



COLLEGE of AMERICAN
PATHOLOGISTS
Laboratory Quality Solutions

Surveys and Anatomic Pathology Education Programs



Performance
you can measure.



Accuracy
you can trust.

2025

Your Dedication, Our Gratitude— Supporting Patients' Every Step

A patient's journey can certainly feel daunting; it's riddled with unknowns at every turn, and often requires the efforts of an entire health care ecosystem. It takes so many distinct roles and responsibilities to ensure the best outcomes for patients, and some of those—by their very definition—tend to be more front and center than others.

But we feel quite comfortable saying that medical laboratory professionals are essential to the foundation of that ecosystem. Without you doing what you do, the whole journey could take a wrong turn. The accuracy of your work has a monumental impact on the overall health care system operating as smoothly as it should.

Moreover, we honor you and the care you take with every laboratory sample that helps shine a light on an otherwise intimidating path. We stand with you and the more than 23,000 laboratories worldwide that count on the CAP's PT/EQA programs to maintain high-quality, accurate patient testing.

The CAP also builds on its foundation of pathologist expertise by partnering with the 28 committees on our Council of Scientific Affairs to provide programs that promote excellence in the practice of pathology and laboratory medicine.

Together, let's continue our support for the patients and always strive for the best possible outcomes.



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Let us help you meet the new proficiency testing requirements.



You can count on the College of American Pathologists to guide you through CLIA's first major update to its proficiency testing requirements in more than 30 years.

- The CAP has reconfigured our PT/EQA programs where needed to meet the new participation requirements.
- For returning PT/EQA customers, we'll pre-populate your order forms during the order renewal process with the recommended programs based on your history.
- In our participant summaries, you'll find detailed information on the newly regulated analytes, revised grading criteria and acceptance limits, and all other critical changes.
- Your evaluation reports are always personalized with your laboratory's results, peer group statistics, and normalized results as the standard deviation index (SDI) to help you troubleshoot and identify bias, shifts, or trends.
- For CAP-accredited laboratories, PT enrollment will be audited in early 2025 to ensure your laboratory meets requirements.

See all the new CMS regulated analytes for 2025 on page 4.

Stay current with regulatory updates.





We anticipate your needs because laboratory quality drives everything we do.

The CAP aligns to the updated CMS PT participation requirements, supporting laboratories that are subject to CLIA regulations and those that are CAP accredited.

Also new for 2025:

- Gastrointestinal panel created specifically for laboratories outside the US (GIPN)
- New program exclusively formulated to test proficiency of parathyroid hormone level (PTH)
- Linearity test covering a comprehensive range of thyroid analytes (LN50)

New Developments

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New 2025 CMS Regulated Analytes

Prepare your laboratory for the upcoming changes in CLIA proficiency testing (PT) regulations, which will be implemented on January 1, 2025. Refer to the table below to review the new 2025 regulated analytes established by the Centers for Medicare & Medicaid Services (CMS) that meet all updated CLIA requirements.

New 2025 CMS Regulated Analytes

Analyte	Program Code	Discipline	Page
Acetaminophen	CZ/CZX/CZ2X, Z	Chemistry	54-56
Anti-HBs	VM1	Transfusion Medicine	243
Anti-HCV	VM1	Transfusion Medicine	243
Bacterial toxin detection	D, CDF5, GIP5	Microbiology	177, 187, 212
B-type natriuretic peptide (BNP)	BNP5, PCARM/PCARMX	Chemistry	59, 64
Cancer antigen (CA) 125	K/KK	Endocrinology	82
Carcinoembryonic antigen (CEA)	K/KK	Endocrinology	82
Cholesterol, LDL	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry	54-56
CO ₂	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry	54-56
C-reactive protein (high-sensitivity)	HSCRIP	Chemistry	63
Estradiol	Y/YY	Endocrinology	84
Ferritin	C1, C3/C3X, CZ/CZX/CZ2X, K/KK	Chemistry	54-56, 82
Folate, serum	K/KK	Endocrinology	82
Follicle stimulating hormone (FSH)	Y/YY	Endocrinology	84
Fungal antigen	F, F1, CRYP	Microbiology	194, 195
Fungal identification, molecular	MVP, VS, IDM5	Microbiology	191, 190, 209
Gamma glutamyl transferase (GGT)	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry	54-56
Gram stain morphology	D, D2, D3, D5, RMC	Microbiology	177, 179, 180
Hemoglobin A1c	GH5, GH5I	Chemistry	62, 63
Luteinizing hormone (LH)	Y/YY	Endocrinology	84
Mycobacterial identification, molecular	MTR5	Microbiology	193
Parasite antigen	P, P3, P4, P5, RML5	Microbiology	197, 198
Parasite identification, molecular	GIP5, TVG5, VS, STIM, MVP	Microbiology	212, 197, 190, 191
Parathyroid hormone (PTH)	PTH	Endocrinology	86
Phosphorus	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry	54-56
Pro B-natriuretic peptide (pro-BNP)	BNP5, PCARM/PCARMX	Chemistry	59, 64
Progesterone	Y/YY	Endocrinology	84
Prolactin	Y/YY	Endocrinology	84
Prostate specific antigen (PSA), total	K/KK	Endocrinology	82
Salicylate	CZ/CZX/CZ2X, Z	Chemistry	54-56
tCO ₂	AQ, AQH, AQIS	Blood Gas	92, 93
Testosterone	Y/YY	Endocrinology	84
Total, iron-binding capacity (TIBC), direct measurement	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry	54-56
Troponin I	CRT, CRTI, PCARM/PCARMX	Chemistry	60, 64
Troponin T	NONE* High-sensitivity troponin T available	Chemistry	60
Vancomycin	CZ/CZX/CZ2X, Z	Chemistry	54-56
Vitamin B ₁₂	K/KK	Endocrinology	82

* Conventional troponin T not available

2025 New Programs

Quality Management Tools

Subsection	Name	Program Code	Page
Quality Management Tools	Laboratory Staffing Ratios	QP251	25

General Chemistry and Therapeutic Drug Monitoring

Subsection	Name	Program Code	Page
General Chemistry and Therapeutic Drug Monitoring	Waived Hemoglobin	HCC1	65

Endocrinology

Subsection	Name	Program Code	Page
Endocrinology	Parathyroid Hormone	PTH	86

Instrumentation Verification Tools

Subsection	Name	Program Code	Page
Calibration Verification/Linearity	Thyroid Panel Calibration Verification/Linearity	LN50	136
Calibration Verification/Linearity	Factor VIII Calibration Verification/Linearity	LN51	133
Calibration Verification/Linearity	HBV Viral Load Calibration Verification/Linearity	LN52	133

Microbiology

Subsection	Name	Program Code	Page
Parasitology	<i>Trichomonas vaginalis</i> , Molecular, 5 Challenge	TVG5	197
Parasitology	Rapid Malaria, 5 Challenge	RML5	198
Multidiscipline Microbiology	Gastrointestinal Panel, Global	GIPN	213

Transfusion Medicine, Viral Markers, and Parentage Testing

Subsection	Name	Program Code	Page
Transfusion Medicine	Transfusion Medicine With Electronic Crossmatch	JXM	232
Transfusion Medicine	Transfusion Medicine—Automated With Electronic Crossmatch	JATXM	233

Histocompatibility

Subsection	Name	Program Code	Page
Histocompatibility	HLA Antibody Screen (Class I/Class II) Only	MXS	248
Histocompatibility	HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II), Extra Plasma	MXEP	248

Anatomic Pathology

Subsection	Name	Program Code	Page
Surgical Pathology	CAP/NSH HistoQIP Pediatric Program	HQPED	288

2024 New Programs

Name	Program Code	Page
Quality Management Tools		
Technical Competency Assessment of Body Fluid Review for up to 25 Technologists, now called Assessment of Consistency of Body Fluid Morphologic Observations for up to 25 Technologists	QPB25	26
Quality Cross Check		
Quality Cross Check—High-Sensitivity Cardiac Markers	HCRQ	39
Quality Cross Check—Critical Care Blood Gas With Hematocrit	AQHQ	42
Quality Cross Check—Critical Care Blood Gas, i-STAT	AQSQ	42
General Chemistry and Therapeutic Drug Monitoring		
<i>H. pylori</i> Breath Test	HPBT	75
Blood Gas, Critical Care, and Oximetry		
Critical Care Blood Gas With Hematocrit	AQH	92
Critical Care Blood Gas, i-STAT	AQIS	93
Instrumentation Verification Tools		
Cystatin C Calibration Verification/Linearity	LN49	135
Hematology and Clinical Microscopy		
Blood Cell Identification, Virtual	BCPV	142
Microbiology		
Sexually Transmitted Infection Detection, Molecular	STIM	191
Mpox Molecular	MPOX	202
SARS-CoV-2 Molecular, 5 Challenge	COVM	203
SARS-CoV-2 Antigen, 5 Challenge	CVAG	203
Genetics and Molecular Pathology		
CAP/ACMG Acylcarnitine Quantitation for Inherited Metabolic Disorders	BGL4	259
Anatomic Pathology		
HER2 and ER Immunohistochemistry Interpretation Only	HERI	298
Navigating Multimodality Biomarker Assessment	NMBA/NMB1	300



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

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Discontinued Programs

Informatics Essentials for Pathologists (ICBE/ICBE1)

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.

These activities are 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) 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 online 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	54-56
Blood Gas	AQ, AQH, AQIS	Chemistry	92-93
Endocrinology	K/KK	Chemistry	82
Sex Hormones	Y/YY	Chemistry	84
Quality Cross Check—Whole Blood Glucose	WBGQ	Chemistry/Quality Cross Check	37
Coagulation—Limited	CGB, CGDF, CGL	Coagulation	166
Blood Cell Identification, Photographs Blood Cell Identification, Virtual	BCP, BCPV	Hematology and Clinical Microscopy	142
Bone Marrow Cell Differential	BMD	Hematology and Clinical Microscopy	145
Hematology Automated Differential Series	FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology and Clinical Microscopy	140
Hematology—Basic	HE	Hematology and Clinical Microscopy	140
Virtual Body Fluid	VBF	Hematology and Clinical Microscopy	154
Immunology	ANA, ASO, CRP, HCG, IM, RF/RFX, RUB/RUBX, IL, IG/IGX, S2, S4, S5, AHT, CCP, RDS, G	Immunology and Flow Cytometry	216, 217, 218, 220-222
Special Chemistry	M, OLI, SPE, UBJP	Chemistry	74, 76
Bacteriology	D	Microbiology	177
Mycobacteriology	E	Microbiology	193
Mycology and Aerobic Actinomycetes	F	Microbiology	194
Yeast Identification	F1	Microbiology	194
Limited Bacteriology	D1, D2, D3, D5, D6, D8, MC3, MC4, RMC	Microbiology	179-180, 182-183
Embryology	EMB	Reproductive Medicine	163
Sperm Count, Motility, Morphology, and Viability	SMCD, SM1CD, SM2CD	Reproductive Medicine	162
Semen Analysis	ASA, SC, SC1, PV, PV1, SM, SV	Reproductive Medicine	162
Toxicology	DFC, NOB, OFD, SCDD, VF	Toxicology	108, 111, 103, 104
Transfusion Medicine	J, JXM, JE1, JAT, JATXM, JATE1, J1	Transfusion Medicine	232-233

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			
Laboratory Staffing Ratios	QP251	Data Analysis and Critique	25
Assessment of Consistency of Body Fluid Morphologic Observations	QPB10, QPB25	Data Analysis and Critique	26
Assessment of Consistency of Peripheral Blood Morphologic Observations	QPC10, QPC25	Data Analysis and Critique	27
Assessment of Consistency of Gram Stain Morphologic Observations	QPD10, QPD25	Data Analysis and Critique	28
Hematology and Clinical Microscopy			
Blood Cell Identification, Photographs/Virtual	BCP, BCPV	Participant Summary	142
Bone Marrow Cell Differential	BMD	Participant Summary	145
Expanded Virtual Peripheral Blood Smear	EHE1	Participant Summary	150
Hematology Automated Differential Series	FH1–FH4, FH9–FH10, FH13, FH16–FH17	Participant Summary	140
Hematology—Basic	HE	Participant Summary	140
Hemoglobinopathy	HG	Participant Summary	147
Virtual Body Fluid	VBF	Participant Summary	154
Virtual Peripheral Blood Smear	VPBS	Participant Summary	149
Clinical Microscopy	CMP, CMMP, CMP1	Participant Summary	152-153
Microbiology			
Blood Parasite	BP	Participant Summary/Final Critique	198
Expanded Bacteriology	DEX	Participant Summary/Final Critique	178
Yeast	F1	Participant Summary/Final Critique	194
Parasitology	P	Participant Summary/Final Critique	197
Ticks, Mites, and Other Arthropods	TMO	Participant Summary	198
Worm Identification	WID	Participant Summary	198
Toxicology			
Drug Monitoring for Pain Management	DMPM	Participant Summary	110

*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 Health and Health Care (IHHC) (formerly Part IV) at the laboratory or the individual level. Programs that meet IHHC are identified within the description of the program.

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, to appraise and assimilate scientific evidence, and to 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	12.5	Online (DigitalScope®)	302
Clinical Pathology Improvement Program*	CPIP/CPIP1	15	NA	Online	14
Digital Slide Program— Dermatopathology*	DPATH/DPATH1	15	NA	Online (DigitalScope)	303
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)	151
Nongynecologic Cytopathology Education**	NGC/NGC1	25	25	Glass Slides With Online Cases (DigitalScope)	310
Navigating Multimodality Biomarker Assessment*	NMBA/NMB1	4	4	Online (DigitalScope)	300
Neuropathology Program*	NP/NP1	10	NA	Online (DigitalScope)	305
Gynecologic Cytopathology PAP Education Program***	PAPCE/APAPCE PAPJE/APAPJE PAPKE/APAPKE PAPLE/APAPLE PAPME/APAPME Series 1 or 2	8	8	Glass Slides	307
Glass Slide Cytopathology PAP PT Program (With Glass Slide PAP Education)***	PAPCPT/APAPCPT PARJPT/APARJPT PAPKPT/APAPKPT PAPLPT/APAPLPT PAPMPT/APAPMPT	8	8	Glass Slides	306
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.

**NGC provides up to 20 CME/CE credits for the glass slides and five CME/CE credits for the online slide portion of the program.

***PAP provides up to eight CME/CE credits for the glass slides.

System Requirements

DigitalScope is a web-based whole slide image (WSI) retrieval and viewing system. **The current version, DSv6.0, does not require Microsoft Silverlight.** DigitalScope is supported by the latest Chrome and Firefox releases, and the last two major Edge and Safari versions.

Find current information on system requirements on cap.org; click **Browser and Operating System Requirements** at the bottom of the homepage. Download speeds and appearance will vary depending on your internet connection, browser, and computer power.

Navigating Multimodality Biomarker Assessment NMBA/NMB1

Program Name	Program Code	Cases per Mailing
	NMBA/NMB1	
Multimodality biomarker assessment case analysis	■	2

Biomarkers can be tested through a variety of methodologies (eg, flow cytometry, immunohistochemistry, next-generation sequencing, PCR-based testing, karyotype, FISH, clinical chemistry). Each modality has different technical strengths and weaknesses, along with varied analytical and clinical specifications such as sensitivity and specificity. Results may not be clearly concordant across the modalities. This program will challenge pathologists to resolve discrepancies between different methods or “multimodality” biomarker testing.

Program Information

- NMBA - Online program, whole slide images powered by DigitalScope technology (if available); NMBA provides CME or CE for one pathologist or laboratory professional
- NMB1 - Reporting option with CME or CE credit for each additional pathologist or laboratory professional (within the same institution); must order in conjunction with program NMBA
- Two mailings per year with two cases each mailing
- Earn a maximum of four CME credits (*AMA PRA Category 1 Credits™*) per pathologist and a maximum of four CE credits per laboratory professional per year.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHCC).
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



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 addressing common issues faced in the laboratory.

CPIP supports clinical pathologists as well as anatomic pathologists who cover clinical pathology. A diverse portfolio of real-life case scenarios, including images and clinical background, helps pathologists to stay current on issues and advances in the laboratory.

CPIP is designed for pathologists, by pathologists. Each case is developed and peer-reviewed, ensuring learning is 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 collective skills and clinical pathology knowledge of their 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 2025
Laboratory Management	Provider Performed Microscopy (PPM) Testing	January
Transfusion Medicine	ABO Discrepancies	February
Transfusion Medicine	Blood Bank Regulations	March
Chemistry	Hyperbilirubinemia	April
Hematology	Hematologic Pleural Effusions	May
Microbiology	Bloodstream Infections	June
Laboratory Management	CLIA Director Responsibilities and Risks	July
Cytogenetics	Plasma Cell Myeloma	August
Transfusion Medicine	Transfusion Reactions	September
Molecular Pathology	Pharmacogenomics	October
Hematology	Peripheral Blood Smear - Part 1	November
Hematology	Peripheral Blood Smear - Part 2	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



Competency Assessment Hub

A single platform for maintaining your staff competency records and providing CE credits

Presented in partnership with MediaLab, the CAP Competency Assessment Hub helps individual laboratories and entire health care networks 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 you stay in compliance and avoid being cited for a deficiency by managing your personnel's training and competency assessment performance and records.

- **System/network subscriptions now available**—Enroll your entire system and participate as individual, linked sites. Standardize your competency assessments across the system and provide centralized documentation.
- **Customizing tools**—The question bank lets you design your own assessment courses to match your laboratory's written procedures. Checklist tool, CourseBuilder, and Compass competency assessments can ensure convenient documentation for all six areas of competency as defined by CLIA and the CAP Laboratory Accreditation Program.
- **Auto-assignment of assessments and reminder emails**—Never forget your staffs' next assessments.
- **Intuitive 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.
- **Instrument-specific checklists**—More than 130 standard checklists help you meet your laboratory's documentation needs.
- **High-quality Pro courses**—Your laboratory staff can earn PACE CE credits in a variety of disciplines and courses.
- **Easy online 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, the Competency Assessment Hub offers a package of nine complementary safety and compliance courses with PACE CE credits. The package is 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 Healthcare Workers
- Medical Error Prevention: Patient Safety
- Ethics and Code of Conduct in Healthcare
- HIPAA Privacy and Security Rules

With the Competency Assessment Hub, you can keep your laboratory and network organized and inspection-ready every day of the year. Choose the Competency Assessment Hub subscription that best fits your needs. 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

*For subscriptions for single users or more than 250 users and networks, please contact the CAP for more information.

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

2025 Pro Courses

**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



2

Continuing Education

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 cleanup, and PPE.

Tuberculosis Awareness for Health Care Workers—Provides background information about the 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.

Ethics and Code of Conduct in Health Care—Designed to guide health care employees on the importance of ethics and code of conduct by outlining privacy and patient health information regulations, conflict of interest, professional competence, effective communication, and more.

HIPAA Privacy and Security Rules—Addresses the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy regulations and treatment of protected health information (PHI) in a succinct manner. Content is directed at laboratory staff, from desk personnel to phlebotomists to medical technologists. Includes technical and physical safeguards, minimum necessary standards, administrative requirements, and authorization.

Identify and control risks in your laboratory.

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

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

Includes a [Risk Register Tool spreadsheet](#), which helps 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

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 on demand so you can 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 for a minimum of twelve months
- Includes continuing education (CE) credit
- Individual learners use their own login with the ability to bookmark the course and continue where they left off.

About the Courses

Risk Management *Order QMEDRISK*

Learn how different elements of the quality management system—internal audit, data analysis, etc—play a role in identifying and controlling risk. Learn best practices for managing risk, plus practical tools for all phases of the risk management process. Includes a case example showing how high-level risk assessment can be integrated into management review.

4 CE credits available

Quality Culture *Order QMEDOCUL*

This program—designed for laboratory medical directors, administrative directors, quality managers, and other leaders whose decisions affect the culture of their laboratory—provides an adaptable program for proactive culture change. Its unique Culture Assessment Tool helps laboratory leadership get a picture of where your organization is strong and where it needs to improve, then helps make culture change a reality. It also includes video commentary by CAP member pathologists.

4 CE credits available

Root Cause Analysis *Order QMEDROOT*

Designed for laboratory quality managers and implementation team members. Learn real-world methodology and tools to conduct and implement a root cause analysis, performing key steps based on a participant case study. Choose further examples based on your work setting (eg, hospital, reference laboratory, or contract research organization). Includes the RCA Performance and Feedback Toolkit, which an organization can use to guide and assess root cause analysis projects.

6 CE credits available

Mistake Proofing *Order QMEDMIST*

Learn to develop and revise processes, reduce errors, and handle risks. The course methodology is focused on five main categories of mistake-proofing tactics, with examples taken from laboratory medicine. It includes video commentary by CAP member pathologists who have experience using Lean and other process improvement techniques.

4 CE credits available

Internal Auditing *Order QMEDAUDT*

Improve your internal audit capability with a proven methodology for process, tracer, and laser audits. Learn to prepare for interviews, communicate findings to your quality management team, and use audits to drive process improvements. Includes 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*

Understand the ISO 15189 requirements for management review. CAP ISO 15189 assessors cover structuring review meetings, communicating results, and prompting strategic management decisions—all to benefit your organization's health.

2 CE credits available

Quality Manual Development *Order QMEDMANL*

Go beyond a quality plan—develop a manual that organizes and communicates your laboratory's quality management system. The course materials include a well-written and effective sample manual, which you can use to organize and create your own. Plus, the CAP's ISO 15189 assessors demonstrate how to link your quality policy to quality objectives and metrics.

2 CE credits available

Document Control *Order QMEDDOCU*

This “how-to” course details how to control documents to meet 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 and implementation team members.

2 CE credits available

15189 Walkthrough *Order QMEDWALK*

This course summarizes each main clause of the ISO 15189 standard, clarifying its intent and key requirements. CAP assessors offer context in videos that also provide examples of how technical problems relate to fundamental deficiencies in the quality management system. This course, designed for laboratories considering implementation, is updated for the ISO 15189:2022 edition.

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.

Expand your expertise with Root Cause Analysis.

Developed with pathologist input, the Root Cause Analysis QMED online course is infused with real-world laboratory examples, giving you confidence in:

- Using root cause analysis tools
- Recognizing common pitfalls
- Performing key steps
- Applying best practices

You'll receive our unique [Root Cause Analysis Toolkit](#) to help communicate best practices and provide feedback to project teams, with the goal of solving problems permanently.

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

“WOW! Very impressive training module. Probably the best self-taught module I've seen in years. Very systematic, very visual, very easy to follow ... staying with the tried and true textbook of Root Cause Analysis.”

Jim Ellis
Managing Partner
MME Consulting, LLC

Take your quality system to the next level.

The CAP 15189SM Accreditation Program provides accreditation to the ISO 15189:2022 4th edition, an international standard to recognize quality and competence in medical laboratories.

Our program offers:

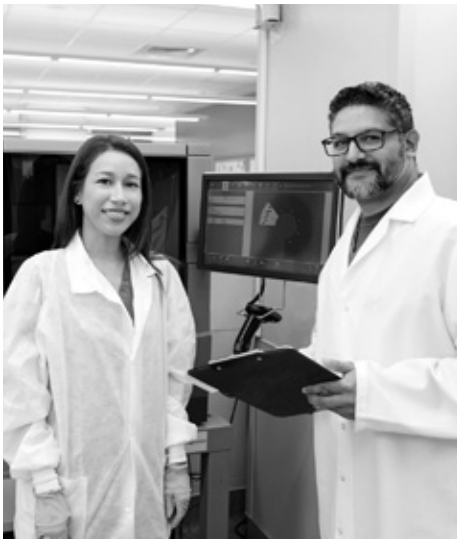
- A distinct approach, using the CAP Laboratory Accreditation Program as a foundation
- Dedicated, expert assessors who specialize in ISO 15189
- Unique, tailored education and quality tools developed with pathologist input
- A personalized, flexible accreditation process

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



3

Quality Management Tools



Easily integrate quality improvement into your daily work processes.

