 200 µg/mL of human DNA in media
- Two shipments per year

Additional Information

These programs will challenge the laboratory to accurately identify the presence or absence of alleles associated with a variety of disease states (listed below) and/or the adverse reactions to specific drugs.

DADR1

- Carbamazepine-induced Stevens-Johnson syndrome
- Allopurinol Stevens-Johnson syndrome
- Hypersensitivity to abacavir
- Dapsone hypersensitivity

DADR2

- Celiac disease
- Narcolepsy
- Pemphigus vulgaris
- Psoriasis
- Antiglomerular basement membrane disease
- Birdshot retinochoroidopathy
- Idiopathic myopathy

During your inspection, if it's not documented, it's not compliant



CLIA and your accreditor's standards haven't changed: you need to have complete and accurate records at inspection or receive a deficiency. The CAP's updated Competency Assessment Hub offers tools to satisfy regulatory record-keeping requirements and meet your staff's CE needs.

2023 Competency Assessment Hub subscription includes:

- Flexible plans that accommodate whole healthcare networks or individual laboratories
- 67 courses in 11 laboratory disciplines
- Tools and resources to build assessment and training records
- Reporting tools to ensure your staff meet deadlines

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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

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New Programs **NEW**

CAP/ACMG FISH for Paraffin-Embedded Tissue <i>ALK</i> Rearrangement in Lung (CYALK).....	255
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Next-Generation Sequencing Hematologic Malignancies Bioinformatics Hybrid (NGSB5)	270

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Analyte Additions **NEW**

Pharmacogenetics (PGX1).....	264
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Discontinued Programs

- Variant Interpretation Only Program (VIP/VIP1)
- Next-Generation Sequencing Bioinformatics Somatic Validated Materials (NGSBV)

Cytogenetics

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

CAP/ACMG Cytogenetics CY, CYBK

Analyte/Procedure	Program Code		Challenges per Shipment
	CY	CYBK	
Chromosome abnormality	■	■	6
Karyotype nomenclature	■	■	6
Educational challenge	■	■	1 per year

Each challenge, with the exception of the educational challenge, includes a case history and images of metaphase cells that are representative of each case. Each mailing will include three constitutional and three neoplastic challenges.

Program Information

- CY - Online images of metaphase cells delivered two times a year; your CAP shipping contact will be notified [via email](#) when the activity is available
- CYBK - Prints of metaphase cells; two shipments per year



CAP/ACMG Fluorescence In Situ Hybridization CYF, CYI

Disease/Procedure	Program Code		Challenges per Shipment
	CYF	CYI	
Constitutional and Hematologic Disorders			
FISH for constitutional disorder - slides	■		1
FISH for constitutional disorder - image/dry challenge	■		2
FISH for hematologic disorder - slides	■		1
FISH for hematologic disorder - image/dry challenge	■		2
Urothelial Carcinoma			
FISH for urothelial carcinoma		■	2

Additional Information

- CYF 2023-A:
Constitutional disorder - Sex chromosome enumeration (two slides)
Hematologic disorder - *MYC* (two slides)
- CYF 2023-B:
Constitutional disorder - Prader-Willi syndrome/Angelman syndrome critical region (two slides)
Hematologic disorder - *RUNX1::RUNX1T1* (two slides)
- CYF is prepared from cell suspension samples. For FISH in paraffin-embedded tissues, see page 255.
- These programs are only for laboratories that perform both hybridization and interpretation under the same CLIA number.

Program Information

- CYF - Four slides and four image/dry challenges
- CYI - Two 250- μ L 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, CYALK

Analyte/Procedure	Program Code					Challenges per Shipment	
	CYH	CYJ	CYK	CYL	CYALK NEW	A	B
Breast Cancer							
<i>ERBB2 (HER2)</i> amplification	■					10	10
Interpretive challenges for <i>ERBB2 (HER2)</i> amplification	■					3	3
Brain/Glioma Tissue							
1p/19q		■				1	1
Solid Tumor							
<i>DDIT3</i> rearrangement			■			1	
<i>SS18</i> rearrangement			■				1
Educational image challenge			■			1	1
Lymphoma Tissue							
<i>MYC</i> rearrangement				■		1	
<i>BCL6</i> rearrangement				■			1
Lung Cancer							
<i>ALK</i> rearrangement					■	1	
<i>ALK</i> rearrangement image challenge					■		1

Additional Information

- All CYJ, CYK, and CYL specimens will be 4.0-micron tissue sections mounted on positively charged glass slides.
- These programs are for laboratories that perform both hybridization and interpretation under the same CLIA number. For interpretation only *ERBB2 (HER2)* FISH for breast cancer, see page 296.

Program Information

- CYH - Two unstained, five-core tissue microarray slides equivalent to 10 paraffin-embedded breast tissue specimens; two H&E stained tissue microarray slides are also provided
- CYJ - Four unstained slides and one H&E stained slide
- CYK - Two unstained slides and one H&E stained slide; one educational image challenge querying different probes/genes is included with each mailing
- CYL - Two unstained slides and one H&E stained slide
- CYALK - Two unstained slides and one H&E stained slide is provided for the A mailing; the B mailing will include an *ALK* image challenge
- Two shipments per year



CAP/ACMG Constitutional Microarray CYCGH

Procedure	Program Code	Challenges per Shipment
	CYCGH	
Cytogenomic microarray analysis for constitutional abnormalities	■	2
Educational challenge for constitutional abnormalities	■	1

Additional Information

- Participants will identify and characterize gains or losses and the cytogenetic location of abnormalities detected.
- This program 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 abnormalities	■	1
Educational challenge for oncologic abnormalities	■	1

Participants will identify and characterize gains or losses and the cytogenetic location of abnormalities detected.

Program Information

- Two 2.0- μ g DNA specimens; one image/dry challenge
- Two shipments per year



Program Information

- One 2.0- μ g DNA specimen; one image/dry challenge
- Two shipments per year



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	Program Code		Challenges per Shipment
	BGL	BGL1	
Acylcarnitines, qualitative and quantitative	■		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



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 laboratories 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 laboratories 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.

Visit cap.org and from the Laboratory Improvement tab, choose Proficiency Testing > Sample Exchange Registry.

CAP/ACMG Amino Acid Quantitation for Inherited Metabolic Disorders BGL2

Analyte/Procedure	Program Code	Challenges per Shipment
	BGL2	
Alanine	■	3
Alloisoleucine	■	3
Arginine	■	3
Aspartic acid	■	3
Citrulline	■	3
Cystine	■	3
Glutamic acid	■	3
Glutamine	■	3
Glycine	■	3
Histidine	■	3
Homocystine	■	3
Hydroxyproline	■	3
Isoleucine	■	3
Leucine	■	3
Lysine	■	3
Methionine	■	3
Ornithine	■	3
Phenylalanine	■	3
Proline	■	3
Serine	■	3
Taurine	■	3
Threonine	■	3
Tryptophan	■	3
Tyrosine	■	3
Valine	■	3

Program Information

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



CAP/ACMG Alpha-1 Antitrypsin Genotyping AAT

Analyte/Procedure	Program Code	Challenges per Shipment
	AAT	
Alpha-1 antitrypsin (<i>SERPINA1</i>) genotyping	■	3

This program will test for the M, S, and Z alleles.

Program Information

- Three 10.0- μ g extracted DNA specimens
- Two shipments per year



CAP/ACMG Apolipoprotein E Genotyping APOE

Analyte/Procedure	Program Code	Challenges per Shipment
	APOE	
Apolipoprotein E (<i>APOE</i>) genotyping	■	3

This program 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- μ g 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	■	3
<i>BRCA1/2</i> duplication/deletion analysis	■	3

Program Information

- Three 10.0- μ g extracted DNA specimens
- Two shipments per year



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	■	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: *ACTC1*, *MYBPC3*, *MYH7*, *MYL2*, *MYL3*, *TNNI3*, *TNNT2*, and *TPM1*.

Program Information

- Three 80.0-μL purified extracted DNA specimens (50 ng/μL)
- Two shipments per year



CAP/ACMG Hemoglobinopathies Genotyping HGM

Analyte/Procedure	Program Code	Challenges per Shipment
	HGM	
Alpha-thalassemia	■	3
Beta-thalassemia	■	3
Hemoglobin S/C	■	3

Program Information

- Three 50.0-μg extracted DNA specimens
- Two shipments per year



CAP/ACMG Inherited Cancer Sequencing Panel ICSP

Analyte/Procedure	Program Code	Challenges per Shipment
	ICSP	
Inherited cancer sequencing panel	■	3

Additional Information

- This proficiency challenge is for laboratories performing gene panels, exome sequencing, and whole genome sequencing to detect germline variants associated with inherited forms of cancer.
- Participants will be asked to identify variants in the following genes: *APC*, *ATM*, *BRCA1*, *BRCA2*, *CDKN2A*, *CHEK2*, *MLH1*, *MSH2*, *MSH6*, *PALB2*, and *PMS2*.

Program Information

- Three 80.0-μL purified extracted DNA specimens (50 ng/μL)
- Two shipments per year



CAP/ACMG Molecular Genetics Series MGL1, MGL2, MGL3, MGL4, MGL5

Disease/Gene	Program Code					Challenges per Shipment
	MGL1	MGL2	MGL3	MGL4	MGL5	
Bloom syndrome (<i>BLM</i> gene)				■		3
<i>BRCA1/2</i>			■			3
Canavan (<i>ASPA</i> gene)				■		3
Connexin 26 (<i>GJB2</i> gene)			■			3
Cystic fibrosis (<i>CFTR</i> gene)		■			■	3/2(MGL5)
DMD/Becker (<i>DMD</i> gene)		■				3
Factor V Leiden (<i>F5</i> gene)	■					3
Familial dysautonomia (<i>ELP1</i> gene)				■		3
Fanconi anemia complementation group C (<i>FANCC</i> gene)				■		3
Fragile X (<i>FMR1</i> gene)	■					3
Friedreich ataxia (<i>FXN</i> gene)		■				3
Gaucher (<i>GBA</i> gene)				■		3
Glycogen storage disease type Ia (<i>G6PC</i> gene)				■		3
Hemochromatosis (<i>HFE</i> gene)	■					3
Hemoglobin S/C		■				3
Huntington (<i>HTT</i> gene)		■				3
Methylenetetrahydrofolate reductase (<i>MTHFR</i> gene) c.665C>T (677C>T) and c.1286A>C (1298A>C)	■					3
Mucopolipidosis IV (<i>MCOLN1</i> gene)				■		3
Multiple endocrine neoplasia type 2 (<i>RET</i> gene)			■			3
Myotonic dystrophy (<i>DMPK</i> gene)		■				3
Niemann-Pick type A/B (<i>SMPD1</i> gene)				■		3
Plasminogen activator inhibitor (PAI)-1 (<i>SERPINE1</i> gene)	■					3

Continued on the next page

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.

Program Information

- MGL1, MGL2, MGL3, MGL4 - Three 50.0- μ g extracted DNA specimens per disease/gene
- MGL5 - Two 50.0- μ g extracted DNA specimens
- Two shipments per year



CAP/ACMG Molecular Genetics Series MGL1, MGL2, MGL3, MGL4, MGL5 continued

Disease/Gene	Program Code					Challenges per Shipment
	MGL1	MGL2	MGL3	MGL4	MGL5	
Prader-Willi/Angelman syndrome	■					3
Prothrombin (<i>F2</i> gene)	■					3
RhD		■				3
Spinal muscular atrophy (<i>SMN1</i> and <i>SMN2</i> genes)		■				3
Spinocerebellar ataxia (<i>ATXN1</i> , <i>ATXN2</i> , <i>ATXN3</i> , <i>CACNA1A</i> , and <i>ATXN7</i> genes)		■				3
Tay-Sachs (<i>HEXA</i> gene)				■		3

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.
- The Spinal Muscular Atrophy program includes *SMN1* and *SMN2* gene analysis and copy number 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

- 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



Program Information

- IMD1 - Three 100.0-µL DNA specimens
- 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 activities per year; your CAP shipping contact will be notified via email when the activity is available
- SEC1 - Three 30.0-µg extracted DNA specimens; forward and reverse lyophilized primers are provided. Two shipments per year



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Pharmacogenetics PGX, PGX1, PGX3

Analyte/Procedure	Program Code			Challenges per Shipment
	PGX	PGX1	PGX3	
<i>CYP2C19</i>	■			3
<i>CYP2C9</i>	■			3
<i>CYP2B6</i>	■			3
<i>CYP2D6</i>	■			3
<i>CYP3A4</i>	■			3
<i>CYP3A5</i>	■			3
<i>CYP4F2</i>	■			3
<i>SLCO1B1</i> (rs4149056)	■			3
<i>VKORC1</i>	■			3
<i>IL28B</i> (rs12979860)		■		3
<i>COMT</i> (rs4680)		■		3
<i>G6PD</i> NEW		■		3
<i>OPRM1</i> (rs1799971, c.118A>G)		■		3
<i>DPYD</i>			■	3
<i>NUDT15</i>			■	3
<i>TPMT</i>			■	3
<i>UGT1A1</i>			■	3

UGT1A1 (PGX3 program) 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.

Program Information

- PGX, PGX1, PGX3 - Three 25.0-µg extracted DNA specimens
- Includes allele detection (genotyping) and/or interpretive challenges
- Two shipments per year

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	■		3

Program Information

- Three 10.0-µg extracted DNA specimens
- Two shipments per year



CAP/ACMG Thrombophilia Mutations TPM

Analyte/Procedure	Program Code	Challenges per Shipment
	TPM	
Factor II (<i>F2</i> gene, Prothrombin)	■	3
Factor V Leiden (<i>F5</i> gene)	■	3

This program 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- μ L synthetic whole blood specimens
- Two shipments per year



Red Blood Cell Antigen Genotyping RAG

Procedure	Program Code	Challenges per Shipment
	RAG	
RBC blood group genotyping for phenotype prediction	■	3

Program Information

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

Noninvasive Prenatal Testing NIPT

Analyte	Program Code	Challenges per Shipment
	NIPT	
Cell-free DNA screening for fetal aneuploidy	■	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 liquid specimens
- Two shipments per year

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	■	2

Laboratories will have the ability to analyze up to 200 preselected chromosomal intervals in hg19 (GRCh37) and hg38 (GRCh38) coordinates 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- μ g extracted gDNA specimen; one educational variant interpretation image/dry challenge
- Methods-based challenge for germline variants for laboratories using gene panels, exome, and genome sequencing
- Two shipments per year

Next-Generation Sequencing—Solid Tumor NGSST

Procedure	Program Code	Challenges per Shipment
	NGSST	
Next-generation sequencing	■	3

Additional Information

- This is a methods-based proficiency challenge for laboratories performing targeted next-generation sequencing of cancer genes or mutation hotspots in solid tumors.
- This program includes variants present with a variant allele fraction (VAF) potentially as low as 5%.

Program Information

- Three 1.0- μ g gDNA (50 ng/ μ L) specimens
- Two shipments per year

Next-Generation Sequencing—Hematologic Malignancies NGSHM

Procedure	Program Code	Challenges per Shipment
	NGSHM	
Next-generation sequencing	■	3

Additional Information

- This is a methods-based proficiency challenge for laboratories performing targeted next-generation sequencing of genes or mutation hotspots in hematologic malignancies.
- This program includes variants present with a variant allele fraction (VAF) potentially as low as 5%.

Program Information

- Three 1.0- μ g gDNA (50 ng/ μ L) specimens
- Two shipments per year

Next-Generation Sequencing Solid Tumor Bioinformatics NGSB1

Procedure	Program Code	Challenges per Shipment
	NGSB1	
Illumina TruSeq Amplicon Cancer Panel	■	1
Illumina TruSight Tumor 15 Panel	■	1
Illumina TruSight Tumor 170 Panel	■	1
Illumina TruSight Oncology 500 Panel	■	1
Thermo Fisher Ion AmpliSeq Cancer Hotspot Panel v2	■	1
Thermo Fisher OncoPrint Comprehensive Assay v3	■	1
Thermo Fisher OncoPrint Focus Cancer Panel	■	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.
- This program includes variants present with a variant allele fraction (VAF) potentially as low as 5%.
- For platform agnostic solid tumor bioinformatic proficiency testing challenges, refer to the NGSB4 program, page 268.

Program Information

- Sequencing files containing somatic variants to be downloaded and incorporated into your laboratory bioinformatics pipeline for analysis and reporting; file sizes range from 100MB to 1GB
- BAM and FASTQ file formats
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

NEW

Next-Generation Sequencing Solid Tumor Bioinformatics Hybrid NGSB4

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSB4	
<i>In silico</i> mutagenized sequencing file(s) containing somatic variants of relevance in solid tumors - platform agnostic	■	1

This is a platform agnostic hybrid *in silico* proficiency testing and validated materials program for laboratories performing targeted NGS of cancer genes or mutational hotspots in solid tumors.

For panel-specific solid tumor bioinformatic proficiency testing challenges, refer to the NGSB1 program, page 267.

Minimum Requirements:

- Laboratories must provide a gene panel sequencing data file (FASTQ or **unaligned** BAM) that has been generated using their current clinical sequencing protocols from one of the following sources: A specimen from the NGS - Germline program (see page 266) or from one of the following NIST Reference Material cell lines: RM 8398 (NA12878), RM 8391, RM 8392, or RM 8393. FASTQs or **unaligned** BAMs must be submitted along with a BED file describing the regions targeted and interrogated by your laboratory. Specimens from the NGSST and NGSHM programs or additional Coriell/NIST Reference Material cell lines cannot be used for this program.
- Laboratories can transfer and download files from most modern browsers/operating systems. Due to the extremely large file sizes, 40 Mbps transfer speed or higher is needed to ensure successful transfer of your laboratory's sequencing files to the CAP. For the most up-to-date information on system requirements, click **Browser and Operating System Requirements** located at the bottom of the cap.org homepage.

Additional Information, Proficiency Testing Program:

- Laboratories will be asked to identify somatic single nucleotide variants and small (1-15bp) insertions, deletions, duplications, and deletions-insertions (delins) in a subset of solid tumor mutational hotspots/genes with VAF potentially as low as 5%. Laboratories will be required to submit results of the variants identified.

Additional Information, Validated Materials:

- The sequencing file will contain up to 75 custom somatic variants that are tailored to the specific assay submitted (depending on the size of the panel provided) at VAF from 3% to 99% (higher allele fractions to mimic loss of heterozygosity or homozygosity) and will include:
 - Single nucleotide variants
 - Insertions, deletions, delins, and/or duplications ranging from 1-100bp (1-15bp, 16-50bp, 51-100bp)
 - For laboratories doing microsatellite instability, microsatellite instability at mono nucleotide tracts in the submitted capture design will be included.

All variants will be modeled based on actual somatic mutations from the COSMIC and/or cBioPortal databases. This portion of the program 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.

Program Information

- The proficiency testing portion of this program is designed to complement and augment NGS somatic variant wet bench proficiency testing programs by testing for a greater diversity of variants with a wide range of variant allele fractions (VAF) while the validated materials portion is designed to optimize bioinformatics pipelines, augment validations, and assist with pipeline verification after changes to NGS/ bioinformatics processes
- One panel sequencing data file (FASTQ or **unaligned** BAM), originating from your laboratory and provided to the CAP, for *in silico* mutagenesis
- Sequencing files containing somatic variants to be downloaded and analyzed by your laboratory bioinformatics pipeline
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

Next-Generation Sequencing Hematologic Malignancies Bioinformatics NGSB3

Procedure	Program Code	Challenges per Shipment
	NGSB3	
Illumina TruSight Myeloid Sequencing Panel	■	1
Thermo Fisher OncoPrint Myeloid Assay	■	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.
- This program includes variants present with a variant allele fraction (VAF) potentially as low as 5%.
- For platform agnostic hematologic malignancies bioinformatic proficiency testing challenges, refer to the NGSB5 program, page 270.

Program Information

- Sequencing files containing somatic variants to be downloaded and incorporated into your laboratory bioinformatics pipeline for analysis and reporting; file sizes range from 100MB to 1GB
- BAM and FASTQ file formats
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

NEW

Next-Generation Sequencing Hematologic Malignancies Bioinformatics Hybrid NGSB5

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSB5	
<i>In silico</i> mutagenized sequencing file(s) containing somatic variants of relevance in hematologic malignancies - platform agnostic	■	1

This is a platform agnostic hybrid *in silico* proficiency testing and validated materials program for laboratories performing targeted NGS of cancer genes or mutational hotspots in hematologic malignancies.

For panel-specific hematologic malignancies bioinformatic proficiency testing challenges, refer to the NGSB3 program, page 269.

Minimum Requirements:

- Laboratories must provide a gene panel sequencing data file (FASTQ or **unaligned** BAM) that has been generated using their current clinical sequencing protocols from one of the following sources: a specimen from the NGS - Germline program (see page 266) or from one of the following NIST Reference Material cell lines: RM 8398 (NA12878), RM 8391, RM 8392, or RM 8393. FASTQs or **unaligned** BAMs must be submitted along with a BED file describing the regions targeted and interrogated by your laboratory. Specimens from the NGSST and NGSHM programs or additional Coriell/NIST Reference Material cell lines cannot be used for this program.
- Laboratories can transfer and download files from most modern browsers/operating systems. Due to the extremely large file sizes, 40 Mbps transfer speed or higher is needed to ensure successful transfer of your laboratory's sequencing files to the CAP. For the most up-to-date information on system requirements, click **Browser and Operating System Requirements** located at the bottom of the cap.org homepage.
- Additional Information, Proficiency Testing Program:**
- Laboratories will be asked to identify somatic single nucleotide variants and small (1-15bp) insertions, deletions, duplications, and deletions-insertions (delins) in a subset of hematologic malignancies mutational hotspots/genes with VAF potentially as low as 5%. Laboratories will be required to submit results of the variants identified.
- Additional Information, Validated Materials:**
- The sequencing file will contain up to 75 custom somatic variants that are tailored to the specific assay submitted (depending on the size of the panel provided) at VAF from 3% to 99% (higher allele fractions to mimic loss of heterozygosity or homozygosity) and will include:
 - Single nucleotide variants
 - Insertions, deletions, delins, and/or duplications ranging from 1-100bp (1-15bp, 16-50bp, 51-100bp)

All variants will be modeled based on actual somatic mutations from the COSMIC and/or cBioPortal databases. This portion of the program 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.

Program Information

- The proficiency testing portion of this program is designed to complement and augment NGS somatic variant wet bench proficiency testing programs by testing for a greater diversity of variants with a wide range of variant allele fractions (VAF) while the validated materials portion is designed to optimize bioinformatics pipelines, augment validations, and assist with pipeline verification after changes to NGS/ bioinformatics processes
- One panel sequencing data file (FASTQ or **unaligned** BAM), originating from your laboratory and provided to the CAP, for *in silico* mutagenesis
- Sequencing files containing somatic variants to be downloaded and analyzed by your laboratory bioinformatics pipeline
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

Next-Generation Sequencing Undiagnosed Disorders—Exome NGSE

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSE	
Exome analysis for germline undiagnosed disorders	■	1

Additional Information/Minimum Requirements

- This *in silico* based program 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 (FASTQ or **unaligned** BAM) that has been generated using their current clinical sequencing protocols from one of the following sources: A specimen from the NGS - Germline program (see page 266) 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 programs or additional Coriell/NIST Reference Material cell lines 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, more than 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. Due to the extremely large file sizes, 40 Mbps transfer speed or higher is needed to ensure successful transfer of your laboratory's sequencing files to the CAP. For the most up-to-date information on system requirements, click **Browser and Operating System Requirements** located at the bottom of the cap.org homepage.

Program Information

- 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 [via email](#) when the activity is available

Next-Generation Sequencing Undiagnosed Disorders—Trio Analysis NGSET

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSET	
Trio (parents and proband) exome analysis for germline undiagnosed disorders	■	3

Additional Information/Minimum Requirements

- This *in silico* based program will assess the ability of the laboratory to identify germline variants responsible for a provided clinic phenotype in a proband as is encountered in an undiagnosed disease scenario using a trio approach (ie, laboratories will analyze the proband and parents in an effort to determine the diagnosis in the proband). In addition to analyzing the *in silico* mutagenized files to identify a genetic diagnosis for the provided clinical scenario, inheritance patterns as well as pathogenic or likely pathogenic ACMG secondary findings may also be reported.
- Laboratories must provide exome sequencing data files (FASTQs or **unaligned** BAMs) that have been generated using their current clinical sequencing protocols from one of the following Genome in a Bottle Consortium trio sources: The Ashkenazi Jewish trio (Coriell IDs GM24385, GM24149, and GM24143 or NIST RM8392) or the Han Chinese trio (Coriell IDs GM24631, GM24694, and GM24695). All exome files must be from the same trio (Ashkenazi Jewish or Han Chinese). Specimens from the NGS, NGSST, and NGSHT programs or additional Coriell/Genome in a Bottle Consortium sources 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, more than 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. Due to the extremely large file sizes, 40 Mbps transfer speed or higher is needed to ensure successful transfer of your laboratory's sequencing files to the CAP. For the most up-to-date information on system requirements, click **Browser and Operating System Requirements** located at the bottom of the cap.org homepage.

Program Information

- Three exome sequencing data files (one from each parent plus the proband), originating from your laboratory and provided to the CAP, for *in silico* mutagenesis. The mutagenized exome sequencing data files are to be downloaded and analyzed by your bioinformatics pipeline
- The mutagenized exome sequencing files 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 [via email](#) when the activity is available

Copy Number Variant—Solid Tumor CNVST

Procedure	Program Code	Challenges per Shipment
	CNVST	
Copy number variant—solid tumor	■	1

Additional Information

- This program is designed for laboratories using next-generation sequencing for copy number analysis.
- Laboratories will be asked to identify copy number alterations in some of these genes: *CDKN2A*, *CDKN2B*, *EGFR*, *ERBB2*, *FGFR3*, *MET*, *MYC*, *MYCN*, *TP53*.
- Copy number alterations tested will include amplification, gain, copy neutral loss of heterozygosity, and deletion.

Program Information

- One 20- μ L gDNA (10ng/ μ L) specimen
- Two shipments per year

Tumor Mutational Burden TMB

Procedure	Program Code	Challenges per Shipment
	TMB	
Tumor mutational burden	■	2

Additional Information

- This program is intended for laboratories using next-generation sequencing to determine tumor mutational burden.
- This program is appropriate for laboratories using targeted panels and whole exome sequencing.
- Paired normal tissue is included.
- Specimens are 50% tumor.

Program Information

- Two 10- μ L gDNA (50ng/ μ L) specimens
- Two 10- μ L gDNA (50ng/ μ L) paired normal tissues
- Two shipments per year

Molecular Oncology—Solid Tumors

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

Microsatellite Instability MSI

Procedure	Program Code		Challenges per Shipment
	MSI		
Microsatellite instability testing (DNA amplification)	■		3
<i>MLH1</i> promoter methylation analysis	■		3

Laboratories performing DNA mismatch repair assessment by immunohistochemistry methods should see program MMR on page 299.

Program Information

- Three specimens each containing two 10.0-micron unstained paraffin section slides and one H&E slide
- For laboratories performing molecular testing using PCR and NGS
- Two shipments per year

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>ERBB2</i> (<i>HER2</i>) gene amplification (brightfield)		■	10

Laboratories performing FISH for interphase chromosomal targets in paraffin sections refer to the Cytogenetics programs, page 255.

Program ISH2 is only for laboratories that perform both hybridization and interpretation under the same CLIA number.

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	■		1

Methods-based proficiency challenge to examine DNA purification from formalin-fixed, paraffin-embedded (FFPE) tissues. Laboratories will be able to purify DNA from FFPE sections and amplify control targets using laboratory-provided reagents.

Program Information

- Three 10.0-micron paraffin sections
- Two shipments per year

Neoplastic Cellularity NEO

Procedure	Program Code	Challenges per Shipment
	NEO	
Online assessment of percent neoplastic cellularity	■	10

Program Information

- Ten regions of interest (ROIs) using online, whole slide images
- A method-based preanalytic program to assess competency for determining percent neoplastic cellularity
- Powered by DigitalScope® technology
- Individual reporting fields for up to five pathologists are available
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available

Sarcoma Fusion Gene SARC

Gene	Program Code	Challenges per Shipment
	SARC	
Sarcoma fusion gene*	■	3

*See fusion gene listing below.

Laboratories performing FISH for sarcoma translocation refer to the Cytogenetics programs, page 255.

Program Information

- Three snap-frozen cell pellets from which approximately 5.0-µg of RNA can be extracted
- For laboratories performing molecular testing using RT-PCR and NanoString
- Two shipments per year

Sarcoma Fusion Gene Listing

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)

EWSR1::FLI1 or EWSR1::ERG

EWSR1::WT1, t(11;22)

FUS::DDIT3, t(12;16)

PAX3::FOXO1, t(2;13)

PAX7::FOXO1, t(1;13)

PAX3::FOXO1 or PAX7::FOXO1

SS18::SSX1, t(X;18)

SS18::SSX2, t(X;18)

SS18::SSX1 or SS18::SSX2

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.
- Genes in this program include: *EGFR*, *BRAF*, *KRAS*, *NRAS*, *IDH1*, *PIK3CA*, *ERBB2*, *MET*, and *BRCA1*.
- This program includes variants present with a variant allele fraction (VAF) range of 0.1% - 3.0%.