Measure and document your process improvements with these convenient tools:

- Assess clinical laboratory staffing ratios and benchmark performance (QP251).
- Streamline your efforts to assess consistency of morphologic observations of peripheral blood (QPC10/QPC25), Gram stains (QPD10/QPD25), and body fluid review (QPB10/QPB25).

Quality Management Tools

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New Programs

NEW

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Program Changes

Technical Competency Assessment of Body Fluid Review (QPB10/QPB25) is now called Assessment of Consistency of Body Fluid Morphologic Observations	26
Technical Competency Assessment of Peripheral Blood Smears (QPC10/QPC25) is now called Assessment of Consistency of Peripheral Blood Morphologic Observations	27
Technical Competency Assessment of Gram Stains (QPD10/QPD25) is now called Assessment of Consistency of Gram Stain Morphologic Observations	28

Discontinued Programs

Rates and Turnaround Times for Investigation and Reporting of Suspected Transfusion Reactions (QP241)
Troponin Turnaround Times (QT15)

Quality Management Tools

3

Quality Management Tools

Benchmark outside your laboratory.

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

- **Short-Term Quality Studies and Morphology/Competency Assessments** provide opportunities to benchmark performance indicators, compare normative rates, and assist your laboratory in meeting checklist requirements.
- **Continuous Quality Monitors** examine performance indicators such as turnaround time and specimen identification errors throughout the year.

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

- **Establish realistic goals** by comparing their performance against other 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 their daily work processes.
- **Meet requirements** of the CAP Laboratory Accreditation Program checklists and The Joint Commission standards.

Purchase combination packages and save.

2025 Short-Term Quality Studies and Morphology/Competency Assessments

Module/Package	Program Code
Individual Short-Term Quality Studies and Morphology/Competency Assessments	QP251, QPB10, QPB25, QPC10, QPC25, QPD10, QPD25
Four Quality Management Tools (QP251, QPB10, QPC10, QPD10)	PRO

2025 Continuous Quality Monitors

Module/Package	Program Code
Individual Continuous Quality Monitors	QT2, QT3, QT4, QT7, QT8, QT10, QT16, QT17
Clinical Pathology Module—includes all eight Continuous Quality Monitors	QTC

Complement your quality management program needs with these clinical pathology studies.

Clinical Pathology Study	Testing Phase			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.											
Laboratory Staffing Ratios QP251 (QPR-A) NEW	■	■		■	■	■	■	■	■	■	■
Assessment of Consistency of Body Fluid Morphologic Observations (QPB10/QPB25)		■	■		■		■			■	
Assessment of Consistency of Peripheral Blood Morphologic Observations (QPC10/QPC25)		■	■		■		■			■	
Assessment of Consistency of Gram Stain Morphologic Observations (QPD10/QPD25)		■	■		■		■	■			
Blood Culture Contamination (QT2)	■	■			■		■	■			■
Laboratory Specimen Acceptability (QT3)	■				■					■	■
In-Date Blood Product Wastage (QT4)			■		■		■		■		
Satisfaction with Outpatient Specimen Collection (QT7)	■				■		■				■
Stat Test Turnaround Time Outliers (QT8)		■			■	■	■			■	■
Critical Values Reporting (QT10)			■		■		■			■	■
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 Morphology/Competency Assessments

Implement quality monitoring—Use these comprehensive short-term quality studies and morphology/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 between predetermined dates, the CAP provides personalized reports with the individual participant's performance compared against peers.

Strengthen your quality assessment expertise—CAP pathologist experts provide in-depth discussions and identify best practices for laboratories to strive for. In addition, the studies' consolidated results are carefully reviewed and analyzed to be published in the form of scientific articles for further analysis.

Participating laboratories receive:

- User Guides
- Templates and instructions for data collection
- Individual Participant Summaries and interpretation guides
- Data distributions and initial analysis of laboratory practices
- Data Analysis and Critiques with author commentaries on improvement opportunities, dependent on study type and complexity
- Morphology/Competency Program inclusions:
 - o Participant Summary Reports have all-laboratories, institution, and individual study results.
 - o Data Analysis and Critique has commentaries from subject matter experts on the importance of each case with links for viewing.

Case Number	Criteria	No. of points
Case 1	• Indicate polymorphonuclear leukocytes are present	10
Cerebrospinal fluid	o Identify Gram-positive cocci in pairs and/or chains (full credit)	90
	o Identify Gram-positive cocci only (partial credit)	70
Case 2	• Indicate polymorphonuclear leukocytes are present	10
Sputum	o Identify Gram-positive beaded, branching bacilli (reflex to modified Acid Fast stain) (full credit)	90
	o Identify Gram-positive branching bacilli only (partial credit)	80
	o Identify Gram-positive bacilli only (partial credit)	70
Case 3	• Indicate polymorphonuclear leukocytes are present	10
Bronchoalveolar lavage	o Identify Septate hyphae (full credit)	90
Case 4	•	
Blood culture		
Case 5	•	
Blood culture		
Case 6	•	
Tissue culture		
Case 7	•	
Respiratory culture		

COLLEGE of AMERICAN PATHOLOGISTS		Quality Management Tools									
GPD10/QPD25: Technical Competency Assessment of Gram Stains		Quality Management Report: Institution Report									
Institution Score (%) Summary											
Case	No. of tech. scores	Min-max scores	Average score	No. Labs	All Institutions Percentiles			Performance Distribution			
					90th	50th	10th				
1	10	70 - 100	78.0	114	73.3	84.5	100.0	[Progress bar]			
2	10	10 - 100	55.0	115	17.0	76.3	100.0	[Progress bar]			
3	10	10 - 100	53.0	114	10.0	45.0	86.8	[Progress bar]			
4	10	80 - 100	92.0	114	86.0	98.0	100.0	[Progress bar]			
5	10	90 - 100	91.0	114	56.1	89.2	99.1	[Progress bar]			
6	10										
7	10										
Avg tech scores											
Technologist Score (%)											
Kit Number	Case 1										
00000001	80										
00000002	100										
00000003	90										
00000004	80										
00000005	70										
00000006	70										
00000007	70										
00000008	80										
00000009	70										
00000010	70										
Tech. average 78.8											
All tech scores distribution											
90% - 100% = 30		70 - 80 = 100		50 - 60 = 100		30 - 40 = 100		10 - 20 = 100		0 - 10 = 100	
95% - 100% = 30		75 - 85 = 100		55 - 65 = 100		35 - 45 = 100		15 - 25 = 100		5 - 15 = 100	
99% - 100% = 30		79 - 89 = 100		59 - 69 = 100		39 - 49 = 100		19 - 29 = 100		9 - 19 = 100	
100% = 30		80 - 100 = 100		60 - 100 = 100		40 - 100 = 100		20 - 100 = 100		0 - 100 = 100	
Note: The report is designed to list the technologist result followed by the report or study summary statistics in parentheses. Case-specific grading criteria are summarized in the Preliminary Summary of Results.											

Laboratory Staffing Ratios QP251 (QPR-A)

Introduction

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

Laboratories participating in this study will submit data on their staffing levels for laboratory sections, and may participate in any or all areas including anatomic pathology, chemistry/hematology/immunology, microbiology, molecular pathology, phlebotomy, point-of-care testing, and transfusion medicine. From these levels, staffing ratios will be calculated for these sections relative to managerial staffing and billable tests. Each laboratory's staffing ratios will be compared against those of other institutions participating in this study, and where applicable, against peer groups with similar billable test profiles.

Enrollment in this study will help laboratory directors address CAP Laboratory Accreditation Program Checklist statement DRA.11300, which requires sufficient numbers of personnel to be available to meet the needs of the laboratory, and The Joint Commission Standard HR.01.02.05, which requires the laboratory to have the necessary staff to support the services it provides.

Objectives

The aims of this study are to measure staffing levels in different areas of the laboratory, calculate key staffing ratios and levels, and compare all staffing ratios with those of other institutions participating in this study.

Data Collection

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

Performance Indicators

- **Anatomic Pathology**
 - Histology blocks/Histology non-management FTE
 - Cytology accessions/Cytology non-management FTE
 - Non-management FTE/Management FTE
- **Chemistry/Hematology/Immunology**
 - Total billable tests/Non-management FTE
 - Non-management FTE/Management FTE
- **Microbiology**
 - Total billable tests/Non-management FTE
 - Non-management FTE/Management FTE
- **Molecular Pathology**
 - Total billable tests/Non-management FTE
 - Non-management FTE/Management FTE
- **Phlebotomy**
 - Total inpatient blood draws/Inpatient phlebotomist FTE
 - Total outpatient blood draws/Outpatient phlebotomist FTE
- **Point-of-Care Testing (POCT)**
 - POCT billable tests/Laboratory FTE overseeing POCT
- **Transfusion Medicine**
 - Crossmatches or type and screens/Non-management FTE
 - Transfused units/Non-management FTE
 - Non-management FTE/Management FTE

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

Assessment of Consistency of Body Fluid Morphologic Observations QPB10/QPB25

3

Quality Management Tools

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 to assess consistency of reporting morphology among staff and competency 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 the manager with areas to focus on for improvement and education.

The study will help management meet applicable CLIA, CAP Laboratory Accreditation Program, and The Joint Commission laboratory requirements for consistency of reporting morphology among staff and personnel competency requirements (testing previously analyzed specimens).*

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 to identify miscellaneous cells and inclusions in cytocentrifuged preparations using their own kit and result form. Participants will provide additional information about their competency assessment programs, continuing education, and professional background. Information will be collected from each site regarding their institution's minimum continuing education programs and requirements for their technologists in who review body fluids, and relevant procedures and policies related to body fluid review assessment.

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

Program Information

To meet your technical staff morphology and competency assessment requirements:

- Result forms for up to 10 technologists (QPB10)
- Result forms for up to 25 technologists (QPB25)
- Multiple orders may be purchased to accommodate the quantity of technologist result forms needed.

*Participation in this study helps laboratories meet applicable requirements:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Checklist statements: HEM.35566, consistency of morphologic observation among personnel performing body fluid cell differentials at least annually; GEN.55500, Competency Assessment of Testing Personnel (element 5); GEN.55525, Performance Assessment of Supervisors/Consultants; DRA.11425, functions or responsibilities are properly performed by a qualified individual
- The Joint Commission Standards HR.01.05.03, 01.06.01 (EPs 3, 18,19), HR.01.07.01, PI.03.01.01(EPs 3-5), and LD.04.05.01, 04.05.03 (EPs 1-6) regarding in-service training, continuing education, competency, and evaluation of staff members

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

Assessment of Consistency of Peripheral Blood Morphologic Observations 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 medical laboratory scientist/technologist staff dedicate to morphological assessment of blood cells. However, these staff must maintain their morphological skills. Laboratories have an annual requirement to do a morphologic comparison of their technical staff's peripheral blood smear results, assess their competency on peripheral blood smears, and provide appropriate education.

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 Program, and The Joint Commission laboratory requirements for consistency of reporting morphology among staff and personnel competency requirements (testing previously analyzed specimens).*

Data Collection

A series of online, whole slide images of Wright or 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. Each technologist will receive their own kit. 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)

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 orders may be purchased to accommodate the quantity of technologist result forms needed.

Preliminary study reports are provided at institution and technologist levels.

*Participation in this study helps laboratories meet applicable requirements:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Checklist statements: HEM.34400, consistency of morphologic observation among personnel performing blood cell microscopy at least annually; GEN.55500, element 5, Competency Assessment of Testing Personnel; GEN.55525, Performance Assessment of Supervisors/Consultants; DRA.11425, functions or responsibilities are properly performed by a qualified individual
- The Joint Commission Standards HR.01.05.03, 01.06.01 (EPs 3, 18, 19), HR.01.07.01, PI.03.01.01 (EPs 3-5), and LD.04.05.01, 04.05.03 (EPs 1-6) regarding in-service training, continuing education, competency, and evaluation of staff members.

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

Assessment of Consistency of Gram Stain Morphologic Observations 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 medical laboratory scientist/technologist staff 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 Program, and The Joint Commission laboratory requirements for morphology consistency of reporting among staff and personnel competency requirements (testing previously analyzed specimens).*

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 about their continuing education requirements in microbiology and relevant laboratory procedures and policies related to Gram stain assessment. Each technologist will receive their own kit and result form.

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)

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 orders may be purchased to accommodate the quantity of technologist result forms needed.

Preliminary study reports are provided at institution and technologist levels.

*Participation in this study helps laboratories meet:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Microbiology Checklist statements: MIC.11060, Culture Result Reporting, personnel performing Gram stains for this purpose are subject to competency assessment; MIC.11350, Morphologic Observation Evaluation, the laboratory evaluates consistency of morphologic observation among personnel performing microscopic analysis (eg, stains, wet preparations) from direct specimens and cultured organisms at least annually. The laboratory director or designee must determine acceptability criteria for agreement.
- CAP Laboratory Accreditation Program Checklist items: GEN.55500, element 5, Competency Assessment of Testing Personnel; GEN.55525, Performance Assessment of Supervisors/Consultants; DRA.11425, functions or responsibilities are properly performed by a qualified individual.
- The Joint Commission Standards HR.01.05.03, 01.06.01 (EPs 3, 18, 19), HR.01.07.01, PI.03.01.01 (EPs 3-5), and LD.04.05.01, 04.05.03 (EPs 1-6) regarding in-service training, continuing education, competency, and evaluation of staff members

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

Continuous Quality Monitors

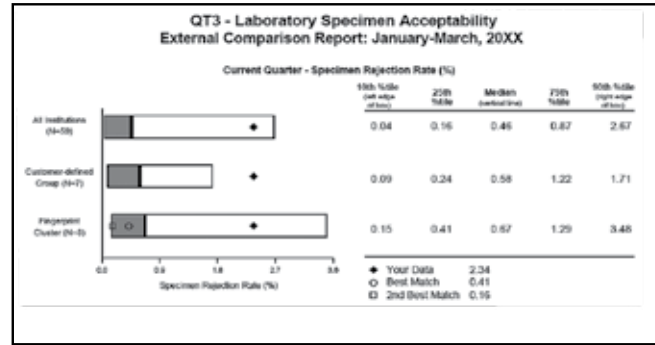
Use these programs to:

- 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:

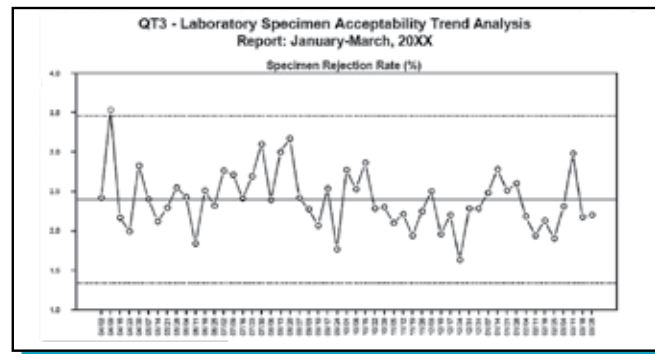
Identify improvement opportunities.

Specimen Rejection Reasons	Year 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	5.5	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
- Access to the Peer Directory, allowing you to connect with your counterparts enrolled in the same program

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 Program 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

This study will 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 (%)

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

This study will 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 (%)

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

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, which 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, which requires transfusing facilities to have a peer-review program that monitors transfusion practices for blood components.

Objective

This study will 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.

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

This study will 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. It excludes patients seen in the emergency department, ambulatory surgery area, urgent care facility, chest pain center, 23-hour short-stay facility, employee health department, outpatient health screening fair/promotion, dialysis center, nursing home, or extended care facility.

Performance Indicators

- Satisfaction scores and satisfaction rates (% of patients rating 4 or 5) for the following categories:
 - o Overall experience
 - o Waiting time
 - o Patient comfort
 - o Professionalism and courtesy
 - o Patient privacy
 - o Laboratory hours of operation

Stat Test Turnaround Time Outliers QT8

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

Objective

This study will 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 the 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

This study will evaluate the documentation of successful critical values reporting in the general laboratory for inpatients and outpatients.

Data Collection

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

Performance Indicators

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

Look 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. Use this monitor to 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.

Objective

This study will 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 unnecessary 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 The Joint Commission Standard DC.01.02.01: The laboratory performs testing based on written laboratory test orders.

Objective

This study will 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 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.

Discontinued Programs

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

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 54-56	■	3

This program does not meet regulatory requirements for proficiency testing; see program CZ on pages 54-56. For additional information about the Quality Cross Check program, see page 36.

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 BNP5 on page 59. For additional information about the Quality Cross Check program, see page 36.

Quality Cross Check—Whole Blood Glucose WBGQ

Analyte	Program Code	Challenges per Shipment
	WBGQ	
Glucose	■	3

The CAP 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 72. For additional information about the Quality Cross Check program, see page 36.

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 A1c GHQ

Analyte	Program Code	Challenges per Shipment
	GHQ	
Hemoglobin A1c	■	3

This program does not meet regulatory requirements for proficiency testing; see program GH5 on page 62. For additional information about the Quality Cross Check program, see page 36.

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 60. For additional information about the Quality Cross Check program, see page 36.

Program Information

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

Quality Cross Check—High-Sensitivity Cardiac Markers HCRQ

Analyte/Procedure	Program Code	Challenges per Shipment
	HCRQ	
CK-MB, immunochemical	■	3
Myoglobin	■	3
High-sensitivity troponin I	■	3
High-sensitivity troponin T	■	3

This program does not meet regulatory requirements for proficiency testing; see program HCRT on page 60. For additional information about the Quality Cross Check program, see page 36.

Program Information

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

4

Quality Cross Check

Searching for **accreditation educational resources**? Find them around the clock with the CAP.



Log in to e-LAB Solutions Suite and select Accreditation Resources.

“As new technologies emerge or regulatory requirements come up, the CAP provides education and resources from experts to understand and implement them. And that brings a practical aspect that’s invaluable.”

Julie Kingery, MD, FCAP
Vice Chair of Clinical Pathology
University of Florida

Endocrinology

4

Quality Cross Check

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 86. For additional information about the Quality Cross Check program, see page 36.

Program Information

- Three 2.0-mL lyophilized serum specimens in duplicate
- Report up to three instruments.
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

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 95. For additional information about the Quality Cross Check program, see page 36.

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—Critical Care Blood Gas AQQ, AQHQ, AQSQ

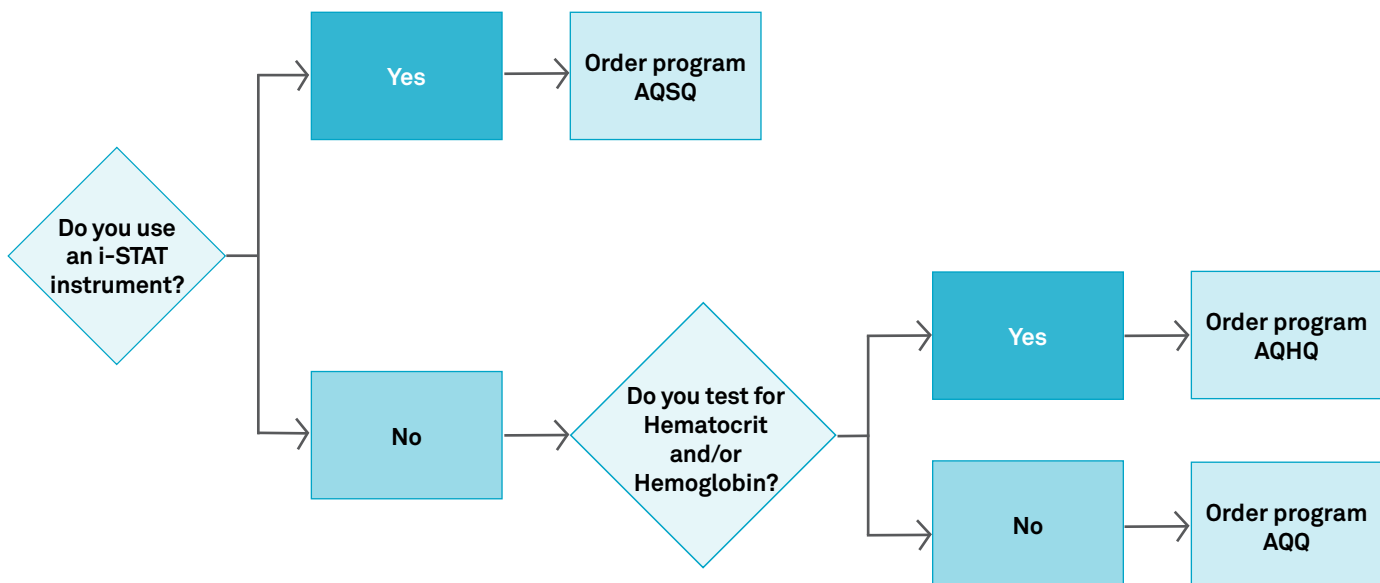
Analyte	Program Code			Challenges per Shipment
	AQQ	AQHQ	AQSQ	
Calcium, ionized	■	■	■	3
Chloride	■	■	■	3
Creatinine	■	■	■	3
Glucose	■	■	■	3
Hematocrit		■	■	3
Hemoglobin, estimated		■	■	3
Lactate	■	■	■	3
Magnesium, ionized	■	■		3
pCO ₂	■	■	■	3
pH	■	■	■	3
pO ₂	■	■	■	3
Potassium	■	■	■	3
Sodium	■	■	■	3
tCO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

Program Information

- AQQ - Three 2.5-mL specimens in triplicate; appropriate for all methods except i-STAT
- AQHQ - 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
- AQSQ - 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

Additional Information

- It is not appropriate to report hemoglobin and hematocrit results by co-oximetry in these programs.
- These programs do not meet regulatory requirements for proficiency testing; see programs AQ, AQH, and AQIS on pages 92-93. For additional information about the Quality Cross Check program, see page 36.



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 (IG)			■		3
Immature platelet fraction (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 140. For additional information about the Quality Cross Check program, see page 36.

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 141.
- 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
Beckman Coulter, LH 500, LH 700 series, UniCel DxH series		■		3
Symex XE-2100, XE-2100C, XE-2100D, XE-2100DC, XE-2100L, XE-5000, XN-L series, XN-series (includes RL App), XR-series, 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 36.

Program Information

- RTQ - Three 1.0-mL stabilized red blood cell specimens
- RT3Q, RT4Q - Three 3.0-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 152. For additional information about the Quality Cross Check program, see page 36.

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 159. For additional information about the Quality Cross Check program, see page 36.

Program Information

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

4

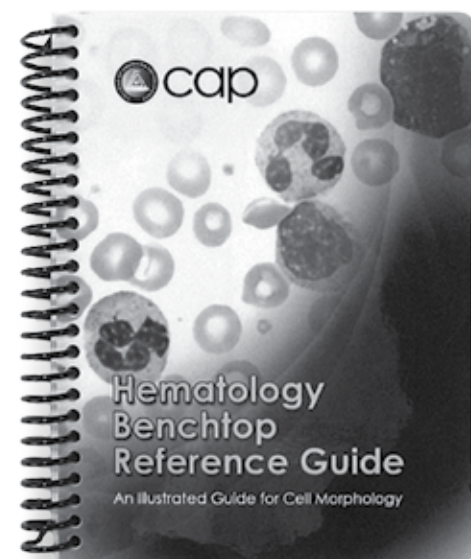
Quality Cross Check

Hematology Benchtop Reference Guide

- More than 50 different cell identifications, including common and rare cells
- Detailed descriptions for each cell morphology
- Six tabbed sections for easy reference
 - Erythrocytes
 - Erythrocyte Inclusions
 - Granulocytic (Myeloid) and Monocytic Cells
 - Lymphocytic Cells
 - Platelets and Megakaryocytic Cells
 - Microorganisms and Artifacts
- A durable and water-resistant format to withstand years of benchtop use—5" x 6½"

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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 166. For additional information about the Quality Cross Check program, see page 36.

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 C-ACT®	■					3
Helena Actalyke MAX-ACT	■					
IL GEM Hemochron 100/ACT+				■		
IL GEM Hemochron 100/ACT-LR			■			
IL Hemochron® CA510/FTCA510	■					3
IL Hemochron FTK-ACT	■					3
IL Hemochron P214/P215	■					3
IL Hemochron Signature Elite/ Hemochron Jr./ACT+				■		3
IL Hemochron Signature Elite/ Hemochron Jr./ACT-LR			■			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 170. For additional information about the Quality Cross Check program, see page 36.

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 202. For additional information about the Quality Cross Check program, see page 36.

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 36.

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

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 contain human genome material or sequences from human RNase P gene.

This program does not meet regulatory requirements for proficiency testing; see program ID3 on page 204. For additional information about the Quality Cross Check program, see page 36.

Program Information

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

Transfusion Medicine

4

Quality Cross Check

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 233. For additional information about the Quality Cross Check program, see page 36.

Program Information

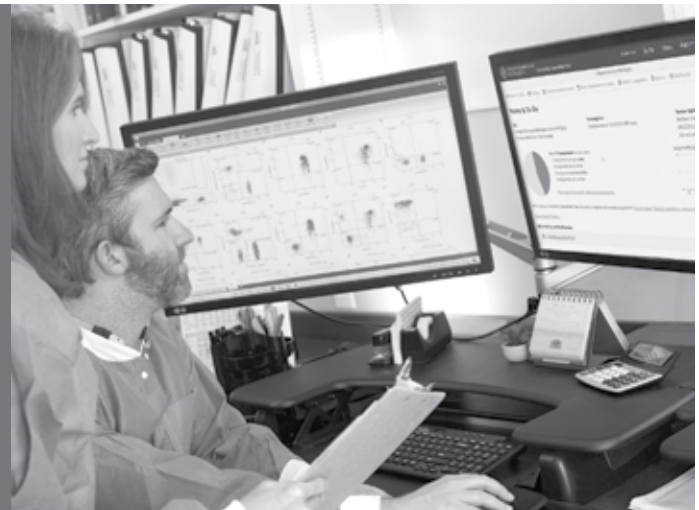
- Three 6.0-mL 13%–17% whole blood specimens
- May be used with automated and manual procedures
- Two shipments per year

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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 be used not only 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 have limited availability and stability. These programs must be purchased by May 1.

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.

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 1.5-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.

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.

Professionalism in Pathology and Laboratory Medicine

This important resource provides a basic understanding of how ethics and professionalism impact pathology and laboratory medicine. Approaches and guidance to educational and assessment tools, including more than 100 case vignettes to guide discussion, are included. The book also discusses professionalism in the context of research, pathologist well-being and burnout, legal aspects, diversity, organizational leadership, and patient safety and quality of care. Also addressed are lapses in ethical and professional behavior as well as recommendations on future directions for research and education in professionalism.

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Item number: PUB317
Softcover; 146 pages; 2020

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.

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6

General Chemistry and Therapeutic Drug Monitoring



CAP Accreditation: Focused on the laboratory

CAP laboratory accreditation gives you and your staff the confidence of knowing that your laboratory is providing the highest quality results and better patient outcomes.

General Chemistry and Therapeutic Drug Monitoring

All current and new 2025 Centers for Medicare & Medicaid Services (CMS) regulated analytes are listed in **bold** type.

General Chemistry and Therapeutic Drug Monitoring.....	54
Urine Chemistry	68
Special Chemistry	71

New Programs **NEW**

Waived Hemoglobin (HCC1)	65
--------------------------------	----

Program Changes

CAP/AACC Immunosuppressive Drugs (CS) is now called CAP/ADLM Immunosuppressive Drugs (CS).....	58
Hemoglobin A1c, 3 Challenge (GH2) is now called Hemoglobin A1c, Waived and is for waived methods only	62
High-Sensitivity C-reactive Protein (HSCRP) number of challenges, number of shipments	63

Discontinued Programs

B-type Natriuretic Peptides, 2 Challenge (BNP)
Sweat Analysis (SW1)

General Chemistry and Therapeutic Drug Monitoring

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

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

Analyte	Program Code					Challenges per Shipment
	C1	C3/C3X	C4	CZ/CZX/ CZ2X	Z	
Alanine aminotransferase (ALT/SGPT)	■	■		■		5
Albumin	■	■		■		5
Alkaline phosphatase	■	■		■		5
Amylase	■	■		■		5
Aspartate aminotransferase (AST/SGOT)	■	■		■		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 Laboratory Accreditation Programs. See programs NB, NB2, on page 64.

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 56.



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	■	■		■		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 56.



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, below.



Quality Cross Check—Chemistry and Therapeutic Drug Monitoring CZQ

Analyte	Program Code	Challenges per Shipment
	CZQ	
See program CZ analytes on pages 54-56	■	3

This program does not meet regulatory requirements for proficiency testing; see program CZ on pages 54-56. For additional information about the Quality Cross Check program, see page 36.

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

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

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

Program Information

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

Additional Information

- Analytes will be evaluated using harmonization.
- Specimens are collected by a modified application of Clinical 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*.

Thyroid Panel Calibration Verification/Linearity LN50

NEW

Analyte	Program Code	LN50 Target Ranges
	LN50	
Triiodothyronine (T3), free	■	1.0–18.0 pg/mL
Triiodothyronine (T3), total	■	0.4–7.0 ng/mL
Thyroxine (T4), free	■	0.7–7.0 ng/dL
Thyroxine (T4), total	■	1.0–27.0 µg/dL
Thyroid-stimulating hormone (TSH)	■	0.1–120.0 µIU/mL

Program Information

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

CAP/ADLM 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



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

B-type Natriuretic Peptides BNP5

Analyte	Program Code	Challenges per Shipment
	BNP5	
BNP	■	5
NT-proBNP	■	5

Program Information

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

Additional Information

- 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, on page 60.

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 BNP5, on page 59. For additional information about the Quality Cross Check program, see page 36.

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

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
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—High-Sensitivity Cardiac Markers HCRQ

Analyte/Procedure	Program Code	Challenges per Shipment
	HCRQ	
CK-MB, immunochemical	■	3
Myoglobin	■	3
High-sensitivity troponin I	■	3
High-sensitivity troponin T	■	3

This program does not meet regulatory requirements for proficiency testing; see program HCRT, on page 60. For additional information about the Quality Cross Check program, see page 36.

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

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 60. For additional information about the Quality Cross Check program, see page 36.

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 specimens
- Report up to three instruments.
- Two shipments per year

Program Information

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

Hemoglobin A1c Waived GH2

Analyte	Program Code	Challenges per Shipment
	GH2	
Hemoglobin A1c	■	3

Additional Information

- This program will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- For multiple instrument reporting options, see the Quality Cross Check program, GHQ, below.
- This program has limited stability. Laboratories outside the US or Canada should consider purchasing GH5I, which has longer stability.

Program Information

- Accuracy-Based program
- Three 0.8-mL liquid human whole blood specimens
- Two shipments per year
- Designed for waived methods

Hemoglobin A1c GH5

Analyte	Program Code	Challenges per Shipment
	GH5	
Hemoglobin A1c	■	5

Additional Information

- This program will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- For multiple instrument reporting options, see the Quality Cross Check program, GHQ, below.
- This program has limited stability. Laboratories outside the US or Canada should consider purchase of GH5I, which has longer stability.

Program Information

- Accuracy-Based program
- Five 0.8-mL liquid human whole blood specimens
- Three shipments per year

Quality Cross Check—Hemoglobin A1c GHQ

Analyte	Program Code	Challenges per Shipment
	GHQ	
Hemoglobin A1c	■	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 36.

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 A1c GH5I

Analyte	Program Code	Challenges per Shipment
	GH5I	
Hemoglobin A1c	■	5

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 laboratories outside the US 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	■	5

Program Information

- Five 0.5-mL liquid serum specimens
- Three 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 general chemistry 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

Whole Blood Chemistry Compatibility Matrix

Whole Blood Analyzer/Method	Analyte	Compatible Survey Programs	Page
HemoCue® Glucose 201 systems	Glucose	HCC	below
HemoCue Hb 201+ systems	Hemoglobin	HCC	below
HemoCue Hb 301 and 801 systems	Hemoglobin	HCC1	below
Roche Reflotron®	Cholesterol	C1, C4	54-56
	Glucose		54-56
Cholestech LDX®	Total cholesterol	LCW	64
	HDL cholesterol		64
	Triglycerides		64
	Glucose		64
Whole blood cholesterol meters	Cholesterol	C1, C4, LCW	54, 64
Whole blood glucose meters	Glucose	HCC2, WBGQ	66, 67
Nova StatSensor®/ StatSensor Xpress™	Creatinine	WBCR	66

Waived Combination HCC

Analyte	Program Code	Challenges per Shipment
	HCC	
Hemoglobin	■	2
Whole blood glucose	■	2

Program Information

- Two 1.5-mL whole blood specimens; two shipments per year
- Conventional and International System of Units (SI) reporting offered
- To identify instrument specific programs, refer to the whole blood chemistry compatibility matrix above.

Waived Hemoglobin HCC1

NEW

Analyte	Program Code	Challenges per Shipment
	HCC1	
Hemoglobin	■	2

Program Information

- Two 1.0-mL whole blood specimens; two shipments per year
- Conventional and International System of Units (SI) reporting offered
- To identify instrument specific programs, refer to the whole blood chemistry compatibility matrix above.

Waived Combination HCC2

Analyte	Program Code	Challenges per Shipment
	HCC2	
Hematocrit	■	2
Hemoglobin	■	2
Urinalysis/urine hCG	■	2
Whole blood glucose	■	3

Program Information

- 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
- Conventional and International System of Units (SI) reporting offered
- To identify instrument specific programs, refer to the whole blood chemistry compatibility matrix on page 65.

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 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	54-56

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

Analyte	Program Code	Challenges per Shipment
	N	
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
- 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

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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.

Urine Chemistry—General, Validated Material

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

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 don't 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

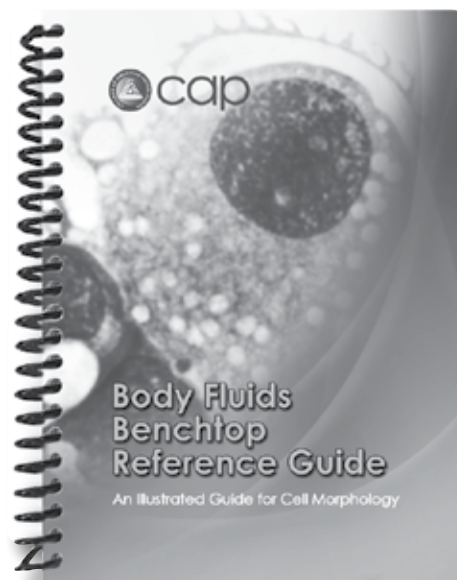
For multiple instrument reporting options, see the Quality Cross Check program, FLDQ, on page 73.

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
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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 72. For additional information about the Quality Cross Check program, see page 36.

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 per 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

H. pylori Breath Test HPBT

Analyte	Program Code	Challenges per Shipment
	HPBT	
<i>H. pylori</i> breath test	■	2

Program Information

- Two gas bags for qualitative reporting with the Meridian BreathID
- 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 specimens
- Two shipments per year

Lipoprotein Electrophoresis LPE

Analyte/Procedure	Program Code	Challenges per Shipment
	LPE	
Lipoprotein electrophoresis	■	2

Program Information

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

Protein Electrophoresis SPE, UBJP

Analyte	Program Code		Challenges per Shipment
	SPE	UBJP	
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

- 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

Pseudochoolinesterase C7

Analyte	Program Code	Challenges per Shipment
	C7	
Pseudochoolinesterase	■	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	■	3
Arsenic	■	3
Chromium	■	3
Cobalt	■	3
Copper	■	3
Lead	■	3
Manganese	■	3
Mercury	■	3
Selenium	■	3
Thallium	■	3
Zinc	■	3

Program Information

- Three 12.0-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 SW2, SW4

Analyte	Program Code	Challenges per Shipment
	SW2, SW4	
Chloride	■	3
Conductivity	■	3

For method compatibility, see chart below.

Sweat Analysis Series Compatibility Matrix

Method/Procedure	Program Code		Materials Included
	SW2	SW4	
ELITechGroup and Nanoduct® Systems	■		22-gauge blunt-tipped needles
All other methodologies		■	No additional materials provided

Viscosity V

Analyte	Program Code	Challenges per Shipment
	V	
Viscosity	■	2

Soluble Transferrin Receptor STFR

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

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- 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	74

Program Information

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

Program Information

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

Program Information

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

Program Information

- Three 5.0-mL simulated liquid spinal fluid specimens

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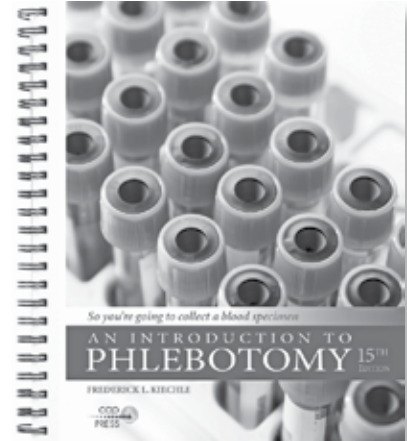
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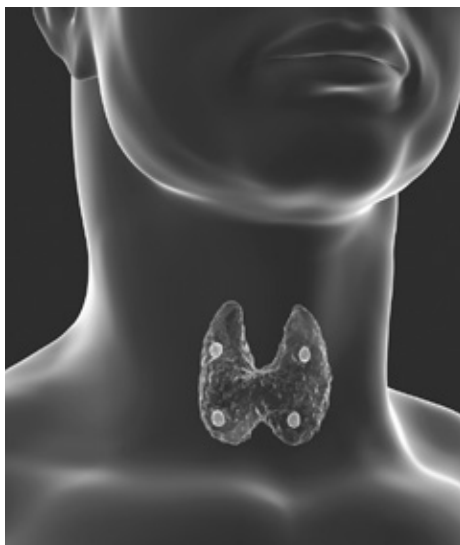
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7 Endocrinology



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New Programs

NEW

Parathyroid Hormone (PTH)..... 86

Analyte Changes

CA 125 added to Ligand—General (K/KK) and removed from Tumor Markers (TM/TMX) 82

Discontinued Programs

Bone Markers and Vitamins (BMV6)
Bone and Mineral Metabolism, Urine (BU)

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
CA 125 <small>NEW</small>	■	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 B₁₂	■	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 BNP5

Analyte	Program Code	Challenges per Shipment
	BNP5	
BNP	■	5
NT-proBNP	■	5

Additional Information

- 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

- 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 BNP5, above. For additional information about the Quality Cross Check program, see page 36.

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

Analyte	Program Code	Challenges per Shipment
	Y/YY	
11-deoxycortisol	■	5
17-hydroxyprogesterone	■	5
Androstenedione	■	5
DHEA sulfate	■	5
Estradiol	■	5
Estriol, unconjugated (uE3)	■	5
Follicle-stimulating hormone (FSH)	■	5
Growth hormone (GH)	■	5
IGF-1 (somatomedin C)	■	5
Luteinizing hormone (LH)	■	5
Progesterone	■	5
Prolactin	■	5
Sex hormone-binding globulin (SHBG)	■	5
Testosterone	■	5
Testosterone, bioavailable (measured)	■	5
Testosterone, free (measured)	■	5

Program Information

- Y - Five 5.0-mL liquid serum specimens in duplicate
- YY - Five 5.0-mL liquid serum specimens in triplicate
- Conventional and International System of Units (SI) reporting offered
- Three 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.*

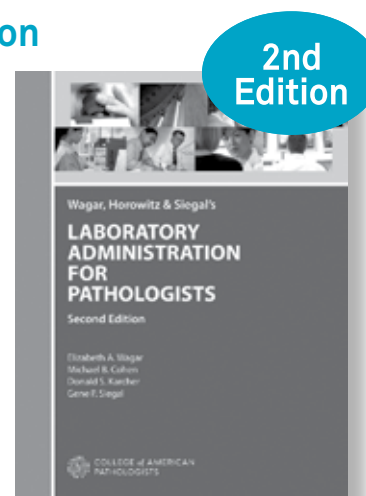
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Item number: PUB312
Hardcover; 296 pages; 2019

Bone Markers and Vitamins BMV1, BMV2, BMV3, BMV4, BMV5

Analyte	Program Code					Challenges per Shipment
	BMV1	BMV2	BMV3	BMV4	BMV5	
1,25-dihydroxy vitamin D	■					3
Bone-specific alkaline phosphatase		■				3
Vitamin A			■			3
Vitamin E, total				■		3
C-telopeptide					■	3

Program Information

- BMV1-4 - Three 5.0-mL liquid serum specimens for each program
- BMV5 - Three 1.0-mL liquid serum specimens
- Two shipments per year

7

Endocrinology

Insulin, Gastrin, and C-peptide ING

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

Program Information

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

Parathyroid Hormone PTH

NEW

Analyte/Procedure	Program Code	Challenges per Shipment
	PTH	
Parathyroid hormone (PTH)	■	5

Program Information

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

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 86. For additional information about the Quality Cross Check program, see page 36.

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 lyophilized serum specimens in duplicate
- Report up to three instruments.
- 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
Gastrin NEW	■	3
Glucose	■	3
Insulin	■	3

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

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 82.

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 82.

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 liquid serum 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
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.
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- 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	82
Sex Hormones	YVM	Y	84

Program Information

- KVM - Five 5.0-mL liquid serum specimens; three shipments per year
- YVM - Five 5.0-mL liquid serum specimens in duplicate; three 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.
- Our reconfigured programs better meet today's blood gas laboratory needs.

All current and new 2025 Centers for Medicare & Medicaid Services (CMS) regulated analytes are listed in **bold type**.

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, AQH

Analyte	Program Code		Challenges per Shipment
	AQ	AQH	
Calcium, ionized	■	■	2
Chloride	■	■	5
Creatinine	■	■	5
Glucose	■	■	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	■	■	5
Urea nitrogen (BUN)	■	■	5

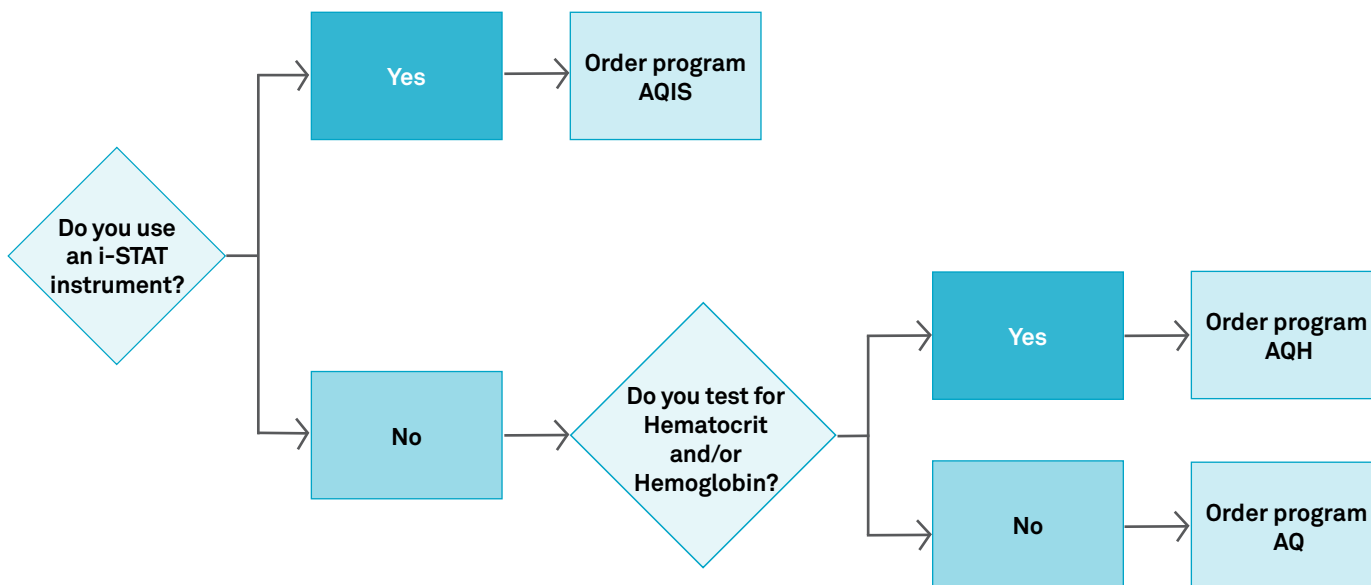
Program Information

- AQ - Five 2.5-mL aqueous specimens in duplicate; appropriate for all methods except i-STAT
- AQH - 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
- 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 and AQHQ, on page 94.


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



Critical Care Blood Gas, i-STAT AQIS		
Analyte	Program Code	Challenges per Shipment
	AQIS	
Calcium, ionized	■	2
Chloride	■	5
Creatinine	■	5
Glucose	■	5
Hematocrit	■	5
Hemoglobin, estimated	■	5
Lactate	■	2
pCO ₂	■	5
pH	■	5
pO ₂	■	5
Potassium	■	5
Sodium	■	5
tCO ₂	■	5
Urea nitrogen (BUN)	■	5

Program Information

- AQIS - Five specimens in duplicate for i-STAT only
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



For multiple instrument reporting options, see the Quality Cross Check program, AQSQ, on page 94.

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Quality Cross Check—Critical Care Blood Gas AQQ, AQHQ, AQSQ

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

Program Information

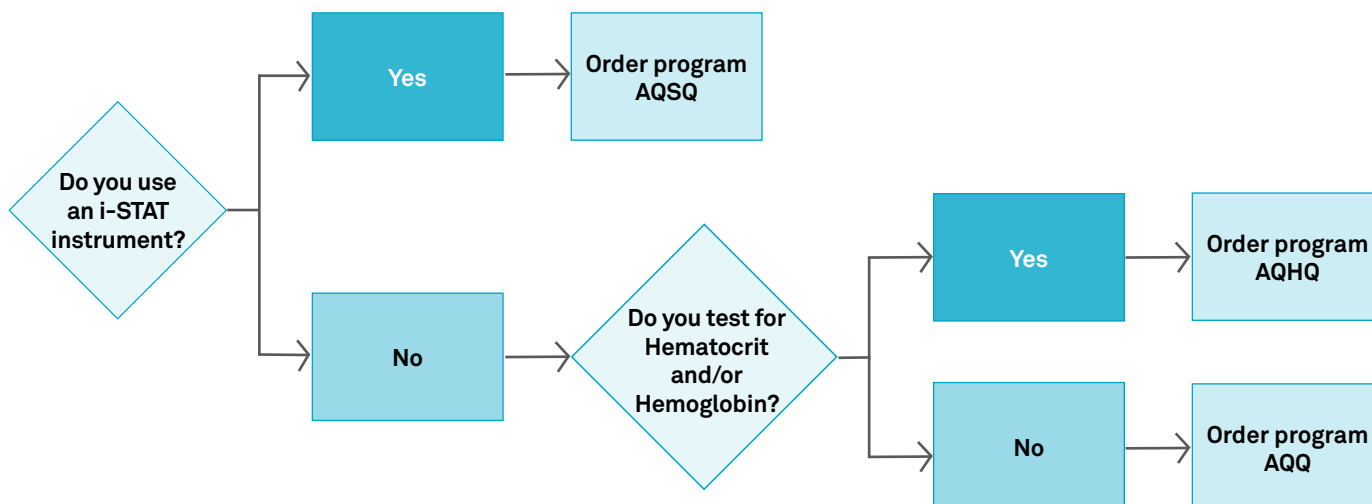
- AQQ - Three 2.5-mL specimens in triplicate; appropriate for all methods except i-STAT
- AQHQ - Three 2.5-mL specimens in triplicate and three 2.5-mL specimens for hematocrit testing in triplicate; appropriate for all methods except i-STAT
- AQSQ - Three 1.7-mL specimens in triplicate for i-STAT methods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

Additional Information

- It is not appropriate to report hemoglobin and hematocrit results by co-oximetry in these programs.
- These programs do not meet regulatory requirements for proficiency testing; see programs AQ, AQH, and AQIS on pages 92-93. For additional information about the Quality Cross Check program, see page 36.