Program Information

- Three 125-ng DNA (25 ng/mL) specimens
- Two shipments per year

Fusion RNA Sequencing RNA

Analyte/Procedure	Program Code	Challenges per Shipment
	RNA	
RNA	■	3

Additional Information

- Total RNA from a cell line engineered to contain desired fusion RNA.
- This is for laboratories using RNAseq to detect gene fusion transcripts.
- This is not intended to replace the current program (SARC) for reverse transcription (RT)-PCR based detection (see page 275).
- 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.

Program Information

- Three 500-ng RNA (20 ng/μL) specimens
- Two shipments per year

Solid Tumor—Other BRAF, EGFR, KRAS, KIT

Analyte	Program Code				Challenges per Shipment
	BRAF	EGFR	KRAS	KIT	
<i>BRAF</i>	■				3
<i>EGFR</i>		■			3
<i>KRAS</i>			■		3
<i>KIT</i>				■	3
<i>PDGFRA</i>				■	3

Program Information

- BRAF, EGFR, KRAS - Paraffin-embedded sections or shavings
- KIT - 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	
<i>BRAF</i>	■	3
<i>EGFR</i>	■	3
<i>ERBB2 (HER2)</i>	■	3
<i>KIT</i>	■	3
<i>KRAS</i>	■	3
<i>NRAS</i>	■	3
<i>PDGFRA</i>	■	3
<i>PIK3CA</i>	■	3

CAP accredited laboratories that perform testing for the detection of somatic single nucleotide variants, insertions, and deletions in *BRAF*, *EGFR*, and *KRAS* by non-NGS methods are required to enroll in either MTP or the respective single gene programs. This includes laboratories that perform non-NGS-based multiplexed assays and nonmultiplexed assays (eg, Sanger sequencing). Laboratories that perform NGS-based testing of somatic single nucleotide variants, insertions, and deletions in *BRAF*, *KRAS*, *EGFR*, and/or other genes are required to enroll in NGSST (on page 266) 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.

Program Information

- Three 2.0- μ g gDNA (50 ng/ μ L) specimens for laboratories performing molecular testing on multiple targets
- Two shipments per year

Glioma GLI

Analyte	Program Code	Challenges per Shipment
	GLI	
<i>MGMT</i>	■	3
<i>IDH1, IDH2</i>	■	3

Program Information

- Four 2.0- μ g gDNA (50 ng/ μ L) 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	MHO5	
Lymphoid Malignancy Genotyping				
<i>IGH</i>	■			3
<i>IGH::BCL2 major</i>	■			3
<i>IGH::BCL2 minor</i>	■			3
<i>IGH::CCND1</i>	■			3
<i>IGK</i>	■			3
<i>TRB</i>	■			3
<i>TRG</i>	■			3
Myeloid Malignancy Genotyping				
<i>BCR::ABL1 p190</i>		■		3
<i>BCR::ABL1 p210</i>		■		3
<i>CALR</i>		■		3
<i>CBFB::MYH11</i>		■		3
<i>FLT3 ITD</i>		■		3
<i>FLT3 TKD</i>		■		3
<i>JAK2 c.1849G>T(p.V617F)</i>		■		3
<i>KMT2A-PTD (MLL-PTD)</i>		■		3
<i>MPL</i>		■		3
<i>NPM1</i>		■		3
<i>PML::RARA</i>		■		3
<i>RUNX1::RUNX1T1</i>		■		3
DNA extraction and amplification from formalin-fixed, paraffin-embedded (FFPE) tissue			■	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
- MHO5 - Three 10.0-micron paraffin sections; extraction and amplification from FFPE tissue will be assessed by a method-based challenge
- Two shipments per year; ships on dry ice (dry ice does not apply to MHO5)

IGHV Mutation Analysis IGHV

Analyte/Procedure	Program Code	Challenges per Shipment
	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 productive/unproductive rearrangement, SHM status, percent similarity, and V-gene utilization.

Program Information

- Three 20- μ g DNA specimens (200 ng/ μ L)
- Two shipments per year

Minimal Residual Disease MRD, MRD1, MRD2

Analyte	Program Code			Challenges per Shipment
	MRD	MRD1	MRD2	
<i>BCR::ABL1</i> p190		■		3
<i>BCR::ABL1</i> p210	■			3
<i>PML::RARA</i>			■	3

Program Information

- MRD, MRD1, MRD2 - 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

Laboratory Administration for Pathologists, Second Edition

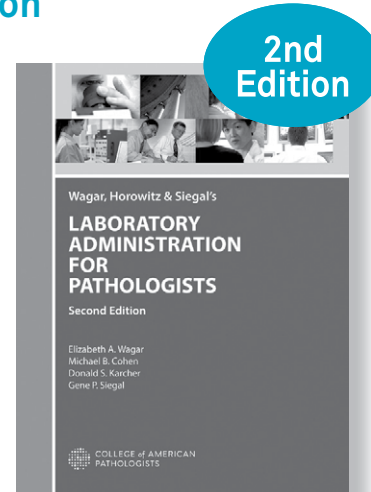
Designed to provide pathologists with an overview of the fundamentals of management and leadership, *Laboratory Administration for Pathologists* addresses the specific role and responsibility of the pathologist in directing the laboratory.

- 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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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.

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Surgical Pathology

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

Online Performance Improvement Program in Surgical Pathology PIPW/PIPW1

Program	Program Code	Challenges per Shipment
	PIPW/PIPW1	
Surgical pathology case review	■	10

Additional Information

- PIPW prepares pathologists to succeed by providing ongoing diagnostic learning 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
 - Various sites, encompassing a variety of organ systems
- See system requirements on page 13.

Program Information

- PIPW - Ten diagnostic challenges/whole slide H&E images with clinical history; 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 program PIPW
- Earn a maximum of 40 CME credits (*AMA PRA Category 1 Credits™*) per pathologist for completion of an entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Powered by DigitalScope® technology
- Four online activities per year; your CAP shipping contact will be notified via email 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	■	10

Additional Information

- PIP prepares pathologists to succeed by providing ongoing diagnostic learning 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
 - Allows you to experience smaller tumors and more interesting cases by providing two online cases per release
 - Features PIP case selections that include:
 - A variety of neoplastic and nonneoplastic lesions
 - Inflammatory and infectious diseases
 - Various sites, encompassing a variety of organ systems

Program Information

- PIP - Ten diagnostic challenges with clinical history: eight H&E stained glass slides and two online only cases; 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 program PIP
- Powered by DigitalScope technology
- Earn a maximum of 40 CME credits (*AMA PRA Category 1 Credits*) per pathologist for completion of an entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Four shipments per year



Virtual Biopsy Program VBP/VBP1

Program	Program Code	Challenges per Shipment
	VBP/VBP1	
Online biopsy case review	■	5

Additional Information

- VBP prepares pathologists to succeed by providing ongoing diagnostic learning in surgical pathology.
- This program is applicable to all pathologists, including general pathologists, and focuses on biopsy material. Cases may include gross, radiographic, or endoscopic images.
- There are four topical releases per year that focus on benign and malignant pathology. Cases are from selected organ systems and may include a variety of specimen types (eg, core biopsies, endoscopic biopsies, curetings, aspirate smears).
- See system requirements on page 13.

Program Information

- VBP - Five diagnostic challenges/whole slide images with clinical history; reporting with CME credit is available for one pathologist; for each additional pathologist, order VBP1
- VBP1 - Reporting option with CME credit for each additional pathologist (within the same institution); must order in conjunction with program VBP
- Earn a maximum of 25 CME credits (AMA PRA Category 1 Credits) per pathologist for completion of an entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Powered by DigitalScope technology
- Four online activities per year; your CAP shipping contact will be notified via email when the activity is available



New for 2023: Access CPIP cases when and where it's convenient via PC or personal mobile device.

Pathologists can keep abreast of current scientific knowledge with interactive, case-based learning to address both common and esoteric issues faced in the laboratory.

CPIP supports pathologists who do principally clinical pathology as well as those who do primarily anatomic pathology but cover clinical pathology. A diverse portfolio of real-life case scenarios, including images and clinical background, help pathologists to stay current on issues and advances in the laboratory.

Designed for pathologists, by pathologists. Each case is developed and peer-reviewed, ensuring learnings are practical and easily applied to work. Thought-provoking questions with feedback and multiple choice knowledge checks assess and confirm diagnostic skills. Participants may apply 1.25 CME credits for each CPIP toward the ABPath's Continuing Certification (CC) requirements.

Clinical Pathology Improvement Program CPIP/CPIP1

Program Name	Program Code	Cases per Year
	CPIP/CPIP1	
Online cases in clinical pathology	■	12

Consider CPIP for:

- Medical directors seeking to continuously improve the clinical pathology knowledge and collective skills of their pathology team.
- Pathologists with clinical and/or laboratory management responsibilities.
- Pathologists seeking CME CC credits in clinical pathology.
- Subspecialty clinical pathologists who need to keep current.

Discipline	Case Schedule (subject to change)	Month 2023
Laboratory Management	Occurrence management	January
Chemistry	Hypoxemia	February
Transfusion Medicine	Merging laboratories and implications for blood banks	March
Microbiology	<i>C. difficile</i>	April
Transfusion Medicine	Platelet refractoriness	May
Molecular Pathology	Fetal aneuploidy	June
Chemistry	Hemoglobin A1c	July
Microbiology	Microbiology checklist breakpoints	August
Hematology	Monocytosis	September
Cytogenetics	B-Lymphoblastic leukemia/lymphoma	October
Molecular Pathology	Pitfalls/limitations of molecular methodologies	November
Transfusion Medicine	von Willebrand Disease	December

To learn more visit cap.org and search CPIP.

Program Information

CPIP - One online clinical laboratory case per month

CPIP1 - Additional pathologist (within the same institution) reporting option with CME credit; must order in conjunction with CPIP

Earn a maximum of 15 CME credits (*AMA PRA Category 1 Credits™*) per year

Twelve cases per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Touch Imprint/Crush Preparation TICP/TICP1

Procedure	Program Code	Challenges per Shipment
	TICP/TICP1	
Online slide and image program in rapid assessment case review	■	4

Additional Information

- The TICP program gets surgical pathologists, cytopathologists, and cytotechnologists ready to succeed by familiarizing them 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 focus on TICP lymph node and miscellaneous tumors.
- 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 or CE credit for one pathologist or cytotechnologist; for each additional pathologist or cytotechnologist, order TICP1
- TICP1 - Reporting option with CME or CE credit for each additional pathologist/cytotechnologist (within the same institution); must order in conjunction with program TICP
- Earn a maximum of 10 CME 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 ABPath CC requirements for Improvement in Medical Practice (IMP)
- Online, whole slide images powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



CAP/NSH HistoQIP HQIP

Stain/Tissue	Program Code	Challenges per Shipment	
		A	B
	HQIP		
H&E - Appendix resection	■	1	
H&E - Pancreas resection	■	1	
IHC - CK20 colon resection	■	1	
IHC - Synaptophysin, pancreas resection	■	1	
Special Stain - Elastin, temporal artery biopsy	■	1	
H&E - Fallopian tube resection	■		1
H&E - Uterus resection	■		1
IHC - p40/p63 breast resection	■		1
IHC - CD20, lymph node resection	■		1
Special Stain - PAS, fungal positive skin control material	■		1

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 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.

Program Information

- Participant laboratories may submit up to five stained coverslipped glass slides (one from each category) per mailing
- Includes photographs
- Two shipments per year

CAP/NSH HistoQIP Cell Block Preparations
HQCLB

NEW

Stain/Tissue	Program Code	Challenges per Shipment	
		A	B
	HQCLB		
H&E - Pleural fluid, with mesothelial cells	■	1	
IHC - Calretinin on pleural fluid with mesothelial cells	■	1	
H&E - Thyroid fine needle aspiration (FNA) biopsy with follicular epithelial cells	■	1	
IHC - TTF-1 thyroid FNA with follicular cells	■	1	
H&E - Pelvic wash with serous carcinoma	■		1
IHC - Ber-EP4 on pelvic wash with serous carcinoma	■		1
H&E - Nonneoplastic lymph node FNA biopsy	■		1
IHC - CD20 nonneoplastic lymph node FNA biopsy	■		1

Program Information

- Participants may submit up to four stained coverslipped slides (one from each category) per mailing
- Two shipments per year



HistoQIP programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

NEW

CAP/NSH HistoQIP Targeted Therapy HQTAR

Stain/Tissue	Program Code	Challenges per Shipment	
		HQTAR	A
H&E - Breast ductal carcinoma	■	1	
IHC - HER2, breast ductal carcinoma	■	1	
H&E - Urothelial carcinoma	■	1	
IHC - PD-L1, urothelial carcinoma	■	1	
H&E - Gastroesophageal adenocarcinoma	■		1
IHC - HER2, gastroesophageal adenocarcinoma	■		1
H&E - Breast lobular carcinoma	■		1
IHC - ER, breast lobular carcinoma	■		1

Program Information

- Participants may submit up to four stained coverslipped slides (one from each category) per mailing
- Two shipments per year

NSH.ORG

CAP/NSH HistoQIP Whole Slide Image Quality Improvement Program HQWSI

Stain/Tissue	Program Code	Challenges per Shipment	
		HQWSI	A
H&E - Appendix resection	■	1	
H&E - Lymph node resection	■	1	
IHC - <i>H. pylori</i> , stomach biopsy	■	1	
Special Stain - Trichrome, liver biopsy	■	1	
H&E - Prostate, invasive adenocarcinoma, resection or biopsy	■	1	
H&E - Spleen resection	■		1
H&E - Prostate resection, TURP	■		1
IHC - Ki-67, breast carcinoma, resection or biopsy	■		1
Special Stain - Elastin, lung resection	■		1
H&E - Breast, invasive carcinoma, resection or biopsy	■		1

Program Information

- Participant laboratories may submit up to five stained coverslipped glass slides and corresponding scanned whole slide images per mailing
- Online, whole slide images powered by DigitalScope technology
- Two shipments per year

NSH.ORG

The HQWSI program provides feedback to laboratories using whole slide imaging for clinical applications. Participants upload their scanned whole slide images to the CAP designated server. An expert panel of pathologists, histotechnicians, and histotechnologists evaluates image and histologic quality using uniform grading criteria. Participants will receive an evaluation and a participant summary, as well as annotated feedback directly on their uploaded images.

HistoQIP programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

CAP/NSH HistoQIP Biopsy Series HQIPBX

Stain/Tissue	Program Code	Challenges per Shipment	
		A	B
	HQIPBX		
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

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.

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



Grossing, Staging, and Reporting: An Integrated Manual of Modern Surgical Pathology

Gross dissection is the first step in analyzing a resection specimen. *Grossing, Staging and Reporting* presents a standardized approach for practicing pathologists, pathologists-in-training, and pathologists' assistants who handle specimens. This manual is organized by organ system and incorporates AJCC staging criteria and elements of the CAP cancer protocols.

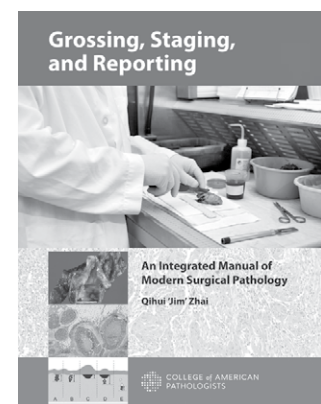
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2021

HistoQIP programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

CAP/NSH HistoQIP Specialty Series HQBX1, HQBX2, HQBX3, HQBX4

Stain/Tissue	Program Code				Challenges per Shipment	
	HQBX1	HQBX2	HQBX3	HQBX4	A	B
Gastrointestinal Biopsy Module						
H&E – Colon biopsy	■				1	1
H&E – Esophagus biopsy	■				1	1
H&E – Small intestine biopsy	■				1	1
H&E – Stomach biopsy	■				1	1
Dermatologic Biopsy Module						
H&E – Alopecia biopsy		■			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 urothelial carcinoma)			■		1	1
H&E – Prostate needle biopsy (nonneoplastic)			■		1	1
H&E – Prostate needle biopsy (with carcinoma)			■		1	1
Gynecological Biopsy Module						
H&E – Cervical biopsy				■	1	1
H&E – Endometrial biopsy				■	1	1
H&E – Cervical cone/LEEP biopsy				■	1	1
H&E – Vaginal biopsy				■	1	1

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, urogenital tract, and gynecologic 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 programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

CAP/NSH HistoQIP In Situ Hybridization (HPV/EBV) HQISH

Stain/Tissue	Program Code	Challenges per Shipment	
		HQISH	A
H&E - Cervical biopsy	■	1	
ISH - DNA/RNA negative control probe ISH	■	1	
ISH - DNA/RNA positive control probe ISH	■	1	
ISH - Human papillomavirus (HPV) ISH, (HPV probe, ISH)	■	1	
H&E - Epstein-Barr virus (EBV) positive lymphoma	■		1
ISH - DNA/RNA negative control probe ISH	■		1
ISH - DNA/RNA positive control probe ISH	■		1
ISH - EBV ISH (EBV probe, ISH)	■		1

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 HPV and EBV detection by chromogenic in situ hybridization.

CAP/NSH HistoQIP IHC Series HQIHC

Stain/Tissue	Program Code	Challenges per Shipment	
		HQIHC	A
IHC - p16, squamous cell carcinoma	■	1	
IHC - Ber-EP4, lung adenocarcinoma	■	1	
IHC - Glypican 3 (GLP3), hepatocellular carcinoma	■	1	
IHC - SMA, leiomyoma	■	1	
IHC - SATB2, colorectal adenocarcinoma	■	1	
IHC - CD31, skin resection	■		1
IHC - CD15, Hodgkin lymphoma	■		1
IHC - Pancytokeratin, liver resection	■		1
IHC - BCL6, follicular lymphoma	■		1
IHC - NKx3.1, prostatic adenocarcinoma	■		1

The HistoQIP IHC Series improves the preparation of immunohistochemistry slides in all anatomic laboratories involved in the handling of a broad range of surgical specimens. 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

- Participants are to submit an H&E, positive and negative reagent control slides, and HPV and EBV DNA/RNA ISH stained coverslipped glass slides (one from each category) per mailing
- Two shipments per year



Program Information

- Participants may submit up to five stained coverslipped slides (one from each category) per mailing
- Two shipments per year



HistoQIP programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

CAP/NSH HistoQIP Central Nervous System IHC HQNEU

Stain/Tissue	Program Code	Challenges per Shipment	
		HQNEU	A
H&E - Pituitary gland (adenohypophysis)	■	1	
IHC - Growth hormone (GH), pituitary gland (adenohypophysis)	■	1	
IHC - Prolactin, pituitary gland (adenohypophysis)	■	1	
H&E - Hemangioblastoma	■	1	
IHC - Inhibin, hemangioblastoma	■	1	
H&E - Medulloblastoma	■		1
IHC - Synaptophysin, medulloblastoma	■		1
IHC - Ki-67, medulloblastoma	■		1
H&E - Atypical teratoid/rhabdoid tumor (AT/RT)	■		1
IHC - INI-1, AT/RT	■		1

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.

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



HistoQIP programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

CAP/NSH HistoQIP Non-small Cell Lung Carcinoma IHC HQNSC

Stain/Tissue	Program Code	Challenges per Shipment	
		HQNSC	A
H&E – Lung adenocarcinoma	■	1	
IHC – TTF-1, lung adenocarcinoma	■	1	
IHC – Napsin A, lung adenocarcinoma	■	1	
H&E – ALK, positive lung adenocarcinoma	■	1	
IHC – ALK, positive lung adenocarcinoma	■	1	
H&E – Lung squamous cell carcinoma	■		1
IHC – p40/p63, lung squamous cell carcinoma	■		1
IHC – CK5 or CK5/6, lung squamous cell carcinoma	■		1
H&E – PD-L1, positive lung squamous cell carcinoma	■		1
IHC – PD-L1, positive lung squamous cell carcinoma	■		1

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.

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

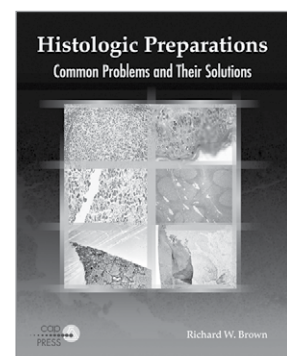


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HistoQIP programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

CAP/NSH HistoQIP Melanoma IHC HQMEL

Stain/Tissue	Program Code	Challenges per Shipment	
		HQMEL	A
H&E - Melanoma skin biopsy	■	1	
IHC - Melan A/MART-1 melanoma skin biopsy	■	1	
IHC - SOX10 melanoma skin biopsy	■	1	
H&E - PD-L1 positive melanoma	■	1	
IHC - PD-L1 positive melanoma	■	1	
H&E - Melanoma skin resection	■		1
IHC - S100 melanoma skin resection	■		1
IHC - HMB-45 melanoma skin resection	■		1
H&E - Melanoma with CD8 positive tumor infiltrating lymphocytes	■		1
IHC - CD8 melanoma with CD8 positive tumor infiltrating lymphocytes	■		1

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.

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



CAP/NSH HistoQIP Mismatch Repair IHC HQMMR

Stain/Tissue	Program Code	Challenges per Shipment	
		HQMMR	A
H&E – Colonic adenocarcinoma	■	1	
IHC – MLH1, colonic adenocarcinoma	■	1	
IHC – MSH2, colonic adenocarcinoma	■	1	
IHC – MSH6, colonic adenocarcinoma	■	1	
IHC – PMS2, colonic adenocarcinoma	■	1	
H&E – Endometrial adenocarcinoma	■		1
IHC – MLH1, endometrial adenocarcinoma	■		1
IHC – MSH2, endometrial adenocarcinoma	■		1
IHC – MSH6, endometrial adenocarcinoma	■		1
IHC – PMS2, endometrial adenocarcinoma	■		1

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.

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



HistoQIP programs that include IHC stains assess preanalytic steps. For immunohistochemistry programs that focus on instrument analytic and pathologist readout steps, see the immunohistochemistry programs on pages 297-300.

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 Shipment
	MK	
Immunohistochemistry	■	16

The MK program allows laboratories to compare their assay methodology and results with all participating laboratories. Case materials are donated and represent a variety of diagnostic entities. Markers will vary in each case and will provide a wide range of IHC testing for routine surgical pathology practices.

Program Information

- Five glass slides with unstained tissue sections from four separate cases; each case includes four slides for selected IHC markers and one slide for H&E
- Two shipments per year

CD117 Immunohistochemistry Tissue Microarray PM1

Analyte	Program Code	Challenges per Shipment
	PM1	
CD117	■	10

For ER/PgR testing, see the PM2 program on page 297.

Program Information

- One 10-core tissue microarray slide
- One shipment per year

Immunohistochemistry Tissue Microarray Series PM5

Analyte	Program Code	Challenges per Shipment
	PM5	
BAP1	■	10
Beta-catenin	■	10

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 program may change from those listed above due to development constraints.

Program Information

- Two 10-core tissue microarray slides, one for BAP1 and one for Beta-catenin
- One shipment per year

These immunohistochemistry programs assess instrument analytic and pathologist readout steps. For programs focusing on preanalytic steps, see the HistoQIP IHC programs on pages 287-294.

p53 Immunohistochemistry Tissue Microarray P53

Analyte	Program Code	Challenges per Shipment
	P53	
p53	■	10

The purpose of this program is to assess the laboratory's ability to detect various patterns of p53 staining, which is diagnostically useful in several tumor types.

Program Information

- One 10-core tissue microarray slide
- Two shipments per year

Dermatopathology Immunohistochemistry DPIHC

Procedure	Program Code	Challenges per Shipment
	DPIHC	
Dermatopathology	■	8

This case-based program assesses the laboratory's ability to perform and interpret immunostains commonly used in dermatopathology practice.

Program Information

- Six glass slides with unstained tissue sections from two separate cases; each case includes four slides for selected IHC markers, one slide for H&E, and one slide for negative control
- Two shipments per year

CAP/ACMG ERBB2 (HER2) Amplification by FISH, Interpretation Only CYHI

Analyte/Procedure	Program Code	Challenges per Shipment
	CYHI	
ERBB2 (HER2) amplification in breast cancer, interpretation only	■	3

Additional Information

- ERBB2 (HER2) 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 interpretation only 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 255.

Program Information

- Three online interpretation challenges; your CAP shipping contact will be notified [via email](#) when the activity is available
- Two shipments per year



These immunohistochemistry programs assess instrument analytic and pathologist readout steps. For programs focusing on preanalytic steps, see the HistoQIP IHC programs on pages 287-294.

Immunohistochemistry Predictive Markers

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

HER2 Immunohistochemistry HER2

Analyte	Program Code	Challenges per Shipment
	HER2	
HER2	■	20

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.

Program Information

- Two 10-core tissue microarray slides
- Two shipments per year

Gastric HER2 GHER2

Analyte	Program Code	Challenges per Shipment
	GHER2	
HER2	■	10

Additional Information

- The Gastric HER2 program fulfills the proficiency testing requirement stated in the CAP/ASCP/ASCO Gastroesophageal HER2 Testing Guideline.
- 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.

Program Information

- One 10-core tissue microarray slide
- Two shipments per year

ER/PgR Immunohistochemistry Tissue Microarray PM2

Analyte	Program Code	Challenges per Shipment
	PM2	
Estrogen receptor (ER)	■	20
Progesterone receptor (PgR)	■	20

The PM2 program fulfills the ER proficiency testing requirement and the PgR alternative assessment requirement stated in the ASCO/CAP ER/PgR Testing Guideline. Due to the unique nature of these human, donor-based materials, the shipping date is subject to change. If this should occur, the CAP will provide notification prior to the originally scheduled shipping date.

Program Information

- Four 10-core microarray slides, two for ER and two for PgR
- Two shipments per year

These immunohistochemistry programs assess instrument analytic and pathologist readout steps. For programs focusing on preanalytic steps, see the HistoQIP IHC programs on pages 287-294.

CD20 Immunohistochemistry Tissue Microarray PM3

Analyte	Program Code	Challenges per Shipment
	PM3	
CD20	■	10

For ER/PgR testing, see the PM2 program on page 297.

Program Information

- One 10-core tissue microarray slide
- Two shipments per year

Highly Sensitive Anaplastic Lymphoma Kinase IHC PM6

Analyte	Program Code	Challenges per Shipment
	PM6	
Highly sensitive anaplastic lymphoma kinase IHC (ALK)	■	10

This program assesses the laboratory’s ability to detect ALK-rearranged lung cancers using highly sensitive ALK immunohistochemistry. The ALK1 clone is NOT highly sensitive and should not be used in this program.

Program Information

- One 10-core tissue microarray slide
- Two shipments per year

BRAF V600E BRAFV

Analyte	Program Code	Challenges per Shipment
	BRAFV	
BRAF V600E	■	10

The purpose of this program is to assess the laboratory’s ability to detect BRAF V600E mutant tumors using mutation-specific immunohistochemistry.

Program Information

- One 10-core tissue microarray slide
- Two shipments per year

CD30 Immunohistochemistry Tissue Microarray CD30

Analyte	Program Code	Challenges per Shipment
	CD30	
CD30	■	10

This program assesses the laboratory’s ability to detect CD30 expression in lymphomas, which has emerged as a key therapeutic target.

Program Information

- One 10-core tissue microarray slide
- Two shipments per year

These immunohistochemistry programs assess instrument analytic and pathologist readout steps. For programs focusing on preanalytic steps, see the HistoQIP IHC programs on pages 287-294.

DNA Mismatch Repair MMR

Procedure	Program Code	Challenges per Shipment
	MMR	
MLH1 by IHC	■	10
MSH2 by IHC	■	10
MSH6 by IHC	■	10
PMS2 by IHC	■	10

If your laboratory performs DNA mismatch repair by molecular methods, see the MSI program on page 274.

Program Information

- Four unstained cell line/ tissue microarray slides for the immunohistochemical analysis of DNA mismatch repair proteins MLH1, MSH2, MSH6, and PMS2
- Two shipments per year

PD-L1 Immunohistochemistry PDL1

Analyte	Program Code	Challenges per Shipment
	PDL1	
PD-L1	■	10

The purpose of this program is to assess the laboratory’s ability to detect PD-L1 expression and apply various PD-L1 scoring systems.

Program Information

- One 10-core tissue microarray slide; additional slide provided for H&E
- Two shipments per year

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These immunohistochemistry programs assess instrument analytic and pathologist readout steps. For programs focusing on preanalytic steps, see the HistoQIP IHC programs on pages 287-294.

Immunohistochemistry Prognostic Markers

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

c-Myc/Bcl-2 Immunohistochemistry Tissue Microarray MYCB

Analyte	Program Code	Challenges per Shipment
	MYCB	
c-Myc	■	10
Bcl-2	■	10

This program assesses the laboratory's ability to detect c-Myc and Bcl-2-positivity in large B-cell lymphomas, which have emerged as critical prognostic markers.

Program Information

- Two 10-core tissue microarray slides, one for c-Myc and one for Bcl-2
- Two shipments per year

p16 Immunohistochemistry Tissue Microarray P16

Analyte	Program Code	Challenges per Shipment
	P16	
p16	■	10

This program assesses the laboratory's ability to detect p16 overexpression in squamous cell carcinomas, mainly as a surrogate for HR-HPV detection in head and neck tumors.

Program Information

- One 10-core tissue microarray slide
- Two shipments per year

Ki-67 Immunohistochemistry Tissue Microarray KI67

Procedure	Program Code	Challenges per Shipment
	KI67	
Ki-67	■	10

The purpose of this program is to assess the laboratory's ability to accurately quantify the Ki-67 proliferation index, which is prognostically significant and emerging as a companion diagnostic.

Program Information

- One 10-core cell line tissue microarray slide
- Two shipments per year

These immunohistochemistry programs assess instrument analytic and pathologist readout steps. For programs focusing on preanalytic steps, see the HistoQIP IHC programs on pages 287-294.

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	■	5

- AUP prepares pathologists and pathologists' assistants to succeed by providing ongoing diagnostic learning in autopsy pathology.
- Each case includes case description, gross and/or microscopic images, and case discussion with sample death certificate, key teaching points, and current references.

Program Information

- AUP - Online activity providing five cases; reporting with CME 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 or CE credit for each additional pathologist or pathologists' assistant (within the same institution); must order in conjunction with program AUP
- Earn a maximum of 12.5 CME credits (*AMA PRA Category 1 Credits*) per pathologist and a maximum of 12.5 CE credits per pathologists' assistant for completion of entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Online, whole slide images powered by DigitalScope technology (if available)
- Two online activities per year; your CAP shipping contact will be notified via email 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 prepares pathologists, dermatopathologists, and dermatologists to succeed by providing ongoing diagnostic learning in dermatopathology.
- Cases include static images.
- See system requirements on page 13.

Program Information

- DPATH - Six diagnostic challenges/whole slide images with clinical history; reporting with CME credit is available for one pathologist; for each additional pathologist, order DPATH1
- DPATH1 - Reporting option with CME credit for each additional pathologist (within the same institution); must order in conjunction with program DPATH
- Earn a maximum of 15 CME credits (AMA PRA Category 1 Credits) per pathologist for completion of an entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



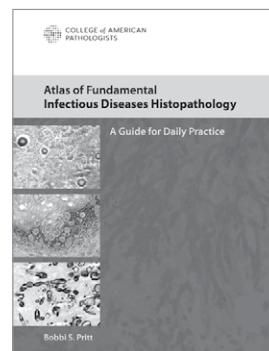
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Hematopathology Online Education HPATH/HPATH1

Program	Program Code	Challenges per Shipment
	HPATH/HPATH1	
Hematopathology online case review	■	5

Additional Information

HPATH prepares pathologists, hematopathologists, and hematologists to succeed by providing ongoing diagnostic learning 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.
- Each case includes assessment questions.
- See system requirements on page 13.

Program Information

- HPATH - Five diagnostic challenges/online, whole slide images with clinical history; reporting with CME credit is available for one pathologist/hematologist; for additional pathologist/hematologist, order HPATH1
- HPATH1 - Reporting option with CME credit for each additional pathologist/hematologist (within the same institution); must order in conjunction with program HPATH
- Earn a maximum of 12.5 CME credits (AMA *PRA Category 1 Credits™*) per pathologist and a maximum of 12.5 CE credits per hematologist for completion of an entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



Neuropathology Program NP/NP1

Program	Program Code	Challenges per Shipment
	NP/NP1	
Neuropathology online case review	■	8

NP prepares anatomic pathologists, neuropathologists, and trainees to succeed by providing ongoing diagnostic learning 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.

Program Information

- NP - Online activity providing eight cases and a mini-symposium; reporting with CME credit is available for one pathologist; for each additional pathologist, order NP1
- Includes option to download program content
- NP1 - Reporting option with CME credit for each additional pathologist (within the same institution); must order in conjunction with program NP
- Earn a maximum of 10 CME credits (*AMA PRA Category 1 Credits*) per pathologist
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



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	PARJPT	Proficiency Testing	Education
Conventional	■				■	10	10
SurePath		■		■	■		
ThinPrep			■	■	■		
Individual Participant Response Form	APAPCPT	APAPKPT	APAPMPT	APAPLPT	APARJPT		

PAPCPT, PAPKPT, PAPMPT, PAPLPT, and PARJPT prepare pathologists and cytotechnologists to succeed by providing ongoing diagnostic learning in gynecologic cytopathology.

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:

- Choose the following:
 - Slide type program code (refer to table above)
 - PAP Education series shipment dates (choose one)
 - Series 1
 - A mailing ships February
 - B mailing ships August
 - Series 2
 - A mailing ships May
 - B mailing ships November
 - Add the PAP Education series number after the slide type program code (eg, PAPCPT1, PAPCPT2).
- Order one Individual Participant Response Form code for each participating pathologist/cytotechnologist. Also include the PAP Education Series number after the program code (eg, APAPCPT1).
- Select primary testing session option with two alternative date options using the Gynecologic Cytology Proficiency Testing Order Details Form.
- PPTENR is required by CMS as verification that personnel required to participate in PAP PT under its CLIA number are taking the examination at another laboratory.

Additional Information

- Participants will receive an evaluation [via email](#) shortly after submitting results online.
- The PAP Education component meets the CAP Laboratory Accreditation Program requirement for participation in a peer educational program.

Program Information

- Ten glass slides for proficiency testing and ten glass slides for education
- APAPCPT, APAPKPT, APAPMPT, APAPLPT, APAPJPT - Reporting option with CME or CE credit for each pathologist/cytotechnologist (within the same institution); must order in conjunction with 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 ABPath CC requirements for Improvement in Medical Practice (IMP)
- 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	■				■	10
SurePath		■		■	■	
ThinPrep			■	■	■	
Individual Participant Response Form	APAPCE	APAPKE	APAPME	APAPLE	APAPJE	

PAPCE, PAPKE, PAPME, PAPLE, and PAPJE prepare pathologists and cytotechnologists to succeed by providing ongoing diagnostic learning in cytopathology.

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
 - A mailing ships February
 - B mailing ships August
 - Series 2
 - A mailing ships May
 - 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 will receive an evaluation [via email](#) shortly after submitting results online.
- The PAP Education component meets the CAP Laboratory Accreditation Program requirement for participation in a peer educational program.

Program Information

- Ten glass slides for education
- APAPCE, APAPJE, APAPKE, APAPLE, APAPME - Reporting option with CME or CE credit for each pathologist/cytotechnologist (within the same institution); must order in conjunction with programs 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 ABPath CC requirements for Improvement in Medical Practice (IMP)
- Two shipments (five slides each)



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 study helps laboratories meet CAP Laboratory Accreditation Program Cytopathology Checklist statements CYP.01900, 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 in e-LAB Solutions Suite for your input forms approximately two weeks before the start of the next quarter.

Human Papillomavirus (High Risk) for Cytopathology CHPVD, CHPVM, CHPVK, CHPVJ

Analyte/Procedure	Program Code				Challenges per Shipment
	CHPVD	CHPVM	CHPVK	CHPVJ	
HPV	■	■	■	■	5
High-risk HPV genotyping (optional)		■	■	■	5

Additional Information

- Each laboratory should choose the program that best reflects the transport media received in its facility. For program CHPVJ, participants must provide results for all three media types. If your laboratory receives two types of media, order the programs that are appropriate for your specific laboratory (CHPVD, CHPVM, or CHPVK).
- For laboratories that perform HPV genotyping using ThinPrep PreservCyt or SurePath Preservative Fluid transport mediums on site, programs CHPVM, CHPVK and select CHPVJ specimens provide an opportunity to report specific HPV genotypes.
- The CAP does not report genotyping responses to the CMS.

Program Information

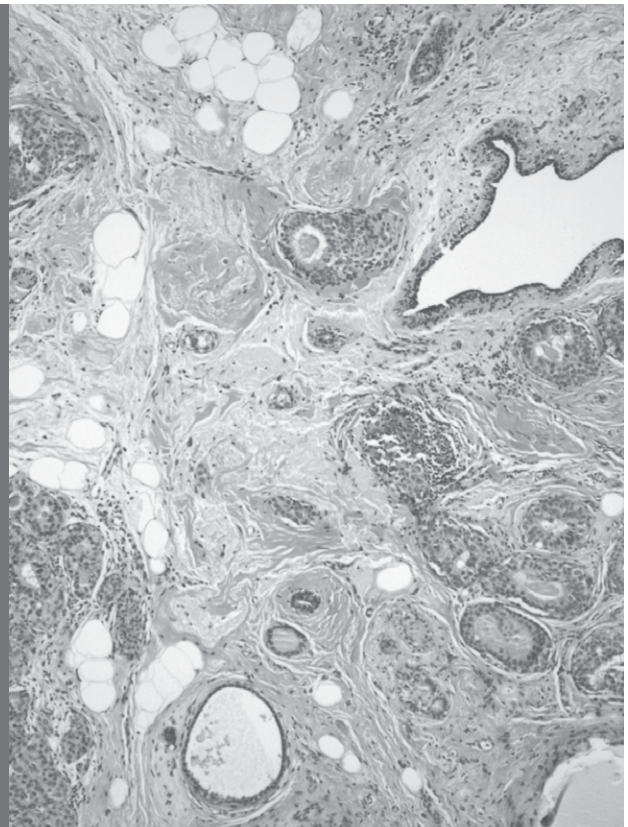
- Five simulated cervical specimens
- CHPVD - Digene® Specimen Transport Medium™ (STM)
- CHPVM - ThinPrep PreservCyt® transport medium
- CHPVK - SurePath Preservative Fluid transport medium and corresponding vial of diluent
- CHPVJ - Combination of Digene, ThinPrep PreservCyt, and SurePath transport mediums
- Three shipments per year

Simplify Cancer Reporting for You and Your Patients.

Ensure complete and accurate diagnostic cancer reporting and best outcomes for your patients with CAP's cancer reporting tools that make your life simpler with a workflow friendly interface, streamlined reporting process, and standardized quality checks. CAP electronic Cancer Protocols tools:

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- Facilitate compliance with accreditation standards
- Ensure data fidelity for quality analytics and public health

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Touch Imprint/Crush Preparation TICP/TICP1

Procedure	Program Code	Challenges per Shipment
	TICP/TICP1	
Online slide and image program in rapid assessment case review	■	4

Additional Information

- The TICP program gets surgical pathologists, cytopathologists, and cytotechnologists ready to succeed by familiarizing them 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 focus on TICP lymph node and miscellaneous tumors.
- 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 or CE credit for one pathologist or cytotechnologist; for each additional pathologist or cytotechnologist, order TICP1
- TICP1 - Reporting option with CME or CE credit for each additional pathologist/cytotechnologist (within the same institution); must order in conjunction with program TICP
- Earn a maximum of 10 CME 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 ABPath CC requirements for Improvement in Medical Practice (IMP)
- Online, whole slide images powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



Nongynecologic Cytopathology Education Program NGC/NGC1

Procedure	Program Code	Challenges per Shipment
	NGC/NGC1	
Nongynecologic cytopathology case review – glass slides	■	5
Nongynecologic cytopathology case review – online	■	5 per year

Additional Information

- Designed to help pathologists and cytotechnologists get ready to succeed, 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 will receive an evaluation via email shortly after submitting results online.
- 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 or CE credit for each additional pathologist/cytotechnologist (within the same institution); must order in conjunction with program NGC
- Earn a maximum of 25 CME credits (*AMA PRA Category 1 Credit*) per pathologist and a maximum of 25 CE credits per cytotechnologist for completing the glass slides and online cases
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Online, whole slide images powered by DigitalScope technology
- Four shipments per year



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	■	5

Additional Information

- The FNA program gets pathologists and cytotechnologists ready to succeed by focusing on fine-needle aspiration 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 salivary gland and spindle cell pattern 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 or CE credit for one pathologist or cytotechnologist; for each additional pathologist or cytotechnologist, order FNA1
- FNA1 - Reporting option with CME or CE credit for each additional pathologist/cytotechnologist (within the same institution); must order in conjunction with program FNA
- Earn a maximum of 10 CME credits (*AMA PRA Category 1 Credits*) per pathologist and a maximum of 10 CE credits per cytotechnologist
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Online, whole slide images powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



Fine-Needle Aspiration Glass Slide FNAG/FNAG1

Procedure	Program Code	Challenges per Shipment
	FNAG/FNAG1	
Fine-needle aspiration glass slide case review	■	5

Additional Information

- The Fine-Needle Aspiration Glass Slide Education program gets pathologists and cytotechnologists ready to succeed through 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 will receive an evaluation via email shortly after submitting results online.

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 or CE credit for each additional pathologist/cytotechnologist (within the same institution); must order in conjunction with program FNAG
- Earn a maximum of 10 CME credits (*AMA PRA Category 1 Credits*) per pathologist and a maximum of 10 CE credits per cytotechnologist
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Two shipments per year



21 Forensic Sciences



Benefit from the support of experts in laboratory medicine.

These experts spend countless hours monitoring testing trends to:

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

Forensic Sciences

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

Forensic Pathology FR/FR1

Procedure	Program Code	Challenges per Shipment
	FR/FR1	
Forensic pathology cases	■	5

Additional Information

- Cases may include or reflect anthropologic materials, ballistics, dental identification, DNA identification, environmental pathology, forensic evidence, injury pattern, medicolegal issues, toxicology, and trace evidence.
- FR/FR1 prepares hospital-based pathologists, forensic pathologists, residents, fellows, and medical examiners/coroners for success by keeping them current in forensic pathology techniques and practices. 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 or CE credit is available for one pathologist or investigator. For each additional pathologist or investigator, order FR1
- FR1 - Additional pathologist or investigator (within the same institution) reporting option with CME or CE credit; must order in conjunction with program FR
- Includes option to download program content
- Earn a maximum of 12.5 CME credits (*AMA PRA Category 1 Credits™*) per pathologist and a maximum of 12.5 CE credits per investigator for completion of an entire year
- This activity meets the ABPath CC requirements for Improvement in Medical Practice (IMP)
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



Vitreous Fluid, Postmortem VF

Analyte	Program Code	Challenges per Shipment
	VF	
Acetone	■	3
Chloride	■	3
Creatinine	■	3
Ethanol	■	3
Glucose	■	3
Potassium	■	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

This book is a practical guide to directing hospital toxicology laboratory operations. This 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.

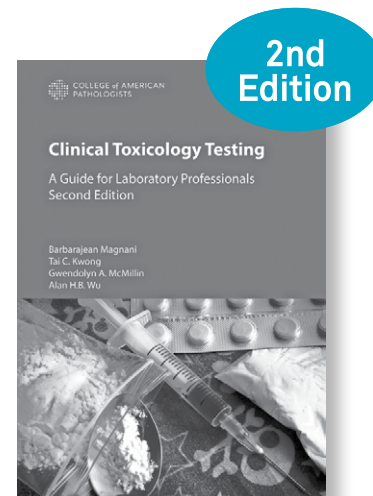
Contents include:

- 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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Softcover; 2020

Forensic Toxicology, Criminalistics FTC

Analyte	Program Code	Challenges per Shipment
	FTC	
See drug listing below	■	5

Program Information

- Five 20.0-mL whole blood specimens
- For crime and hospital laboratories that have forensic toxicology divisions performing qualitative and quantitative analysis of drugs in whole blood specimens
- Three shipments per year



FTC Program Drug Listing

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

6-acetylmorphine (6-AM)	Desmethylsertraline	Methylenedioxyamphetamine (MDA)	Oxymorphone
7-aminoclonazepam	Dextromethorphan	Methylenedioxymethamphetamine (MDMA)	Paroxetine
7-aminoflunitrazepam	Diazepam	Methylenedioxypropylvalerone (MDPV)	Pentobarbital
7-hydroxymitragynine	Dihydrocodeine	Methylphenidate	Phencyclidine
Acetaminophen	Diltiazem	Metoprolol	Phenethylamine
Alpha-hydroxyalprazolam	Diphenhydramine	Midazolam NEW	Pheniramine
Alprazolam	Doxepin	Mirtazapine	Phenobarbital
Amitriptyline	Doxylamine	Mitragynine (Kratom)	Phentermine
Amphetamine	Duloxetine	Morphine*	Phenylephrine
Aripiprazole	Ecgonine ethyl ester	N-desmethyltramadol	Phenytoin
Atenolol	Ecgonine methyl ester	Naproxen	Pregabalin
Atropine	Ephedrine	Norbuprenorphine	Propoxyphene
Benzoyllecgonine	Fentanyl*	Norchlordiazepoxide	Propranolol
Brompheniramine	Flunitrazepam	Norclomipramine	Pseudoephedrine
Buprenorphine	Fluoxetine	Norcodeine	Quetiapine
Bupropion	Gabapentin	Norcyclobenzaprine	Quinine
Butalbital	Gamma-hydroxybutyrate (GHB)	Nordiazepam	Ranitidine
Carbamazepine	Hydrocodone	Nordoxepin	Ritalinic acid NEW
Carbamazepine-10, 11-epoxide	Hydromorphone	Norfentanyl	Salicylate
Carisoprodol	Hydroxybupropion	Norfluoxetine	Sertraline
Chlordiazepoxide	Hydroxyzine	Norketamine	Strychnine
Chlorpheniramine	Ibuprofen	Normeperidine	Tapentadol NEW
Citalopram	Imipramine	Normirtazapine	Temazepam
Clomipramine	Ketamine	Noroxycodone	Topiramate
Clonazepam	Lamotrigine	Norpropoxyphene	Tramadol
Clozapine	Levetiracetam	Norsertaline	Trazodone
Cocaethylene	Lidocaine	Nortrimipramine	Trimipramine
Cocaine	Lorazepam	Nortriptyline	Valproic acid
Codeine	Lysergic acid diethylamide (LSD)	Norverapamil	Venlafaxine
Cyclobenzaprine*	Meperidine*	O-desmethyltramadol	Verapamil
Delta-9-THC	Mephedrone	Olanzapine	Zolpidem
Delta-9-THC-COOH	Meprobamate	Oxazepam	
Demoxepam	Methadone	Oxycodone	
Desipramine	Methadone metabolite (EDDP)		
Desmethylclomipramine	Methamphetamine		

*and/or metabolite(s)

22 Analyte/Procedure Index



Performance Analytics Dashboard provides valuable insights into your laboratory's performance.

The complimentary dashboard helps you manage your CAP PT and accreditation performance.

- Access all graded proficiency testing result forms, evaluations, and participant summary reports from one centralized location.
- 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. Use this index to identify the correct PT programs that match up to your laboratory's activity menu to meet accreditation requirements. For international CAP-accredited laboratories, enrollment in CAP PT is required for all tests/activities if a program is available. Refer to program descriptions in this catalog to determine compatibility with your specific methodologies.

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
1,25-dihydroxy vitamin D		BMV1	Bone Markers and Vitamins	90	17-hydroxyprogesterone	X	Y/YY	Sex Hormones	88
1,5-anhydroglucitol		AG	1,5-Anhydroglucitol	75	17-ketosteroids		N/NX	Urine Chemistry–Special	73
3-methoxytyramines		N/NX	Urine Chemistry–Special	73	25-OH vitamin D, total	X	ABVD	Accuracy-Based Vitamin D	116
4-hydroxytriazolam		DFC	Drug–Facilitated Crime	113			LN40	Vitamin D Cal Ver/Lin	134
5-hydroxyindoleacetic acid, qualitative		N/NX	Urine Chemistry–Special	73		X	VITD	25-OH Vitamin D	88
5-hydroxyindoleacetic acid, quantitative	X	N/NX	Urine Chemistry–Special	73	50:50 mixing study, aPTT		CGE/CGEX	Coagulation, Extended	165
6-acetylmorphine (6-AM)		DMPM	Drug Monitoring for Pain Management	112			CGS1	Coag Special, Series 1	167
		FTC	Forensic Toxicology, Criminalistics	109	50:50 mixing study, PT		CGE/CGEX	Coagulation, Extended	165
		OFD	Oral Fluid for Drugs of Abuse	105			CGS1	Coag Special, Series 1	167
		T	Toxicology	100	ABO grouping	X	J, J1	Transfusion Medicine	230
		UDC	Forensic Urine Drug Testing, Confirmatory	104		X	JAT	Transfusion Medicine, Automated	231
		UDS, UDS6	Urine Drug Screen	102			JATE1	Transfusion Medicine, Automated, Educational	231
		UT	Urine Toxicology	100			JATQ	Quality Cross Check, Transfusion Medicine	51
7-aminoclonazepam		DFC	Drug–Facilitated Crime	113			TMCA	Transfusion Medicine, Competency Assessment	237
		DMPM	Drug Monitoring for Pain Management	112	ABO subgroup typing		ABOSG	ABO Subgroup Typing	234
		FTC	Forensic Toxicology, Criminalistics	109	Acetaminophen	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60
		T	Toxicology	100			CZQ	Quality Cross Check, Chemistry and TDM	41
		UT	Urine Toxicology	100			FTC	Forensic Toxicology, Criminalistics	109
7-aminoflunitrazepam		DFC	Drug–Facilitated Crime	113			LN3	TDM Cal Ver/Lin	125
		FTC	Forensic Toxicology, Criminalistics	109		X	SDS	Serum Drug Screen	106
		T	Toxicology	100			T	Toxicology	100
		UT	Urine Toxicology	100			UDS, UDS6	Urine Drug Screen	102
7-hydroxymitragynine		FTC	Forensic Toxicology, Criminalistics	109			UT	Urine Toxicology	100
		T	Toxicology	100	Acetone	X	AL1	Whole Blood Alcohol/Volatiles	106
		UT	Urine Toxicology	100		X	AL2	Serum Alcohol/Volatiles	106
11-deoxycortisol		Y/YY	Sex Hormones	88			SDS	Serum Drug Screen	106
11-hydroxy-THC		THCB	Blood Cannabinoids	111			VF	Vitreous Fluid, Postmortem	106
17-hydroxycorticosteroids		N/NX	Urine Chemistry–Special	73					

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Acid phosphatase		C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
Acid-fast smear	X	E	Mycobacteriology	194
	X	E1	Mycobacteriology, Ltd	194
Acinetobacter calcoaceticus-baumannii complex	X	IDPN	Infectious Disease, Pneumonia Panel	211
Activated clotting time	X	CT, CT1, CT2, CT3, CT5	ACT	168
		CTQ, CT1Q, CT2Q, CT3Q, CT5Q	Quality Cross Check, ACT	48
		POC14, POC15, POC16	Competency Activated Clotting Time	56
Activated partial thromboplastin time		APXBN	Anticoagulant Monitoring, Apixaban	168
	X	CGB	Basic Coagulation	164
		CGE/CGEX	Coagulation, Extended	165
	X	CGL	Coagulation, Limited	164
		CGLQ	Quality Cross Check, Coagulation, Limited	48
		CGS1	Coag Special, Series 1	167
		CGS3	Coag Special, Series 3	167
		CGS4	Coag Special, Series 4	167
		DBGN	Anticoagulant Monitoring, Dabigatran	168
		FNPX	Anticoagulant Monitoring, Fondaparinux	168
	RVBN	Anticoagulant Monitoring, Rivaroxaban	168	
Activated protein C resistance		CGE/CGEX	Coagulation, Extended	165
		CGS2	Coag Special, Series 2	167
Active vitamin B12		MMA	MMA and Active Vitamin B12	86
Acylcarnitine		BGL	Biochemical Genetics	257
ADAMTS13		CGS7	ADAMTS13	167
Adenovirus		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel	212
		ID2	Nucleic Acid Amp, Respiratory	204
	X	IDPN	Infectious Disease, Pneumonia Panel	211
	X	IDR	Infectious Disease Respiratory Panel	210
		VLS2	Viral Load	206
	X	VR1	Virology Culture	201
	X	VR2	Viral Antigen by DFA	201

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Adenovirus (cont.)	X	VR4	Viral Antigen by EIA and Latex	201
Adenovirus 40/41		SP, SPN	Stool Pathogen	190
Adjustable micropipette cal ver/lin		I	Instrumentation	136
Adrenocorticotrophic hormone (ACTH)	X	TM/TMX	Tumor Markers	93
Alanine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Alanine aminotransferase (ALT/SGPT)	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Albumin		ABS	Accuracy-Based Testosterone and Estradiol	117
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	76
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
		SPE	Protein Electrophoresis	80
	Albumin, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands
Albumin, urine		ABU	Accuracy-Based Urine	117
		LN20	Urine Albumin	130
	X	U	Urine Chemistry–General	72
Albumin: creatinine ratio		ABU	Accuracy-Based Urine	117
		LN20	Urine Albumin Cal Ver/Lin	130
		U	Urine Chemistry–General	72
		UMC	Urine Albumin Creatinine	158
Alcohol, serum	X	AL2	Serum Alcohol/Volatiles	106
		LN11	Serum Ethanol Cal Ver/Lin	127

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Alcohol, whole blood	X	AL1	Whole Blood Alcohol/Volatiles	106	Alprazolam (cont.)		FTC	Forensic Toxicology, Criminalistics	109
Aldolase		ADL	Aldolase	75			OFD	Oral Fluid for Drugs of Abuse	105
Aldosterone, serum	X	RAP	Renin and Aldosterone	93			T	Toxicology	100
Aldosterone, urine		N/NX	Urine Chemistry–Special	73			UT	Urine Toxicology	100
Alkaline phosphatase (ALP)	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58–60	Aluminum	X	R	Trace Metals	82
		CZQ	Quality Cross Check, Chemistry and TDM	41	Aluminum, urine		TMU	Trace Metals, Urine	108
		FLD2	Body Fluid Chemistry 2	77	Aluminum, whole blood		TMWB	Trace Metals, Whole Blood	108
		IFS	Interfering Substances	137	Amikacin	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	58–60
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124			CZQ	Quality Cross Check, Chemistry and TDM	41
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124			LN3	TDM Cal Ver/Lin	125
Allergens (specific)		SE	Diagnostic Allergy	221	Amino acids, qualitative	X	BGL	Biochemical Genetics	257
Alloisoleucine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258	Amino acids, quantitative		BGL	Biochemical Genetics	257
Alpha-1 antitrypsin	X	IG/IGX	Immunology, General	216			BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		LN7	Immunology Cal Ver/Lin	126	Amisulpride		DFC	Drug–Facilitated Crime	113
Alpha-1 antitrypsin genotyping (<i>SERPINA1</i>) gene	X	AAT	Alpha-1 Antitrypsin Genotyping	259			FTC	Forensic Toxicology, Criminalistics	109
Alpha-1 globulin		SPE	Protein Electrophoresis	80			T	Toxicology	100
Alpha-2 globulin		SPE	Protein Electrophoresis	80			UT	Urine Toxicology	100
Alpha-2-antiplasmin		CGE/CGEX	Coagulation, Extended	165		X	ZT	TDM, Special	62
Alpha-2-macroglobulin		A2MG	Alpha-2-Macroglobulin	218	Ammonia		C3/C3X, CZ/ CZX/CZ2X	Chemistry and TDM	58–60
Alpha-fetoprotein (AFP), amniotic fluid	X	FP/FPX	Maternal Screen	91			CZQ	Quality Cross Check, Chemistry and TDM	41
Alpha-fetoprotein (AFP), serum	X	FP/FPX	Maternal Screen	91			LN32	Ammonia Cal Ver/Lin	132
	X	K/KK	Ligand–General	86	Amniotic fluid leakage (nitrazine)		AFL	Amniotic Fluid Leakage	153
		LN5	Ligand Assay Cal Ver/Lin	125	Amobarbital		DFC	Drug–Facilitated Crime	113
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	125	Amphetamine		DFC	Drug–Facilitated Crime	113
Alpha-hydroxyalprazolam		DFC	Drug–Facilitated Crime	113			DMPM	Drug Monitoring for Pain Management	112
		DMPM	Drug Monitoring for Pain Management	112			FTC	Forensic Toxicology, Criminalistics	109
		FTC	Forensic Toxicology, Criminalistics	109			OFD	Oral Fluid for Drugs of Abuse	105
		T	Toxicology	100			T	Toxicology	100
		UDC	Forensic Urine Drug Testing, Confirmatory	104			UDC	Forensic Urine Drug Testing, Confirmatory	104
		UT	Urine Toxicology	100			UDS, UDS6	Urine Drug Screen	102
Alpha-thalassemia		HGM	Hemoglobinopathies, Molecular Methods	260			UT	Urine Toxicology	100
Alprazolam		DMPM	Drug Monitoring for Pain Management	112			UTCO	Urine Toxicology Carryover	138
					Amphetamine group		DMPM	Drug Monitoring for Pain Management	112
							OFD	Oral Fluid for Drugs of Abuse	105