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.



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

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 36.

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

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9 Toxicology



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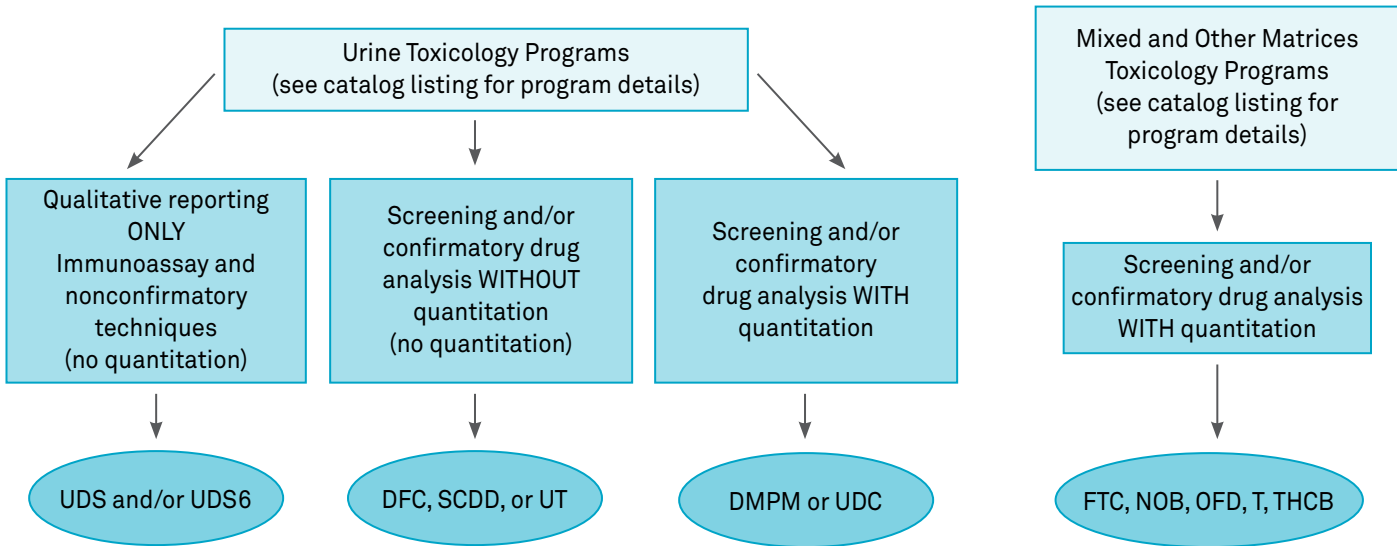
New Analyte/Drug Additions **NEW**

Etizolam (UT).....	99
Xylazine (T, UT)	99
Zolpidem carboxylic acid (DFC).....	111

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

*Same compound

CAP/ADLM 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 ADLM 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

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

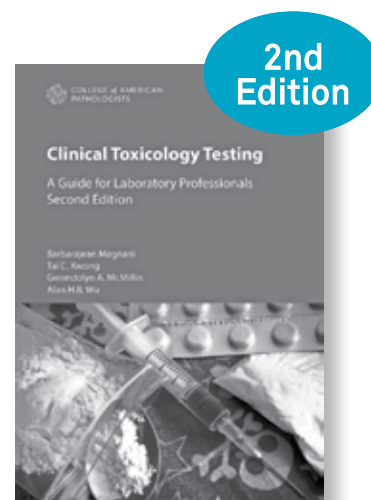
This book is a practical guide to directing hospital toxicology laboratory operations. This edition features expanded sections on testing in the clinical setting, methodologies, and more user-friendly information on specific analytes. It provides the reader with a comprehensive view of what is needed—and 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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Item number: PUB227
Softcover; 368 pages; 2020

CAP/ADLM 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 ADLM 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
Cannabinoid	■	5
Delta-9-THC	■	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

This program does not meet the regulatory requirements for proficiency testing for laboratories that quantitate Acetaminophen and/or Salicylate for TDM purposes.

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/ADLM 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



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/ADLM 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



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	
Cotinine	■	3
Nicotine	■	3

Program Information

- Three 25.0-mL urine specimens
- Designed for laboratories that qualitatively and/or quantitatively test for 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	■	3
Arsenic	■	3
Chromium	■	3
Cobalt	■	3
Copper	■	3
Lead	■	3
Manganese	■	3
Mercury	■	3
Selenium	■	3
Thallium	■	3
Zinc	■	3

Program Information

- Three 12.0-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	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
Carbamazepine-10, 11-epoxide	Hydromorphone	Norfentanyl	Salicylate
Carisoprodol	Hydroxybupropion	Norfluoxetine	Sertraline
Chlordiazepoxide	Hydroxyzine	Norketamine	Strychnine
Chlorpheniramine	Ibuprofen	Normeperidine	Tapentadol
Citalopram	Imipramine	Normirtazapine	Temazepam
Clomipramine	Ketamine	Noroxycodone	Toripamate
Clonazepam	Lamotrigine	Norsertaline	Tramadol
Clozapine	Levetiracetam	Nortrimipramine	Trazodone
Cocaethylene	Lidocaine	Nortriptyline	Trimipramine
Cocaine	Lorazepam	Norverapamil	Valproic acid
Codeine	Lysergic acid diethylamide (LSD)	O-desmethyltramadol	Venlafaxine
Cyclobenzaprine*	Meperidine*	Olanzapine	Verapamil
Delta-9-THC	Mephedrone	Oxazepam	Zolpidem
Delta-9-THC-COOH	Meprobamate	Oxycodone	
Demoxepam	Methadone		
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-8-THC	■	3
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

Sample Exchange Registry for Alternative Assessment

When no formal proficiency testing is yet available, join the CAP's Sample Exchange Registry. After at least three laboratories are identified as testing for the same rare analyte, the CAP can anonymously deliver a sample from each laboratory to another participating facility, all of whom then report their results to us. We send each participant a custom result report, including an anonymous participant summary covering all the laboratories that took part.

Learn more at cap.org

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

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

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	100

Program Information

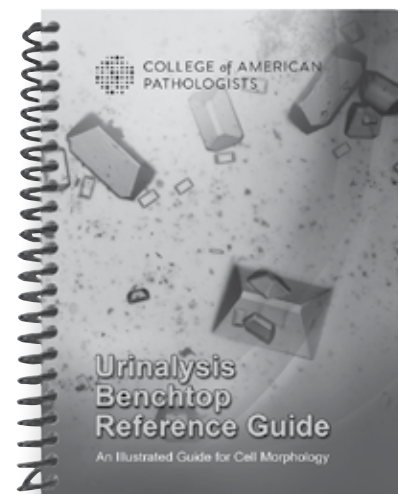
- Five 10.0-mL liquid urine specimens
- Three shipments per year

Urinalysis Benchtop Reference Guide

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- Eight tabbed sections for easy reference
- A durable and water-resistant format to withstand years of benchtop use—5" x 6½"

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10 Accuracy-Based Programs



The CAP's Accuracy-Based Programs do what proficiency testing can't.

- Use the CAP's Accuracy-Based Programs to verify the accuracy of your test results against a gold standard.
- 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

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New Analyte Additions **NEW**

Accuracy-Based Glucose, Insulin and C-peptide (ABGIC).....	118
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Accuracy-Based Programs

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

Accuracy-Based Lipids ABL

Analyte	Program Code	Challenges per Shipment
	ABL	
Apolipoprotein A1	■	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

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.

eGFR results will be evaluated with a calculation verification comparison.

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

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 A1c Accuracy Calibration Verification/Linearity LN15

Analyte	Program Code	
	LN15	LN15 Target Range
Hemoglobin A1c	■	5%–12%

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

CAP-assigned target values are derived from Hemoglobin A1c measurements assayed by National Glycohemoglobin Standardization Program (NGSP) secondary reference laboratories.

Program Information

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

Hemoglobin A1c Waived GH2

Analyte	Program Code	Challenges per Shipment
	GH2	
Hemoglobin A1c	■	3

Additional Information

- This program will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- For multiple instrument reporting options, see the Quality Cross Check program, GHQ, see page 62.
- This program has limited stability. Laboratories outside the US or Canada should consider purchasing GH5I, which has longer stability.

Program Information

- Accuracy-Based program
- Three 0.8-mL liquid human whole blood specimens
- Two shipments per year
- Designed for waived methods

Hemoglobin A1c GH5

	Program Code	Challenges per Shipment
	GH5	
Hemoglobin A1c	■	5

Additional Information

- This program will be evaluated against the National Glycohemoglobin Standardization Program (NGSP) reference method.
- For multiple instrument reporting options, see the Quality Cross Check program, GHQ, see page 62.
- This program has limited stability. Laboratories outside the US or Canada should

Program Information

- Accuracy-Based program
- Five 0.8-mL liquid human whole blood specimens
- Three 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.

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

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

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

Color Atlas of Hematology—Vol 1. Peripheral Blood Color Atlas of Hematology—Vol 2. Bone Marrow

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

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Vol 1. Peripheral Blood

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Vol 2. Bone Marrow

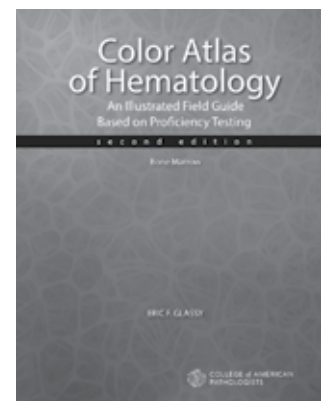
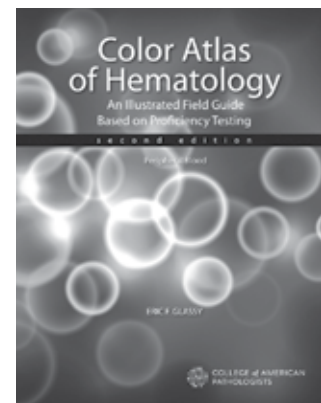
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Learn more



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	54-56
Cerebrospinal Fluid	MVM	M	74
Urine Chemistry—General	UVM	U	68

Coagulation—Limited, Validated Material

Validated Material	Validated Material Code	Corresponding Program	Page
Coagulation—Limited	CGM	CGL	166

Endocrinology, Validated Materials

Validated Material	Validated Material Code	Corresponding Program	Page
Ligand—General	KVM	K	82
Sex Hormones	YVM	Y	84

Toxicology, Validated Material

Validated Material	Validated Material Code	Corresponding Program	Page
Urine Drug Testing, Screening	UDSM	UDS	100

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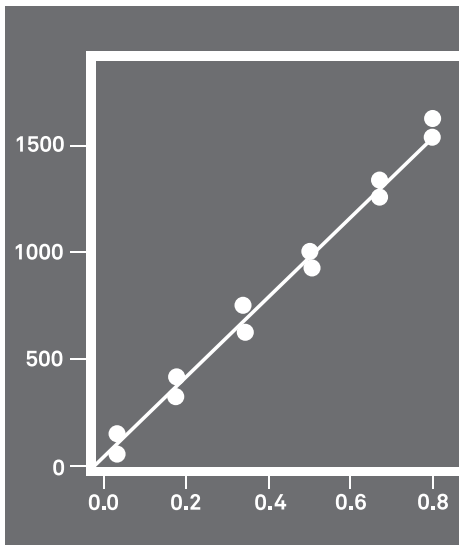
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More accurate

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patient testing**

LESS = MORE

11 Instrumentation Verification Tools



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

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

- Thyroid panel (LN50)
- Factor VIII (LN51)
- Hepatitis B viral load (LN52)

Instrumentation Verification Tools

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Discontinued Programs

Reticulocyte Calibration Verification/Linearity (LN18)

Calibration Verification/Linearity

The CAP CVL Program

The CAP is your trusted calibration verification and linearity (CVL) 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 CFR 493.1255(bX3). Don't 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'll receive:

- **Testing Kit**
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 - Specimens—The majority of CAP CVL programs offer human-based materials to closely mimic your patient results.
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 - 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	54-56
LN2BV - Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124		
LN3 - Therapeutic Drug Monitoring CVL	125	CZ/CZX/CZ2X/Z	54-56
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LN5S - Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	125		
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LN12 - C-reactive Protein CVL	128	CRP	216
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LN15 - Hemoglobin A1c Accuracy CVL	128	GH2, GH5	62
LN16 - Homocysteine CVL	129	HMS	63
LN17 - Whole Blood Glucose CVL	129	N/A	
LN19 - Reticulocyte CVL	129	RT3	146
LN20 - Urine Albumin CVL	129	U	68
LN21 - High-Sensitivity C-reactive Protein CVL	130	HSCRP	63
LN22 - Flow Cytometry CVL	130	FL	224
LN23 - Prostate-Specific Antigen CVL	130	K/KK	82
LN24 - Creatinine Accuracy CVL	131	C1, C3/C3X, C4, CZ/CZX/CZ2X	54-56
LN25 - Troponin I CVL	131	CRT, CRTI	60
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LN31 - Immunosuppressive Drugs CVL	132	CS	58
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LN36 - Heparin CVL	133	CGS4	168
LN37 - von Willebrand Factor Antigen CVL	133	CGS3	168
LN38 - CMV Viral Load CVL	133	VLS, VLS2	206
LN39 - HIV Viral Load CVL	133	HIVG, HV2	206
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LN48 - High-Sensitivity Troponin I CVL	135	HCRT, HCRTI	60
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LN50 - Thyroid Panel CVL NEW	136	C1, C3/C3X, CZ/CZX/CZ2X, K/KK	54-56, 82
LN51 - Factor VIII CVL NEW	133	CGE/CGEX, CGS3, ECF	167-168
LN52 - HBV Viral Load CVL NEW	133	HBVL/HBVL5	205

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	LN2 Target Ranges (All Instruments)	LN2BV Target Ranges		Units
			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		
	LN5, LN5S*	LN5 Target Ranges	LN5S Target Ranges
AFP	■	1.0–900.0 ng/mL	
CEA	■	0.5–750.0 ng/mL	0.6–90.0 ng/mL
Cortisol	■	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	
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

11

Instrumentation Verification Tools

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

11

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 A1c Accuracy Calibration Verification/Linearity LN15

Analyte	Program Code	
	LN15	LN15 Target Range
Hemoglobin A1c	■	5%–12%

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

CAP-assigned target values are derived from Hemoglobin A1c measurements assayed by National Glycohemoglobin Standardization Program (NGSP) secondary reference laboratories.

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 LN19

Instrument/Method	Program Code	
	LN19	LN19 Target Range
Beckman Coulter Unicel DxH series (except DxH 500)	■	0.5%–28.0%

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

Program Information

- Five 2.5-mL liquid whole blood specimens with pierceable caps
- Two shipments per year

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

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.

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.

eGFR results will be evaluated with a calculation verification comparison.

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 I Calibration Verification/Linearity LN25

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

LN25 is not appropriate for reporting high-sensitivity troponin. For reporting high-sensitivity troponin I, use program LN48 on page 135.

Program Information

- LN25 - Seven 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	■	35–25,000 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
- 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, LN51

Analyte	Program Code				Target Ranges
	LN35	LN36	LN37	LN51 NEW	
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%
Factor VIII clot-based				■	1-200 IU/dL
Factor VIII chromogenic				■	1-200 IU/dL

View your expedited linearity evaluations for LN35, LN36, and LN37 within two business days by logging into e-LAB Solutions Suite.

The LN35, LN36, and LN37 CVL programs meet the CAP Accreditation Checklist requirements HEM.37363, 37365, 37373, and 37375.

Program Information

- LN35, LN37, LN51 - 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, LN52

Analyte	Program Code				Target Ranges
	LN38	LN39	LN45	LN52 NEW	
CMV viral load	■				316.0–8.0M IU/mL
HIV viral load		■			50.0–5.0M IU/mL
HCV viral load			■		50.0-280.0M IU/mL
HBV viral load				■	1.3 log–8.5 log IU/mL

View your expedited linearity evaluations for LN38, LN39, and LN45 within two business days by logging into e-LAB Solutions Suite.

Program Information

- LN38 - Six 1.5-mL liquid plasma specimens
- LN39 - Six 2.5-mL liquid plasma specimens
- LN45 - Seven 2.5-mL frozen DNA specimens
- LN52 - Seven 2.5-mL frozen DNA specimens
- Two shipments per year; LN45 and LN52 ship 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.

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 µIU/mL

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

Program Information

- Seven 2.0-mL frozen serum specimens
- 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

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

Program Information

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

High-Sensitivity Troponin I Calibration Verification/Linearity LN48

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

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

Program Information

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

Cystatin C Calibration Verification/Linearity LN49

Analyte/Procedure	Program Code	
	LN49	Target Range
Cystatin C	■	0.5 - 8.0 mg/L
Estimated glomerular filtration rate (eGFR)	■	

eGFR results will be evaluated with a calculation verification comparison.

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

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.

NEW

Thyroid Panel Calibration Verification/Linearity LN50

Analyte	Program Code	LN50 Target Ranges
	LN50	
Triiodothyronine (T3), free	■	1.0–18.0 pg/mL
Triiodothyronine (T3), total	■	0.4–7.0 ng/mL
Thyroxine (T4), free	■	0.7–7.0 ng/dL
Thyroxine (T4), total	■	1.0–27.0 µg/dL
Thyroid-stimulating hormone (TSH)	■	0.1–120.0 µIU/mL

Program Information

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

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 don't 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.

Instrumentation Quality Management Programs

Instrumentation I

Challenges	Program Code
	I
Gravimetric pipette calibration	■
Microtiter plate linearity	■
Refractometer calibration	■
Spectrophotometer (stray light check)	■
Fluorescent intensity check – fluorescent microscopes	■
pH meter check	■

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

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
- 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
Benzoyllecgonine	■
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

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	■	■	■

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

The material expires December 1, 2025.

12 Hematology and Clinical Microscopy



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

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

Hematology and Clinical Microscopy

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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		
Analyte/Procedure	Program Code	Challenges per Shipment
	HE	
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

- Five 3.0-mL whole blood specimens
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



Hematology Automated Differential Series FH1–FH4, FH9–FH10, FH13, FH16–FH17		
Analyte/Procedure	Program Code	Challenges per Shipment
	FH1–FH4, FH9–FH10, FH13, FH16–FH17	
Hematocrit	■	5
Hemoglobin	■	5
Immature granulocyte (IG)	■	5 (FH9 and FH17)
Immature platelet fraction (IPF)/reticulated platelet (RP)	■	5 (FH9 only)
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

Program Information

- FH1–4, FH10, FH16–17 - Five 2.5-mL whole blood specimens in vials with pierceable caps
- FH9, FH13 - Five 2.0-mL whole blood specimens in vials with pierceable caps
- For method compatibility, see instrument matrix on page 141.
- Conventional and International System of Units (SI) reporting offered
- Three shipments per year



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

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		■							
Beckman Coulter® AcT, 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 HA3/HA5			■						
Drew Scientific EXCELL 22, 2280			■						
HumaCount5D			■						
Nihon Kohden MEK 9100			■						
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, XR-series, XS-500i, XS-800i, XS-1000i, XS-1000i-AL, XS-1000iC, XT-1800i, XT-2000i, XT-4000i, Zybio EXZ 6000 series					■				
Beckman Coulter AcT 5diff (AL, CP, OV)						■			
DIRUI BF series						■			
Horiba ABX Pentra 60, 80, 120, Pentra DF Nexus						■			
Beckman Coulter LH 750, LH 755, LH 780, LH 785, UniCel DxH series (except DxH 500 series)							■		
Beckman 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, BC-7500 CRP									■

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 (IG)			■		3
Immature platelet fraction (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 140. For additional information about the Quality Cross Check program, see page 36.

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 141.
- 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

Blood Cell Identification, Photographs BCP

Procedure	Program Code	Challenges per Shipment
	BCP	
Blood cell identification	■	5
Educational challenge(s)	■	5

Program Information

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



Blood Cell Identification, Virtual BCPV

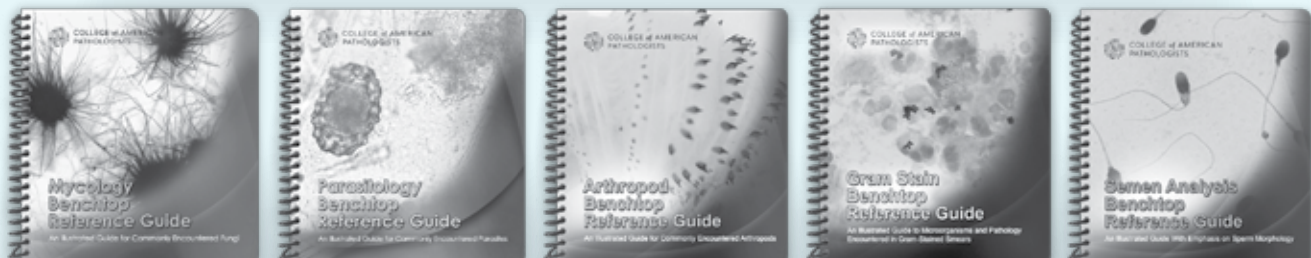
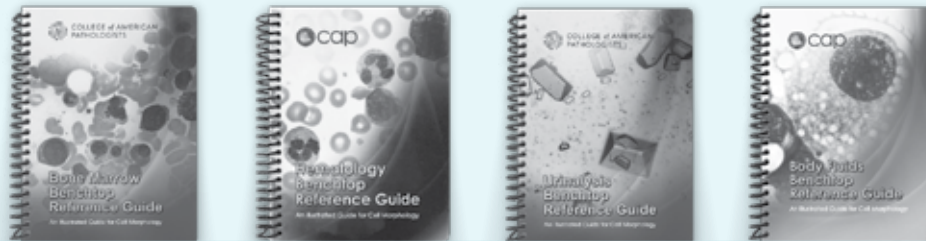
Analyte/Procedure	Program Code	Challenges per Shipment
	BCPV	
Blood cell identification	■	5
Educational challenge	■	5

Program Information

- Ten online images
- Three shipments per year



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Assessment of Consistency of Peripheral Blood Morphologic Observations 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 medical laboratory scientist/technologist staff dedicate to morphological assessment of blood cells. However, these staff must maintain their morphological skills. Laboratories have an annual requirement to do a morphologic comparison of their technical staff's peripheral blood smear results, assess their competency on peripheral blood smears, and provide appropriate education.

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 Program, and The Joint Commission laboratory requirements for consistency of reporting morphology among staff and personnel competency requirements (testing previously analyzed specimens).*

Data Collection

A series of online, whole slide images of Wright or 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. Each technologist will receive their own kit. 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)

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 orders may be purchased to accommodate the quantity of technologist result forms needed.

Preliminary study reports are provided at institution and technologist levels.