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Amphetamine group (cont.)		T	Toxicology	100
		UDS, UDS6	Urine Drug Screen	102
		UT	Urine Toxicology	100
Amylase	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	76
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Amylase, pancreatic	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
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	X	U	Urine Chemistry–General	72
Anabasine		NTA	Nicotine and Tobacco Alkaloids	107
<i>Anaerococcus prevotii/vaginalis</i>		JIP	Joint Infection Panel	208
Analytical balance		I	Instrumentation	136
<i>Anaplasma phagocytophilum</i>		TTD	Antibody Detection of Tick-Transmitted Diseases	213
Anaplastic lymphoma kinase	X	PM6	Anaplastic Lymphoma Kinase IHC	298
Androstenedione	X	Y/YY	Sex Hormones	88
Angiotensin converting enzyme		ACE	Angiotensin Converting Enzyme	75
Anti ADAMTS13 IgG		CGS7	ADAMTS13	167
Anti-A titer		AABT, AABT1	Antibody Titer, Automated	235
		ABT, ABT1	Antibody Titer	235
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		ABT3	Antibody Titer	235
Antibody detection	X	J, JAT	Transfusion Medicine	230–231
		JATE1	Transfusion Medicine, Automated, Educational	231
		JATQ	Quality Cross Check, Transfusion Medicine	51
	X	PS	Platelet Serology	237

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Anticardiolipin IgA, qualitative		ACL, APS	Antiphospholipid Antibody	219
Anticardiolipin IgA, quantitative		ACL, APS	Antiphospholipid Antibody	219
Anticardiolipin IgG, IgM, polyclonal; qualitative	X	ACL, APS	Antiphospholipid Antibody	219
Anticardiolipin IgG, IgM, polyclonal; quantitative		ACL, APS	Antiphospholipid Antibody	219
Anti-CCP		CCP	Cyclic Citrullinated Peptide Antibody	220
Anticentromere antibody		S2	Immunology, Special	217
Antichromatin antibody		ACA	Antichromatin Antibody	218
Anti-CMV, IgG, IgM	X	VR3	Infectious Disease Serology	213
Anti-CMV, total	X	VM3	Viral Markers–Series 3	242
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Anti-DNA (ds) antibody, qualitative	X	S2, S4	Immunology, Special	217
Anti-DNA (ds) antibody, quantitative		S2, S4	Immunology, Special	217
Anti-DNA topoisomerase (Anti-Scl-70)		RDS	Rheumatic Disease Special Serologies	221
Antideamidated gliadin peptide antibody screen (IgA, IgG)		CES/CESX	Celiac Serology	220
Antideamidated gliadin peptide antibody, IgA; qualitative	X	CES/CESX	Celiac Serology	220

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Antideamidated gliadin peptide antibody, IgA, IgG; quantitative		CES/CESX	Celiac Serology	220	Anti-HAV, IgG	X	VM1	Viral Markers–Series 1	242
Antideamidated gliadin peptide/tissue transglutaminase antibody screen (IgA, IgG)		CES/CESX	Celiac Serology	220	Anti-HAV, IgM	X	VM5	Viral Markers–Series 5	243
Antiendomysial antibody IgA, IgG; qualitative		CES/CESX	Celiac Serology	220	Anti-HAV, total		VM1	Viral Markers–Series 1	242
Antiendomysial antibody IgA, IgG; quantitative		CES/CESX	Celiac Serology	220	Anti-HBc, IgM	X	VM5	Viral Markers–Series 5	243
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Antifungal drugs monitoring		AFD	Antifungal Drugs Monitoring	111	Anti-Hbe	X	VM2	Viral Markers–Series 2	242
Antifungal susceptibility testing	X	F	Mycology and Aerobic Actinomycetes	195	Anti-HBs, qualitative	X	VM1	Viral Markers–Series 1	242
	X	F1	Yeast	195	Anti-HBs, quantitative		VM1	Viral Markers–Series 1	242
Antigen detection, bacterial		CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188	Anti-HCV	X	RHCWV	Anti-HCV, Rapid Methods, Waived	243
	X	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	188		X	VM1	Viral Markers–Series 1	242
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	X	D6	Rapid Group A Strep	183	Antihistone antibody		AHT	Antihistone Antibody	218
	X	D8	Group B Strep	184	Anti-HIV-1	X	AHIV	Anti-HIV Rapid Methods	243
	X	D9	Rapid Group A Strep, Waived	183		X	AHIVW	Anti-HIV Rapid Methods	243
	X	HC1	<i>C. trachomatis</i> by DFA	188		X	VM1	Viral Markers–Series 1	242
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		LBAS	<i>Legionella pneumophila</i>	184		X	VM1	Viral Markers–Series 1	242
	X	MC4	Urine Colony Count Combination	181	Anti-HIV-1/2	X	AHIV	Anti-HIV Rapid Methods	243
		POC4	POC Strep Screen Competency	54		X	AHIVW	Anti-HIV Rapid Methods	243
	X	RMC	Routine Microbiology Combination	180		X	VM1	Viral Markers–Series 1	242
		SBAS	<i>Streptococcus pneumoniae</i>	184	Anti-HIV-1/2, HIV-1 p24 antigen	X	VM6/VM6X	Viral Markers–Series 6	243
	X	VS	Vaginitis Screen	191	Anti-HTLV-I/II		VM3	Viral Markers–Series 3	242
Antigen detection, viral	X	VR2	Viral Antigen Detection by DFA	201	Anti-intrinsic factor antibody		APC	Autoimmune Gastritis Markers	218
	X	VR4	Viral Antigen Detection by EIA and Latex	201	Anti-Jo-1 (antihistidyl t-RNA synthetase)		RDS	Rheumatic Disease Special Serologies	221
Antigliadin antibody IgA, IgG, qualitative		CES/CESX	Celiac Serology	220	Anti-LKM		LKM	Liver-Kidney Microsomal Antibody	221
Antigliadin antibody IgA, IgG, quantitative		CES/CESX	Celiac Serology	220	Antimicrobial susceptibility testing	X	D	Bacteriology	177
Antiglomerular basement membrane, qualitative	X	S2	Immunology, Special	217		X	D2	Urine Cultures	179
							MBT	Microbiology Bench Tools Competency	178
						X	RMC	Routine Microbiology Combination	180
					Antimitochondrial antibody, qualitative	X	S2	Immunology, Special	217
					Antimitochondrial antibody, quantitative		S2	Immunology, Special	217
					Antimitochondrial M2 antibody		H	Antimitochondrial M2 Antibody	218
					Anti-MPO		S2	Immunology, Special	217
					Antimüllerian hormone	X	AMH	Antimüllerian Hormone	88
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Antinuclear antibody (ANA), quantitative	X	ANA, IL	Immunology	216
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Antiphospholipid antibody		ACL	Antiphospholipid Antibody	219
Anti-PR3		S2	Immunology, Special	217
Antiribosomal P antibody		ARP	Antiribosomal P Antibody	219
Anti-RNP antibody, qualitative	X	S2	Immunology, Special	217
Anti-RNP antibody, quantitative		S2	Immunology, Special	217
Anti-Ro52 antibodies		S2	Immunology, Special	217
Anti-Ro60 antibodies		S2	Immunology, Special	217
Anti- <i>Saccharomyces cerevisiae</i> antibody		ASC	Anti- <i>Saccharomyces cerevisiae</i> Antibody	219
Anti-Scl-70 (anti-DNA topoisomerase)		RDS	Rheumatic Disease Special Serologies	221
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Anti-SSB antibody, quantitative		S2	Immunology, Special	217
Antistreptolysin O (ASO), qualitative	X	ASO, IL	Immunology	216
Antistreptolysin O (ASO), quantitative	X	ASO, IL	Immunology	216
Antithrombin (activity, Ag)		CGE/CGEX	Coagulation, Extended	165
		CGS2	Coag Special, Series 2	167
		LN35	Thrombophilia Cal Ver/Lin	133
Antithyroglobulin antibody, qualitative	X	S2, S4	Immunology, Special	217
Antithyroglobulin antibody, quantitative		S2, S4	Immunology, Special	217
Antithyroid microsomal, qualitative	X	S2, S4	Immunology, Special	217
Antithyroid microsomal, quantitative		S2, S4	Immunology, Special	217
Antithyroid peroxidase, qualitative	X	S2, S4	Immunology, Special	217
Antithyroid peroxidase, quantitative		S2, S4	Immunology, Special	217
Antitissue transglutaminase antibody IgA, qualitative	X	CES/CESX	Celiac Serology	220
Antitissue transglutaminase antibody IgA, quantitative	X	CES/CESX	Celiac Serology	220
Antitissue transglutaminase antibody IgG, qualitative		CES/CESX	Celiac Serology	220
Antitissue transglutaminase antibody IgG, quantitative		CES/CESX	Celiac Serology	220
<i>Anti-Trypanosoma cruzi</i>		VM4	Viral Markers–Series 4	243
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Apolipoprotein A1	X	ABL	Accuracy-Based Lipids	116
	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
Apolipoprotein B	X	ABL	Accuracy-Based Lipids	116
	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
Apolipoprotein E (APOE) genotyping	X	APOE	Apolipoprotein E (APOE) Genotyping	259

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Aripiprazole		FTC	Forensic Toxicology, Criminalistics	109	B-type natriuretic peptides	X	BNP	B-Type Natriuretic Peptides, 2 Chall	63	
		T	Toxicology	100		X	BNP5	B-Type Natriuretic Peptides, 5 Chall	63	
		UT	Urine Toxicology	100			BNPQ	Quality Cross Check, B-Type Natriuretic Peptides	41	
Arsenic, urine		TMU	Trace Metals, Urine	108			LN30	B-Type Natriuretic Peptides Cal Ver/Lin	131	
Arsenic, whole blood		TMWB	Trace Metals, Whole Blood	108		X	PCARM/PCARMX	Point-of-Care Cardiac Markers	69	
Arthropod identification		TMO	Ticks, Mites, and Other Arthropods	199			POC12	POC Cardiac Markers Competency	55	
Aspartate aminotransferase (AST/SGOT)	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58–60	<i>Babesia microti</i>		TTD	Antibody Detection of Tick-Transmitted Diseases	213	
		CZQ	Quality Cross Check, Chemistry and TDM	41			NAT	Nucleic Acid Testing	244	
		IFS	Interfering Substances	137	Bacterial antigen detection			CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124		X	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	188	
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124		X	D	Bacteriology	177	
Aspartic acid, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258		X	D6	Rapid Group A Strep	183	
Aspirin assay		PIA/PIAX	Drug-Specific Platelet Aggregation	171		X	HC1	<i>C. trachomatis</i> by DFA	188	
Astrovirus		GIP	Gastrointestinal Panel	212		X	HC3	<i>C. trachomatis</i> by EIA	188	
	X	GIP5	Gastrointestinal Panel	212			LBAS	<i>Legionella pneumophila</i> Antigen Detection	184	
Atenolol		FTC	Forensic Toxicology, Criminalistics	109		X	MC4	Urine Colony Count Combination	181	
		T	Toxicology	100			POC4	POC Strep Screen Competency	54	
		UT	Urine Toxicology	100		X	RMC	Routine Microbiology Combination	180	
Atropine		FTC	Forensic Toxicology, Criminalistics	109			SBAS	<i>S. pneumoniae</i> Antigen Detection	184	
		T	Toxicology	100		X	VS	Vaginitis Screen	191	
		UT	Urine Toxicology	100	Bacterial detection in platelets			BDP, BDPV	Bacterial Detection, Platelets	240
Automated WBC differential	X	FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141		X	BDP5, BDPV5	Bacterial Detection, Platelets	240	
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45	Bacterial identification	X	BCM	Bacterial Blood Culture, Molecular	185	
						X	D	Bacteriology	177	
						X	D1, D2, D3, RMC	Throat, Urine, GC Cultures	179–180	
Autopsy pathology		AUP/AUP1	Autopsy Pathology	301		X	D8	Group B Strep	184	
							DEX	Expanded Bacteriology	178	
					X	HC6/HC6X	<i>C. trachomatis</i> /GC by Nucleic Acid Amp	192		

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	X	IDM5	Meningitis/Encephalitis Panel	209
	X	IDR	Infectious Disease, Respiratory Panel	210
		LPX	Laboratory Preparedness Exercise	190
		MBT	Microbiology Bench Tools Competency	178
	X	MC4	Urine Colony Count Combination	181
		MRS	Methicillin-resistant <i>Staphylococcus aureus</i> Screen	189
		MRS2M	MRSA Screen, Molecular, 2 Challenge	189
	X	MRS5	Methicillin-resistant <i>Staphylococcus aureus</i> Screen	189
	X	MRS5M	MRSA Screen, Molecular, 5 Challenge	189
	X	RMC	Routine Microbiology Combination	180
	Bacterial vaginosis screen		BV	Bacterial Vaginosis
		MVP	Molecular Vaginal Panel	192
		VS2	Vaginitis Screen, Virtual Gram Stain	193
<i>Bacterioides fragilis</i>		JIP	Joint Infection Panel	208
BAP1		PM5	Immunohistochemistry TMA	295
Barbiturate group		DMPM	Drug Monitoring for Pain Management	112
		SDS	Serum Drug Screen	106
		T	Toxicology	100
		UDS, UDS6	Urine Drug Screen	102
		UT	Urine Toxicology	100
BCR/ABL1 p190	X	MH02, MH03	Molecular Hematologic Oncology	278
		MRD1	Minimal Residual Disease	279
BCR/ABL1 p210	X	MH02, MH03	Molecular Hematologic Oncology	278
		MRD	Minimal Residual Disease	279
Bence Jones protein		UBJP	Urine Bence Jones Protein	80
Benzodiazepine group		DMPM	Drug Monitoring for Pain Management	112
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		SDS	Serum Drug Screen	106

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		UT	Urine Toxicology	100
Benzoylcegonine		DFC	Drug-Facilitated Crime	113
		DMPM	Drug Monitoring for Pain Management	112
		FTC	Forensic Toxicology, Criminalistics	109
		OFD	Oral Fluid for Drugs of Abuse	105
		T	Toxicology	100
		UDC	Forensic Urine Drug Testing, Confirmatory	104
		UDS, UDS6	Urine Drug Screen	102
		UT	Urine Toxicology	100
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Beta-1 globulin		SPE	Serum Electrophoresis	80
Beta-2 globulin		SPE	Serum Electrophoresis	80
Beta-2-glycoprotein I		ACL, APS	Antiphospholipid Antibody	219
Beta-2-microglobulin, serum	X	TM/TMX	Tumor Markers	93
Beta-2-microglobulin, urine		CD	Cadmium	107
Beta-catenin		PM5	Immunohistochemistry TMA	295
Beta globulin		SPE	Serum Electrophoresis	80
Beta-hydroxybutyrate	X	KET	Ketones	68
Beta-thalassemia		HGM	Hemoglobinopathies, Molecular Methods	260
Bile crystal identification, photographs		BCR	Bile Crystals	155
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Bilirubin, direct	X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
		X	NB, NB2	Neonatal Bilirubin
Bilirubin, total	X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41

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		IFS	Interfering Substances	137		Body fluid (cell count)		ABF1, ABF2, ABF3	Automated Body Fluid	153
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124		Body fluid cell differential		VBF	Virtual Body Fluid	154
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124		Body fluid (cell count) manual	X	HFC, HFCI	Hemocytometer Fluid Count	156
		X	NB, NB2	Neonatal Bilirubin		69	Body fluid cell identification		CMP, CMP1	Clinical Microscopy
Bilirubin, urine	X	CMP, CMP1	Clinical Microscopy	151			VBF	Virtual Body Fluid	154	
		CMQ	Quality Cross Check, Urinalysis	46	Body fluid (chemistry)		FLD, FLD2	Body Fluid	76–77	
		DSC	Dipstick Confirmatory	155	Body fluid crystal identification		BFC	Crystals	155	
	X	HCC2	Waived Combination	70	Body fluid photographs		CMP, CMP1	Clinical Microscopy	151	
		POC3	POC Urine Dipstick Competency	54	Bone marrow cell differential		BMD	Bone Marrow Cell Differential	144	
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Bioterrorism agents		LPX	Laboratory Preparedness Exercise	190	Bordetella holmesii	X	IDR	Nucleic Acid Amp, Organisms	210	
BK virus		ID1T	Nucleic Acid Amp, JC and BK	202	Bordetella parapertussis		BOR	<i>Bordetella pertussis/parapertussis</i> , Molecular	186	
		VLS, VLS2	Viral Load	206			IDN, IDO	Nucleic Acid Amp, Organisms	207	
Blood cannabinoids		THCB	Blood Cannabinoids	111		X	IDR	Infectious Disease Respiratory Panel	210	
Blood cell identification		EHE1	Expanded Virtual Peripheral Blood Smear	149	Bordetella pertussis		BOR	<i>Bordetella pertussis/parapertussis</i> , Molecular	186	
		VPBS	Virtual Peripheral Blood Smear	149			IDN, IDO	Nucleic Acid Amp, Organisms	207	
Blood cell identification photographs	X	BCP, BCP2	Blood Cell Identification	144		X	IDR	Infectious Disease Respiratory Panel	210	
	X	FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141	Borrelia burgdorferi		TTD	Antibody Detection of Tick-Transmitted Diseases	213	
	X	HEP	Basic Hematology	140	BRAF	X	BRAF	Mutation Testing	276	
Blood culture	X	BCS	Blood Culture	185		X	MTP	Multigene Tumor Panel	277	
	X	BCM	Bacterial Blood Culture, Molecular	185	BRAF V600E		BRAFV	BRAF V600E	298	
Blood culture <i>Staphylococcus aureus</i>	X	BCS1	Blood Culture <i>Staphylococcus aureus</i>	185	BRCA1/2	X	MGL3	Molecular Genetics	261–262	
Blood culture, yeast, molecular	X	YBC	Yeast Blood Culture, Molecular	196	BRCA1/2 duplication/deletion analysis	X	BRCA	BRCA1/2 Sequencing	259	
Blood or hemoglobin, urine	X	CMP, CMP1	Clinical Microscopy	151	BRCA1/2 sequencing	X	BRCA	BRCA1/2 Sequencing	259	
Blood parasite	X	BP	Blood Parasite	199	Brain tissue by FISH		CYJ	Fluorescence In Situ Hybrid and Interpretation on Site, Brain/Glioma Tissue	255	
	X	P	Parasitology	198	Brightfield in situ hybridization	X	ISH2	In Situ Hybridization	274	
Blood parasite, rapid		RMAL	Rapid Malaria	199	Bromazepam		DFC	Drug-Facilitated Crime	113	
Bloom syndrome (<i>BLM</i> gene)	X	MGL4	Molecular Genetics	261–262						

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Brompheniramine		DFC	Drug-Facilitated Crime	113	CA 19-9		FLD	Body Fluid	76	
		FTC	Forensic Toxicology, Criminalistics	109				FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		T	Toxicology	100				LN34	Tumor Markers Cal Ver/Lin	132
		UT	Urine Toxicology	100			X	TM/TMX	Tumor Markers	93
Buprenorphine		DMPM	Drug Monitoring for Pain Management	112	CA 27.29	X	TM/TMX	Tumor Markers	93	
		FTC	Forensic Toxicology, Criminalistics	109	CA 72-4		TM/TMX	Tumor Markers	93	
		OFD	Oral Fluid for Drugs of Abuse	105	CA 125		LN34	Tumor Markers Cal Ver/Lin	132	
		T	Toxicology	100		X	TM/TMX	Tumor Markers	93	
		UDC	Forensic Urine Drug Testing, Confirmatory	104	Cadmium, urine	X	CD	Cadmium	107	
		UDS, UDS6	Urine Drug Screen	102	Cadmium, whole blood	X	CD	Cadmium	107	
Bupropion		UT	Urine Toxicology	100	Caffeine	X	CZ2X, CZX, CZ, Z	Chemistry and TDM	58-60	
		FTC	Forensic Toxicology, Criminalistics	109			CZQ	Quality Cross Check, Chemistry and TDM	41	
		T	Toxicology	100	Calcitonin	X	TM/TMX	Tumor Markers	93	
		UT	Urine Toxicology	100	Calcium		ABVD	Accuracy-Based Vitamin D	116	
Butalbital		DFC	Drug-Facilitated Crime	113		X	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58-60	
		DMPM	Drug Monitoring for Pain Management	112			CZQ	Quality Cross Check, Chemistry and TDM	41	
		FTC	Forensic Toxicology, Criminalistics	109			FLD2	Body Fluid Chemistry 2	77	
		T	Toxicology	100			IFS	Interfering Substances	137	
		UDC	Forensic Urine Drug Testing, Confirmatory	104			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124	
		UT	Urine Toxicology	100			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124	
C. difficile antigen		CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188	Calcium, ionized	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96	
		SP, SPN	Stool Pathogens-Rapid and Molecular	190			AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44	
	X	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	188		X	C3/C3X, CZ/ CZX/CZ2X	Chemistry and TDM	58-60	
	X	D	Bacteriology-Antigen Detection	177			CZQ	Quality Cross Check, Chemistry and TDM	41	
C. difficile toxin		CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188			LN13C	Blood Gas Cal Ver/Lin	128	
		CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	188			POC10, POC11	POC Competency Blood Gases	55	
		D	Bacteriology-Antigen Detection	177	Calcium, urine		ABU	Accuracy-Based Urine	117	
		GIP	Gastrointestinal Panel	212			LN6	Urine Chemistry Cal Ver/Lin	126	
		GIP5	Gastrointestinal Panel	212		X	U	Urine Chemistry-General	72	
		SP, SPN	Stool Pathogens-Rapid and Molecular	190	Calcofluor white		FSM	Fungal Smear	197	
CA 15-3		LN34	Tumor Markers Cal Ver/Lin	132	Campylobacter		CAMP	Campylobacter	187	
	X	TM/TMX	Tumor Markers	93			GIP	Gastrointestinal Panel	212	
					X	GIP5	Gastrointestinal Panel	212		

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Canavan disease (ASPA gene)	X	MGL4	Molecular Genetics	261–262	Carisoprodol (cont.)		FTC	Forensic Toxicology, Criminalistics	109
<i>Candida albicans</i>		JIP	Joint Infection Panel	208			T	Toxicology	100
Candida culture	X	F3	<i>Candida</i> Culture	196			UT	Urine Toxicology	100
<i>Candida glabrata</i> vaginal, molecular		MVP	Molecular Vaginal Panel	192	Carnitine	X	BGL1	Biochemical Genetics	257
<i>Candida krusei</i> vaginal, molecular		MVP	Molecular Vaginal Panel	192	Casts, urine, semiquantitative		UAA, UAA1	Automated Urinalysis	154
<i>Candida</i> sp., DNA probe	X	VS	Vaginitis Screen	191	CD1a		RFAV1	Rare Flow Antigen Validation, CD1a	228
<i>Candida</i> sp. group, vaginal, molecular		MVP	Molecular Vaginal Panel	192	CD3	X	FL, FL1	Lymphocyte Subset Immunophenotyping	224
Cannabinoids			See Delta-9-THC-COOH, Delta-9-THC, and 11-hydroxy-THC				FL7	Flow Cytometry, T-Cell Subsets Analysis	225
Carbamazepine	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60			LN22	Flow Cytometry Cal Ver/Lin	130
		CZQ	Quality Cross Check, Chemistry and TDM	41			SCP	Stem Cell Processing	239
		FTC	Forensic Toxicology, Criminalistics	109	CD4	X	FL, FL1	Lymphocyte Subset Immunophenotyping	224
		LN3	TDM Cal Ver/Lin	125			FL7	Flow Cytometry, T-Cell Subsets Analysis	225
		T	Toxicology	100			LN22	Flow Cytometry Cal Ver/Lin	130
		UT	Urine Toxicology	100	CD8	X	FL, FL1	Lymphocyte Subset Immunophenotyping	224
Carbamazepine-10,11-epoxide		FTC	Forensic Toxicology, Criminalistics	109			FL7	Flow Cytometry, T-Cell Subsets Analysis	225
		T	Toxicology	100			LN22	Flow Cytometry Cal Ver/Lin	130
		UT	Urine Toxicology	100	CD20		PM3	Immunohistochemistry	298
Carbamazepine, free		CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60	CD30		CD30	CD30 Immunohistochemistry	298
		CZQ	Quality Cross Check, Chemistry and TDM	41			RFAV3	Rare Flow Antigen Validation, CD30	228
Carbapenem-resistant organisms		CRO	Carbapenem-resistant Organisms	187	CD34		CBT	Cord Blood Testing	239
Carbapenemase resistance mechanism detection		CRE	Carbapenemase Detection	187		X	FL4	Flow Cytometry CD34+	224
Carbon dioxide (CO ₂)	x	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	58–60			SCP	Stem Cell Processing	239
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124	CD45	X	FL, FL1	Lymphocyte Subset Immunophenotyping	224
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124			FL4	Flow Cytometry CD34+	224
Carboxyhemoglobin	X	SO	Blood Oximetry	98			SCP	Stem Cell Processing	239
		SOQ	Quality Cross Check, Blood Oximetry	44	CD49d		ZAP70	ZAP-70 Analysis by Flow Cytometry	228
Cardiomyopathy sequencing panel		CMSP	Cardiomyopathy Sequencing Panel	260	CD103		RFAV2	Rare Flow Antigen Validation, CD103	228
Carisoprodol		DFC	Drug–Facilitated Crime	113	CD117 (c-kit)		PM1	Immunohistochemistry	295
		DMPM	Drug Monitoring for Pain Management	112	CEA		FLD	Body Fluid	76
							FLDQ	Quality Cross Check, Body Fluid Chemistry	42
						X	K/KK	Ligand–General	86
							LN5	Ligand Assay Cal Ver/Lin	125
							LN5S	Ligand Assay, Siemens Cal Ver/Lin	125

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		NIPT	Noninvasive Prenatal Testing	92
Ceruloplasmin	X	S2, S4	Immunology, Special	217
CFU-GM		CBT	Cord Blood Testing	239
		SCP	Stem Cell Processing	239
CH50		CH50	Total Hemolytic Complement	223
CH100		CH50	CH100	223
Chlamydia trachomatis	X	HC1	<i>C. trachomatis</i> by DFA	188
	X	HC3	<i>C. trachomatis</i> by EIA	188
	X	HC6, HC6X	<i>C. trachomatis</i> /GC by Nucleic Acid Amp	192
	X	HC7	<i>C. trachomatis</i> /GC DNA by NAA	192
		VR1	Virology Culture	201
Chlamydia pneumoniae		IDN, IDO	Nucleic Acid Amp, Organisms	207
	X	IDPN	Infectious Disease, Pneumonia Panel	211
	X	IDR	Infectious Disease, Respiratory Panel	210
Chlordiazepoxide		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Chloride	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	77
		IFS	Interfering Substances	137
		LN13C	Blood Gas Cal Ver/Lin	128
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
		POC10, POC11	POC Competency Blood Gases	55
Chloride, sweat	X	SW1, SW2, SW4	Sweat Analysis Series	83
Chloride, urine		LN6	Urine Chemistry Cal Ver/Lin	126
	X	U	Urine Chemistry-General	72

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Chloride, vitreous fluid		VF	Vitreous Fluid, Postmortem	106
		DFC	Drug-Facilitated Crime	113
Chlorpheniramine		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
		ABL	Accuracy-Based Lipids	116
Cholesterol	X	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	76
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
	X	LCW	Chemistry-Ltd, Waived	68
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Chromium	X	R	Trace Metals	82
Chromium, urine		TMU	Trace Metals, Urine	108
Chromium, whole blood		TMWB	Trace Metals, Whole Blood	108
Chromosomal abnormalities	X	CY, CYBK	Cytogenetics	254
Citalopram		DFC	Drug-Facilitated Crime	113
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Citrate		KSA	Kidney Stone Risk Assessment	73
<i>Citrobacter</i> spp.		JIP	Joint Infection Panel	208
Citrulline, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
CK isoenzymes	X	CRTI, HCRTI	Cardiac Markers	64
CK-MB (immunochemical)	X	CRT, CRTI, HCRT, HCRTI	Cardiac Markers	64
		CRTQ	Quality Cross Check, Cardiac Markers	42
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
CK-MB (immunochemical) (cont.)	X	PCARM/PCARMX	Point-of-Care Cardiac Markers	69	CMV		ID1	Nucleic Acid Amp, Viruses	202
		POC12	POC Cardiac Markers Competency	55			LN38	CMV Viral Load Cal	133
CK2 (MB)		IFS	Interfering Substances	137		X	VLS, VLS2	Viral Load	206
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124	VM3		Viral Markers--Series 3	242	
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124	X	VR1	Virology Culture	201	
					X	VR2	Viral Antigen Detection by DFA	201	
Clinical pathology improvement program		CPIP/CPIP1	Quality Management, Education	14		X	VR3	Infectious Disease Serology	213
Clobazam		DFC	Drug-Facilitated Crime	113	c-Myc/Bcl-2 immunohistochemistry tumor markers		MYCB	c-Myc/Bcl-2 Immunohistochemistry TMA	300
Clomipramine		FTC	Forensic Toxicology, Criminalistics	109	CO ₂	x	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58-60
		T	Toxicology	100			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		UT	Urine Toxicology	100			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Clonazepam		DMPM	Drug Monitoring for Pain Management	112	Cobalt		TMU	Trace Metals, Urine	108
		FTC	Forensic Toxicology, Criminalistics	109	Cobalt, whole blood		TMWB	Trace Metals, Whole Blood	108
		T	Toxicology	100	Cocaethylene		FTC	Forensic Toxicology, Criminalistics	109
		UT	Urine Toxicology	100			T	Toxicology	100
Clonidine		DFC	Drug-Facilitated Crime	113			UT	Urine Toxicology	100
Clostridioides (Clostridium) difficile antigen	X	CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188	Cocaine		DMPM	Drug Monitoring for Pain Management	112
		CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	188			FTC	Forensic Toxicology, Criminalistics	109
	X	D	Bacteriology--Antigen Detection	177			OFD	Oral Fluid for Drugs of Abuse	105
		SP, SPN	Stool Pathogens--Rapid and Molecular	190			T	Toxicology	100
<i>Clostridioides (Clostridium) difficile</i> toxin		CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188			UDS, UDS6	Urine Drug Screen	102
		CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	188			UT	Urine Toxicology	100
		D	Bacteriology--Antigen Detection	177	Codeine		DFC	Drug-Facilitated Crime	113
		GIP	Gastrointestinal Panel	212			DMPM	Drug Monitoring for Pain Management	112
		GIP5	Gastrointestinal Panel	212			FTC	Forensic Toxicology, Criminalistics	109
		SP, SPN	Stool Pathogens--Rapid and Molecular	190			OFD	Oral Fluid for Drugs of Abuse	105
Clozapine		DFC	Drug-Facilitated Crime	113			T	Toxicology	100
		FTC	Forensic Toxicology, Criminalistics	109			UDC	Forensic Urine Drug Testing, Confirmatory	104
		T	Toxicology	100			UT	Urine Toxicology	100
		UT	Urine Toxicology	100	Compatibility testing	X	J, JAT	Transfusion Medicine	230-231
		ZE	Therapeutic Drug Monitoring, Extended	62			JATE1	Transfusion Medicine, Automated, Educational	231

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Complement C3	X	IG/IGX LN7	Immunology, General Immunology Cal Ver/Lin	216 126
Complement C4	X	IG/IGX LN7	Immunology, General Immunology Cal Ver/Lin	216 126
Complexed PSA	X	K/KK	Ligand-General	86
COMT		PGX1	Pharmacogenetics	264
Conductivity, sweat	X	SW1, SW2, SW4	Sweat Analysis Series	83
Connexin 26 (GJB2 gene)	X	MGL3	Molecular Genetics	261-262
Copper	X	R	Trace Metals	82
Copper, urine		TMU	Trace Metals, Urine	108
Copper, whole blood		TMWB	Trace Metals, Whole Blood	108
Coproporphyrins	X	N/NX	Urine Chemistry-Special	73
Copy number variant		CNVST	Copy Number Variant-Solid Tumor	273
Coronavirus		COV2	SARS-CoV-2 Molecular	203
		COVS	SARS-CoV-2 Serology	222
		ID2	Nucleic Acid Amp, Respiratory	204
	X	IDPN	Infectious Disease, Pneumonia Panel	211
	X	IDR	Infectious Disease, Respiratory Panel	210
Cortisol		ABS	Accuracy-Based Testosterone and Estradiol	117
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand-General	86
		LN5	Ligand Assay Cal Ver/Lin	125
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	125
Cortisol, salivary		SALC	Salivary Cortisol	81
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Cotinine		NTA	Nicotine and Tobacco Alkaloids	107
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COVID-19		COV2	SARS-CoV-2 Molecular	203
		COV2Q	Quality Cross Check, SARS-CoV-2 Molecular	49
		COVAG	SARS-CoV-2 Antigen	203
		COVAQ	Quality Cross Check, SARS-CoV-2 Antigen	49
		COVS	SARS-CoV-2 Serology	222

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COVID-19 (cont.)		COVSQ	Quality Cross Check, SARS-CoV-2 Serology	50
		ID3	Nucleic Acid Amplification, Respiratory Limited	205
		ID3Q	Quality Cross Check-Nucleic Acid Amplification, Respiratory Limited	49
		IDR	Infectious Disease, Respiratory Panel	210
C-peptide		ABGIC	Accuracy-Based Glucose, Insulin, and C-Peptide	119
	X	ING	Insulin, Gastrin, C-Peptide, PTH	90
		LN46	C-Peptide/Insulin Cal Ver/Lin	135
C-reactive protein (CRP)	X	CRP, IL	Immunology	216
		LN12	C-Reactive Protein Cal Ver/Lin	128
C-reactive protein, high-sensitivity (hsCRP)	X	HSCRP	High-Sensitivity C-Reactive Protein	68
		LN21	High-Sensitivity C-Reactive Protein Cal Ver/Lin	130
Creatine kinase (CK)	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Creatinine	X	AQ2, AQ4	Critical Care Blood Gas	96
		AQ2Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD	Body Fluid	76
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN24	Creatinine Accuracy Cal Ver/Lin	131

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Creatinine (cont.)		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124	CSF IgG calculations		OLI	CSF Chemistry and Oligoclonal Bands	78
		SCO	Serum Carryover	138	C-telopeptide (CTX)		BMV5	Bone Markers and Vitamin	90
Creatinine, urine		ABU	Accuracy-Based Urine	117			BU	Bone and Mineral, Urine	89
		BU	Bone and Mineral, Urine	89	<i>Cutibacterium avidum/granulosum</i>		JIP	Joint Infection Panel	208
	X	CD	Cadmium	107	Cyclic citrullinated peptide antibody		CCP	Anti-cyclic Citrullinated Peptide Antibody	220
		DAI	Urine Drug Adulterant/ Integrity Testing	103	Cyclobenzaprine		DFC	Drug-Facilitated Crime	113
		LN20	Urine Albumin Cal Ver/ Lin	130			FTC	Forensic Toxicology, Criminalistics	109
		LN6	Urine Chemistry Cal Ver/Lin	126			T	Toxicology	100
	X	U	Urine Chemistry-General	72			UT	Urine Toxicology	100
		UDC	Forensic Urine Drug Testing, Confirmatory	104	<i>Cyclospora cayatanensis</i>		GIP	Gastrointestinal Panel	212
	X	UMC	Urine Albumin/ Creatinine	158			GIP5	Gastrointestinal Panel	212
Creatinine, vitreous fluid		VF	Vitreous Fluid, Postmortem	106	Cyclosporine	X	CS	Immunosuppressive Drugs	61
Creatinine, whole blood	X	WBCR	Whole Blood Creatinine	71			LN31	Immunosuppressive Drugs Cal Ver/Lin	132
Crossmatching		EXM, EXM2	Electronic Crossmatch	231, 233	<i>CYP2B6</i>		PGX	Pharmacogenetics	264
	X	J, JAT	Transfusion Medicine	230-231	<i>CYP2C9</i>	X	PGX	Pharmacogenetics	264
	X	MXC	HLA Analysis, Class I/II	248	<i>CYP2C19</i>	X	PGX	Pharmacogenetics	264
		TMCA	Transfusion Medicine, Competency Assessment	237	<i>CYP2D6</i>		PGX	Pharmacogenetics	264
Cryptococcal antigen detection	X	CRYP	Cryptococcal Antigen Detection	196	<i>CYP3A4</i>		PGX	Pharmacogenetics	264
	X	F	Mycology and Aerobic Actinomycetes	195	<i>CYP3A5</i>		PGX	Pharmacogenetics	264
	X	F1	Yeast	195	<i>CYP4F2</i>		PGX	Pharmacogenetics	264
<i>Cryptococcus neoformans/gatti</i>		IDME	Meningitis/Encephalitis Panel	209	Cystatin C		CYS	Cystatin C	78
		IDM5	Meningitis/Encephalitis Panel	209	Cystic fibrosis (CFTR gene)	X	MGL2, MGL5	Molecular Genetics	261-262
<i>Cryptosporidium</i>		GIP	Gastrointestinal Panel	212	Cystine		KSA	Kidney Stone Risk Assessment	73
		GIP5	Gastrointestinal Panel	212	Cystine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
<i>Cryptosporidium</i> immunoassay, preserved specimen	X	P, P3, P4, P5	Parasitology	198	Cytogenomic microarray		CYCGH	Constitutional Microarray Analysis	256
Crystal identification (bile)		BCR	Bile crystals	155			CYMA	Cytogenomic Microarray Analysis for Oncologic Abnormality	256
Crystal identification (body fluid)		BFC	Body Fluid Crystals	155	Cytology proficiency testing			See Cytopathology GYN proficiency testing	
Crystal identification (urine)		URC	Urine Crystals	155	Cytomegalovirus (CMV)		ID1	Nucleic Acid Amp, Viruses	202
Crystals, urine (semiquantitative)		UAA	Automated Urinalysis	154			IDME	Meningitis/Encephalitis Panel	209
CSF antigen detection	X	D	Bacteriology	177		X	IDM5	Meningitis/Encephalitis Panel	209
							LN38	CMV Viral Load Cal Ver/ Lin	133
							VLS, VLS2	Viral Load	206
						X	VM3	Viral Markers-Series 3	242

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Cytomegalovirus (CMV) (cont.)	X	VR1	Virology Culture	201	Delta-9-THC-COOH (cont.)		OFD	Oral Fluid for Drugs of Abuse	105
	X	VR2	Virology by DFA	201			T	Toxicology	100
	X	VR3	Infectious Disease Serology	213			THCB	Blood Cannabinoids	111
Cytopathology GYN education		PAPCE1	PAP Edu, Conventional	306			UDC	Forensic Urine Drug Testing, Confirmatory	104
		PAPJE1	PAP Edu, All Technologies	306			UDS, UDS6	Urine Drug Screen	102
		PAPKE1	PAP Edu, SurePath	306			UT	Urine Toxicology	100
		PAPME1	PAP Edu, ThinPrep	306			UTCO	Urine Toxicology Carryover	138
		PAPCPT	PAP PT, Conventional	305	Demoxepam		FTC	Forensic Toxicology, Criminalistics	109
Cytopathology GYN proficiency testing		PAPJPT	PAP PT, Combination	305		T	Toxicology	100	
		PAPKPT	PAP PT, SurePath	305		UT	Urine Toxicology	100	
		PAPLPT	PAP PT, Combination	305	Deoxy pyridinoline (DPD)		BU	Bone and Mineral, Urine	89
		PAPMPT	PAP PT, ThinPrep	305	Dermatopathology		DPATH/DPATH1	Online Digital Slide Program	302
Cytopathology, nongynecologic		FNA/FNA1	Fine-Needle Aspiration-Online	311	Dermatopathology immunohistochemistry		DPIHC	Dermatopathology Immunohistochemistry	296
		FNAG/FNAG1	Fine-Needle Aspiration-Glass	312	Dermatophyte identification	X	F	Mycology and Aerobic Actinomycetes	195
		NGC/NGC1	Nongynecologic Cytopathology Education Program	310	Desipramine		DFC	Drug-Facilitated Crime	113
Cytopreparation differential manual		HFC	Hemocytometer Fluid Count	156			FTC	Forensic Toxicology, Criminalistics	109
Dabigatran		DBGN	Anticoagulant Monitoring, Dabigatran	168			T	Toxicology	100
D-dimer, qualitative		CGDF	Coagulation, D-dimer/FDP	164			UT	Urine Toxicology	100
		CGL	Coagulation, Limited	164		X	ZT	TDM, Special	62
D-dimer, quantitative	X	CGDF	Coagulation, D-dimer/FDP	164	Desmethylclomipramine		FTC	Forensic Toxicology, Criminalistics	109
		CGL	Coagulation, Limited	164			T	Toxicology	100
		CGLQ	Quality Cross Check, Coagulation, Limited	48			UT	Urine Toxicology	100
		LN42	D-dimer Cal Ver/Lin	134	Desmethylsertraline		FTC	Forensic Toxicology, Criminalistics	109
Delta-9-THC		PCARM/PCARMX	Point-of-Care Cardiac Markers	69			T	Toxicology	100
		POC12	POC Cardiac Markers Competency	55			UT	Urine Toxicology	100
		FTC	Forensic Toxicology, Criminalistics	109	Dextromethorphan		DFC	Drug-Facilitated Crime	113
Delta-9-THC-COOH		OFD	Oral Fluid for Drugs of Abuse	105			FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100			T	Toxicology	100
		THCB	Blood Cannabinoids	111	DHEA sulfate	X	Y/YY	Sex Hormones	88
		UT	Urine Toxicology	100	DIA (Dimeric inhibin A)	X	FP/FPX	Maternal Screen	91
		DFC	Drug-Facilitated Crime	113	Diazepam		DMPM	Drug Monitoring for Pain Management	112
	DMPM	Drug Monitoring for Pain Management	112			FTC	Forensic Toxicology, Criminalistics	109	
	FTC	Forensic Toxicology, Criminalistics	109			OFD	Oral Fluid for Drugs of Abuse	105	
						T	Toxicology	100	
						UT	Urine Toxicology	100	

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Differential, automated	X	FH1-FH4, FH9, FH10, FH13, FH16, FH17	Hematology Automated Differential	141	Direct antiglobulin testing	X	DAT	Direct Antiglobulin Testing	236
					TMCAD		Transfusion Medicine, Competency Assessment	237	
		FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P			141	Direct antiglobulin testing, automated		ADAT	Direct Antiglobulin Testing--Automated
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45	Direct bilirubin	X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	58-60
					CZQ		Quality Cross Check, Chemistry and TDM	41	
					LN2		Chemistry, Lipid, Enzyme Cal Ver/Lin	124	
Differential (bone marrow), manual		BMD	Bone Marrow Cell Differential	144			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Differential (fluid), manual		HFC, HFCI	Hemocytometer Fluid Count	156		X	NB, NB2	Neonatal Bilirubin	69
Differential (peripheral blood), manual		EHE1	Expanded Virtual Peripheral Blood Smear	149	Disease association/drug risk		DADR1, DADR2	Disease Association/ Drug Risk	251
		VPBS	Virtual Peripheral Blood Smear	149	Disopyramide		CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60
Digital slide program in fine-needle aspiration, online		FNA/FNA1	Online Digital Slide Program	311			CZQ	Quality Cross Check, Chemistry and TDM	41
Digoxin	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60	DMD/Becker (<i>DMD</i> gene)	X	MGL2	Molecular Genetics	261-262
		CZQ	Quality Cross Check, Chemistry and TDM	41	DNA analysis		DML	HLA Molecular Typing	248
		LN3	TDM Cal Ver/Lin	125		X	PARF	Parentage/Relationship	245
Digoxin, free		CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60	DNA content/cell cycle analysis		FL, FL2	Flow Cytometry	224
		CZQ	Quality Cross Check, Chemistry and TDM	41	DNA extraction and amplification		MH05	Molecular Oncology Hematologic	274, 278
Dihydrocodeine		FTC	Forensic Toxicology, Criminalistics	109	DNA fingerprinting		IDN, IDO	Nucleic Acid Amp, Organisms	207
		T	Toxicology	100	DNA mismatch repair		HQMMR	HistoQIP Mismatch Repair IHC	294
		UT	Urine Toxicology	100			MMR	DNA Mismatch Repair	299
Diltiazem		FTC	Forensic Toxicology, Criminalistics	109	DNA sequencing		SEC, SEC1	DNA Sequencing	263
		T	Toxicology	100	Dopamine	X	N/NX	Urine Chemistry--Special	73
		UT	Urine Toxicology	100	Doxepin		DFC	Drug-Facilitated Crime	113
Dilute prothrombin time		CGE/CGEX	Coagulation, Extended	165			FTC	Forensic Toxicology, Criminalistics	109
Dilute Russell's viper venom time		CGS1	Coag Special, Series 1	167			T	Toxicology	100
Dimeric inhibin A (DIA)	X	FP/FPX	Maternal Screen	91			UT	Urine Toxicology	100
Diphenhydramine		DFC	Drug-Facilitated Crime	113	Doxylamine		DFC	Drug-Facilitated Crime	113
		FTC	Forensic Toxicology, Criminalistics	109			FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100			T	Toxicology	100
		UT	Urine Toxicology	100			UT	Urine Toxicology	100
Diphenylhydantoin			See Phenytoin		DPYD		PGX3	Pharmacogenetics	264

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Duloxetine		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Ecgonine ethyl ester		FTC	Forensic Toxicology, Criminalistics	109
		FTC	Forensic Toxicology, Criminalistics	109
Ecgonine methyl ester		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
E. coli O157		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel	212
eGFR		LN24	Creatinine Accuracy Cal Ver/Lin	131
<i>EGFR</i> –epidermal growth factor receptor	X	EGFR	Mutation Testing	276
	X	MTP	Multigene Tumor Panel	277
Electronic crossmatch		EXM, EXM2	Electronic Crossmatch	231, 233
	X	HG	Hemoglobinopathy	145
Electrophoresis		LPE	Lipoprotein Electrophoresis	80
	X	M, OLI	CSF Chemistry and Oligoclonal Bands	78
		SPE	Protein Electrophoresis	80
Elution, antibody		UBJP	Urine Bence Jones Protein	80
		ELU	Eluate	236
		TMCAE	Eluate Competency Assessment	237
Embryology		EMB	Embryology	161
<i>Entamoeba histolytica</i>		GIP, GIP5	Gastrointestinal Panel	212
Enter aggregative E. coli (EAEC)		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel	212
Enterobacter cloacae complex	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
<i>Enterococcus faecalis</i>		JIP	Joint Infection Panel	208
<i>Enterococcus faecium</i>		JIP	Joint Infection Panel	208
Enteropathogenic E. coli (EPEC)		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel	212
Enterotoxigenic E. coli (ETEC)		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel	212
Enterovirus		ID1	Nucleic Acid Amp, Viruses	202
		IDME	Meningitis/Encephalitis Panel	209
	X	IDM5	Meningitis/Encephalitis Panel	209

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Enterovirus (cont.)	X	IDR	Infectious Disease, Respiratory Panel	210
	X	VR1	Virology Culture	201
Eosinophils, urine		SCM2	Special Clinical Microscopy	157
Ephedrine		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Epidermal growth factor receptor (<i>EGFR</i>)	X	EGFR	Mutation Testing	276
	X	MTP	Multigene Tumor Panel	277
Epinephrine	X	N/NX	Urine Chemistry–Special	73
Epithelial cells, urine, semiquantitative		UAA1	Automated Urinalysis	154
Epstein-Barr virus (EBV)		ID1	Nucleic Acid Amp, Viruses	202
	X	ISH	In Situ Hybridization	274
		VLS, VLS2	Viral Load	206
		VR3	Antibody Detection–Infectious Disease Serology	213
ER by immunohistochemistry	X	PM2	ER, PgR by Immunohistochemistry	297
<i>ERBB2 (HER2)</i> gene amplification by ISH	X	ISH2	In Situ Hybridization	274
Erythrocyte sedimentation rate		ESR, ESR1, ESR2, ESR3	Erythrocyte Sedimentation Rate	145
Erythropoietin		EPO	Erythropoietin	92
Escherichia coli	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
Escherichia coli K1		IDME	Meningitis/Encephalitis Panel	209
	X	IDM5	Meningitis/Encephalitis Panel	209
Escherichia coli O157		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel	212
Estazolam		DFC	Drug–Facilitated Crime	113
Estradiol		ABS	Accuracy-Based Testosterone and Estradiol	117
		LN8	Reproductive Endocrinology Cal Ver/ Lin	127
	X	Y/YY	Sex Hormones	88
Estriol, unconjugated (uE3)	X	FP/FPX	Maternal Screen	91
	X	Y/YY	Sex Hormones	88
Estrogen receptors by immunohistochemistry	X	PM2	ER, PgR by Immunohistochemistry	297

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Ethanol	X	AL1	Whole Blood Alcohol/Volatiles	106	Factor XIII		CGE/CGEX	Coagulation, Extended	165
	X	AL2	Serum Alcohol/Volatiles	106				ECF	Expanded Colagulation Factors
			LN11	Serum Ethanol Cal Ver/Lin	127	Familial dysautonomia (ELP1 gene)	X	MGL4	Molecular Genetics
Ethanol, urine		UDS, UDS6	Urine Drug Screen	102	Fanconi anemia, complementation grp. C (FANCC gene)	X	MGL4	Molecular Genetics	261–262
Ethanol, vitreous fluid		VF	Vitreous Fluid, Postmortem	106	Fecal calprotectin		FCAL	Fecal Calprotectin	79
Ethosuximide	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60	Fecal fat, qualitative		FCFS	Fecal Fat	79
		CZQ	Quality Cross Check, Chemistry and TDM	41	Fecal lactoferrin		FLAC	Fecal Lactoferrin	188
Ethyl glucuronide (EtG)		ETB	Ethanol Biomarkers	107	Fecal occult blood		OCB	Occult Blood	157
Ethyl sulfate (EtS)		ETB	Ethanol Biomarkers	107			OCBQ	Quality Cross Check, Occult Blood	47
Ethylene glycol		AL1	Whole Blood Alcohol/Volatiles	106	Fentanyl		DFC	Drug–Facilitated Crime	113
		AL2	Serum Alcohol/Volatiles	106			DMPM	Drug Monitoring for Pain Management	112
Etizolam		DFC	Drug–Facilitated Crime	113			FTC	Forensic Toxicology, Criminalistics	109
Everolimus		EV	Everolimus	62			OFD	Oral Fluid for Drugs of Abuse	105
Factor II		CGE/CGEX	Coagulation, Extended	165			T	Toxicology	100
		ECF	Expanded Colagulation Factors	166			UDC	Forensic Urine Drug Testing, Confirmatory	104
Factor II (F2 gene)	X	MGL1	Molecular Genetics	261–262			UDS, UDS6	Urine Drug Screen	102
	X	TPM	Thrombophilia Mutations	265			UT	Urine Toxicology	100
Factor V		CGE/CGEX	Coagulation, Extended	165	Fern test (vaginal)	X	CMMP	Clinical Microscopy, Misc	152
		ECF	Expanded Colagulation Factors	166	Ferritin	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
Factor V Leiden (F5 gene)	X	MGL1	Molecular Genetics	261–262			CZQ	Quality Cross Check, Chemistry and TDM	41
	X	TPM	Thrombophilia Mutations	265		X	K/KK	Ligand–General	86
Factor VII		CGE/CGEX	Coagulation, Extended	165			LN5	Ligand Assay Cal Ver/Lin	125
		ECF	Expanded Colagulation Factors	166			LN5S	Ligand Assay, Siemens Cal Ver/Lin	125
Factor VIII		CGE/CGEX	Coagulation, Extended	165	Fetal fibronectin	X	FF	Fetal Fibronectin	92
		CGS3	Coag Special, Series 3	167	Fetal hemoglobin (gastric fluid)		APT	Fetal Hemoglobin	155
		ECF	Expanded Colagulation Factors	166	Fetal hemoglobin identification	X	HG	Hemoglobinopathy	145
Factor VIII inhibitor		CGS3	Coag Special, Series 3	167	Fetal membrane rupture		ROM1	Fetal Membranes/ Preterm Labor	157
Factor IX		CGE/CGEX	Coagulation, Extended	165	Fetal red cell quantitation	X	HBF	Fetal Red Cell Detection	236
		ECF	Expanded Colagulation Factors	166			TMCAF	Transfusion Medicine, Competency Assessment	238
Factor X		CGE/CGEX	Coagulation, Extended	165	Fetal screen (Rosette testing)	X	HBF	Fetal Red Cell Detection	236
		ECF	Expanded Colagulation Factors	166			TMCAF	Transfusion Medicine, Competency Assessment	238
Factor XI		CGE/CGEX	Coagulation, Extended	165					
		ECF	Expanded Colagulation Factors	166					
Factor XII		CGE/CGEX	Coagulation, Extended	165					
		ECF	Expanded Colagulation Factors	166					

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Fibrin degradation products, plasma		CGDF	Coagulation, D-dimer/ FDP	164	FISH for paraffin-embedded tissue (cont.)		CYK	Fluorescence In Situ Hybridization and Interpretation on Site, Solid Tumor	255
		CGL	Coagulation, Limited	164			CYL	Fluorescence In Situ Hybridization and Interpretation on Site, Lymphoma	255
		CGLQ	Quality Cross Check, Coagulation, Limited	48	FISH for solid tumor		CYK	Fluorescence In Situ Hybridization and Interpretation on Site, Solid Tumor	255
Fibrin degradation products, serum		CGDF	Coagulation, D-dimer/ FDP	164	FISH for urothelial carcinoma hybridization and interpretation	X	CYI	Fluorescence In Situ Hybridization and Interpretation on Site, Urothelial Carcinoma	254
		CGL	Coagulation, Limited	164	Flow cytometry, post-immunotherapy analysis		FL6	Flow Cytometry, Post-Immunotherapy Analysis	225
		CGLQ	Quality Cross Check, Coagulation, Limited	48	Fluconazole		AFD	Antifungal Drugs Monitoring	111
Fibrin monomer		CGL	Coagulation, Limited	164	Flunitrazepam		FTC	Forensic Toxicology, Criminalistics	109
		CGDF	Coagulation, D-dimer/ FDP	164			T	Toxicology	100
Fibrinogen	X	CGL	Coagulation, Limited	164			UT	Urine Toxicology	100
		CGLQ	Quality Cross Check, Coagulation, Limited	48	Fluorescent microscope check		I	Instrumentation	136
		LN44	Fibrinogen, Cal Ver/Lin	134	Fluoxetine		DFC	Drug-Facilitated Crime	113
Fibrinogen antigen		CGE/CGEX	Coagulation, Extended	165			FTC	Forensic Toxicology, Criminalistics	109
<i>Finegoldia magna</i>		JIP	Joint Infection Panel	208			T	Toxicology	100
Fine-needle aspiration, digital slide program		FNA/FNA1	Online Digital Slide Program	311			UT	Urine Toxicology	100
Fine-needle aspiration, glass slides		FNAG/ FNAG1	Fine-Needle Aspiration	312	Folate, RBC	X	FOL	RBC Folate	92
FISH for brain/glioma		CYJ	Fluorescence In Situ Hybridization and Interpretation on Site, Brain/Glioma Tissue	255	Folate, serum	X	K/KK	Ligand-General	86
		CYH	FISH for ERBB2 (HER2) Amplification	255			LN5	Ligand Assay Cal Ver/Lin	125
FISH for breast carcinoma hybridization and interpretation on site <i>ERBB2 (HER2)</i> amplification	X	CYH	FISH for ERBB2 (HER2) Amplification, Interpretation Only Exercise	296			LN5S	Ligand Assay, Siemens Cal Ver/Lin	125
FISH for breast carcinoma, interpretation only, <i>ERBB2 (HER2)</i> gene amplification		CYHI	FISH for ERBB2 (HER2) Amplification, Interpretation Only Exercise	296	Follicle-stimulating hormone (FSH)		ABS	Accuracy-Based Testosterone, Estradiol	117
FISH for constitutional and hematologic disorders		CYF	Fluorescence In Situ Hybridization and Interpretation on Site	254			LN8	Reproductive Endocrinology Cal Ver/ Lin	127
FISH for lung cancer, <i>ALK</i> rearrangement		CYALK	Fluorescence in Situ Hybridization and Interpretation on Site, Lung Cancer	255		X	Y/YY	Sex Hormones	88
FISH for lymphoma		CYL	Fluorescence In Situ Hybridization and Interpretation on Site, Lymphoma	255	Fondaparinux		FNPX	Anticoagulant Monitoring, Fondaparinux	168
FISH for paraffin-embedded tissue	X	CYH	FISH for ERBB2 (HER2) Amplification	255	Forensic pathology		FR/FR1	Forensic Pathology	314
		CYJ	Fluorescence In Situ Hybridization and Interpretation on Site, Brain/Glioma Tissue	255	Forensic toxicology		FTC	Forensic Toxicology, Criminalistics	109
					Fragile X (<i>FMR1</i> gene)	X	MGL1	Molecular Genetics	261-262
					Free beta hCG		FP1B	First Trimester Maternal Screening, Free Beta	91
					Free Kappa/Lambda ratio		SFLC	Serum Free Light Chains	223