*Participation in this study helps laboratories meet applicable requirements:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Checklist statements: HEM.34400, consistency of morphologic observation among personnel performing blood cell microscopy at least annually; GEN.55500, element 5, Competency Assessment of Testing Personnel; GEN.55525, Performance Assessment of Supervisors/Consultants; DRA.11425, functions or responsibilities are properly performed by a qualified individual
- The Joint Commission Standards HR.01.05.03, 01.06.01 (EPs 3, 18, 19), HR.01.07.01, PI.03.01.01 (EPs 3-5), and LD.04.05.01, 04.05.03 (EPs 1-6) regarding in-service training, continuing education, competency, and evaluation of staff members.

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

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 12.

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

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
Beckman Coulter LH 500, LH 700 series, 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), XR-series, XT-2000i, XT-4000i				■	3
Pierceable caps			■	■	3

Program Information

- RT, RT2 - Three 1.0-mL stabilized red blood cell specimens
- RT3, RT4 - Three 3.0-mL stabilized red blood cell specimens
- Two shipments per year

For specific program testing components, see reticulocyte matrix below.

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	■	■	■		■

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
Beckman Coulter, LH 500, LH 700 series, 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), XR-series, 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 36.

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, RT4Q - Three 3.0-mL stabilized red blood cell specimens
- Includes percentage and absolute result reporting
- Report up to three instruments.
- Two shipments per year

Hemoglobinopathy HG

Procedure	Program Code	Challenges per Shipment
	HG	
Hemoglobin identification and quantification	■	4
Educational dry challenges	■	2
Hemoglobin A2 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

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, by 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

Waived Combination HCC

Analyte	Program Code	Challenges per Shipment
	HCC	
Hemoglobin	■	2
Whole blood glucose	■	2

Program Information

- Two 1.5-mL whole blood specimens; two shipments per year
- Conventional and International System of Units (SI) reporting offered
- To identify instrument specific programs, refer to the whole blood chemistry compatibility matrix on page 65.

Waived Hemoglobin HCC1

NEW

Analyte	Program Code	Challenges per Shipment
	HCC1	
Hemoglobin	■	2

Program Information

- Two 1.0-mL whole blood specimens; two shipments per year
- Conventional and International System of Units (SI) reporting offered
- To identify instrument specific programs, refer to the whole blood chemistry compatibility matrix on page 65.

Waived Combination HCC2

Analyte	Program Code	Challenges per Shipment
	HCC2	
Hematocrit	■	2
Hemoglobin	■	2
Urinalysis/urine hCG	■	2
Whole blood glucose	■	3

Program Information

- 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
- Conventional and International System of Units (SI) reporting offered
- To identify instrument specific programs, refer to the whole blood chemistry compatibility matrix on page 65.

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 (WBC) differential count and annotated cells for identification.
- Evaluate and identify red blood cell (RBC) morphology and identify specific white blood cells (WBC) in peripheral blood.
- Recognize and integrate problem-solving skills through the use of interpretive questions found throughout the discussion.
- See system requirements on page 12.

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
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 (WBC) 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 12.

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/HPATH1 prepares pathologists and pathology trainees with an interest in hematopathology to succeed by providing ongoing diagnostic learning and self-assessment.

The program includes 10 challenge cases per year written by expert hematopathologists. For each case the learner will:

- Review virtual whole slide image(s) in the context of a clinical scenario and relevant laboratory data.
- Select and interpret appropriate ancillary studies (IHC, flow cytometry, FISH, cytogenetics, molecular studies, etc) with real-time feedback.
- Simulate a real-world diagnostic workup to arrive at the appropriate diagnosis.
- Apply knowledge to answer three CME questions.

Cases span the breadth of benign and neoplastic hematopathology. Discussions incorporate current best practices in the workup, diagnosis, and subclassification of hematomolymphoid diseases.

Neoplastic entities are discussed in the context of both the International Consensus Classification (ICC) and the fifth edition of the World Health Organization (WHO) classification.

See system requirements on page 12.

Program Information

- HPATH - Five diagnostic challenges per activity (two activities per year), with online whole slide images. Reporting with CME credit is available for one participant.
- HPATH1 - Reporting option with CME credit for each additional participant (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 participant.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHHC).
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



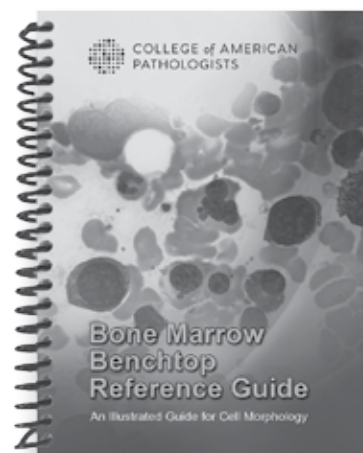
12

Bone Marrow Benchtop Reference Guide

With more than 60 different identifications and a detailed description for each cell morphology, this illustrated guide is an affordable, convenient way to identify various cell types quickly and confidently. Plus, its rugged construction makes it well-suited for heavy use at the benchtop.

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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

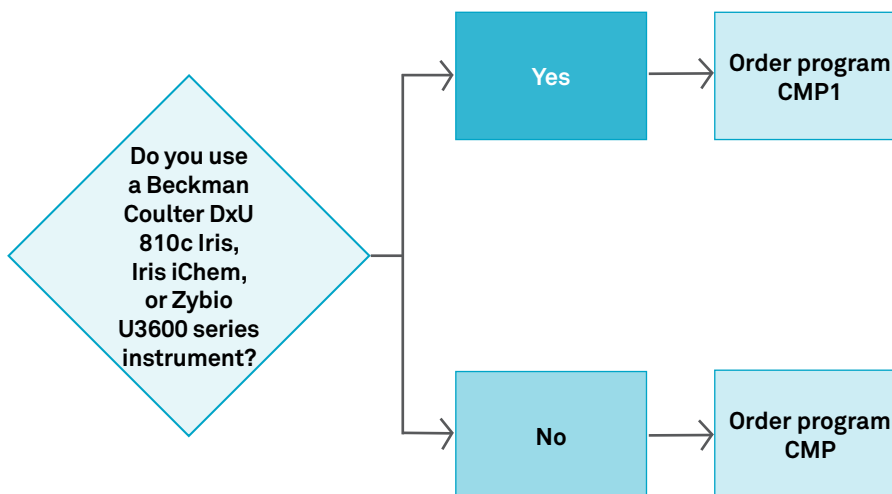
Program Information

- **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, Iris iChem, and Zybio U3600 Series 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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For multiple instrument reporting options, see the Quality Cross Check program, CMQ, on page 153.

Hematology and Clinical Microscopy



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 152. For additional information about the Quality Cross Check program, see page 36.

The Quality Cross Check Program:

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

Clinical Microscopy Miscellaneous Photopage CMMP

Procedure	Program Code	Challenges per Shipment
	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

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

Program Information

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

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

- ABF1–3 - Two 3.0-mL simulated body fluid specimens
- Two shipments per year

For method compatibility, see automated body fluid instrument matrix below.

Automated Body Fluid, Instrument Matrix

Instrument	ABF Series		
	ABF1	ABF2	ABF3
Advanced Instruments GloCyte, Siemens ADVIA 120/2120 series	■		
Beckman Coulter LH 700 series, Unicel 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 iQ200/DxU 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 12.

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



Assessment of Consistency of Body Fluid Morphologic Observations QPB10/QPB25

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 to assess consistency of reporting morphology among staff and competency 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 the manager with areas to focus on for improvement and education.

The study will help management meet applicable CLIA, CAP Laboratory Accreditation Program, and The Joint Commission laboratory requirements for consistency of reporting morphology among staff and personnel competency requirements (testing previously analyzed specimens).*

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 to identify miscellaneous cells and inclusions in cytocentrifuged preparations using their own kit and result form. Participants will provide additional information about their competency assessment programs, continuing education, and professional background. Information will be collected from each site regarding their institution's minimum continuing education programs and requirements for their technologists in who review body fluids, and relevant procedures and policies related to body fluid review assessment.

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

Program Information

To meet your technical staff morphology and competency assessment requirements:

- Result forms for up to 10 technologists (QPB10)
- Result forms for up to 25 technologists (QPB25)
- Multiple orders may be purchased to accommodate the quantity of technologist result forms needed.

*Participation in this study helps laboratories meet applicable requirements:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Checklist statements: HEM.35566, consistency of morphologic observation among personnel performing body fluid cell differentials at least annually; GEN.55500, Competency Assessment of Testing Personnel (element 5); GEN.55525, Performance Assessment of Supervisors/Consultants; DRA.11425, functions or responsibilities are properly performed by a qualified individual
- The Joint Commission Standards HR.01.05.03, 01.06.01 (EPs 3, 18,19), HR.01.07.01, PI.03.01.01(EPs 3-5), and LD.04.05.01, 04.05.03 (EPs 1-6) regarding in-service training, continuing education, competency, and evaluation of staff members

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

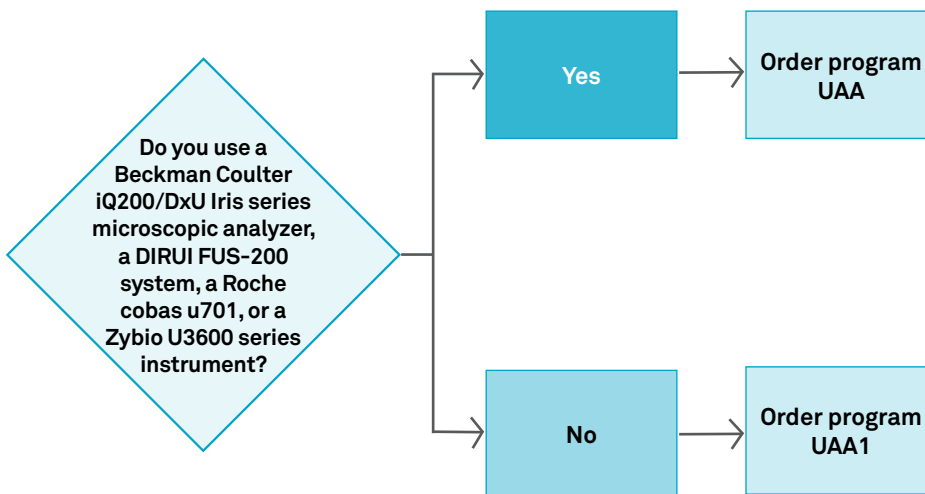
Automated Urine Microscopy UAA, UAA1

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

Program Information

- UAA - Two 10.0-mL liquid urine specimens for use with Beckman Coulter Iris, DIRUI, Roche, and Zybio instruments
- UAA1 - Two 12.0-mL liquid urine specimens for use with Sysmex instruments
- Two shipments per year

For method compatibility, see automated urine microscopy instrument matrix below.



Automated Urine Microscopy, Instrument Matrix

Instrument	UAA, UAA1	
	UAA	UAA1
Beckman Coulter iQ200/DxU Iris series	■	
DIRUI FUS-200	■	
Roche cobas u701	■	
77 Elektronika		■
Zybio U3600 series	■	
ARKRAY Aution Hybrid		■
Siemens Atellica UAS 800		■
Sysmex UF 50, 100, 500i, 1000i, 3000/4000/5000, Sysmex UX 2000		■

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 Laboratory Accreditation Program requirements.
- Examine online whole slide images that include a manual differential count.
- See system requirements on page 12.

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 36.

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 68.

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



Enhance your learning with continuing education (CE) content included with many of our proficiency testing programs.

- For many of our PT/EQA programs, each member of a participating laboratory has complimentary enrollment to online CE activities.
- Advance skills with education activities developed by more than 600 physicians and doctoral scientists with expertise in pathology and laboratory medicine.

Reproductive Medicine

Andrology and Embryology..... 162

Andrology and Embryology

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

Semen Analysis SC, SC1, PV, PV1, SM, SV, ASA								
Procedure	Program Code							Challenges per Shipment
	SC	SC1	PV	PV1	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

Analyte	Program Code	Challenges per Shipment
	Y/YY	
11-deoxycortisol	■	5
17-hydroxyprogesterone	■	5
Androstenedione	■	5
DHEA sulfate	■	5
Estradiol	■	5
Estriol, unconjugated (uE3)	■	5
Follicle-stimulating hormone (FSH)	■	5
Growth hormone (GH)	■	5
IGF-1 (somatomedin C)	■	5
Luteinizing hormone (LH)	■	5
Progesterone	■	5
Prolactin	■	5
Sex hormone-binding globulin (SHBG)	■	5
Testosterone	■	5
Testosterone, bioavailable (measured)	■	5
Testosterone, free (measured)	■	5

Program Information

- Y - Five 5.0-mL liquid serum specimens in duplicate
- YY - Five 5.0-mL liquid serum specimens in triplicate
- Conventional and International System of Units (SI) reporting offered
- Three 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

Performance Analytics Dashboard: Bringing it all together



The CAP's Performance Analytics Dashboard provides valuable insights into your laboratory's performance with a single comprehensive view of your CAP PT results and accreditation status.

Simplify analysis and reporting of PT performance data

- Quickly spot unacceptable results for follow-up to mitigate risk of inaccurate patient test results
- Review three years of PT results to identify trends and early indicators of potential problems

Prepare for your next CAP accreditation inspection

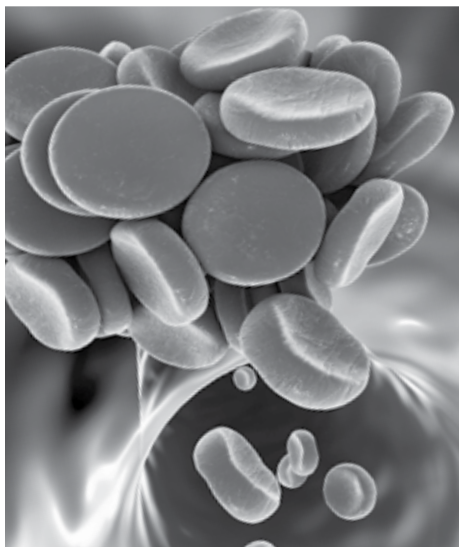
- Manage risk and compliance by identifying areas of improvement based on past deficiencies
- Review PT performance data to ensure appropriate corrective action has been taken for each unacceptable result

Monitor performance of your laboratory or system from a single dashboard

- Benchmark laboratory performance
- Export PT performance from individual laboratories or across the system for quality review meetings

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

14 Coagulation



Provide for patient care and safety.

The CAP continues to support laboratory quality initiatives through the development, maintenance, and enhancement of effective PT/EQA programs for coagulation.

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, below.

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



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, above. For additional information about the Quality Cross Check program, see page 36.

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	Plasminogen activator inhibitor
Activated partial thromboplastin time	Plasminogen activity/antigen
Activated protein C resistance	Prekallikrein
Alpha-2-antiplasmin	Protein C
Antithrombin activity/antigen	Protein S
Dilute prothrombin time	Prothrombin time
Factors II, V, VII, VIII, IX, X, XI, XII, and XIII	Reptilase time
Fibrinogen antigen	Thrombin time
Heparin-induced thrombocytopenia (HIT)	

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 IX chromogenic	■	3
Factor X clot based	■	3
Factor X chromogenic	■	3
Factor XI	■	3
Factor XII	■	3
Factor XIII	■	3
Fibrinogen antigen	■	3
Reptilase time	■	3
Thrombin time	■	3

Program Information

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

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 prothrombin time	2					
Dilute Russell's viper venom time	2					
Lupus anticoagulant sensitive aPTT (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 166.

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

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

Coagulation Calibration Verification/Linearity LN35, LN36, LN37, LN51

Analyte	Program Code				Target Ranges
	LN35	LN36	LN37	LN51 NEW	
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%
Factor VIII clot-based				■	1-200 IU/dL
Factor VIII chromogenic				■	1-200 IU/dL

View your expedited linearity evaluations for LN35, LN36, and LN37 within two business days by logging into e-LAB Solutions Suite.

The LN35, LN36, and LN37 CVL programs meet the CAP Accreditation Checklist requirements HEM.37363, 37365, 37373, and 37375.

Program Information

- LN35, LN37, LN51 - 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

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 166.

Program Information

- APXBN, DBGN, FNPX, RVBN - 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 C-ACT	■					3
Helena Actalyke MAX-ACT	■					3
IL GEM Hemochron 100/ACT+				■		3
IL GEM Hemochron 100/ACT-LR			■			3
IL Hemochron CA 510/FTCA510	■					3
IL Hemochron FTK-ACT	■					3
IL Hemochron P214/P215	■					3
IL Hemochron Signature Elite/ Hemochron Jr./ACT+				■		3
IL Hemochron Signature Elite/ Hemochron Jr./ACT-LR			■			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, CT1Q, CT2Q, CT3Q, and CT5Q, on page 171.

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 C-ACT®	■					3
Helena Actalyke MAX-ACT	■					
IL GEM Hemochron 100/ACT+				■		
IL GEM Hemochron 100/ACT-LR			■			
IL Hemochron® CA510/FTCA510	■					3
IL Hemochron FTK-ACT	■					3
IL Hemochron P214/P215	■					3
IL Hemochron Signature Elite/ Hemochron Jr./ACT+				■		3
IL Hemochron Signature Elite/ Hemochron Jr./ACT-LR			■			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 170. For additional information about the Quality Cross Check program, see page 36.

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

Platelet Function PF, PF1

Instrument/Method	Program Code		Challenges per Shipment
	PF	PF1	
Platelet aggregation	■		2
PFA-100, PFA-200		■	2
Helena Plateletworks®		■	2

These programs require the draw of a normal donor sample.

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

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® <i>delta</i>	■	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 <i>sigma</i> , ROTEM <i>delta</i>	■	2

Program Information

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

This program requires the draw of a normal donor sample.

Whole Blood Viscoelastic Assays in Clinical Diagnosis

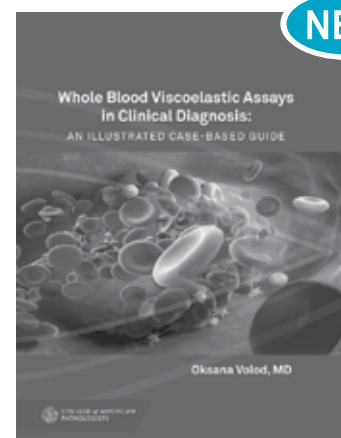
The use of whole blood viscoelastic assays (TEG and ROTEM) to monitor or diagnose patients with various coagulopathies has increased exponentially in recent years. *Whole Blood Viscoelastic Assays in Clinical Diagnosis* offers a practical and comprehensive case-based guide for tracings interpretation to ensure testing quality and patient safety. Pathologists and other laboratory personnel will all benefit from its case use studies for hemostatic disorders, pregnancy, trauma, cardiac surgery, and more.

Topics covered include:

- Overview of hemostasis physiology
- Viscoelastic testing
- Case studies addressing different hemostatic disorders
- Clinical uses of viscoelastic assays

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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 whole blood coagulation 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
CoaguSense™	■				
IL GEM Hemochron Jr. Signature/Signature+, Signature Elite and Jr. II – citrated cuvette		■			
IL GEM Hemochron Jr. Signature/Signature+, Signature Elite and Jr. II – noncitrated cuvette			■		
i-STAT/i-STAT PTPlus	■				
Roche CoaguChek XS Plus, XS Pro, and CoaguChek Pro II				■	
Roche CoaguChek XS System					■
Siemens Xprexia 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.

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

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

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

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

Program Information

- 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

Coagulation—Limited, Validated Material

Validated Material	Program Code	Corresponding Program	Page
Coagulation	CGM	CGL	166

Program Information

- Seven 1.0-mL lyophilized plasma specimens and one 2.0-mL serum specimen; three shipments per year

With direct transmission, less equals more.

Transmit your quantitative PT/EQA 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



15 Microbiology



Count on the CAP to support your PT/EQA needs in microbiology.

- New gastrointestinal panel for global laboratories (GIPN)
- Five-challenge PT/EQA programs for rapid malaria (RML5) and *Trichomonas vaginalis*, molecular (TVG5)

Microbiology

All current and new 2025 Centers for Medicare & Medicaid Services (CMS) regulated analytes are listed in **bold** type.

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New Programs

NEW

<i>Trichomonas vaginalis</i> , Molecular, 5 Challenge (TVG5)	197
Rapid Malaria, 5 Challenge (RML5)	198
Gastrointestinal Panel, Global (GIPN)	213

Discontinued Programs

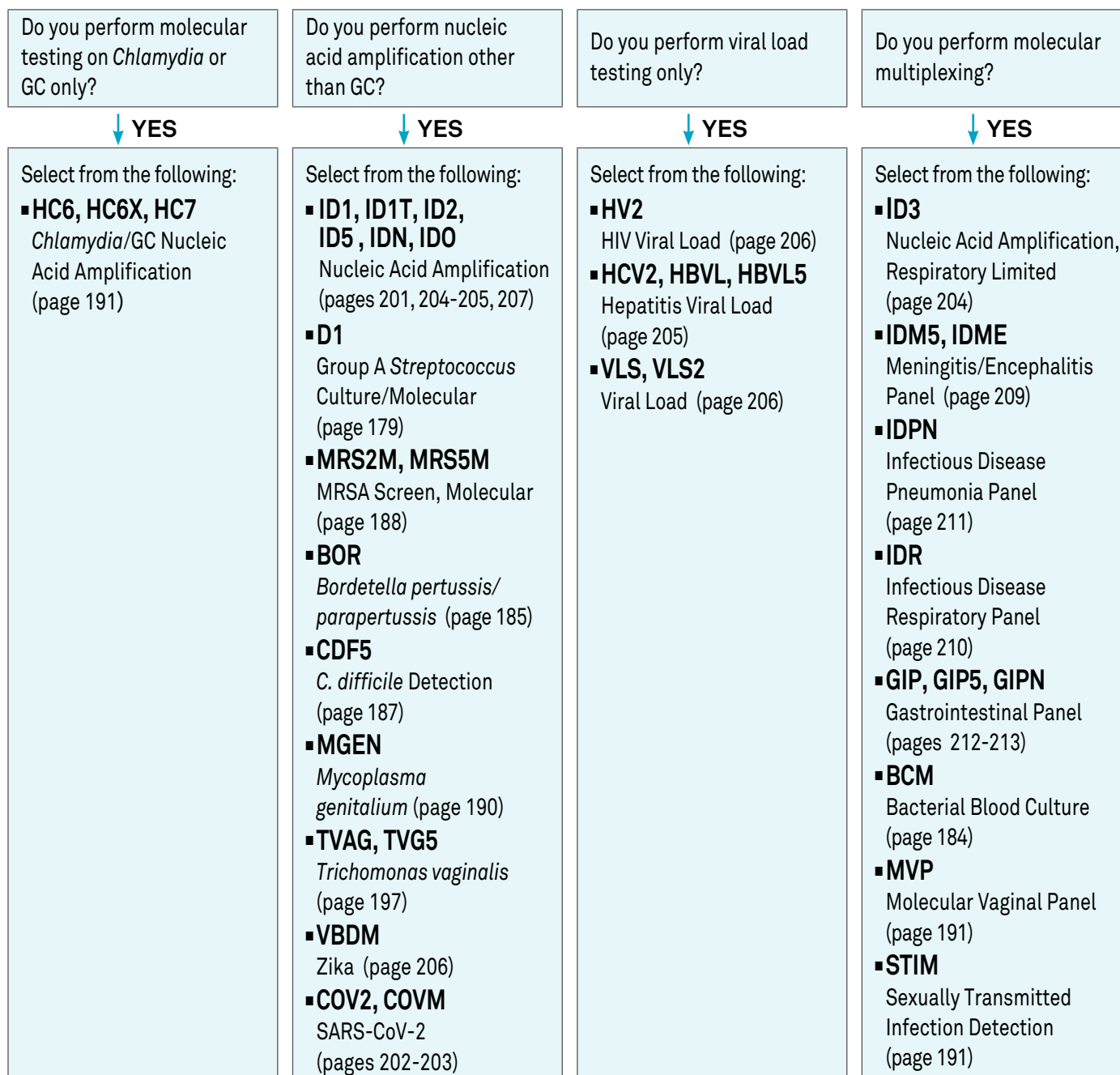
C. trachomatis Antigen Detection (HC1)

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 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 and morphology	■	■	■	■		
Antimicrobial susceptibility testing	■	■	■			
Bacterial antigen/toxin 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	■	2 graded
Bacterial antigen/toxin detection	■	2
Bacterial identification	■	5
Gram stain and morphology	■	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, Group A *Streptococcus*, and *C. difficile*
- Shipment C: *C. difficile* antigen/toxin and Group A *Streptococcus*

Program Information

- Five swab specimens with diluents in duplicate for culture
- Culture sources may include wounds, blood, respiratory, urines, stools, and anaerobes on a rotational basis.
- Three specimens for bacterial antigen/toxin 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 and bacteria (aerobic and anaerobic) 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.