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Free testosterone		DY	Sex Hormones	88	GDH Antigen (cont.)	X	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	188
Friedreich ataxia (<i>FXN</i> gene)	X	MGL2	Molecular Genetics	261–262		X	D	Bacteriology	177
Fructosamine		FT	Fructosamine	79	Genomic copy number array		CYCGH	Constitutional Microarray Analysis	256
Fungal culture		CBT	Cord Blood Testing	239	Gentamicin	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60
		SCP	Stem Cell Processing	239			CZQ	Quality Cross Check, Chemistry and TDM	41
Fungal serology		FSER	Fungal Serology	197			LN3	TDM Cal Ver/Lin	125
Fungus identification	X	F	Mycology and Aerobic Actinomycetes	195	<i>Giardia</i>		GIP	Gastrointestinal Panel	212
	X	F1	Yeast	195			GIP5	Gastrointestinal Panel	212
	X	F3	<i>Candida</i> culture	196	<i>Giardia</i> immunoassay, preserved specimen	X	P, P3, P4, P5	Parasitology	198
<i>G6PD</i>		PGX1	Pharmacogenetics	264	Giemsia stain	X	BP	Blood Parasite	199
Gabapentin		DFC	Drug–Facilitated Crime	113		X	P	Parasitology	198
		DMPM	Drug Monitoring for Pain Management	112	Glioma by FISH		CYJ	Fluorescence In Situ Hybridization and Interpretation on Site, Brain/Glioma Tissue	255
		FTC	Forensic Toxicology, Criminalistics	109	Glucose		ABGIC	Accuracy-Based Glucose, Insulin, and C-Peptide	119
		T	Toxicology	100		X	AQ2, AQ4	Critical Care Blood Gas	96
		UT	Urine Toxicology	100			AQ2Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		ZE	Therapeutic Drug Monitoring, Extended	62		X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	58–60
Galactomannan		FGAL	Galactomannan	196			CZQ	Quality Cross Check, Chemistry and TDM	41
Gamma globulin		M, OL1	CSF Chemistry	78			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		SPE	Serum Electrophoresis	80			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Gamma glutamyl transferase (GGT)	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60	Gamma hydroxybutyrate (GHB)		DFC	Drug–Facilitated Crime	113
		CZQ	Quality Cross Check, Chemistry and TDM	41			FTC	Forensic Toxicology, Criminalistics	109
		IFS	Interfering Substances	137	<i>Gardnerella vaginalis</i>, DNA probe	X	VS	Vaginitis Screen	191
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124	Gastric occult blood		GOCB	Gastric Occult Blood	155
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124	Gastric pH		GOCB	Gastric Occult Blood	155
Gamma hydroxybutyrate (GHB)		DFC	Drug–Facilitated Crime	113	Gastrin	X	ING	Insulin, Gastrin, C-Peptide, PTH	90
		FTC	Forensic Toxicology, Criminalistics	109	Gaucher disease (<i>GBA</i> gene)	X	MGL4	Molecular Genetics	261–262
<i>Gardnerella vaginalis</i>, DNA probe	X	VS	Vaginitis Screen	191	GDH Antigen	X	CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188
Gastric occult blood		GOCB	Gastric Occult Blood	155					
Gastric pH		GOCB	Gastric Occult Blood	155	Glucose, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	78
Gastrin	X	ING	Insulin, Gastrin, C-Peptide, PTH	90	Glucose, urine	X	CMP, CMP1	Clinical Microscopy	151
Gaucher disease (<i>GBA</i> gene)	X	MGL4	Molecular Genetics	261–262			CMQ	Quality Cross Check, Urinalysis	46
GDH Antigen	X	CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	188		X	HCC2	Waived Combination	70
							LN6	Urine Chemistry Cal Ver/Lin	126
							POC3	POC Urine Dipstick Competency	54

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Glucose, vitreous fluid		VF	Vitreous Fluid, Postmortem	106
Glucose, whole blood	X	HCC	Waived Combination	70
		HCC2	Waived Combination	70
	X	LCW	Chemistry–Ltd, Waived	68
		LN17	Whole Blood Glucose Cal Ver/Lin	129
		POC2	POC Glucose Competency	54
		POC7	POC/Waived Glucose and Hemoglobin Competency	54
		WBGQ	Quality Cross Check, Whole Blood Glucose	41
Glucose-6-phosphate dehydrogenase, qualitative and quantitative		G6PDS	Glucose-6 Phosphate Dehydrogenase	79
Glutamic acid, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Glutamine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Glutaraldehyde, urine		DAI	Urine Drug Adulterant/ Integrity Testing	103
Glycated serum albumin		GSA	Glycated Serum Albumin	68
Glycine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Glycogen storage disease type Ia (G6PC gene)	X	MGL4	Molecular Genetics	261–262
Glycohemoglobin	X	GH2, GH5, GH5I	Hemoglobin A1 _c	67
		GHQ	Quality Cross Check, Hemoglobin A1 _c	42
		LN15	Hemoglobin A1 _c Cal Ver/Lin	128
Glycosaminoglycans (mucopolysaccharides)	X	BGL	Biochemical Genetics	257
Gram stain	X	D	Bacteriology	177
	X	D2, D3, RMC	Throat, Urine, GC Cultures	179–180
	X	D5	Gram Stain	181
		VGS1	Virtual Gram Stain Basic	183
		VGS2	Virtual Gram Stain Advanced	183
		VS2	Vaginitis Screen, Virtual Gram stain	193
Group A Streptococcus antigen detection	X	D	Bacteriology	177
	X	D6	Rapid Group A Strep	183

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	X	MC4	Urine Colony Count Combination	181
		POC4	POC Strep Screen Competency	54
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	X	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	LCW	Chemistry–Ltd, Waived	68
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
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		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44		X	HCC2	Waived Combination	70	
	X	FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141		X	HE, HEP	Basic Hematology	140	
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45			LN9	Hematology Cal Ver/Lin	127	
	X	HCC2	Waived Combination	70			POC7	POC/Waived Glucose and Hemoglobin Competency	54	
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		POC10, POC11	POC Competency Blood Gases	55		X	SO	Blood Oximetry	98	
		SCP	Stem Cell Processing	239			SOQ	Quality Cross Check, Blood Oximetry	44	
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Hematology peripheral blood case studies		EHE1	Expanded Virtual Peripheral Blood Smear	149	Hemoglobin, estimated	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96	
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Hemochromatosis (<i>HFE</i> gene)	X	MGL1	Molecular Genetics	261–262		POC10, POC11	POC Competency Blood Gases	55		
Hemocytometer fluid count	X	HFC, HFCI	Hemocytometer Fluid Count	156	Hemoglobin F quantitation	X	HG	Hemoglobinopathy	145	
Hemoglobin	X	FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141	Hemoglobin, plasma		PHG	Plasma Hemoglobin	80	
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45	Hemoglobin S/C	X	HGM	Hemoglobinopathies Genotyping	260	
						X	MGL2	Molecular Genetics	261–262	
					Hemoglobin, urine	X	CMP, CMP1	Clinical Microscopy	151	
							CMQ	Quality Cross Check, Urinalysis	46	
						X	HCC2	Waived Combination	70	
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					Heparin assay		CGS4	Coag Special, Series 4	167	
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					Heparin, unfractionated		LN36	Heparin Cal/Ver Lin	133	
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Hepatitis C virus	X	HCV2	Hepatitis Viral Load, Genotyping and Qualitative	205	Histotechnology quality improvement, cell block preparations		HQCLB	HistoQIP Cell Block Preparations	287
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HER2 by immunohistochemistry	X	HER2	HER2 by Immunohistochemistry	297	Histotechnology quality improvement, IHC		HQIHC	HistoQIP IHC	291
HER2 by molecular testing	X	MTP	Multigene Tumor Panel	277	Histotechnology quality improvement, mismatch repair IHC		HQMMR	HistoQIP Mismatch Repair IHC	294
HER2, gastric	X	GHER2	Gastric HER2	297	Histotechnology quality improvement, non-small cell lung carcinoma IHC		HQNSC	HistoQIP Non-small Cell Lung Carcinoma IHC	293
HER2 (ERBB2) gene amplification by FISH, hybridization and interpretation on site	X	CYH	FISH for ERBB2 (HER2) Amplification	255	Histotechnology quality improvement, ISH		HQISH	HistoQIP In Situ Hybridization (HPV/EBV)	291
HER2 (ERBB2) gene amplification by FISH, interpretation only		CYHI	FISH for ERBB2 (HER2) Amplification, Interpretation Only Exercise	296	Histotechnology quality improvement, melanoma IHC		HQMEL	HistoQIP Melanoma IHC	294
HER2 (ERBB2) gene amplification by ISH	X	ISH2	In Situ Hybridization	274	Histotechnology quality improvement, targeted therapy		HQTAR	HistoQIP Targeted Therapy	288
Herpes simplex virus (HSV)	X	HC4	HSV Culture	202	Histotechnology quality improvement, whole slide image		HQWSI	HistoQIP Whole Slide Image	288
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	X	ID5	HSV, Molecular	205			LN39	HIV Viral Load Cal Ver/ Lin	133
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	X	VR3	Antibody Detection–Infectious Disease Serology	213	HLA-A, -B, -C (class I/II) antibody identification	X	MXC, MXE	HLA Analysis, Class I/II	248
HHV6		ID1	Nucleic Acid Amp, Viruses	202	HLA-(class I/II) antibody screen		MXC, MXE	HLA Analysis, Class I/II	248
		IDME	Meningitis/Encephalitis Panel	209	HLA-(class I/II) crossmatching	X	MXC	HLA Analysis, Class I/II	248
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High-sensitivity C-reactive protein	X	HSCRP	hsCRP	68	HLA-B*58:01		DADR1	Disease Association, Drug Risk	251
		LN21	High-Sensitivity C-Reactive Protein Cal Ver/Lin	130	HLA-DQA1*03/DQB1*03:02		DADR2	Disease Association, Drug Risk	251
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		LN16	Homocysteine Cal Ver/ Lin	129	Human epididymis protein 4		HUEP	Human Epididymis Protein 4	93	
Homovanillic acid	X	N/NX	Urine Chemistry–Special	73	Human herpesvirus 6		ID1	Nucleic Acid Amp, Viruses	202	
HPV (cytopathology), high-risk	X	CHPVD	Digene Specimen Transport Medium	308			IDME	Meningitis/Encephalitis Panel	209	
	X	CHPVJ	Mixed Medium	308		X	IDM5	Meningitis/Encephalitis Panel	209	
	X	CHPVK	SurePath Preservative Fluid Transport Medium	308			VLS2	Viral Load	206	
	X	CHPVM	ThinPrep PreservCyt Transport Medium	308	Human herpesvirus 8		ID1	Nucleic Acid Amp, Viruses	202	
		HPV	Digene Hybrid Capture Technology Only	202	Human immuno-deficiency virus (HIV)		HIVG	HIV Genotyping	206	
	X	ISH	In Situ Hybridization	274		X	HV2	HIV Viral Load	206	
HSV	X	HC4	HSV Culture	202			LN39	HIV Viral Load Cal Ver/ Lin	133	
		ID1	Nucleic Acid Amp, Viruses	202	Human metapneumovirus		ID2	Nucleic Acid Amp, Respiratory	204	
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		IDME	Meningitis/Encephalitis Panel	209		X	IDR	Infectious Disease, Respiratory Panel	210	
	X	IDM5	Meningitis/Encephalitis Panel	209	Human papillomavirus (cytology) high-risk	X	CHPVD	Digene Specimen Transport Medium	308	
	X	VR1	Virology Culture	201		X	CHPVJ	Mixed Medium	308	
	X	VR2	Viral Antigen by DFA	201		X	CHPVK	SurePath Preservative Fluid Transport Medium	308	
	X	VR3	Antibody Detection–Infectious Disease Serology	213		X	CHPVM	ThinPrep PreservCyt Transport Medium	308	
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		CZQ	Quality Cross Check, Chemistry and TDM	41		X	ISH	In Situ Hybridization	274	
	X	FP/FPX, FP1T	Maternal Screen	91	Human papillomavirus (high-risk) for cytopathology genotyping		CHPVJ	Mixed Medium	308	
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		LN5S	Ligand Assay, Siemens Cal Ver/Lin	125		X	IDM5	Meningitis/Encephalitis Panel	209	
		LN8	Reproductive Endocrinology Cal Ver/ Lin	127	Huntington disease (<i>HTT</i> gene)	X	MGL2	Molecular Genetics	261–262	
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Human chorionic gonadotropin (hCG), urine	X	CMP, CMP1	Clinical Microscopy	151						
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	X	HCC2	Waived Combination	70						

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		T	Toxicology	100	
		UDC	Forensic Urine Drug Testing, Confirmatory	104	
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		UT	Urine Toxicology	100	
	Hydromorphone		DFC	Drug-Facilitated Crime	113
			DMPM	Drug Monitoring for Pain Management	112
		FTC	Forensic Toxicology, Criminalistics	109	
		OFD	Oral Fluid for Drugs of Abuse	105	
		T	Toxicology	100	
		UDC	Forensic Urine Drug Testing, Confirmatory	104	
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Hydroxybupropion		FTC	Forensic Toxicology, Criminalistics	109	
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		UT	Urine Toxicology	100	
Hydroxyzine		DFC	Drug-Facilitated Crime	113	
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		T	Toxicology	100	
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IDH2	X	GLI	Glioma	277	
IgA	X	IG/IGX	Immunology, General	216	
		LN7	Immunology Cal Ver/Lin	126	
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IgD		S2, S4	Immunology, Special	217	
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IgM	X	IG/IGX	Immunology, General	216
		LN7	Immunology Cal Ver/Lin	126
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		FH9, FH9P, FH17, FH17P	Hematology Automated Differential	141
Immature reticulocyte fraction (IRF)		FH9Q	Quality Cross Check - Hematology	45
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	X	GHER2	Gastric HER2	297
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		PM5	Immunohistochemistry TMA	295			LN20	Urine Albumin Cal Ver/Lin	130
	X	PM6	Anaplastic Lymphoma Kinase IHC	298			LN21	High-Sensitivity C-Reactive Protein Cal Ver/Lin	130
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	X	IMW	Infectious Mononucleosis, Waived	217			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
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	X	ID3	Nucleic Acid Amplification, Respiratory Limited	205			LN30	BNP Cal Ver/Lin	131
		ID3Q	Quality Cross Check–Nucleic Acid Amplification, Respiratory Limited	49			LN31	Immunosuppressive Drugs Cal Ver/Lin	132
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	X	VR1	Virology Culture	201			LN35	Thrombophilia Cal Ver/Lin	133
	X	VR2	Viral Antigen Detection by DFA	201			LN36	Heparin Cal Ver/Lin	133
	X	VR4	Viral Antigen Detection by EIA and Latex	201			LN37	von Willebrand Factor Ag Cal Ver/Lin	133
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		LN12	C-Reactive Protein Cal Ver/Lin	128			LN44	Fibrinogen Cal Ver/Lin	134
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		LN5S	Ligand Assay, Siemens Cal Ver/Lin	125
		LN6	Urine Chemistry Cal Ver/Lin	126
		LN7	Immunology Cal Ver/Lin	126
		LN8	Reproductive Endocrinology Cal Ver/Lin	127
		LN9	Hematology Cal Ver/Lin	127
	Insulin		ABGIC	Accuracy-Based Glucose, Insulin, and C-Peptide
X		ING	Insulin, Gastrin, C-Peptide, PTH	90
		LN46	C-Peptide/Insulin Cal Ver/Lin	135
Interferon (IFN) gamma		CTKN	Cytokines	220
Interleukin (IL)-1 beta		CTKN	Cytokines	220
International normalized ratio (INR)	X	CGB	Basic Coagulation	164
	X	CGL	Coagulation, Limited	164
		CGS1	Coag Special, Series 1	167
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		POC6	POC PT/INR, CoaguChek XS Plus	54
		WP10	Whole Blood Coagulation	172
	X	WP3, WP4, WP6, WP9	Whole Blood Coagulation	172
Ionized calcium	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		POC10, POC11	POC Competency Blood Gases	55
Iron	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124

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		S2, S4	Immunology, Special	217
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		UT	Urine Toxicology	100
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Ketones, urine	X	CMP, CMP1	Clinical Microscopy	151
		CMQ	Quality Cross Check, Urinalysis	46
	X	HCC2	Waived Combination	70
		POC3	POC Urine Dipstick Competency	54
Ki-67		KI67	Ki-67 Immunohistochemistry TMA	300
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Kidney stone risk assessment		KSA	Kidney Stone Risk Assessment	73
<i>Kingella kingae</i>		JIP	Joint Infection Panel	208
KIT	X	KIT	KIT/PDGFRA	276
	X	MTP	Multigene Tumor Panel	277
Klebsiella aerogenes	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
Klebsiella oxytoca	X	IDPN	Infectious Disease, Pneumonia Panel	211
Klebsiella pneumoniae group	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
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KOH prep (skin or vaginal)	X	FSM	Fungal Smear	197
KRAS	X	KRAS	Colorectal Cancer Mutation	276
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Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Lacosamide		ZE	Therapeutic Drug Monitoring, Extended	62	LDL cholesterol, measured	X	ABL	Accuracy-Based Lipid	116
Lactate	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96		X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44			CZQ	Quality Cross Check, Chemistry and TDM	41
	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58-60	LDL cholesterol, waived	X	LCW	Chemistry-Ltd, Waived	68
		CZQ	Quality Cross Check, Chemistry and TDM	41	Lead (blood)	X	BL	Blood Lead	107
		FLD	Body Fluid	76	Lead, urine		TMU	Trace Metals, Urine	108
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42	<i>Legionella pneumophila</i> antigen		LBAS	<i>Legionella</i> Ag	184
		LN13C	Blood Gas Cal Ver/Lin	128	<i>Legionella pneumophila</i>		IDN, IDO	Nucleic Acid Amp, Organisms	207
		POC10, POC11	POC Competency Blood Gases	55		X	IDPN	Infectious Disease, Pneumonia Panel	211
Lactate, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	78		X	IDR	Infectious Disease, Respiratory Panel	210
Lactate dehydrogenase (LD)	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58-60	Leucine quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		CZQ	Quality Cross Check, Chemistry and TDM	41	Leukemia/lymphoma immunophenotype		FL3	Flow Cytometry	224
		FLD	Body Fluid	76	Leukemia/lymphoma interpretation only		FL5	Flow Cytometry Interpretation Only	225
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42	Leukocyte esterase, urine	X	CMP, CMP1	Clinical Microscopy	151
		IFS	Interfering Substances	137			CMQ	Quality Cross Check, Urinalysis	46
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124		X	HCC2	Waived Combination	70
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124			POC3	POC Urine Dipstick Competency	54
		SCO	Serum Carryover	138	Leukocyte-reduced platelets		TRC	Transfusion-Related Cell Count	236
Lactate dehydrogenase (LD), CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	78	Leukocyte-reduced RBC		TRC	Transfusion-Related Cell Count	236
Lamellar body count		LBC	Lamellar Body Count	156	Leukocyte, stool, Wright-Giemsa		CMMP	Clinical Microscopy, Misc	152
Lamotrigine		FTC	Forensic Toxicology, Criminalistics	109	Levetiracetam		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100			T	Toxicology	100
		UT	Urine Toxicology	100			UT	Urine Toxicology	100
		ZE	Therapeutic Drug Monitoring, Extended	62			ZE	Therapeutic Drug Monitoring, Extended	62
Large unstained cells (LUC)		FH4, FH4P	Hematology Automated Differential	141	Levorphanol		T	Toxicology	100
		FH4Q	Quality Cross Check - Hematology	45			UT	Urine Toxicology	100
LD isoenzymes	X	CRTI, HCRTI	Cardiac Markers	64	Lidocaine	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60
LD1/LD2 ratio	X	CRTI, HCRTI	Cardiac Markers	64			CZQ	Quality Cross Check, Chemistry and TDM	41
LDL cholesterol, calculated	X	ABL	Accuracy-Based Lipid	116			FTC	Forensic Toxicology, Criminalistics	109
							LN3	TDM Cal Ver/Lin	125
							T	Toxicology	100
							UT	Urine Toxicology	100

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Lipase	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60	Lupus anticoagulant (screen, conf)		CGS1	Coag Special, Series 1	167
		CZQ	Quality Cross Check, Chemistry and TDM	41	Luteinizing hormone (LH)		ABS	Accuracy-Based Testosterone, Estradiol	117
		FLD2	Body Fluid Chemistry 2	77			LN8	Reproductive Endocrinology Cal Ver/Lin	127
		IFS	Interfering Substances	137		X	Y/YY	Sex Hormones	88
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124	Lysine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124	Lyme disease		TTD	Tick-Transmitted Disease	213
Lipids		ABL	Accuracy-Based Lipid	116	Lymphocyte immunophenotyping	X	FL, FL1	Flow Cytometry	224
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60	Lymphoma by FISH		CYL	Fluorescence In Situ Hybridization and Interpretation on Site, Lymphoma	255
		CZQ	Quality Cross Check, Chemistry and TDM	41	Lysergic acid diethylamide (LSD)		FTC	Forensic Toxicology, Criminalistics	109
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124			UDS, UDS6	Urine Drug Screen	102
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124	Magnesium	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
Lipoprotein (a)	X	ABL	Accuracy-Based Lipid	116			CZQ	Quality Cross Check, Chemistry and TDM	41
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60			IFS	Interfering Substances	137
		CZQ	Quality Cross Check, Chemistry and TDM	41			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
Lipoprotein-associated phospholipase		PLA	Lp-PLA ₂	79			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Lipoprotein electrophoresis		LPE	Lipoprotein Electrophoresis	80	Magnesium, ionized	X	AQ, AQ2	Critical Care Blood Gas	96
<i>Listeria monocytogenes</i>		IDME	Meningitis/Encephalitis Panel	209			AQQ, AQ2Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	IDM5	Meningitis/Encephalitis Panel	209			POC10, POC11	POC Competency Blood Gases	55
Lithium	X	C1, C3/C3X, CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60	Magnesium, urine	X	U	Urine Chemistry–General	72
		CZQ	Quality Cross Check, Chemistry and TDM	41	Malaria		RMAL	Rapid Malaria	199
		LN3	TDM Cal Ver/Lin	125	Manganese		R	Trace Metals	82
Liver-kidney microsomal antibody		LKM	Liver-Kidney Microsomal Antibody	221	Manganese, urine		TMU	Trace Metals, Urine	108
Lorazepam		DFC	Drug–Facilitated Crime	113	Manganese, whole blood		TMWB	Trace Metals, Whole Blood	108
		DMPM	Drug Monitoring for Pain Management	112	Mature B-cell leukemia/lymphoma minimal residual disease		FL8	Flow Cytometry Mature B-Cell Leukemia/Lymphoma Minimal Residual Disease	226
		FTC	Forensic Toxicology, Criminalistics	109	MCAD	X	IMD2	MCAD	262
		T	Toxicology	100					
		UDC	Forensic Urine Drug Testing, Confirmatory	104					
		UT	Urine Toxicology	100					

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MCH		FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141	Meperidine (cont.)		UDS, UDS6	Urine Drug Screen	102
							UT	Urine Toxicology	100
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45	Mephedrone		FTC	Forensic Toxicology, Criminalistics	109
							T	Toxicology	100
		HE, HEP	Basic Hematology	140			UT	Urine Toxicology	100
MCHC		FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141	Meprobamate/ Carisoprodol		UDS, UDS6	Urine Drug Screen	102
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45		Mercury, urine		TMU	Trace Metals, Urine
			HE, HEP	Basic Hematology	140		Mercury, whole blood		TMWB
					Metabolic disease testing			BGL	Biochemical Genetics
						Meta-chlorophenylpiperazine (m-CPP)		DFC	Drug-Facilitated Crime
								T	Toxicology
							UT	Urine Toxicology	100
					Metanephrine	X	N/NX	Urine Chemistry-Special	73
					Methadone		DFC	Drug-Facilitated Crime	113
							DMPM	Drug Monitoring for Pain Management	112
							FTC	Forensic Toxicology, Criminalistics	109
							OFD	Oral Fluid for Drugs of Abuse	105
							T	Toxicology	100
							UDC	Forensic Urine Drug Testing, Confirmatory	104
							UDS, UDS6	Urine Drug Screen	102
							UT	Urine Toxicology	100
					Methadone metabolite (EDDP)		DFC	Drug-Facilitated Crime	113
							DMPM	Drug Monitoring for Pain Management	112
							FTC	Forensic Toxicology, Criminalistics	109
							T	Toxicology	100
							UDC	Forensic Urine Drug Testing, Confirmatory	104
							UDS, UDS6	Urine Drug Screen	102
							UT	Urine Toxicology	100
					Methamphetamine		DFC	Drug-Facilitated Crime	113
							DMPM	Drug Monitoring for Pain Management	112
							T	Toxicology	100

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page	
Methamphetamine (cont.)		FTC	Forensic Toxicology, Criminalistics	109	Methylenedioxy-methamphetamine (MDMA)		DFC	Drug-Facilitated Crime	113	
		OFD	Oral Fluid for Drugs of Abuse	105			DMPM	Drug Monitoring for Pain Management	112	
		T	Toxicology	100			FTC	Forensic Toxicology, Criminalistics	109	
		UDC	Forensic Urine Drug Testing, Confirmatory	104			OFD	Oral Fluid for Drugs of Abuse	105	
		UDS, UDS6	Urine Drug Screen	102			T	Toxicology	100	
		UT	Urine Toxicology	100			UDC	Forensic Urine Drug Testing, Confirmatory	104	
Methanol	X	AL1	Whole Blood Alcohol/Volatiles	106			UDS, UDS6	Urine Drug Screen	102	
	X	AL2	Serum Alcohol/Volatiles	106			UT	Urine Toxicology	100	
Methaqualone		UDC	Forensic Urine Drug Testing, Confirmatory	104		Methylenedioxy-pyrovalerone (MDPV)		FTC	Forensic Toxicology, Criminalistics	109
		UDS, UDS6	Urine Drug Screen	102				T	Toxicology	100
Methemoglobin	X	SO	Blood Oximetry	98			UT	Urine Toxicology	100	
		SOQ	Quality Cross Check, Blood Oximetry	44		Methylenetetrahydrofolate reductase (MTHFR gene)	X	MGL1	Molecular Genetics	261-262
Methionine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258	Methylmalonic acid			MMA	MMA and Active B12	86
	Methicillin-resistant <i>Staphylococcus aureus</i> (MRSA)		BCS1	Blood Culture <i>Staphylococcus aureus</i>	185	Methylphenidate		FTC	Forensic Toxicology, Criminalistics	109
		IDN, IDO	Nucleic Acid Amp, Organisms	207			T	Toxicology	100	
		MRS	Methicillin-resistant <i>S. aureus</i> Screen	189			UT	Urine Toxicology	100	
		MRS2M	MRSA Screen, Molecular, 2 Challenge	189	Metoprolol		FTC	Forensic Toxicology, Criminalistics	109	
X		MRS5	Methicillin-resistant <i>S. aureus</i> Screen	189			T	Toxicology	100	
X		MRS5M	MRSA Screen, Molecular, 5 Challenge	189			UT	Urine Toxicology	100	
Methotrexate	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60	MGMT		GLI	Glioma	277	
		CZQ	Quality Cross Check, Chemistry and TDM	41	Microalbumin, urine		LN20	Urine AlbuminCal Ver/Lin	130	
Methylenedioxyamphetamine (MDA)		DFC	Drug-Facilitated Crime	113		X	U	Urine Chemistry-General	72	
		DMPM	Drug Monitoring for Pain Management	112		X	UMC	Urine Albumin (Microalbumin)/Creatinine	158	
		FTC	Forensic Toxicology, Criminalistics	109	Microarray, constitutional disorders		CYCGH	Constitutional Microarray Analysis	256	
		OFD	Oral Fluid for Drugs of Abuse	105	Microarray, neoplastic disorders		CYMA	Cytogenomic Microarray Analysis for Oncologic Abnormality	256	
		T	Toxicology	100	Microsatellite instability	X	MSI	Microsatellite Instability	274	
		UDC	Forensic Urine Drug Testing, Confirmatory	104	Microtiter plate reader linearity		I	Instrumentation	136	
Methylenedioxyethylamphetamine (MDEA)		UDC	Forensic Urine Drug Testing, Confirmatory	104	Midazolam		DFC	Drug-Facilitated Crime	113	
		UT	Urine Toxicology	100			FTC	Forensic Toxicology, Criminalistics	109	

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Minimal residual disease		BALL	B-ALL Minimal Residual Disease	226	Molecular HLA typing	X	DML	HLA Molecular Typing	248
		FL8	Flow Cytometry Mature B-Cell Leukemia/ Lymphoma Minimal Residual Disease	226	Molecular typing		IDN, IDO	Nucleic Acid Amp, Organisms	207
		FL9	Flow Cytometry Plasma Cell Myeloma Minimal Residual Disease	226	Monitoring engraftment	X	ME	Monitoring Engraftment	250
		MRD	Minimal Residual Disease, <i>BCR/ABL1</i> p210	279	Mononuclear cell count		CBT	Cord Blood Testing	239
		MRD1	Minimal Residual Disease, <i>BCR/ABL1</i> p190	279			SCP	Stem Cell Processing	239
		MRD2	Minimal Residual Disease, <i>PML/RARA</i>	279	Moraxella catarrhalis	X	IDPN	Infectious Disease, Pneumonia Panel	211
Mirtazapine		FTC	Forensic Toxicology, Criminalistics	109	<i>Morganella morganii</i>		JIP	Joint Infection Panel	208
		T	Toxicology	100	Morphine		DFC	Drug-Facilitated Crime	113
		UT	Urine Toxicology	100			DMPM	Drug Monitoring for Pain Management	112
Mite identification		TMO	Ticks, Mites, and Other Arthropods	199			FTC	Forensic Toxicology, Criminalistics	109
Mitochondrial cytopathies	X	IMD3	Mitochondrial Cytopathies	262			OFD	Oral Fluid for Drugs of Abuse	105
Mitochondrial DNA deletion syndromes	X	IMD1	Mitochondrial DNA Deletion Syndromes	262			T	Toxicology	100
Mitragynine (Kratom)		FTC	Forensic Toxicology, Criminalistics	109			UDC	Forensic Urine Drug Testing, Confirmatory	104
		T	Toxicology	100			UT	Urine Toxicology	100
		UT	Urine Toxicology	100	M-protein (paraprotein) identification	X	SPE	Protein Electrophoresis	80
Mixing studies, aPTT		CGE/CGEX	Coagulation, Extended	165	<i>MPL</i>		MH02, MH03	Molecular Hematologic Oncology	278
		CGS1	Coag Special, Series 1	167	Mpox virus detection		MPOX	Mpox Virus	203
Mixing studies, PT		CGE/CGEX	Coagulation, Extended	165	MPV		FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141
		CGS1	Coag Special, Series 1	167			FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45
<i>MLH1</i> promoter methylation analysis	X	MSI	Defective DNA Mismatch Repair/ Hereditary Nonpolyposis Colorectal Cancer (HNPCC)	274			HE, HEP	Basic Hematology	140
Modified acid-fast stain	X	P, P3, P4, P5	Parasitology	198	MRSA		BCS1	Blood Culture <i>Staphylococcus aureus</i>	185
Mold identification	X	F	Mycology and Aerobic Actinomycetes	195			IDN, IDO	Nucleic Acid Amp, Organisms	207
Molecular genetics	X	MGL1, MGL2, MGL3, MGL4, MGL5	Molecular Genetics	261-262			MRS	Methicillin-resistant <i>S. aureus</i> Screen	189
Molecular hematologic oncology	X	MHO, MH01, MH02, MH03	Molecular Hematologic Oncology	278			MRS2M	MRSA Screen, Molecular, 2 Challenge	189
		MH05	Molecular Hematologic Oncology	274, 278		X	MRS5	Methicillin-resistant <i>S. aureus</i> Screen	189
						X	MRS5M	MRSA Screen, Molecular, 5 Challenge	189
					Mucopolipidosis IV (<i>MCOLN1</i> gene)	X	MGL4	Molecular Genetics	261-262