Group A *Streptococcus* Culture/Molecular D1

Procedure	Program Code		Challenges per Shipment
	D1		
Bacterial identification	■		5
Culture source:	Throat		
Microbiologic level:	Presence or absence of Group A <i>Streptococcus</i> determination		

Program Information

- Five swab specimens with diluents in duplicate
- Throat swabs compatible with molecular- and culture-based methods
- Three shipments per year



GC and Urine Cultures D2, D3

Procedure	Program Code		Challenges per Shipment
	D2	D3	
Antimicrobial susceptibility testing	■		2
Bacterial identification	■	■	5
Gram stain and morphology	■	■	1
Culture source:	Urine	Cervical	
Microbiologic level:	Organisms identified to the extent of your laboratory's protocol	Presence or absence of <i>Neisseria gonorrhoeae</i> determination	

Program Information

- D2 - Five loop specimens with diluents in duplicate, with two susceptibility challenges and one Gram stain and morphology challenge
- D3 - Five loop specimens with diluents in duplicate, and one Gram stain and morphology challenge
- Three shipments per year



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	■	2
GC culture	■	2
Gram stain and morphology	■	2
Group A <i>Streptococcus</i> antigen detection*	■	1
Throat culture/molecular	■	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 two susceptibility challenges.
- Throat swabs compatible with molecular- and culture-based methods
- Three shipments per year



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/molecular		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 and morphology	■	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.

Assessment of Consistency of Gram Stain Morphologic Observations 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 medical laboratory scientist/technologist staff 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 Program, and The Joint Commission laboratory requirements for morphology consistency of reporting among staff and personnel competency requirements (testing previously analyzed specimens).*

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 about their continuing education requirements in microbiology and relevant laboratory procedures and policies related to Gram stain assessment. Each technologist will receive their own kit and result form.

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)

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 orders may be purchased to accommodate the quantity of technologist result forms needed.

Preliminary study reports are provided at institution and technologist levels.

*Participation in this study helps laboratories meet:

- CLIA personnel requirements (Subpart M, 42 CFR §493.1)
- CAP Laboratory Accreditation Program Microbiology Checklist statements: MIC.11060, Culture Result Reporting, personnel performing Gram stains for this purpose are subject to competency assessment; MIC.11350, Morphologic Observation Evaluation, the laboratory evaluates consistency of morphologic observation among personnel performing microscopic analysis (eg, stains, wet preparations) from direct specimens and cultured organisms at least annually. The laboratory director or designee must determine acceptability criteria for agreement.
- CAP Laboratory Accreditation Program Checklist items: GEN.55500, element 5, Competency Assessment of Testing Personnel; GEN.55525, Performance Assessment of Supervisors/Consultants; DRA.11425, functions or responsibilities are properly performed by a qualified individual.
- The Joint Commission Standards HR.01.05.03, 01.06.01 (EPs 3, 18,19), HR.01.07.01, PI.03.01.01(EPs 3-5), and LD.04.05.01, 04.05.03 (EPs 1-6) regarding in-service training, continuing education, competency, and evaluation of staff members

This is a one-time study conducted in the fourth 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 12.

Program Information

- VGS1, VGS2 - 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
- Program includes A549 cells to meet sample adequacy control requirement.
- 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

Blood Culture BCS

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

Program Information

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



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

Blood Culture, *Staphylococcus aureus* BCS1

Analyte	Program Code	Challenges per Shipment
	BCS1	
<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.

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.



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 Program 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

This study will 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

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



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

C. trachomatis Antigen Detection HC3

Procedure	Program Code	Challenges per Shipment
	HC3	
<i>C. trachomatis</i> antigen detection (EIA)	■	5

Program Information

- 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	■	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 customers outside the US due to US 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 customers outside the US due to US export law restrictions
- SPN - Two 1.0-mL liquid specimens; for use with rapid or molecular testing methods; intended for laboratories outside the US
- 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 customers outside the US due to US 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 sp.</i>	■		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 or TVG5), on page 197.

****Trichomonas vaginalis* is only reported to CMS for the VS program.

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

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



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

Molecular Vaginal Panel MVP

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

Program Information

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

Sexually Transmitted Infection Detection, Molecular STIM

Analyte	Program Code	Challenges per Shipment
	STIM	
<i>Chlamydia trachomatis</i>	■	5
<i>Neisseria gonorrhoeae</i>	■	5
<i>Mycoplasma genitalium</i>	■	5
<i>Trichomonas vaginalis</i>	■	5

Program Information

- Five 2.0-mL simulated urogenital specimens
- Designed for molecular multiplex methods
- 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 12.

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, TVG5

Analyte	Program Code	
	Challenges per Shipment	
	TVAG	TVG5 NEW
Trichomonas vaginalis	3	5

Note: Only analytes in TVG5 will meet CMS requirements for parasite identification.

Program Information

- TVAG - Three 1.5-mL liquid specimens; two shipments per year
- TVG5 - Five 1.5-mL liquid specimens; three 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

**Mycobacterium tuberculosis* detection is only reported to CMS for the MTR5 program.

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	■	1
Mold and yeast identification	■	5

Program Information

- Five loops for culture with diluents in duplicate and one 1.0-mL simulated cerebrospinal fluid specimen
- 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	■	1
Yeast identification	■	5

Program Information

- Five loops for culture with diluents in duplicate and one 1.0-mL simulated cerebrospinal fluid specimen
- 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 cerebrospinal 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 IgG 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

- PCP1, PCP2, PCP4 - 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
- P3 - Five 0.75-mL fecal suspensions for direct wet mount examination, photographs, and/or online images; one 0.75-mL fecal suspension
- 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
- P5 - Five 0.75-mL fecal suspensions **for *Giardia* and *Cryptosporidium* immunoassays and/or modified acid-fast stain**
- P, P3, P4, P5 program specimens are for *Giardia* and *Cryptosporidium* immunoassays and/or modified acid-fast stain
- Three shipments per year

<i>Trichomonas vaginalis</i>, Molecular TVAG, TVG5		
Analyte	Program Code	
	Challenges per Shipment	
	TVAG	TVG5 NEW
<i>Trichomonas vaginalis</i>	3	5

Note: Only analytes in TVG5 will meet CMS requirements for parasite identification.

Program Information

- TVAG - Three 1.5-mL liquid specimens; two shipments per year
- TVG5 - Five 1.5-mL liquid specimens; 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, RML5

Analyte	Program Code	
	Challenges per Shipment	
	RMAL	RML5 NEW
Rapid malaria detection	3	5
<i>Plasmodium falciparum</i> only	3	5

Note: Only analytes in program RML5 will meet CMS requirements for parasite antigen detection.

Program Information

- RMAL - Three 0.5-mL antigen specimens; two shipments per year
- RML5 - Five 0.5-mL liquid specimens; three 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

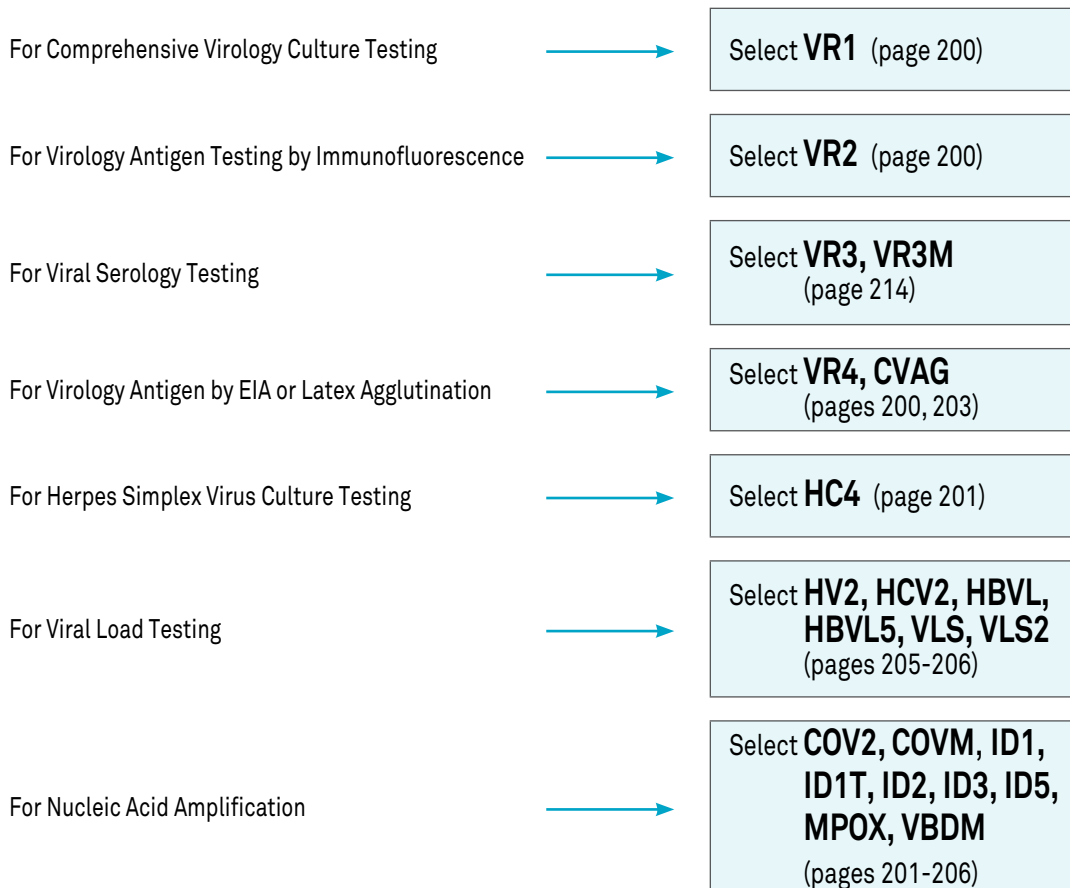
Analytes/procedures in **bold** type are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

Guide for Ordering Regulated Virology Programs

Program Code	Procedure	
	Viral Identification	Viral Antigen Detection
VR1	■	
VR2		■
VR4		■
HC4	■	
ID3	■	
ID5	■	
COVM	■	
CVAG		■

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 +1-847-832-7000, 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 (VZV) 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 (HSV) 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 (HSV)	■		1
Human herpesvirus 6	■		1
Human herpesvirus 8	■		1
Parvovirus B19	■		1
Varicella-zoster virus (VZV)	■		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.

Mpox Molecular MPOX

Procedure	Program Code	Challenges per Shipment
	MPOX	
Monkeypox 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

This program does not meet the proficiency testing requirements for laboratories subject to US Regulations and CAP-accredited laboratories that are performing non-waived testing. 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 36.

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 Molecular, 5 Challenge COVM

Analyte	Program Code	Challenges per Shipment
	COVM	
SARS-CoV-2	■	5

For multiple instrument reporting options, see the Quality Cross Check program, COV2Q, on page 202.

Program Information

- Five 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
- Three shipments per year

SARS-CoV-2 Antigen COVAG

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

This program does not meet the proficiency testing requirements for laboratories subject to US Regulations and CAP-accredited laboratories that are performing non-waived testing. For multiple instrument reporting options, see the Quality Cross Check program, COVAQ, below.

Program Information

- Three 0.5-mL simulated respiratory specimens
- Designed for antigen test
- Two shipments per year

SARS-CoV-2 Antigen, 5 Challenge CVAG

Analyte	Program Code	Challenges per Shipment
	CVAG	
SARS-CoV-2 antigen	■	5

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

Program Information

- Five 0.5 mL simulated respiratory specimens
- Designed for antigen test
- Three 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, above. For additional information about the Quality Cross Check program, see page 36.

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

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

This program 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, on page 205.

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

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 contain human genome material or sequences from human RNase P gene.

This program does not meet regulatory requirements for proficiency testing; see program ID3, on page 204. For additional information about the Quality Cross Check program, see page 36.

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 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 (HSV)	■	5
Varicella-zoster virus (VZV)	■	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, LN52

Analyte	Program Code				Target Ranges
	LN38	LN39	LN45	LN52 <small>NEW</small>	
CMV viral load	■				316.0–8.0M IU/mL
HIV viral load		■			50.0–5.0M IU/mL
HCV viral load			■		50.0-280.0M IU/mL
HBV viral load				■	1.3 log–8.5 log IU/mL

View your expedited linearity evaluations for LN38, LN39, and LN45 within two business days by logging into e-LAB Solutions Suite

Program Information

- LN38 - Six 1.5-mL liquid plasma specimens
- LN39 - Six 2.5-mL liquid plasma specimens
- LN45 - Seven 2.5-mL frozen DNA specimens
- LN52 - Seven 2.5-mL frozen DNA specimens
- Two shipments per year; LN45 and LN52 ship on dry ice

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

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	Fungal Identification	Parasite 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 IDME, IDM5

Analyte	Challenges per Shipment	
	Program Code	
	IDME	IDM5
<i>Escherichia coli</i> K1	3	5
<i>Haemophilus influenzae</i>	3	5
<i>Listeria monocytogenes</i>	3	5
<i>Neisseria meningitidis</i>	3	5
<i>Streptococcus agalactiae</i>	3	5
<i>Streptococcus pneumoniae</i>	3	5
Cytomegalovirus (CMV)	3	5
Enterovirus	3	5
Herpes simplex virus 1 (HSV-1)	3	5
Herpes simplex virus 2 (HSV-2)	3	5
Human herpesvirus 6 (HHV-6)	3	5
Human parechovirus	3	5
Varicella-zoster virus (VZV)	3	5
<i>Cryptococcus neoformans/gattii</i>	3	5

Note: Only IDM5 analytes in **bold** type will meet CMS requirements for bacteriology, fungal, and virology identification. For programs that include more than one subspecialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each subspecialty your laboratory performs.

Program Information

- IDME - Three 1.0-mL liquid specimens; two shipments per year
- IDM5 - Five 1.0-mL liquid specimens; three shipments per year
- Designed for molecular multiplex panel users

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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 subspecialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each subspecialty your laboratory performs.

Program Information

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

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

Program Information

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

*Laboratories performing SARS-CoV-2 testing, see the COVM/COV2 program on pages 202, 203.

Includes antimicrobial resistance genes, as appropriate. For programs that include more than one subspecialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each subspecialty your laboratory performs.

Gastrointestinal Panel GIP, GIP5

Analyte	Challenges per Shipment	
	Program Code	
	GIP	GIP5
Adenovirus	3	5
Astrovirus	3	5
<i>Campylobacter</i>	3	5
<i>Clostridioides (Clostridium) difficile</i> , toxin A/B	3	5
<i>Cryptosporidium</i>	3	5
<i>Cyclospora cayetanensis</i>	3	5
<i>Entamoeba histolytica</i>	3	5
Enteroaggregative <i>E. coli</i> (EAEC)	3	5
Enteropathogenic <i>E. coli</i> (EPEC)	3	5
Enterotoxigenic <i>E. coli</i> (ETEC) LT/ST	3	5
<i>Escherichia coli</i> O157	3	5
<i>Giardia duodenalis (lamblia)</i>	3	5
Norovirus GI/GII	3	5
<i>Plesiomonas shigelloides</i>	3	5
Rotavirus A	3	5
<i>Salmonella</i>	3	5
Sapovirus	3	5
Shiga-like toxin producing <i>E. coli</i> (STEC) <i>stx1/stx2</i>	3	5
<i>Shigella/Enteroinvasive E. coli</i> (EIEC)	3	5
<i>Shigella</i>	3	5
<i>Vibrio cholerae/Vibrio</i> group	3	5
<i>Yersinia enterocolitica</i>	3	5

Program Information

- GIP - Three 1.0-mL simulated stool specimens; two shipments per year
- GIP5 - Five 1.0-mL simulated stool specimens; three shipments per year
- Designed for molecular multiplex panel users
- Not available to customers outside the US due to US export law restrictions

Note: Only GIP5 analytes in **bold** type will meet CMS requirements for bacteriology, parasitology, and virology identification. For programs that include more than one subspecialty of microbiology, per CLIA, your laboratory is required to test five specimens, three times a year, for each subspecialty your laboratory performs.

NEW

Gastrointestinal Panel, Global GIPN

Analyte	Program Code	Challenges per Shipment
	GIPN	
Adenovirus	■	5
Astrovirus	■	5
<i>Campylobacter</i>	■	5
<i>Clostridioides (Clostridium) difficile</i> toxin A/B	■	5
<i>Cryptosporidium</i>	■	5
<i>Cyclospora cayetanensis</i>	■	5
<i>Entamoeba histolytica</i>	■	5
<i>Enteroaggregative E. coli</i> (EAEC)	■	5
<i>Enteropathogenic E. coli</i> (EPEC)	■	5
<i>Enterotoxigenic E. coli</i> (ETEC) LT/ST	■	5
<i>Giardia duodenalis</i> (lamblia)	■	5
Norovirus GI/GII	■	5
<i>Plesiomonas shigelloides</i>	■	5
Rotavirus A	■	5
<i>Salmonella</i>	■	5
Sapovirus	■	5
<i>Shigella/Enteroinvasive E. coli</i> (EIEC)	■	5
<i>Shigella</i>	■	5
<i>Yersinia enterocolitica</i>	■	5

Program Information

- Five 1.0-mL simulated stool specimens
- Three shipments per year
- Intended for laboratories outside the US

This program does not meet US CLIA regulatory requirements for proficiency testing. See program GIP5 on page 212.

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 (VZV) – 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

16 Immunology and Flow Cytometry



Use the CAP's participant summaries 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.

Immunology and Flow Cytometry

Immunology	216
Flow Cytometry	224

Discontinued Programs

Flow Cytometry—T-cell Subsets Analysis (FL7)
Rare Flow Antigen Validation, CD103 (RFAV2)

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

*These CLIA-required analytes may be reported as qualitative, titer, or quantitative. The quantitative results are not reported to CMS.

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 and *H. pylori* IgG Antibody S2, S4, S5

Analyte	Program Code			Challenges per Shipment
	S2 Special	S4 Special, Limited	S5 <i>H. pylori</i> IgG Antibody	
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	
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

- Fifteen 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	

Program Information

- Five 0.5-mL liquid serum specimens
- Three 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

Program Information

- Two 1.0-mL lyophilized serum specimens and one lyophilized mitogen control
- Two shipments per year

This program is appropriate for the Autobio AutoLumo Series, QIAGEN QuantiFERON®-TB Gold and Gold Plus, DiaSorin Liaison QuantiFERON-TB Gold Plus, and SD Biosensor Standard methods.

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

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

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

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

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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 suitable for laboratories that perform technical and interpretive components of leukemia/lymphoma specimens or laboratories that perform the technical component only. This program satisfies proficiency testing requirements for laboratories performing general analysis of leukemia/lymphoma specimens.
- Laboratories that provide only interpretation (without technical component) should order program FL5.
- 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 with clinical histories and pertinent laboratory data; online images of tissue sections, bone marrow, and/or peripheral blood smears as clinically relevant and/or available
- 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

Additional Information

- Program FL5 is suitable for laboratories that provide only interpretation of flow data with technical component performed at an outside laboratory.
- This program may be ordered by laboratories that perform both technical and interpretation components and that are interested in obtaining additional interpretive material.

Program Information

- Three online cases consisting of gated dot plots, clinical histories, and pertinent laboratory data; online images of tissue sections, bone marrow, and/or peripheral blood smears as clinically relevant and/or available
- 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

Additional Information

- Program FL6 is appropriate for laboratories that perform flow cytometry analysis on specimens from patients treated with immunotherapy regimens that cause immunophenotypic changes to normal and/or neoplastic cells. These include anti-CD20 (rituximab), anti-CD19 (CAR T19), and anti-CD38 therapies (daratumumab), among others.
- Participation in this program alone does not satisfy proficiency testing requirements for laboratories performing more general analysis of leukemia/lymphoma specimens.

Program Information

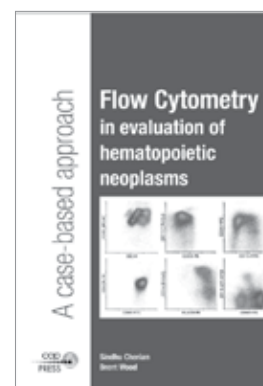
- Three online cases consisting of gated dot plots, clinical histories, and pertinent laboratory data
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available

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Flow Cytometry in Evaluation of Hematopoietic Neoplasms: A Case-Based Approach is a practical guide to flow cytometric analysis in the workup of hematopoietic neoplasms presenting in the peripheral blood, marrow, lymphoid tissue, and extranodal sites.

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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/HPATH1 prepares pathologists and pathology trainees with an interest in hematopathology to succeed by providing ongoing diagnostic learning and self-assessment.

The program includes 10 challenge cases per year written by expert hematopathologists. For each case the learner will:

- Review virtual whole slide image(s) in the context of a clinical scenario and relevant laboratory data.
- Select and interpret appropriate ancillary studies (IHC, flow cytometry, FISH, cytogenetics, molecular studies, etc) with real-time feedback.
- Simulate a real-world diagnostic workup to arrive at the appropriate diagnosis.
- Apply knowledge to answer three CME questions.

Cases span the breadth of benign and neoplastic hematopathology. Discussions incorporate current best practices in the workup, diagnosis, and subclassification of hematolymphoid diseases.

Neoplastic entities are discussed in the context of both the International Consensus Classification (ICC) and the fifth edition of the World Health Organization (WHO) classification.

See system requirements on page 12.