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Mucopolysaccharide (Glycosaminoglycan)	X	BGL	Biochemical Genetics	257
Multiple endocrine neoplasia type 2 (<i>RET</i> gene)	X	MGL3	Molecular Genetics	261–262
Mumps-IgG		VR3M	Virology	213
Mycobacterial culture	X	E1	Mycobacteriology, Ltd	194
Mycobacterial identification	X	E	Mycobacteriology	194
<i>Mycobacterium tuberculosis</i>		IDO	Nucleic Acid Amp, Organisms	207
<i>Mycobacterium tuberculosis</i> antibody detection		QF	<i>M. tuberculosis</i> Infection Detection	221
<i>Mycobacterium tuberculosis</i> identification and resistance detection		MTBR	Molecular MTB Detection and Resistance	194
		MTR5	Molecular MTB Detection and Resistance, 5 challenge	194
Mycophenolic acid	X	MPA	Mycophenolic Acid	62
<i>Mycoplasma genitalium</i>		MGEN	<i>Mycoplasma genitalium</i> , Molecular	192
<i>Mycoplasma pneumoniae</i>		IDN, IDO	Nucleic Acid Amp, Organisms	207
	X	IDPN	Infectious Disease, Pneumonia Panel	211
	X	IDR	Infectious Disease, Respiratory Panel	210
		VR3	Antibody Detection–Infectious Disease Serology	213
Myoglobin	X	CRT, CRTI, HCRT, HCRTI	Cardiac Markers	64
		CRTQ	Quality Cross Check, Cardiac Markers	42
		LN33	Serum Myoglobin Cal Ver/Lin	132
	X	PCARM/PCARMX	Point-of-Care Cardiac Markers	69
		POC12	POC Cardiac Markers Competency	55
Myoglobin, urine		MYG	Myoglobin, Urine	73
Myotonic dystrophy (<i>DMPK</i> gene)	X	MGL2	Molecular Genetics	261–262
N-acetylprocainamide (NAPA)	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
N-desmethyltramadol		DMPM	Drug Monitoring for Pain Management	112
		FTC	Forensic Toxicology, Criminalistics	109

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		UT	Urine Toxicology	100
Naproxen		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Nasal smears, eosinophil		CMMP	Clinical Microscopy, Misc	152
<i>Neisseria gonorrhoeae</i>	X	D3	GC Cultures	179
	X	HC6/HC6X	<i>C. trachomatis</i> /GC by Nucleic Acid Amp	192
	X	HC7	<i>C. trachomatis</i> /GC DNA by NAA	192
		JIP	Joint Infection Panel	208
	X	RMC	Routine Microbiology Combination	180
<i>Neisseria meningitidis</i>		IDME	Meningitis/Encephalitis Panel	209
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Neoplastic cellularity		NEO	Neoplastic Cellularity	275
Neuropathology		NP/NP1	Neuropathology Program	304
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		NGS	NGS–Germline	266
		NGSB1	NGS Solid Tumor Bioinformatics	267
		NGSB3	NGS Hematologic Malignancies Bioinformatics	269
		NGSB4	NGS Solid Tumor Bioinformatics Hybrid	268
		NGSB5	NGS Hematologic Malignancies Bioinformatics Hybrid	270
		NGSE	NGS Undiagnosed Disorders–Exome	271
		NGSET	NGS Undiagnosed Disorders–Trio Analysis	272
	X	NGSHM	NGS, Hematologic Malignancies	266
	X	NGSST	NGS, Solid Tumor	266
		TMB	Tumor Mutational Burden	273
Nicotine		NTA	Nicotine and Tobacco Alkaloids	107
Niemann-Pick type A/B (<i>SMPD1</i> gene)	X	MGL4	Molecular Genetics	261–262
NIPT		NIPT	Noninvasive Prenatal Testing	92

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Nitrite, urine	X	CMP, CMP1	Clinical Microscopy	151	Nordiazepam (cont.)		T	Toxicology	100	
		CMQ	Quality Cross Check, Urinalysis	46			UDC	Forensic Urine Drug Testing, Confirmatory	104	
	DAI	Urine Drug Adulterant/ Integrity Testing	103	UT			Urine Toxicology	100		
	X	HCC2	Waived Combination	70			Nordoxepin	DFC	Drug-Facilitated Crime	113
		POC3	POC Urine Dipstick Competency	54			FTC	Forensic Toxicology, Criminalistics	109	
Nitrogen, urine; total		U	Urine Chemistry-General	72	T	Toxicology	100			
Nongynecologic cytopathology		FNA/FNA1	Fine-Needle Aspiration, Digital	311	UT	Urine Toxicology	100			
		FNAG/ FNAG1	Fine-Needle Aspiration, Glass	312	Norepinephrine	X	N/NX	Urine Chemistry-Special	73	
		NGC/NGC1	Nongynecologic Cytopathology Education Program	310	Norfentanyl	DFC	Drug-Facilitated Crime	113		
Non HDL Cholesterol, calculated		ABL	Accuracy-Based Lipid	116	DMPM	Drug Monitoring for Pain Management	112			
Noninvasive prenatal testing		NIPT	Noninvasive Prenatal Testing	92	FTC	Forensic Toxicology, Criminalistics	109			
Norbuprenorphine		DFC	Drug-Facilitated Crime	113	OFD	Oral Fluid for Drugs of Abuse	105			
			DMPM	Drug Monitoring for Pain Management	112	T	Toxicology	100		
			UT	Urine Toxicology	100	UDC	Forensic Urine Drug Testing, Confirmatory	104		
			FTC	Forensic Toxicology, Criminalistics	109	UT	Urine Toxicology	100		
			OFD	Oral Fluid for Drugs of Abuse	105	Norflouxetine	DFC	Drug-Facilitated Crime	113	
Norchlordiazepoxide		FTC	Forensic Toxicology, Criminalistics	109	FTC	Forensic Toxicology, Criminalistics	109			
			T	Toxicology	100	T	Toxicology	100		
			UT	Urine Toxicology	100	UT	Urine Toxicology	100		
			UT	Urine Toxicology	100	Norhydrocodone	DMPM	Drug Monitoring for Pain Management	112	
			UT	Urine Toxicology	100	Norketamine	DFC	Drug-Facilitated Crime	113	
Norclomipramine		FTC	Forensic Toxicology, Criminalistics	109	FTC	Forensic Toxicology, Criminalistics	109			
			T	Toxicology	100	T	Toxicology	100		
			UT	Urine Toxicology	100	UT	Urine Toxicology	100		
Norcodeine		FTC	Forensic Toxicology, Criminalistics	109	UT	Urine Toxicology	100			
			T	Toxicology	100	T	Toxicology	100		
			UT	Urine Toxicology	100	UT	Urine Toxicology	100		
Norcyclobenzaprine		FTC	Forensic Toxicology, Criminalistics	109	UT	Urine Toxicology	100			
			T	Toxicology	100	Normeperidine	DFC	Drug-Facilitated Crime	113	
			UT	Urine Toxicology	100	DMPM	Drug Monitoring for Pain Management	112		
Nordiazepam		DMPM	Drug Monitoring for Pain Management	112	FTC	Forensic Toxicology, Criminalistics	109			
			FTC	Forensic Toxicology, Criminalistics	109	T	Toxicology	100		
			OFD	Oral Fluid for Drugs of Abuse	105	UT	Urine Toxicology	100		
Norflouxetine		DFC	Drug-Facilitated Crime	113	UT	Urine Toxicology	100			
			FTC	Forensic Toxicology, Criminalistics	109	Normetaneprhine	X	N/NX	Urine Chemistry-Special	73
			T	Toxicology	100	Normirtazapine	FTC	Forensic Toxicology, Criminalistics	109	
Norhydrocodone		DMPM	Drug Monitoring for Pain Management	112	T	Toxicology	100			
			FTC	Forensic Toxicology, Criminalistics	109	UT	Urine Toxicology	100		
			T	Toxicology	100	Nornaloxone	T	Toxicology	100	
Norketamine		DFC	Drug-Facilitated Crime	113	UT	Urine Toxicology	100			
			FTC	Forensic Toxicology, Criminalistics	109	Norovirus		GIP	Gastrointestinal Panel	212
			T	Toxicology	100	X	GIP5	Gastrointestinal Panel	212	
Normetaneprhine		N/NX	Urine Chemistry-Special	73	SP1	Stool Pathogens	190			
			FTC	Forensic Toxicology, Criminalistics	109					
			T	Toxicology	100					
Normirtazapine		FTC	Forensic Toxicology, Criminalistics	109						
			T	Toxicology	100					
			UT	Urine Toxicology	100					
Nornaloxone		T	Toxicology	100						
			UT	Urine Toxicology	100					
			UT	Urine Toxicology	100					
Norovirus		GIP	Gastrointestinal Panel	212						
			X	GIP5	Gastrointestinal Panel	212				
				SP1	Stool Pathogens	190				

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Noroxycodone		DMPM	Drug Monitoring for Pain Management	112
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Noroxymorphone		DMPM	Drug Monitoring for Pain Management	112
Norpropoxyphene		DFC	Drug-Facilitated Crime	113
		DMPM	Drug Monitoring for Pain Management	112
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UDC	Forensic Urine Drug Testing, Confirmatory	104
		UT	Urine Toxicology	100
Norserttraline		DFC	Drug-Facilitated Crime	113
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
Nortrimipramine		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Nortriptyline		DFC	Drug-Facilitated Crime	113
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
	X	ZT	TDM, Special	62
Norvenlafaxine		DFC	Drug-Facilitated Crime	113
Norverapamil		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Novel opioids and benzodiazepines		NOB	Novel Opioids and Benzodiazepines	110
NRAS	X	MTP	Multigene Tumor Panel	277
nRBC		FH3, FH9, FH13, FH16, FH17, FH3P, FH9P, FH13P, FH16P, FH17P	Hematology Automated Differential	141
		FH3Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45
		BMV6	Differential	90
		X BU	Bone and Mineral, Urine	89

Analyte/Procedure	LAP ENR	Program Code	Description	Page
NT-pro B-type natriuretic peptides		BNP	B-Type Natriuretic Peptides, 2 Chall	63
		X BNP5	B-Type Natriuretic Peptides, 5 Chall	63
		BNPQ	Quality Cross Check, B-Type Natriuretic Peptides	41
		LN30	BNP Cal Ver/Lin	131
	X	PCARM/PCARMX	Point-of-Care Cardiac Markers	69
Nucleated cells, total		ABF3	Automated Body Fluid	153
		CBT	Cord Blood Testing	239
		SCP	Stem Cell Processing	239
Nucleated red blood cell count		FH3, FH9, FH13, FH16, FH17, FH3P, FH9P, FH13P, FH16P, FH17P	Hematology Automated Differential	141
		FH3Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45
Nucleated red cells, total		CBT	Cord Blood Testing	239
Nucleic acid amplification	X	HBVL, HBVL5, HCV2	Hepatitis Viral Load	205
	X	HC6/HC6X	<i>C. trachomatis</i> /GC by Nucleic Acid Amp	192
	X	HC7	<i>C. trachomatis</i> /GC DNA by NAA	192
	X	HIVG, HV2	HIV Viral Load	206
		ID1, ID1T	Nucleic Acid Amp, Viruses	202
		ID2	Nucleic Acid Amp, Respiratory	204
	X	ID3	Nucleic Acid Amplification, Respiratory Limited	205
		ID3Q	Quality Cross Check-Nucleic Acid Amplification, Respiratory Limited	49
		IDN, IDO	Nucleic Acid Amp, Organisms	207
		MRS2M	MRSA Screen, Molecular, 2 Challenge	189
	X	MRS5M	MRSA Screen, Molecular, 5 Challenge	189
		SP, SPN, SP1	Stool Pathogens	190
		VLS, VLS2	Viral Load	206
		VRE	Vancomycin-Resistant <i>Enterococcus</i>	193

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Nucleic acid testing	X	NAT	Nucleic Acid Testing	244	Osmolality, urine (cont.)		LN6	Urine Chemistry Cal Ver/Lin	126
<i>NUDT15</i>		PGX3	Pharmacogenetics	264			POC3	POC Urine Dipstick Competency	54
Nugent scoring		VS2	Vaginitis Screen, Virtual Gram Stain	193		X	U	Urine Chemistry–General	72
Occult blood		OCB	Occult Blood	157	Osmometer check		I	Instrumentation	136
		OCBQ	Quality Cross Check, Occult Blood	47	Osteocalcin		BGS	Bone and Growth	89
		POC9	POC Fecal Occult Blood	54	Oxalate		KSA	Kidney Stone Risk Assessment	73
Occult blood, gastric		GOCB	Gastric Occult Blood	155	Oxazepam		DFC	Drug–Facilitated Crime	113
Ocular micrometer check		I	Instrumentation	136			DMPM	Drug Monitoring for Pain Management	112
O-desmethyltramadol		DFC	Drug–Facilitated Crime	113			FTC	Forensic Toxicology, Criminalistics	109
		DMPM	Drug Monitoring for Pain Management	112			OFD	Oral Fluid for Drugs of Abuse	105
		FTC	Forensic Toxicology, Criminalistics	109			T	Toxicology	100
		T	Toxicology	100			UDC	Forensic Urine Drug Testing, Confirmatory	104
		UT	Urine Toxicology	100			UT	Urine Toxicology	100
Olanzapine		FTC	Forensic Toxicology, Criminalistics	109	Oxcarbazepine		ZE	Therapeutic Drug Monitoring, Extended	62
		T	Toxicology	100	Oxcarbazepine metabolite		ZE	Therapeutic Drug Monitoring, Extended	62
		UT	Urine Toxicology	100	Oxidants, urine		DAI	Urine Drug Adulterant/ Integrity Testing	103
Oligoclonal bands		OLI	Oligoclonal Bands	78	Oxycodone		DFC	Drug–Facilitated Crime	113
Opiate group		DMPM	Drug Monitoring for Pain Management	112			DMPM	Drug Monitoring for Pain Management	112
		OFD	Oral Fluid for Drugs of Abuse	105			FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100			OFD	Oral Fluid for Drugs of Abuse	105
		UDS, UDS6	Urine Drug Screen	102			T	Toxicology	100
		UT	Urine Toxicology	100			UDC	Forensic Urine Drug Testing, Confirmatory	104
		UTCO	Urine Toxicology Carryover	138			UDS, UDS6	Urine Drug Screen	102
<i>OPRM1</i>		PGX1	Pharmacogenetics	264			UT	Urine Toxicology	100
Organic acids, urine, qualitative	X	BGL	Biochemical Genetics	257	Oxyhemoglobin	X	SO	Blood Oximetry	98
Organic acids, urine, quantitative		BGL	Biochemical Genetics	257			SOQ	Quality Cross Check, Blood Oximetry	44
Ornithine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258	Oxymorphone		DFC	Drug–Facilitated Crime	113
Osmolality, measured	X	C3/C3X, CZ/ CZX/CZ2X	Chemistry and TDM	58–60			DMPM	Drug Monitoring for Pain Management	112
		CZQ	Quality Cross Check, Chemistry and TDM	41			FTC	Forensic Toxicology, Criminalistics	109
		IFS	Interfering Substances	137			OFD	Oral Fluid for Drugs of Abuse	105
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124			T	Toxicology	100
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124			UDC	Forensic Urine Drug Testing, Confirmatory	104
Osmolality, urine	X	CMP, CMP1	Clinical Microscopy	151			UT	Urine Toxicology	100
		CMQ	Quality Cross Check, Urinalysis	46					

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
p16		P16	P16 Immuno-histochemistry TMA	300	Pentobarbital		DFC	Drug-Facilitated Crime	113
p53		P53	p53 Immuno-histochemistry TMA	296			FTC	Forensic Toxicology, Criminalistics	109
p2PSA		K/KK	Ligand-General	86			T	Toxicology	100
Pancreatic amylase	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58-60			UT	Urine Toxicology	100
		CZQ	Quality Cross Check, Chemistry and TDM	41	<i>Peptoniphilus</i> spp.		JIP	Joint Infection Panel	208
PAPP-A		FP1B	First Trimester Maternal Screening, Free Beta	91	<i>Peptostreptococcus anaerobius</i>		JIP	Joint Infection Panel	208
		FP1T	First Trimester Maternal Screening, Total hCG	91	Performance improvement program in surgical pathology		PIP/PIP1, PIPW/ PIPW1	Performance Improvement Program in Surgical Pathology	282-283
Parainfluenza virus		ID2	Nucleic Acid Amp, Respiratory	204	Peripheral blood cell identification		EHE1	Expanded Virtual Peripheral Blood Smear	149
	X	IDPN	Infectious Disease, Pneumonia Panel	211	Peripheral blood smear, virtual		VPBS	Virtual Peripheral Blood Smear	149
	X	IDR	Infectious Disease, Respiratory Panel	210	pH		AFL	Amniotic Fluid Leakage	153
	X	VR1	Virology Culture	201		X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96
	X	VR2	Viral Antigen Detection by DFA	201			AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
Paraprotein identification	X	SPE	Protein Electrophoresis	80			FLD	Body Fluid	76
Parasite identification	X	BP	Blood Parasite	199			FLDQ	Quality Cross Check, Body Fluid Chemistry	42
	X	P, P3, P4, P5	Parasitology	198			GOCB	Gastric Occult Blood	155
		PEX	Expanded Parasitology	199			LN13, LN13C	Blood Gas Cal Ver/Lin	128
Parathyroid hormone (PTH)	X	ING	Insulin, Gastrin, C-Peptide, PTH	90			POC10, POC11	POC Competency Blood Gases	55
		PTHQ	Quality Cross Check, PTH	43	pH, gastric		GOCB	Gastric Occult Blood	155
Parentage/relationship testing	X	PARF	Parentage/Relationship	245	pH interpretation		AFL	Amniotic Fluid Leakage	153
Paroxetine		DFC	Drug-Facilitated Crime	113	pH meters		I	Instrumentation	136
		FTC	Forensic Toxicology, Criminalistics	109	pH, urine	X	CMP, CMP1	Clinical Microscopy	151
		T	Toxicology	100			CMQ	Quality Cross Check, Urinalysis	46
		UT	Urine Toxicology	100			DAI	Urine Drug Adulterant/ Integrity Testing	103
<i>Parvimonas micra</i>		JIP	Joint Infection Panel	208		X	HCC2	Waived Combination	70
Parvovirus B19		ID1	Nucleic Acid Amp, Viruses	202			POC3	POC Urine Dipstick Competency	54
pCO₂	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96			UDC	Forensic Urine Drug Testing, Confirmatory	104
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44	Phencyclidine		DFC	Drug-Facilitated Crime	113
		LN13, LN13C	Blood Gas Cal Ver/Lin	128			FTC	Forensic Toxicology, Criminalistics	109
		POC10, POC11	POC Competency Blood Gases	55			OFD	Oral Fluid for Drugs of Abuse	105
PDGFRA	X	KIT	KIT/PDGFRA	276			T	Toxicology	100
	X	MTP	Multigene Tumor Panel	277			UDC	Forensic Urine Drug Testing, Confirmatory	104
PD-L1		PDL1	PD-L1 Immunohistochemistry	299			UDS, UDS6	Urine Drug Screen	102
							UT	Urine Toxicology	100

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Phenethylamine		FTC	Forensic Toxicology, Criminalistics	109	Phosphorus (cont.)		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
Pheniramine		FTC	Forensic Toxicology, Criminalistics	109			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
		T	Toxicology	100					
		UT	Urine Toxicology	100	Phosphorus, urine		LN6	Urine Chemistry Cal Ver/Lin	126
Phenobarbital	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	58–60		X	U	Urine Chemistry–General	72
		CZQ	Quality Cross Check, Chemistry and TDM	41	PIK3CA	X	MTP	Multigene Tumor Panel	277
		DFC	Drug–Facilitated Crime	113	Pinworm prep	X	CMMP	Clinical Microscopy, Misc	152
		DMPM	Drug Monitoring for Pain Management	112	Pipette calibration-gravimetric		I	Instrumentation	136
		FTC	Forensic Toxicology, Criminalistics	109	Plasma cell myeloma, minimal residual disease		FL9	Flow Cytometry Plasma Cell Myeloma Minimal Residual Disease	226
		LN3	TDM Cal Ver/Lin	125	Plasma cell neoplasms		PCNEO	Flow Cytometry, Plasma Cell Neoplasms	227
		T	Toxicology	100	Plasma hemoglobin		PHG	Plasma Hemoglobin	80
		UDC	Forensic Urine Drug Testing, Confirmatory	104	Plasminogen activator inhibitor		CGE/CGEX	Coagulation, Extended	165
		UT	Urine Toxicology	100	Plasminogen activator inhibitor (PAI)-1 (SERPINE1 gene)		MGL1	Molecular Genetics	261–262
Phentermine		FTC	Forensic Toxicology, Criminalistics	109	Plasminogen antigen		CGE/CGEX	Coagulation, Extended	165
		T	Toxicology	100	Platelet aggregation		PF	Platelet Function	170
		UT	Urine Toxicology	100	Platelet antibody detection	X	PS	Platelet Serology	237
Phenylalanine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258	Platelet calculator		TRC	Transfusion-Related Cell Count	236
Phenylephrine		FTC	Forensic Toxicology, Criminalistics	109	Platelet count	X	FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141
		T	Toxicology	100			FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45
		UT	Urine Toxicology	100		X	HE, HEP	Basic Hematology	140
Phenytoin	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	58–60			LN9	Hematology Cal Ver/Lin	127
		CZQ	Quality Cross Check, Chemistry and TDM	41	Platelet count (estimated)		EHE1	Expanded Virtual Peripheral Blood Smear	149
		DFC	Drug–Facilitated Crime	113			VPBS	Virtual Peripheral Blood Smear	149
		FTC	Forensic Toxicology, Criminalistics	109	Platelet count (platelet-rich plasma)	X	TRC	Transfusion-Related Cell Count	236
		LN3	TDM Cal Ver/Lin	125	Platelet crossmatch		PS	Platelet Serology	237
		SCO	Serum Carryover	138	Platelet function		PF1	Platelet Function	170
		T	Toxicology	100					
		UT	Urine Toxicology	100					
Phenytoin, free	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	58–60					
		CZQ	Quality Cross Check, Chemistry and TDM	41					
Phosphorus	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	58–60					
		CZQ	Quality Cross Check, Chemistry and TDM	41					
		IFS	Interfering Substances	137					

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Platelet mapping		PLTM	Platelet Mapping	173
<i>Plesiomonas shigelloides</i>		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel	212
PML/RARA	X	MHO2, MHO3	Molecular Hematologic Oncology	278
		MRD2	Minimal Residual Disease	279
<i>Pneumocystis</i> detection		PCP1	<i>Pneumocystis jirovecii</i> , Calcofluor White Stain	197
		PCP2	<i>Pneumocystis jirovecii</i> , DFA Stain	197
		PCP4	<i>Pneumocystis jirovecii</i> , GMS Stain	197
PNH immunophenotype		PNH	Paroxysmal Nocturnal Hemoglobinuria, RBC	227
pO ₂	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
		LN13, LN13C	Blood Gas Cal Ver/Lin	128
		POC10, POC11	POC Competency Blood Gases	55
Porphobilinogen, urine		UPBG	Porphobilinogen, Urine	74
Posaconazole		AFD	Antifungal Drugs Monitoring	111
Post-immunotherapy analysis, flow cytometry		FL6	Post-Immunotherapy Flow Analysis	225
Postanalytical DNA sequencing		SEC	DNA Sequencing Count	263
Postvasectomy sperm count, automated		PV1	Postvasectomy Sperm Count	160
Postvasectomy sperm count, manual	X	PV	Postvasectomy Sperm Count	160
Postvasectomy sperm presence/absence, manual	X	PV	Postvasectomy Sperm Count	160
Potassium	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44
	X	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	77
		IFS	Interfering Substances	137
		LN13C	Blood Gas Cal Ver/Lin	128
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Potassium (cont.)		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
		POC10, POC11	POC Competency Blood Gases	55
Potassium, urine		LN6	Urine Chemistry Cal Ver/Lin	126
	X	U	Urine Chemistry-General	72
Potassium, vitreous fluid		VF	Vitreous Fluid, Postmortem	106
Prader-Willi/Angelman syndrome	X	MGL1	Molecular Genetics	261-262
Prealbumin (transthyretin)	X	C3/C3X, CZ/ CZX/CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	S2, S4	Immunology, Special	217
Predictive markers by immunohistochemistry	X	GHER2	Gastric HER2	297
	X	HER2	HER2 by Immunohistochemistry	297
		PM1	CD117 by Immunohistochemistry	295
	X	PM2	ER, PgR by Immunohistochemistry	297
		PM3	CD20 by Immunohistochemistry	298
		PM5	Immunohistochemistry TMA	295
	X	PM6	Anaplastic Lymphoma Kinase IHC	298
Pregabalin		DMPM	Drug Monitoring for Pain Management	112
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
		ZE	Therapeutic Drug Monitoring, Extended	62
Prekallikrein		CGE/CGEX	Coagulation, Extended	165
Primidone	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
Pro B-type natriuretic peptides		BNP	B-Type Natriuretic Peptides, 2 Chall	63
	X	BNP5	B-Type Natriuretic Peptides, 5 Chall	63
		BNPQ	Quality Cross Check, B-Type Natriuretic Peptides	41
	X	PCARM/ PCARMX	Point-of-Care Cardiac Markers	69

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Procainamide	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60	Protein S		CGE/CGEX	Coagulation, Extended	165
		CZQ	Quality Cross Check, Chemistry and TDM	41			CGS2	Coag Special, Series 2	167
Procalcitonin		LN41	Procalcitonin Cal Ver/Lin	134	Protein, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	78
	X	PCT	Procalcitonin	81			Protein, total	X	C1, C3/C3X, CZ/CZX/CZ2X
Progesterone		LN8	Reproductive Endocrinology Cal Ver/Lin	127					CZQ
	X	Y/YY	Sex Hormones	88			FLD	Body Fluid	76
Progesterone receptors by immunohistochemistry		PM2	ER, PgR by Immunohistochemistry	297			FLDQ	Quality Cross Check, Body Fluid Chemistry	42
		LN8	Reproductive Endocrinology Cal Ver/Lin	127			IFS	Interfering Substances	137
Prolactin		LN8	Reproductive Endocrinology Cal Ver/Lin	127			LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
	X	Y/YY	Sex Hormones	88			LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
Proline, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258			SPE	Lipoprotein and Protein Electrophoresis	80
		DFC	Drug–Facilitated Crime	113	Protein, urine		ABU	Accuracy-Based Urine	117
Promethazine		DFC	Drug–Facilitated Crime	113		X	CMP, CMP1	Clinical Microscopy	151
		DMPM	Drug Monitoring for Pain Management	112			CMQ	Quality Cross Check, Urinalysis	46
Propoxyphene		FTC	Forensic Toxicology, Criminalistics	109			DSC	Dipstick Confirmatory	155
		T	Toxicology	100		X	HCC2	Waived Combination	70
		UDC	Forensic Urine Drug Testing, Confirmatory	104			LN6	Urine Chemistry Cal Ver/Lin	126
		UDS, UDS6	Urine Drug Screen	102			POC3	POC Urine Dipstick Competency	54
		UT	Urine Toxicology	100		X	U	Urine Chemistry–General	72
		FTC	Forensic Toxicology, Criminalistics	109	Proteus spp.	X	IDPN	Infectious Disease, Pneumonia Panel	211
Propranolol		T	Toxicology	100			JIP	Joint Infection Panel	208
		UT	Urine Toxicology	100	Prothrombin mutation (F2 gene)	X	MGL1	Molecular Genetics	261–262
Prostate-specific antigen (PSA)		ABS	Accuracy-Based Testosterone, Estradiol	117		X	TPM	Thrombophilia Mutations	265
	X	K/KK	Ligand–General	86	Prothrombin time		APXBN	Anticoagulant Monitoring, Apixaban	168
	LN23	PSA Cal Ver/Lin	130			X	CGB	Basic Coagulation	164
Prostate-specific antigen, complexed (cPSA)	X	K/KK	Ligand–General	86		X	CGL	Coagulation, Limited	164
	X	K/KK	Ligand–General	86			CGLQ	Quality Cross Check, Coagulation, Limited	48
Prostatic acid phosphatase (PAP)	X	K/KK	Ligand–General	86			CGS1	Coag Special, Series 1	167
		CGE/CGEX	Coagulation, Extended	165			CGS2	Coag Special, Series 2	167
Protein C		CGS2	Coag Special, Series 2	167			LN35	Thrombophilia Cal Ver/Lin	133
		LN35	Thrombophilia Cal Ver/Lin	133			DBGN	Anticoagulant Monitoring, Dabigatran	168
Protein, confirmatory urine		DSC	Dipstick Confirmatory	155			FNPX	Anticoagulant Monitoring, Fondaparinux	168
		SPE	Protein Electrophoresis	80			POC6	POC PT/INR, CoaguChek XS Plus	54