Program Information

- HPATH - Five diagnostic challenges per activity (two activities per year), with online whole slide images. Reporting with CME credit is available for one participant.
- HPATH1 - Reporting option with CME credit for each additional participant (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 participant.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHHC).
- Powered by DigitalScope® technology
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



Flow Cytometry—B-ALL Measurable (Minimal) Residual Disease BALL

Analyte	Program Code	Challenges per Shipment
	BALL	
B-ALL measurable (minimal) residual disease	■	3

Additional Information

- Program BALL is intended for laboratories that perform measurable (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.
- Participation in this program alone does not satisfy PT requirements for laboratories performing more general analysis of leukemia/lymphoma specimens.
- 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 measurable (minimal) residual disease
- One online case consisting of gated dot plots
- Two shipments per year

Flow Cytometry—Mature B-cell Leukemia/Lymphoma Measurable (Minimal) Residual Disease FL8

Procedure	Program Code	Challenges per Shipment
	FL8	
Mature B-cell leukemia/lymphoma measurable (minimal) residual disease	■	3

Additional Information

- Program FL8 is intended for laboratories that perform measurable (minimal) residual disease (MRD) testing (rare event analysis) for mature B-cell leukemia/lymphoma.
- Participation in this program alone does not satisfy PT requirements for laboratories performing more general analysis of leukemia/lymphoma specimens.
- 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 measurable (minimal) residual disease
- One online case consisting of gated dot plots
- Two shipments per year

Flow Cytometry—Plasma Cell Myeloma Measurable (Minimal) Residual Disease FL9

Procedure	Program Code	Challenges per Shipment
	FL9	
Plasma cell myeloma measurable (minimal) residual disease	■	3

Additional Information

- Program FL9 is intended for laboratories that perform measurable (minimal) residual disease (MRD) testing (rare event analysis) for plasma cell myeloma.
- Participation in this program alone does not satisfy PT requirements for laboratories performing more general analysis of leukemia/lymphoma specimens.
- 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 measurable (minimal) residual disease
- One online case consisting of 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 intended to supplement the FL3 program for laboratories performing both technical and interpretive components of leukemia/lymphoma analysis with specialized testing for plasma cells, including intracellular light chain (kappa/lambda) testing.
- Participation in this program alone does not satisfy PT requirements for laboratories performing more general analysis of leukemia/lymphoma specimens.
- 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
- 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, RFAV3

Analyte	Program Code		Challenges per Shipment
	RFAV1	RFAV3	
CD1a	■		1
CD30		■	1

Additional Information

- Programs RFAV1 and RFAV3 do not meet the regulatory requirements for proficiency testing.
- These programs meet CAP Accreditation Checklist item FLO.23737, which requires semiannual testing of antigens.
- 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.

Program Information

- RFAV1 - One 1.1-mL cell line specimen
- RFAV3 - One 1.1-mL cell line specimen
- Two shipments per year

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.
- Laboratories may perform testing on ZAP-70, CD49d, or both.
- 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.

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.

Topics include:

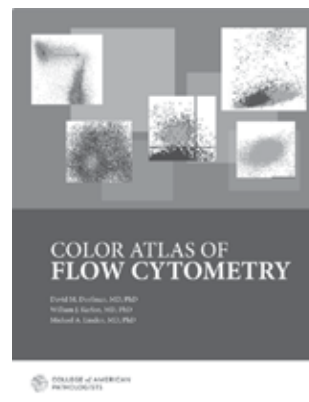
- B lymphoblastic leukemia and immature B cells
- T lymphoblastic leukemia and immature T cells
- Myeloid neoplasms
- Mature B-cell neoplasms

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2023

17 Transfusion Medicine, Viral Markers, and Parentage Testing



Let us make your job easier today.

See how our automated, comprehensive PT/EQA offerings make your job easier while still meeting all your PT/EQA testing needs.

Transfusion Medicine, Viral Markers, and Parentage Testing

All current and new 2025 Centers for Medicare & Medicaid Services (CMS) regulated analytes are listed in **bold** type.

Transfusion Medicine.....	232
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New Programs **NEW**

Transfusion Medicine—Comprehensive (JXM).....	232
Transfusion Medicine—Automated (JATXM).....	233

Discontinued Programs

- Electronic Crossmatch (EXM), Electronic Crossmatch—Automated (EXM2)
See Programs JXM and JATXM
- Bacterial Detection in Platelets, Rapid, 2 Challenge (BDPV)
See Program BDPV5

Transfusion Medicine

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

Transfusion Medicine J, JXM, J1, JE1

Procedure	Program Code				Challenges per Shipment
	J	JXM NEW	J1	JE1	
ABO group	■	■	■		5
ABO subgroup	■	■	■		5
Rh typing	■	■	■		5
Antibody detection	■	■			5
Antibody identification	■	■			5
Compatibility testing	■	■			5
Red blood cell antigen typing	■	■			1
Electronic crossmatch		■			3
Educational challenge				■	1

Program JXM assists laboratories in monitoring the performance of their electronic crossmatching system.

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
- JXM - 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; three simulated, ISBT 128 labeled donor unit challenges and three corresponding red blood cell suspensions
- J1 - Five 3.0-mL 3% red blood cell suspensions; five 3.0-mL corresponding serum specimens
- JE1 - One educational challenge, which may consist of a dry challenge and/or wet specimen for ABO grouping, ABO subgrouping, Rh typing, antibody detection, antibody identification, compatibility testing, antigen typing, and/or direct antiglobulin testing
- Must order JE1 in conjunction with J or JXM programs.
- Three shipments per year



Transfusion Medicine—Automated JAT, JATXM, JATE1

Procedure	Program Code			Challenges per Shipment
	JAT	JATXM NEW	JATE1	
ABO group	■	■		5
ABO subgroup	■	■		5
Rh typing	■	■		5
Antibody detection	■	■		5
Antibody identification	■	■		5
Compatibility testing	■	■		5
Electronic crossmatch		■		3
Educational challenge			■	1

Program JATXM assists laboratories in monitoring the performance of their electronic crossmatching system.

Program Information

- JAT - Five bar-coded 4.0-mL 13%–17% whole blood specimens and one 2.0-mL 23%–27% whole blood specimen for compatibility testing
- JATXM - Five bar-coded 4.0-mL 13%–17% whole blood specimens and one 2.0-mL 23%–27% whole blood specimen for compatibility testing; three simulated, ISBT 128 labeled donor unit challenges and three corresponding red blood cell suspensions
- JATE1 - One educational challenge, which may consist of a dry challenge and/or wet specimen for ABO grouping, ABO subgrouping, Rh typing, antibody detection, antibody identification, and/or compatibility testing
- Must order JATE1 in conjunction with JAT or JATXM programs.
- 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

This program does not meet regulatory requirements for proficiency testing; see program JAT above. For additional information about the Quality Cross Check program, see page 36.

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 6.0-mL 13%–17% whole blood specimens
- May be used with automated and manual procedures
- Two 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, which 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, which requires transfusing facilities to have a peer-review program that monitors transfusion practices for blood components.

Objective

This study will 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, by 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

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

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

A low concentration of sodium azide may be present in the specimens and may affect lymphocytotoxicity methods.

Transfusion Medicine Comprehensive—Competency Assessment TMCA

Procedure	Program Code	Challenges per Shipment
	TMCA	
ABO grouping	■	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

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 which 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 which 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 BDPV5

Procedure	Program Code	Challenges per Shipment
CMS certified rapid immunoassay	BDPV5	5

Additional Information

- The Centers for Medicare & Medicaid Services (CMS) requires proficiency testing for bacterial detection in platelets.
- Program BDPV5 is designed for donor centers/laboratories that are performing bacterial detection for the purposes of platelet unit screening, and which 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

- 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, both those within and outside your institution
- A method for determining your 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, antigen typing, direct antiglobulin testing, 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 covers 20 cases with multiple-choice questions and answers. The topics included reflect clinical cases as well as hot topics in transfusion medicine, and leverage 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
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Viral Markers

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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

Program Information

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

Additional Information

- Do not use program VM1 with rapid anti-HCV, anti-HIV-1, or anti-HIV-1/2 kits. See page 244 for programs appropriate for rapid methods.
- Anti-HIV-1/2, HIV-1 p24 antigen combination assay users should enroll in the VM6 program. Program VM1 is not appropriate for this assay.

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 1.1-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

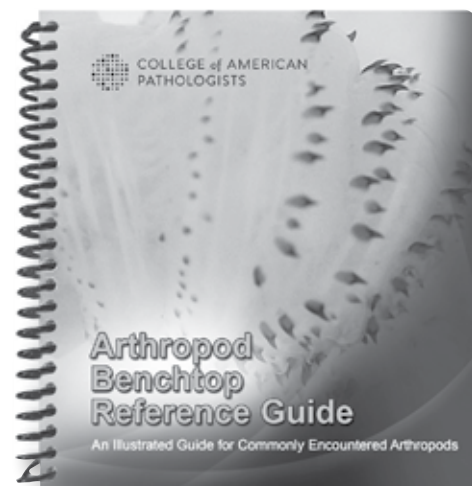
- Three 1.5-mL liquid specimens
- Two shipments per year

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
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 - Bed Bugs
 - Ticks
 - Kissing Bugs
 - Mites
 - Fleas
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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

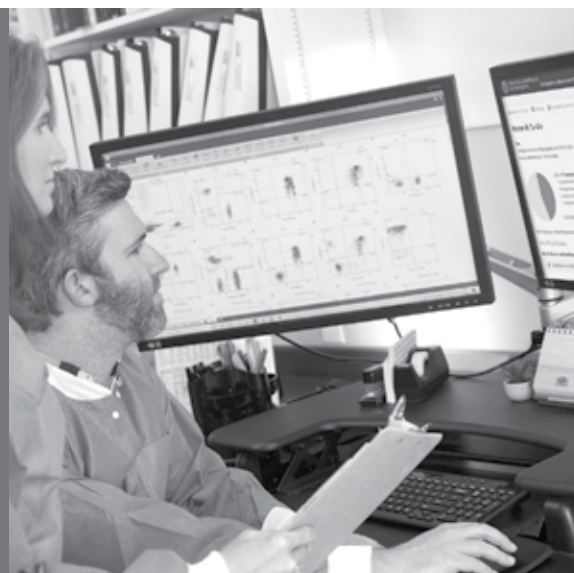
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18 Histocompatibility



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.

New Programs

NEW

HLA Antibody Screen (Class I/Class II) Only (MXS)	248
HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II), Extra Plasma (MXEP)	248

Program Changes

HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II) Number of shipments and number of specimens (MXC)	248
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Discontinued Programs

HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II) (MXE) <i>See Program MXEP</i>	
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Histocompatibility

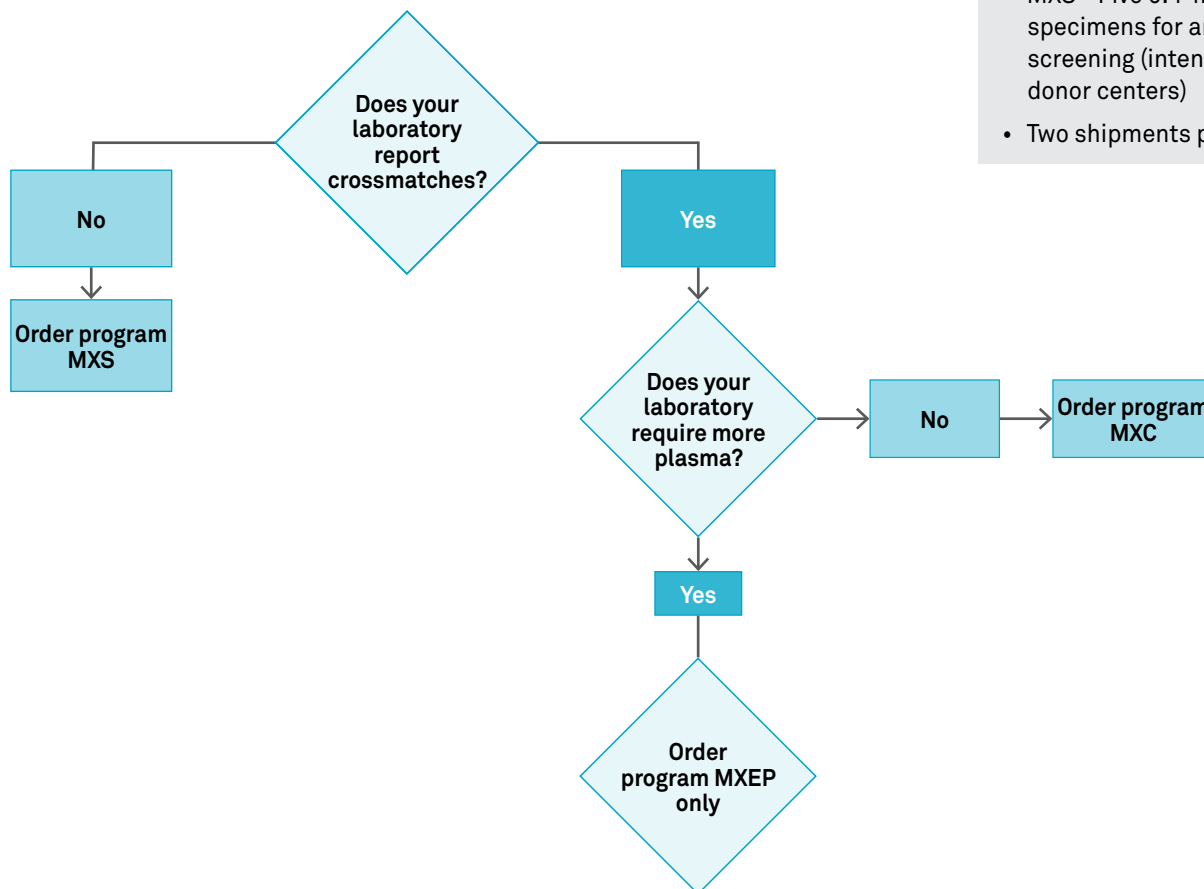
Analytes/procedures in **bold type** are regulated for proficiency testing by the Centers for Medicare & Medicaid Services (CMS).

HLA Crossmatching, Antibody Screen, and Antibody Identification (Class I/Class II) MXC, MXEP, MXS				
Procedure	Program Code			Challenges per Shipment
	MXC	MXEP NEW	MXS NEW	
Antibody screen (Class I/Class II)	■	■	■	5
Antibody identification (Class I/Class II)	■	■		5
Crossmatching (T-cell/B-cell)	■	■		5

Program MXEP combines program MXC and the former program MXE, but with more plasma.

Program Information

- **MXC** - Five 0.4-mL plasma specimens; two (approximately 7–8 x 10⁶ cells) purified blood lymphocyte specimens
- **MXEP** - Five 0.4-mL plasma specimens in duplicate (0.8 mL total plasma); two (approximately 7–8 x 10⁶ cells) purified blood lymphocyte specimens (intended for laboratories that require extra plasma volume for antibody identification)
- **MXS** - Five 0.4-mL plasma specimens for antibody screening (intended for blood donor centers)
- Two 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

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

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

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

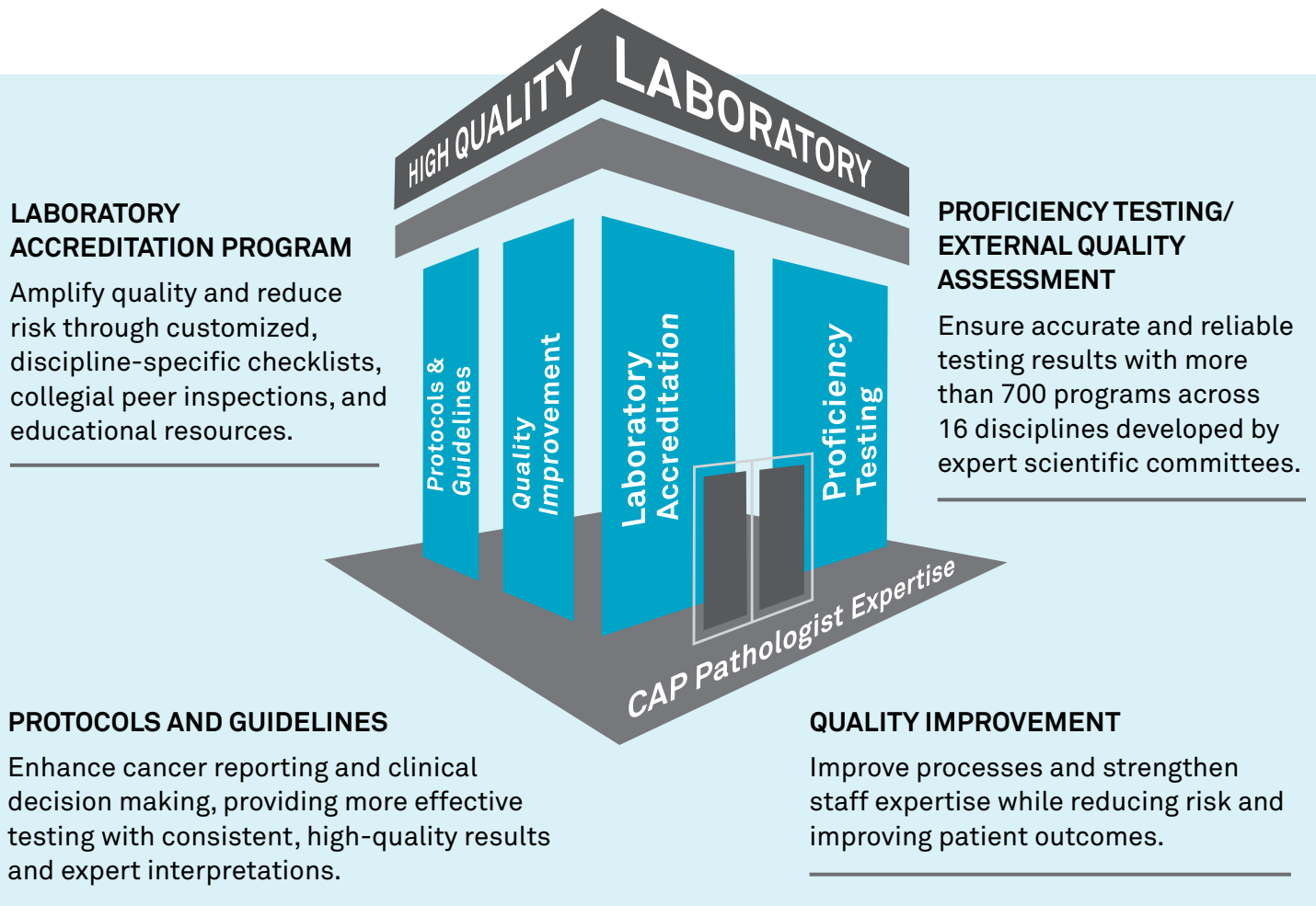
- Carbamazepine-induced Stevens-Johnson syndrome
- Allopurinol Stevens-Johnson syndrome
- Hypersensitivity to abacavir
- Dapsone hypersensitivity

DADR2

- Celiac disease
- Narcolepsy
- Pemphigus vulgaris
- Psoriasis
- Antiglomerular basement membrane disease
- Birdshot retinochoroidopathy
- Idiopathic myopathy

Amplifying Quality, Simplifying Compliance, and Elevating Outcomes

Built on a foundation of pathologist expertise, the College of American Pathologists' Laboratory Quality Solutions partners with laboratories worldwide to elevate the quality of laboratory medicine with best-in-class solutions designed to drive operational excellence, achieve diagnostic confidence, and simplify compliance while ensuring the best patient care.



Learn more about how the CAP can help you achieve your laboratory quality goals.



19 Genetics and Molecular Pathology



The CAP broadens its network of laboratory experts through its collaborations.

Among the organizations with which we partner:

- Association for Diagnostics & Laboratory Medicine (ADLM)
- American College of Medical Genetics and Genomics (ACMG)
- Association for Molecular Pathology (AMP)
- National Society for Histotechnology (NSH)

For additional information, refer to the CAP's **Recommendations and Requirements for Molecular Proficiency Testing**.

Genetics and Molecular Pathology

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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	
Karyotype abnormality	■	■	6
Karyotype nomenclature	■	■	6

Each challenge includes a case history and images of metaphase cells that are representative of each case. Each mailing will include three constitutional and three neoplastic challenges.

Program Information

- CY - Online images of metaphase cells delivered two times a year; your CAP shipping contact will be notified **via email** when the activity is available
- CYBK - Prints of metaphase cells; two shipments per year



CAP/ACMG Fluorescence In Situ Hybridization CYF, CYI

Disease/Procedure	Program Code		Challenges per Shipment
	CYF	CYI	
Constitutional and Hematologic Disorders			
FISH for constitutional disorder - slides	■		1
FISH for constitutional disorder - dry challenge	■		2
FISH for hematologic disorder - slides	■		1
FISH for hematologic disorder - dry challenge	■		2
Urothelial Carcinoma			
FISH for urothelial carcinoma		■	2

Additional Information

- CYF 2025-A:
Constitutional disorder (two slides)-*SRY*
Hematologic disorder (two slides)-20q del¹
- CYF 2025-B:
Constitutional disorder (two slides)-*HIRA (TUPLE1)*
Hematologic disorder (two slides)-*CBFB*²
- ¹ For this challenge, participants should use the probe set used to interrogate deletion of 20q12 in their laboratories.
- ² For this challenge, participants should use the probe set used to interrogate *CBFB* rearrangements in their laboratories.
- 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 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	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>ROS1</i> rearrangement			■			1	
<i>DDIT3 (CHOP)</i> rearrangement			■				1
Lymphoma Tissue							
<i>CCND1</i> rearrangement				■		1	
<i>ALK</i> rearrangement				■			1
Lung Cancer							
<i>ALK</i> rearrangement					■	1	
<i>ALK</i> rearrangement dry 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)* amplification by FISH for breast cancer, see program CYHI, below.

CAP/ACMG *ERBB2 (HER2)* Amplification by FISH, Interpretation Only CYHI

Analyte/Procedure	Program Code	Challenges per Shipment
	CYHI	
<i>ERBB2 (HER2)</i> amplification in breast cancer, interpretation only	■	3

Additional Information

- ERBB2 (HER2)* Amplification by FISH, Interpretation Only 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 *ERBB2 (HER2)* FISH for breast cancer.
- For laboratories that perform both hybridization and interpretation for *ERBB2 (HER2)* FISH for breast cancer under the same CLIA number, see program CYH, above.

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
- CYL - Two unstained slides and one H&E stained slide
- CYALK - Two unstained slides and one H&E stained slide are provided for the A mailing; the B mailing will include an *ALK* dry challenge.
- Two shipments per year



Program Information

- Three online interpretation challenges; your CAP shipping contact will be notified via email when the activity is available
- Two shipments per year



CAP/ACMG Constitutional Microarray CYCGH

Procedure	Program Code	Challenges per Shipment
	CYCGH	
Cytogenomic microarray analysis for constitutional abnormalities	■	2

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.

Program Information

- Two 2.0- μ g DNA specimens
- Two shipments per year



CAP/ACMG Oncology Microarray CYCMA

Procedure	Program Code	Challenges per Shipment
	CYCMA	
Cytogenomic microarray analysis for oncologic abnormalities	■	1

Participants will identify and characterize gains or losses and the cytogenetic location of abnormalities detected.

Program Information

- One 2.0- μ g DNA specimen
- 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



Sample Exchange Registry for Alternative Assessment

When no formal proficiency testing is yet available, join the CAP's Sample Exchange Registry. After at least three laboratories are identified as testing for the same rare analyte, the CAP can anonymously deliver a sample from each laboratory to another participating facility, all of whom then report their results to us. We send each participant a custom result report, including an anonymous participant summary covering all the laboratories that took part.

Learn more at cap.org

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 Acylcarnitine Quantitation for Inherited Metabolic Disorders BGL4

Analyte/Procedure	Program Code	Challenges per Shipment
	BGL4	
Acetylcarnitine	■	3
Propionylcarnitine	■	3
Butyrylcarnitine	■	3
Isovalerylcarnitine	■	3
Glutaryl carnitine	■	3
Hexanoylcarnitine	■	3
Octanoylcarnitine	■	3
Dodecanoylcarnitine	■	3
Hexadecanoylcarnitine	■	3
3-OH-hexadecanoylcarnitine	■	3
Octadecanoylcarnitine	■	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-µg 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-µg extracted DNA specimens
- Two shipments per year



CAP/ACMG BRCA1/2 Sequencing BRCA

Analyte/Procedure	Program Code	Challenges per Shipment
	BRCA	
BRCA1/2 DNA sequencing and variant interpretation	■	3
BRCA1/2 duplication/deletion analysis	■	3

Additional Information

- Test your skill at reporting and interpreting DNA sequence variants for *BRCA1/2* using standard nomenclature.
- Receive a summary and discussion of responses, including comments on the variant nomenclature and known or expected outcomes from identified variants.
- Primers are not included; laboratories are expected to utilize the primers used in routine clinical testing.