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Prothrombin time (cont.)		RVBN	Anticoagulant Monitoring Rivaroxaban	168
	X	WP3, WP4, WP6, WP9	Whole Blood Coagulation	172
Prothrombin time, dilute		CGE/CGEX	Coagulation, Extended	165
Provider-performed microscopy		CMMP	Clinical Microscopy, Misc	152
PRU test		PIA/PIAX	Drug-Specific Platelet Aggregation	171
Pseudocholesterase	X	C7	Pseudocholesterase	81
Pseudoephedrine		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Pseudomonas aeruginosa	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
Quality Management Tools		QP231	Non-Physician Care Team Satisfaction With Clinical Laboratory Services	27
		QPB10	Technical Competency Assessment of Body Fluid Review	28
		QPC10, QPC25	Technical Competency Assessment of Peripheral Blood Smears	29
		QPD10, QPD25	Technical Competency Assessment of Gram Stains	30
		QT1	Patient Identification Accuracy	32
		QT10	Critical Values Reporting	36
		QT15	TATs of Troponin	37
		QT16	Corrected Results	38
		QT17	Outpatient Order Entry Errors	38
		QT2	Blood Culture Contamination	32
		QT3	Laboratory Specimen Acceptability	33
		QT4	In-Date Blood Product Wastage	33
		QT5	Gynecologic Cytology Outcomes: Biopsy Correlation Performance	34
		QT7	Satisfaction With Outpatient Specimen Collection	35
		QT8	Stat Test TAT Outliers	35

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Quetiapine		DFC	Drug-Facilitated Crime	113
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
Quinidine	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
Quinine		FTC	Forensic Toxicology, Criminalistics	109
Ranitidine		FTC	Forensic Toxicology, Criminalistics	109
Rapamycin (sirolimus)	X	CS	Immunosuppressive Drugs	61
Rapid group A strep	X	D	Bacteriology	177
	X	D6	Rapid Group A Strep	183
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RBC count		ABF1, ABF2, ABF3	Automated Body Fluid	153
	X	FH1-FH4, FH9, FH10, FH13, FH16, FH17, FH1P-FH4P, FH9P, FH10P, FH13P, FH16P, FH17P	Hematology Automated Differential	141
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45
	X	HE, HEP	Basic Hematology	140
		LN9	Hematology Cal Ver/Lin	127
RBC count, automated, urine (quantitative)		UAA, UAA1	Automated Urinalysis	154
RBC folate	X	FOL	RBC Folate	92
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							RTQ, RT3Q, RT4Q	Quality Cross Check, Reticulocyte	46
					Reticulocyte count, percent		LN18, LN19	Reticulocyte Cal Ver/Lin	129
						X	RT, RT2, RT3, RT4	Reticulocyte	146
		FH3Q, FH4Q, FH9Q, FH13Q	Quality Cross Check, Automated Hematology Series	45			RTQ, RT3Q, RT4Q	Quality Cross Check, Reticulocyte	46
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Red blood cell antigen detection		J, J1	Transfusion Medicine	230	Reticulocyte hemoglobin concentration (CHR)		RT3	Reticulocyte	146
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Red blood cell antigen typing		RBCAT	Red Blood Cell Antigen Typing	234	Rett syndrome (<i>MECP2</i> gene) duplication deletion analysis	X	RETT	Rett Syndrome Genotyping	264
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		CMQ	Quality Cross Check, Urinalysis	46	RhD typing		ABOSG	ABO Subgroup typing	234
		HCC2	Waived Combination	70		X	J, J1	Transfusion Medicine	230
		POC3	POC Urine Dipstick Competency	54		X	JAT	Transfusion Medicine, Automated	231
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	X	ID3	Nucleic Acid Amplification, Respiratory Limited	205	Rheumatoid factor, quantitative	X	IL, RF/RFX	Immunology	216
		ID3Q	Quality Cross Check–Nucleic Acid Amplification, Respiratory Limited	49	Rhinovirus		ID2	Nucleic Acid Amp, Respiratory	204
	X	IDPN	Infectious Disease, Pneumonia Panel	211		X	IDR	Infectious Disease, Respiratory Panel	210
	X	IDR	Infectious Disease, Respiratory Panel	210	Rhinovirus/enterovirus	X	IDPN	Infectious Disease, Pneumonia Panel	211
	X	VR1	Virology Culture	201	Rifampin Resistance		MTBR	Molecular MTB Detection and Resistance	194
	X	VR2	Viral Antigen Detection by DFA	201			MTR5	Molecular MTB Detection and Resistance, 5 Challenge	194
	X	VR4	Virology Antigen Detection by EIA and Latex	201	Ritalinic acid		FTC	Forensic Toxicology, Criminalistics	109
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	X	GIP5	Gastrointestinal Panel	212			COV2Q	Quality Cross Check, SARS-CoV-2 Molecular	49
		SP, SPN	Stool Pathogens	190			COVAG	SARS-CoV-2 Antigen	203
	X	VR4	Viral Antigen Detection by EIA and Latex	201			COVAQ	Quality Cross Check, SARS-CoV-2 Antigen	49
RSV		ID2	Nucleic Acid Amp, Respiratory	204			COVS	SARS-CoV-2 Serology	222
	X	ID3	Nucleic Acid Amplification, Respiratory Limited	205			COVSQ	Quality Cross Check, SARS-CoV-2 Serology	50
		ID3Q	Quality Cross Check–Nucleic Acid Amplification, Respiratory Limited	49			ID3	Nucleic Acid Amplification, Respiratory Limited	205
	X	IDPN	Infectious Disease, Pneumonia Panel	211			ID3Q	Quality Cross Check–Nucleic Acid Amplification, Respiratory Limited	49
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	X	VR2	Viral Antigen Detection by DFA	201	Scopolamine		DFC	Drug–Facilitated Crime	113
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Salicylate	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58–60		X	SMCD	Semen Analysis, Online	160
		CZQ	Quality Cross Check, Chemistry and TDM	41			SM1CD, SM2CD	Semen Analysis, Online	160
		FTC	Forensic Toxicology, Criminalistics	109	Serine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		LN3	TDM Cal Ver/Lin	125	<i>SERPINA1</i> genotyping	X	AAT	Alpha-1 Antitrypsin Genotyping	259
	X	SDS	Serum Drug Screen	106	<i>Serratia marcescens</i>	X	IDPN	Infectious Disease, Pneumonia Panel	211
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		JIP	Joint Infection Panel	208			UT	Urine Toxicology	100
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		GIP5	Gastrointestinal Panel	212		X	SC1	Semen Analysis	160
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	X	GIP5	Gastrointestinal Panel	212		X	SC	Semen Analysis	160
Sickle cell screen, qualitative	X	HG	Hemoglobinopathy	145	Sperm morphology		SM	Semen Analysis	160
	X	SCS	Sickle Cell Screen	147			SM1CD	Semen Analysis, Online	160
Sirolimus (Rapamycin)	X	CS	Immunosuppressive Drugs	61	Sperm motility		SMCD	Semen Analysis, Online	160
<i>SLC01B1</i>		PGX	Pharmacogenetics	264	Sperm presence/absence		SC	Semen Analysis	160
Sodium	X	AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96	Sperm presence/absence, postvasectomy, manual	X	PV	Semen Analysis	160
		AQQ, AQ2Q, AQ3Q, AQ4Q	Quality Cross Check, Critical Care Aqueous Blood Gas Series	44	Sperm presence/absence, vaginal		CMMP	Clinical Microscopy, Misc	152
	X	C1, C3/C3X, C4, CZ/CZX/ CZ2X	Chemistry and TDM	58–60	Sperm viability		SM2CD	Semen Analysis, Online	160
		CZQ	Quality Cross Check, Chemistry and TDM	41		X	SV	Semen Analysis	160
		FLD2	Body Fluid Chemistry 2	77	Spinal fluid meningitis panel	X	D	Bacteriology	177
		IFS	Interfering Substances	137	Spinal muscular atrophy (<i>SMN1</i> and <i>SMN2</i> genes)	X	MGL2	Molecular Genetics	261–262
		LN13C	Blood Gas Cal Ver/Lin	128	Spinocerebellar ataxia (<i>ATXN1</i> , <i>ATXN2</i> , <i>ATXN3</i> , <i>CACNA1A</i> , and <i>ATXN7</i> genes)	X	MGL2	Molecular Genetics	261–262
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124	Split fats		FCFS	Fecal Fat	79
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		POC10, POC11	POC Competency Blood Gases	55			JIP	Joint Infection Panel	208
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	X	U	Urine Chemistry–General	72	<i>Staphylococcus lugdunensis</i>		JIP	Joint Infection Panel	208
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Somatomedin C (IGF-1)	X	Y, YY	Sex Hormones	88	Strep screen		POC4	POC/Waived Strep Screen Competency	54
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		CMQ	Quality Cross Check, Urinalysis	46			IDME	Meningitis/Encephalitis Panel	209
		DAI	Urine Drug Adulterant/ Integrity Testing	103		X	IDM5	Meningitis/Encephalitis Panel	209
	X	HCC2	Waived Combination	70		X	IDPN	Infectious Disease, Pneumonia Panel	211
		POC3	POC Urine Dipstick Competency	54			JIP	Joint Infection Panel	208
		UDC	Forensic Urine Drug Testing, Confirmatory	104	Streptococcus pneumoniae		IDME	Meningitis/Encephalitis Panel	209
						X	IDM5	Meningitis/Encephalitis Panel	209
						X	IDPN	Infectious Disease, Pneumonia Panel	211

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	X	D6	Rapid Group A Strep	183
	X	D9	Rapid Group A Strep, Waived	183
	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
	X	MC4	Urine Colony Count Combination	181
	X	RMC	Routine Microbiology Combination	180
Strychnine		FTC	Forensic Toxicology, Criminalistics	109
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T3, free (triiodothyronine)		ABTH	Harmonized Thyroid	118
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand–General	86
T3, total (triiodothyronine)		ABTH	Harmonized Thyroid	118
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand–General	86
	LN5	Ligand Assay Cal Ver/Lin	125	
	LN5S	Ligand Assay, Siemens Cal Ver/Lin	125	
T3, uptake and related tests	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand–General	86

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T4, free (thyroxine)		ABTH	Harmonized Thyroid	118
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand–General	86
T4, total (thyroxine)		ABTH	Harmonized Thyroid	118
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand–General	86
	LN5	Ligand Assay Cal Ver/Lin	125	
	LN5S	Ligand Assay, Siemens Cal Ver/Lin	125	
T-cell subsets analysis		FL7	Flow Cytometry, T-Cell Subsets Analysis	225
Tacrolimus	X	CS	Immunosuppressive Drugs	61
		LN31	Immunosuppressive Drugs Cal Ver/Lin	132
Tapentadol		DFC	Drug–Facilitated Crime	113
		DMPM	Drug Monitoring for Pain Management	112
		T	Toxicology	100
		UT	Urine Toxicology	100
	FTC	Forensic Toxicology, Criminalistics	109	
Tapentadol-O-sulfate		DMPM	Drug Monitoring for Pain Management	112
Taurine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Tay-Sachs (HEXA gene)	X	MGL4	Molecular Genetics	261–262
tCO2		AQ, AQ2, AQ3, AQ4	Critical Care Blood Gas	96
Temazepam		DFC	Drug–Facilitated Crime	113
		DMPM	Drug Monitoring for Pain Management	112
		FTC	Forensic Toxicology, Criminalistics	109
		OFD	Oral Fluid for Drugs of Abuse	105
	T	Toxicology	100	
	UDC	Forensic Urine Drug Testing, Confirmatory	104	
	UT	Urine Toxicology	100	
Teriflunomide		ZE	Therapeutic Drug Monitoring, Extended	62

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Testosterone		ABS	Accuracy-Based Testosterone and Estradiol	117
		LN8	Reproductive Endocrinology Cal Ver/Lin	127
	X	Y/YY	Sex Hormones	88
Testosterone, bioavailable, measured		DY	Sex Hormones	88
Testosterone, free, measured		DY	Sex Hormones	88
Tetrahydrozoline		DFC	Drug-Facilitated Crime	113
Thallium, urine		TMU	Trace Metals, Urine	108
Thallium, whole blood		TMWB	Trace Metals, Whole Blood	108
Theophylline	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	125
Threonine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Throat culture	X	D1	Throat	179
	X	MC4	Urine Colony Count Combination	181
	X	RMC	Routine Microbiology Combination	180
Thrombin time		CGE/CGEX	Coagulation, Extended	165
		CGS4	Coag Special, Series 4	167
		DBGN	Dabigatran	168
		ECF	Expanded Coagulation Factors	166
Thrombophilia mutations	X	TPM	Thrombophilia Mutations	265
Thyroglobulin	X	TM/TMX	Tumor Markers	93
Thyroid-stimulating hormone (TSH)		ABS	Accuracy-Based Testosterone and Estradiol	117
		ABTH	Harmonized Thyroid	118
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand-General	86
		LN5	Ligand Assay Cal Ver/Lin	125
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	125
Thyroxine (T4), free		ABTH	Harmonized Thyroid	118
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58-60

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Thyroxine (T4), free (cont.)		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand-General	86
Thyroxine (T4), total		ABTH	Harmonized Thyroid	118
	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
	X	K/KK	Ligand-General	86
		LN5	Ligand Assay Cal Ver/Lin	125
		LN5S	Ligand Assay, Siemens Cal Ver/Lin	125
Tick identification		TMO	Ticks, Mites, and Other Arthropods	199
Tissue parasite identification	X	BP	Blood Parasite	199
	X	P	Parasitology	198
		PEX	Expanded Parasitology	199
Tobramycin	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		LN3	TDM Cal Ver/Lin	125
Topiramate		DFC	Drug-Facilitated Crime	113
		FTC	Forensic Toxicology, Criminalistics	109
		T	Toxicology	100
		UT	Urine Toxicology	100
		ZE	Therapeutic Drug Monitoring, Extended	62
Total bile acids		TBLA	Total Bile Acid	82
Total bilirubin	X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	58-60
		CZQ	Quality Cross Check, Chemistry and TDM	41
		FLD2	Body Fluid Chemistry 2	77
		IFS	Interfering Substances	137
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124
	X	NB, NB2	Neonatal Bilirubin	69
Total bilirubin, urine	X	CMP, CMP1	Clinical Microscopy	151
		DSC	Dipstick Confirmatory	155
	X	HCC2	Waived Combination	70
Total free fatty acids		FCFS	Fecal Fat	79
Total hCG	X	FP1T	First Trimester Maternal Screening, Total hCG	91

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Total hemolytic complement		CH50	Total Hemolytic Complement	223	Toxicology, urine, qualitative/quantitative	X	DMPM	Drug Monitoring for Pain Management	112
Total iron binding capacity, measured	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60		X	UDC	Forensic Urine Drug Testing, Confirmatory	104
		CZQ	Quality Cross Check, Chemistry and TDM	41	<i>Toxoplasma gondii</i>	X	VR3	Antibody Detection–Infectious Disease Serology	213
Total nitrogen, urine		U	Urine Chemistry–General	72	<i>TPMT</i>		PGX3	Pharmacogenetics	264
Total nucleated cells		CBT	Cord Blood Testing	239	Tramadol		DFC	Drug–Facilitated Crime	113
		SCP	Stem Cell Processing	239			DMPM	Drug Monitoring for Pain Management	112
Total nucleated cells manual differential count (body fluid)		HFC/HFCI	Hemocytometer Fluid Count	156			FTC	Forensic Toxicology, Criminalistics	109
		VBF	Virtual Body Fluid	154			T	Toxicology	100
Total nucleated cells (WBC) automated count (body fluid)		ABF1, ABF2, ABF3	Automated Body Fluid	153			UDS, UDS6	Urine Drug Screen	102
Total protein	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60			UT	Urine Toxicology	100
		CZQ	Quality Cross Check, Chemistry and TDM	41	Transferrin	X	C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	58–60
		FLD	Body Fluid	76			CZQ	Quality Cross Check, Chemistry and TDM	41
		FLDQ	Quality Cross Check, Body Fluid Chemistry	42			LN7	Immunology Cal Ver/Lin	126
		IFS	Interfering Substances	137		X	S2, S4	Immunology, Special	217
		LN2	Chemistry, Lipid, Enzyme Cal Ver/Lin	124	Transfusion medicine		ETME1	Expanded Transfusion Medicine Exercises	241
		LN2BV	Chemistry, Lipid, Enzyme all Beckman except AU, Vitros Cal Ver/Lin	124			EXM, EXM2	Electronic Crossmatch	231, 233
		SPE	Protein Electrophoresis	80		X	J, J1	Transfusion Medicine	230
Total protein, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	78		X	JAT	Transfusion Medicine, Automated	231
Total protein, urine	X	CMP, CMP1	Clinical Microscopy	151			JATE1	Transfusion Medicine, Automated, Educational	231
		CMQ	Quality Cross Check, Urinalysis	46			JE1	Transfusion Medicine, Educational	230
	X	HCC2	Waived Combination	70			TMCA	Transfusion Medicine, Competency Assessment	237
		LN6	Urine Chemistry Cal Ver/Lin	126			TMCAD	Transfusion Medicine, Competency Assessment	237
	X	U	Urine Chemistry–General	72			TMCAE	Transfusion Medicine, Competency Assessment	237
Total tricyclics	X	SDS	Serum Drug Screen	106			TMCAF	Transfusion Medicine, Competency Assessment	238
	X	ZT	TDM, Special	62		X	TRC	Transfusion-Related Cell Count	236
Touch imprint/crush prep		TICP, TICP1	Touch Imprint/Crush Prep	309	Trazodone		FTC	Forensic Toxicology, Criminalistics	109
Toxicology, serum, qualitative	X	SDS	Serum Drug Screen	106			T	Toxicology	100
	X	T	Toxicology	100			UT	Urine Toxicology	100
Toxicology, urine, qualitative	X	DMPM	Drug Monitoring for Pain Management	112	<i>Treponema pallidum</i>	X	G	Syphilis Serology	222
	X	T	Toxicology	100			UDS, UDS6	Urine Drug Screen	102
	X	UDS, UDS6	Urine Drug Screen	102			UT	Urine Toxicology	100
	X	UT	Urine Toxicology	100					

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<i>Trichomonas vaginalis</i>		MVP	Molecular Vaginal Panel	192	Troponin I, serum	X	CRT, CRTI	Cardiac Markers	64
		TVAG	<i>Trichomonas vaginalis</i> , Molecular	193			CRTQ	Quality Cross Check, Cardiac Markers	42
	X	VS, VS1	Vaginitis Screen	191			LN25	Troponin I Cal Ver/Lin	131
Tricyclic group		T	Toxicology	100	Troponin I, high sensitivity, serum	X	HCRT, HCRTI	Cardiac Markers	64
		UDS, UDS6	Urine Drug Screen	102			LN48	High-Sensitivity Troponin I Cal Ver/Lin	135
		UT	Urine Toxicology	100	Troponin T, serum	X	CRT, CRTI	Cardiac Markers	64
Tricyclics, total	X	SDS	Serum Drug Screen	106			LN27	Troponin T Cal Ver/Lin	131
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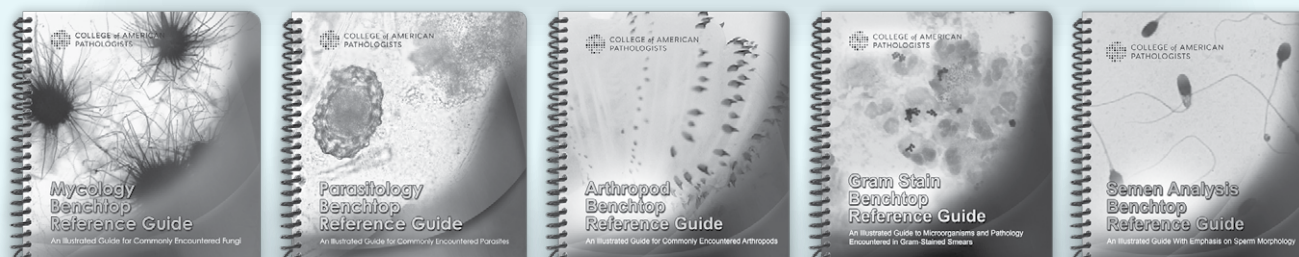
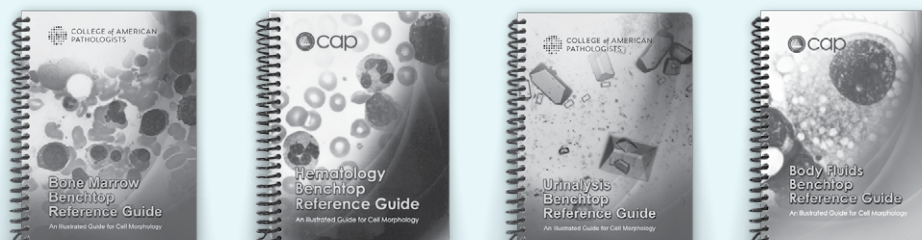
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LN20*	130	MMR	299	OLI*	78	PM5	295
LN21*	130	MPA	62	P*	198	PM6	298
LN22*	130	MPOX	203	P3*	198	PNH*	227
LN23*	130	MRD	279	P4*	198	POC1	54
LN24*	131	MRD1	279	P5*	198	POC2	54

*Program Codes are ISO 17043 accredited.

Program Code	Pg	Program Code	Pg	Program Code	Pg	Program Code	Pg
POC3	54	RHCW*	243	SPN*	190	VBP1	284
POC4	54	RMAL*	199	ST*	191	VES*	170
POC6	54	RMC*	180	STFR*	84	VES1*	170
POC7	54	RNA	276	SV*	160	VF*	106
POC8	54	ROM1*	157	SW1*	83	VGS1*	183
POC9	54	RT*	146	SW2*	83	VGS2*	183
POC10	55	RT2*	146	SW4*	83	VITD*	88
POC11	55	RT3*	146	T*	100	VLS*	206
POC12	55	RT3Q*	46	TBLA*	82	VLS2*	206
POC14	56	RT4*	146	THCB*	111	VM1*	242
POC15	56	RT4Q*	46	TICP	309	VM2*	242
POC16	56	RTQ*	46	TICP1	309	VM3*	242
PS*	237	RUB*	216	TM*	93	VM4*	243
PTHQ*	43	RUBX*	216	TMB	273	VM5*	243
PV*	160	RUR*	190	TMCA	237	VM6*	243
PV1*	160	RVBN*	168	TMCAD	237	VM6X*	243
QF*	221	RWBC*	145	TMCAE	237	VPBS*	149
QP231	27	S2*	217	TMCAF	238	VR1*	201
QPB10	28	S4*	217	TMO*	199	VR2*	201
QPC10	29	S5*	217	TMU*	108	VR3*	213
QPC25	29	SALC*	81	TMWB*	108	VR3M*	213
QPD10	30	SARC	275	TMX*	93	VR4*	201
QPD25	30	SBAS*	184	TPM	265	VRE*	193
QT1	32	SC*	160	TRC*	236	VS*	191
QT2	32	SC1*	160	TTD*	213	VS1*	191
QT3	33	SCDD*	110	TVAG*	193	VS2*	193
QT4	33	SCM1*	157	U*	72	WBCR*	71
QT5	34	SCM2*	157	UAA*	154	WBGQ*	41
QT7	35	SCO	138	UAA1*	154	WID*	199
QT8	35	SCP*	239	UBJP*	80	WP3*	172
QT10	36	SCS*	147	UDC*	104	WP4*	172
QT15	37	SDS	106	UDS*	102	WP6*	172
QT16	38	SE*	221	UDS6*	102	WP9*	172
QT17	38	SEC	263	UDSM	114	WP10*	172
R*	82	SEC1	263	UHCG*	158	Y*	88
RAG*	234	SFLC*	223	UMC*	158	YBC*	196
RAP*	93	SM*	160	UPBG*	74	YVM	94
RBCAT*	234	SM1CD*	160	URC*	155	YY*	88
RDS*	221	SM2CD*	160	UT*	100	Z*	58-60
RETT	264	SMCD*	160	UTCO	138	ZAP70*	228
RF*	216	SO*	98	UVM	74	ZE*	62
RFAV1	228	SOQ*	44	V*	223	ZT*	62
RFAV2	228	SP*	190	VBDM*	206		
RFAV3	228	SP1*	190	VBF*	154		
RFX*	216	SPE*	80	VBP	284		

*Program Codes are ISO 17043 accredited.

Accreditation to ISO 17043:2010 for proficiency testing

The **College of American Pathologists (CAP)**, the leading organization of board-certified pathologists, serves patients, pathologists, and the public by fostering and advocating excellence in the practice of pathology and laboratory medicine worldwide.

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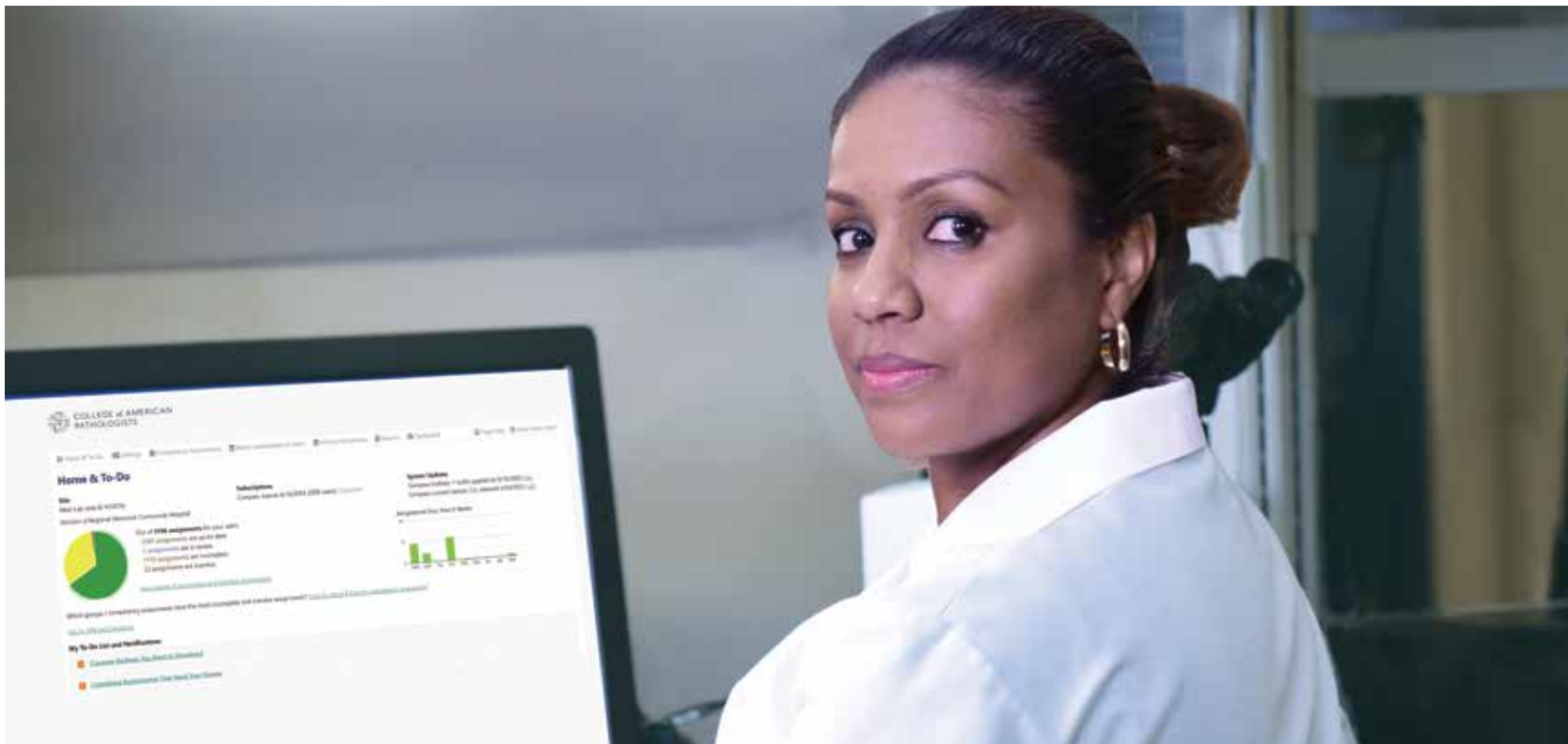
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