Program Information

- Three 10.0-µg extracted DNA specimens
- Two shipments per year



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

Program Information

- Three 80.0-µL purified extracted DNA specimens (50 ng/µL)
- Two shipments per year



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*.

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

Program Information

- MGL1, MGL2, MGL3, MGL4 - Three 50.0-µg extracted DNA specimens per disease/gene
- MGL5 - Two 50.0-µg extracted DNA specimens
- Two shipments per year



Additional Information

- The *BRCA1/2* program (module MGL3) is designed for laboratories testing for the three Ashkenazi Jewish founder mutations.
- The cystic fibrosis programs (modules MGL2 and MGL5) are designed for laboratories testing for the minimum mutation panel for population-based carrier screening from the ACMG Technical Standards and Guidelines for *CFTR* Mutation Testing, expanded panels, PolyT variant analysis, and/or full gene sequencing.
- Module MGL4 is designed for laboratories testing for diseases/disorders related to Ashkenazi Jewish ancestry.
- The Prader-Willi/Angelman syndrome program is designed for laboratories using methylation techniques for analysis.

CAP/ACMG Molecular Genetics Series MGL1, MGL2, MGL3, MGL4, MGL5 continued

Disease/Gene	Program Code					Challenges per 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 testing for the minimum mutation panel for population-based carrier screening 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- μ g extracted DNA specimens per disease/gene
- MGL5 - Two 50.0- μ g extracted DNA specimens
- Two shipments per year



Program Information

- IMD1, IMD2, IMD3 - Three 50.0- μ g 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



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>		■		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* promoter (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

Program Information

- Three 250.0-µL synthetic whole blood specimens
- Two shipments per year



This program is designed for the Cepheid GeneXpert factor II and factor V assays. DNA extraction for other assays/methods is NOT recommended.

Red Blood Cell Antigen Genotyping RAG

Procedure	Program Code	Challenges per Shipment
	RAG	
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

Program Information

- Three liquid specimens
- Two shipments per year

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

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 more than 100 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%.
- Paired normal specimen provided

Program Information

- Three 1.0- μ g gDNA (50 ng/ μ L) specimens
- One 3.0- μ g gDNA (50 ng/ μ l) paired normal specimen
- 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 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 Oncomine Comprehensive Assay v3	■	1
Thermo Fisher Oncomine 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 (VAF).
- 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 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

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 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 database. 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 (VAF).
- 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 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

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 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 database. 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 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 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	■	3

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 snap-frozen cell pellets
- Two shipments per year

Tumor Mutational Burden TMB

Procedure	Program Code	Challenges per Shipment
	TMB	
Tumor mutational burden	■	3

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

- Three 10- μ L gDNA (50ng/ μ L) specimens
- Three 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 (HER2)</i> gene amplification (brightfield)		■	10

Laboratories performing FISH for interphase chromosomal targets in paraffin sections refer to the Cytogenetics programs, page 255.

These programs are 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

This is a 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*, *ALK*, and *BRCA1*.
- This program includes variants present with a 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*, and *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 (VAF) 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</i> major	■			3
<i>IGH::BCL2</i> minor	■			3
<i>IGH::CCND1</i>	■			3
<i>IGK</i>	■			3
<i>TRB</i>	■			3
<i>TRG</i>	■			3
Myeloid Malignancy Genotyping				
<i>BCR::ABL1</i> p190		■		3
<i>BCR::ABL1</i> p210		■		3
<i>CALR</i>		■		3
<i>CBFB::MYH11</i>		■		3
<i>FLT3</i> ITD		■		3
<i>FLT3</i> TKD		■		3
<i>JAK2</i> c.1849G>T p.V617F		■		3
<i>KMT2A</i> -PTD (<i>MLL</i> -PTD)		■		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

Program Information

- Three 20- μ g DNA specimens (200 ng/ μ L)
- Two shipments per year

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.

Measurable (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

Navigating Multimodality Biomarker Assessment NMBA/NMB1

Program Name	Program Code	Cases per Mailing
	NMBA/NMB1	
Multimodality biomarker assessment case analysis	■	2

Biomarkers can be tested through a variety of methodologies (eg, flow cytometry, immunohistochemistry, next-generation sequencing, PCR-based testing, karyotype, FISH, clinical chemistry). Each modality has different technical strengths and weaknesses, along with varied analytical and clinical specifications such as sensitivity and specificity. Results may not be clearly concordant across the modalities. This program will challenge pathologists to resolve discrepancies between different methods or “multimodality” biomarker testing.

Program Information

- NMBA - Online program, whole slide images powered by DigitalScope technology (if available); NMBA provides CME or CE for one pathologist or laboratory professional
- NMB1 - Reporting option with CME or CE credit for each additional pathologist or laboratory professional (within the same institution); must order in conjunction with program NMBA
- Two mailings per year with two cases each mailing
- Earn a maximum of four CME credits (*AMA PRA Category 1 Credits™*) per pathologist and a maximum of four CE credits per laboratory professional per year.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHHC).
- Two online activities per year; your CAP shipping contact will be notified [via email](#) when the activity is available



20 Anatomic Pathology



Prepare for success with our PAP PT and PAP Education programs.

- Every slide is reviewed and approved by pathologists and cytotechnologists before it is put in circulation.
- All slide sets are reviewed every six months by a staff cytotechnologist.
- Slides that do not maintain consensus grading are removed from the program and reviewed by a committee of pathologist experts.

Anatomic Pathology

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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

- Program 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
 - Two PIPW cases per release are from smaller tumors and do not duplicate PIP (glass).
- See system requirements on page 12.

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 Health and Health Care (IHHC).
- 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 staff to experience smaller tumors and more interesting cases by providing three 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: seven H&E stained glass slides and three 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 Health and Health Care (IHHC).
- 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 12.

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 Health and Health Care (IHHC).
- Powered by DigitalScope technology
- Four online activities per year; your CAP shipping contact will be notified via email when the activity is available



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 addressing common issues faced in the laboratory.

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

CP/IP is designed for pathologists, by pathologists. Each case is developed and peer-reviewed, ensuring learning is 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 collective skills and clinical pathology knowledge of their 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

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



Discipline	Case Schedule (subject to change)	Month 2025
Laboratory Management	Provider Performed Microscopy (PPM) Testing	January
Transfusion Medicine	ABO Discrepancies	February
Transfusion Medicine	Blood Bank Regulations	March
Chemistry	Hyperbilirubinemia	April
Hematology	Hematologic Pleural Effusions	May
Microbiology	Bloodstream Infections	June
Laboratory Management	CLIA Director Responsibilities and Risks	July
Cytogenetics	Plasma Cell Myeloma	August
Transfusion Medicine	Transfusion Reactions	September
Molecular Pathology	Pharmacogenomics	October
Hematology	Peripheral Blood Smear - Part 1	November
Hematology	Peripheral Blood Smear - Part 2	December

To learn more visit cap.org and search CPIP.

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 miscellaneous topics.
- May include rarely captured cases that may not be available on the glass slide
- See system requirements on page 12.

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 Health and Health Care (IHHC).
- 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 - Liver resection or biopsy	■	1	
H&E - Breast, needle core biopsy	■	1	
IHC - Hep-Par, liver resection	■	1	
IHC - GATA3, breast needle core biopsy	■	1	
Special Stain - Reticulin, liver resection	■	1	
H&E - Stomach resection with gastrointestinal stromal tumor (GIST) and nonneoplastic stomach mucosa	■		1
H&E - Prostate biopsy, containing both adenocarcinoma and nonneoplastic acini	■		1
IHC - DOG1, gastrointestinal stromal tumor (GIST) positive for DOG1	■		1
IHC - PIN4, prostate biopsy with adenocarcinoma and nonneoplastic glands	■		1
Special Stain - Congo Red, positive for amyloid	■		1

HistoQIP improves histologic slide preparation in anatomic pathology laboratories. In this educational program, an expert panel of pathologists, histotechnologists, and histotechnicians evaluates submitted slides for histologic technique using uniform grading criteria. Participants receive laboratory-specific evaluations and participant summaries with performance benchmarking, commentary from evaluators, and peer comparison data.

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



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 295-300.

NEW

CAP/NSH HistoQIP Pediatric Program HQPED

Stain/Tissue	Program Code	Challenges per Shipment	
		HQPED	A
H&E - Colon resection for Hirschsprung disease	■	1	
IHC - Calretinin, colon resection for Hirschsprung disease	■	1	
H&E - Wilms tumor, renal resection	■	1	
IHC - WT1, Wilms tumor, renal resection	■	1	
H&E - Rhabdomyosarcoma	■		1
IHC - Myogenin, positive rhabdomyosarcoma	■		1
H&E - Hepatoblastoma, liver resection	■		1
IHC - B-catenin, hepatoblastoma liver resection	■		1

Program Information

- Participant laboratories may submit up to four stained coverslipped glass slides (one from each category) per mailing.
- Two shipments per year



CAP/NSH HistoQIP Cell Block Preparations HQCLB

Stain/Tissue	Program Code	Challenges per Shipment	
		HQCLB	A
H&E - Neck mass, HPV on squamous cell carcinoma	■	1	
IHC - p16, squamous cell carcinoma	■	1	
H&E - Pleural fluid, metastatic breast ductal carcinoma	■	1	
IHC - GATA3, metastatic breast ductal carcinoma	■	1	
H&E - Lung mass, FNA on a lung squamous cell carcinoma	■		1
IHC - p40 or p63, lung mass, FNA on a lung squamous cell carcinoma	■		1
H&E - Peritoneal fluid, positive PAX8 metastatic carcinoma	■		1
IHC - PAX8, metastatic carcinoma	■		1

Program Information

- Participants may submit up to four stained coverslipped glass slides (one from each category) per mailing.
- Two shipments per year



This program augments efforts to improve the preparation of H&E and immunohistochemical slides in all anatomic pathology and cytopathology laboratories that handle cell block preparations.

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 295-300.

CAP/NSH HistoQIP Targeted Therapy HQTAR

Stain/Tissue	Program Code	Challenges per Shipment	
	HQTAR	A	B
H&E - Breast ductal carcinoma, core needle biopsy	■	1	
IHC - HER2, breast ductal carcinoma, core needle biopsy	■	1	
H&E - Breast resection, lobular carcinoma	■	1	
IHC - ER, breast resection, lobular carcinoma	■	1	
H&E - Gastroesophageal adenocarcinoma	■		1
IHC - HER2, gastroesophageal adenocarcinoma	■		1
H&E - Gastroesophageal adenocarcinoma	■		1
IHC - Claudin 18.2, gastroesophageal adenocarcinoma	■		1

This program augments efforts to improve the preparation of H&E and immunohistochemical slides in all anatomic pathology laboratories that handle specimens undergoing analysis for targeted therapies.

Program Information

- Participant laboratories may submit up to four stained coverslipped glass slides (one from each category) per mailing.
- Two shipments per year



CAP/NSH HistoQIP Whole Slide Image Quality Improvement Program HQWSI

Stain/Tissue	Program Code	Challenges per Shipment	
	HQWSI	A	B
H&E - Kidney biopsy	■	1	
H&E - Pancreas resection	■	1	
IHC - Synaptophysin, pancreas resection	■	1	
Special Stain - Silver (Jones), kidney biopsy	■	1	
H&E - Prostate, invasive adenocarcinoma biopsy	■	1	
H&E - Ovary resection	■		1
H&E - Lung biopsy	■		1
IHC - TTF-1, lung biopsy	■		1
Special Stain - AFB, control tissue	■		1
H&E - Breast, invasive carcinoma, resection or biopsy	■		1

The program provides feedback to laboratories using whole slide imaging for clinical applications. Participants upload their scanned whole slide images to the CAP designated server. In this educational program, an expert panel of pathologists, histotechnologists, and histotechnicians evaluates whole slide images for histologic technique and image quality. Participants receive laboratory-specific evaluations and participant summaries with performance benchmarking, commentary from evaluators, and peer comparison data as well as annotated feedback directly on their uploaded images.

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



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 295-300.

CAP/NSH HistoQIP Biopsy Series HQIPBX

Stain/Tissue	Program Code	Challenges per Shipment	
	HQIPBX	A	B
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. In this educational program, an expert panel of pathologists, histotechnologists, and histotechnicians evaluates submitted slides for histologic technique using uniform grading criteria. Participants receive laboratory-specific evaluations and participant summaries with performance benchmarking, commentary from evaluators, and peer comparison data.

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



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 295-300.

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				■	1	1
H&E - Vulvar biopsy				■	1	1

The HistoQIP Specialty Series includes modules to improve the preparation of histologic slides in all anatomic pathology laboratories that handle gastrointestinal, dermatologic, urogenital tract, and gynecologic biopsies. In this educational program, an expert panel of pathologists, histotechnologists, and histotechnicians evaluates submitted slides for histologic technique using uniform grading criteria. Participants receive laboratory-specific evaluations and participant summaries with performance benchmarking, commentary from evaluators, and peer comparison data.

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 295-300.

CAP/NSH HistoQIP In Situ Hybridization (Kappa/Lambda) HQISH

Stain/Tissue	Program Code	Challenges per Shipment	
		HQISH	A
H&E - Nonneoplastic lymph node excision (not a biopsy)	■	1	
ISH - DNA/RNA negative control probe ISH	■	1	
ISH - DNA/RNA positive control probe ISH	■	1	
ISH - Kappa ISH (Kappa probe, ISH)	■	1	
ISH - Lambda ISH (Lambda probe, ISH)	■	1	
H&E - Bone marrow core biopsy	■		1
ISH - DNA/RNA negative control probe ISH	■		1
ISH - DNA/RNA positive control probe ISH	■		1
ISH - Kappa ISH (Kappa probe, ISH)	■		1
ISH - Lambda ISH (Lambda probe, ISH)	■		1

This program augments efforts to improve the preparation of ISH slides in all anatomic pathology laboratories that handle specimens undergoing analysis for Kappa and Lambda detection by chromogenic in situ hybridization.

Program Information

- Participant laboratories may submit up to four stained coverslipped glass slides (one from each category) per mailing.
- Two shipments per year



CAP/NSH HistoQIP IHC Series HQIHC

Stain/Tissue	Program Code	Challenges per Shipment	
		HQIHC	A
IHC - CD138, plasmacytoma	■	1	
IHC - CD3, nonneoplastic colonic biopsy	■	1	
IHC - CK5/6, skin biopsy	■	1	
IHC - INSM1, small cell carcinoma	■	1	
IHC - SAT6, solitary fibrous tumor	■	1	
IHC - CD23, lymph node excision	■		1
IHC - CD34, skin biopsy	■		1
IHC - p53, ovarian serous carcinoma	■		1
IHC - TRPS1, breast carcinoma	■		1
IHC - Myogenin, skeletal muscle	■		1

The HistoQIP IHC series improves the preparation of immunohistochemistry slides in all anatomic laboratories that handle a broad range of surgical specimens. In this educational program, an expert panel of pathologists, histotechnologists, and histotechnicians evaluates submitted slides for histologic technique using uniform grading criteria. Participants receive laboratory-specific evaluations and participant summaries with performance benchmarking, commentary from evaluators, and peer comparison data.

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 295-300.

CAP/NSH HistoQIP Central Nervous System IHC HQNEU

Stain/Tissue	Program Code	Challenges per Shipment	
		HQNEU	A
H&E - Meningioma	■	1	
IHC - Epithelial membrane antigen (EMA), positive meningioma	■	1	
IHC - Ki-67, positive meningioma	■	1	
H&E - Schwannoma	■	1	
IHC - S100, schwannoma	■	1	
H&E - IDH1 mutant astrocytoma	■		1
IHC - ATRX, IDH1 mutant astrocytoma	■		1
IHC - IDH1, IDH1 mutant astrocytoma	■		1
H&E - Glioblastoma, IDH-wildtype	■		1
IHC - p53, glioblastoma, IDH-wildtype	■		1

This program augments efforts to improve the preparation of H&E and immunohistochemical slides in all anatomic pathology laboratories that handle central nervous system gliomas.

Program Information

- Participant laboratories may submit up to five stained coverslipped glass slides (one from each category) per mailing.
- Two shipments per year



CAP/NSH HistoQIP Non-small Cell Lung Carcinoma IHC HQNSC

Stain/Tissue	Program Code	Challenges 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 or 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 that handle 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



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 295-300.

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 skin biopsy	■	1	
IHC - PD-L1, positive melanoma skin biopsy	■	1	
H&E - Melanoma skin resection	■		1
IHC - S100, melanoma skin resection	■		1
IHC - HMB-45, melanoma skin resection	■		1
H&E - Nevus resection	■		1
IHC - p16, nevus resection	■		1

This program augments efforts to improve the preparation of H&E and immunohistochemical slides in all anatomic pathology laboratories that handle skin specimens containing melanoma.

Program Information

- Participant laboratories may submit up to five 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 that handle 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 295-300.

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	
Folate 1 Receptor	■	10
SS18	■	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 Folate 1 receptor and one for SS18
- 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	
<i>ERBB2 (HER2)</i> amplification in breast cancer, interpretation only	■	3

Additional Information

- *ERBB2 (HER2)* Amplification by FISH, Interpretation Only 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 *ERBB2 (HER2)* FISH for breast cancer.
- For laboratories that perform both hybridization and interpretation for *ERBB2 (HER2)* FISH for breast cancer under the same CLIA number, see program CYH on 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.

HER2 and ER Immunohistochemistry Interpretation Only HERI

Analyte/Procedure	Program Code	Challenges per Shipment
	HERI	
HER2 online image review	■	10
ER online image review	■	10

Additional Information

- HER2 and ER Immunohistochemistry Interpretation Only is an exercise and is not considered proficiency testing.
- This program is for laboratories that perform interpretation only for HER2 and ER for breast cancer and may be used for quality assessment.
- For laboratories that perform both staining and interpretation for HER2 and ER for breast cancer under the same CLIA number, see page 297.

Program Information

- Ten online whole slide images for HER2 by IHC interpretation only
- Ten online whole slide images for ER by IHC interpretation only
- Powered by DigitalScope technology
- Ten whole slide H&E images for HER2 and ER
- One online activity per year; your CAP shipping contact will be notified via email when the activity is available

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

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.

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

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

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.

Navigating Multimodality Biomarker Assessment NMBA/NMB1

Program Name	Program Code	Cases per Mailing
	NMBA/NMB1	
Multimodality biomarker assessment case analysis	■	2

Biomarkers can be tested through a variety of methodologies (eg, flow cytometry, immunohistochemistry, next-generation sequencing, PCR-based testing, karyotype, FISH, clinical chemistry). Each modality has different technical strengths and weaknesses, along with varied analytical and clinical specifications such as sensitivity and specificity. Results may not be clearly concordant across the modalities. This program will challenge pathologists to resolve discrepancies between different methods or “multimodality” biomarker testing.

Program Information

- NMBA - Online program, whole slide images powered by DigitalScope technology (if available); NMBA provides CME or CE for one pathologist or laboratory professional
- NMB1 - Reporting option with CME or CE credit for each additional pathologist or laboratory professional (within the same institution); must order in conjunction with program NMBA
- Two mailings per year with two cases each mailing
- Earn a maximum of four CME credits (*AMA PRA Category 1 Credits™*) per pathologist and a maximum of four CE credits per laboratory professional per year.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHHC).
- Two online activities per year; your CAP shipping contact will be notified via email when the activity is available



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

- Program 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 and the second activity includes an additional mini-symposium; 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 Health and Health Care (IHHC).
- 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

- Program DPATH prepares pathologists, dermatopathologists, and dermatologists to succeed by providing ongoing diagnostic learning in dermatopathology.
- Cases include static images.
- See system requirements on page 12.

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 Health and Health Care (IHHC).
- 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/HPATH1 prepares pathologists and pathology trainees with an interest in hematopathology to succeed by providing ongoing diagnostic learning and self-assessment.

The program includes 10 challenge cases per year written by expert hematopathologists. For each case the learner will:

- Review virtual whole slide image(s) in the context of a clinical scenario and relevant laboratory data.
- Select and interpret appropriate ancillary studies (IHC, flow cytometry, FISH, cytogenetics, molecular studies, etc) with real-time feedback.
- Simulate a real-world diagnostic workup to arrive at the appropriate diagnosis.
- Apply knowledge to answer three CME questions.

Cases span the breadth of benign and neoplastic hematopathology. Discussions incorporate current best practices in the workup, diagnosis, and subclassification of hematology diseases.

Neoplastic entities are discussed in the context of both the International Consensus Classification (ICC) and the fifth edition of the World Health Organization (WHO) classification.

See system requirements on page 12.

Program Information

- HPATH - Five diagnostic challenges per activity (two activities per year), with online whole slide images. Reporting with CME credit is available for one participant.
- HPATH1 - Reporting option with CME credit for each additional participant (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 participant.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHHC).
- 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

Program 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 focusing on a specific problem area in neuropathology that 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 Health and Health Care (IHHC).
- 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		

Programs 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:

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 in February
 - B mailing ships in August
 - Series 2
 - A mailing ships in May
 - B mailing ships in November
 - c. Add the PAP Education series number after the slide type program code (eg, PAPCPT1, PAPCPT2).
2. Order one Individual Participant Response Form code for each participating pathologist/cytotechnologist. Include the PAP Education Series number after the program code (eg, APAPCPT1).
3. Select one primary testing session option with two alternative date options using the Gynecologic Cytology Proficiency Testing Order Details Form.
4. 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.
- 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 10 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 eight CME credits (*AMA PRA Category 1 Credits*) per pathologist and a maximum of eight CE credits per cytotechnologist for completing all challenges.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHHC).
- 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	

Programs 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 in February
 - B mailing ships in August
 - Series 2
 - A mailing ships in May
 - B mailing ships in 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. Include the PAP Education series number after the program code (eg, APAPCE1).

Additional Information

- Participants will receive an evaluation [via email](#) shortly after submitting the laboratory form via fax.
- 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 eight CME credits (*AMA PRA Category 1 Credits*) per pathologist and a maximum of eight CE credits per cytotechnologist for completing all challenges.
- This activity meets the ABPath CC requirements for Improvement in Health and Health Care (IHHC).
- Two shipments (five slides each)



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 only 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

Color Atlas of Hematology—Vol 1. Peripheral Blood Color Atlas of Hematology—Vol 2. 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 with links to 18 engaging videos. View 100+ peripheral blood smears online with DigitalScope® technology.

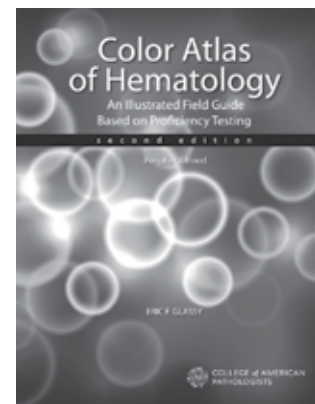
Volume 2 is a useful and instructional reference guide to bone marrow pathology. Explore the detailed “A Closer Look At...” sections. Access the links to interactive slide images.

Vol 1. Peripheral Blood

Item number: PUB222 Hardcover; 480 pages; 2018

Vol 2. Bone Marrow

Item number: PUB229 Hardcover; 408 pages; 2023



Learn more

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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 miscellaneous topics.
- May include rarely captured cases that may not be available on the glass slide
- See system requirements on page 12.

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 Health and Health Care (IHHC).
- 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 Program (NGC) 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 include radiology and multiple aspects of pathology to enhance the interpretation.
- Participants will receive an evaluation via email shortly after submitting the laboratory form via fax.
- Additional online advanced education cases provide immediate feedback on interpretation selection, follow-up recommendations, and case-related educational questions.
- See system requirements on page 12.

Program Information

- NGC - Five glass slides per shipment; five online 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 Credits*) 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 Health and Health Care (IHHC).
- One complimentary online activity with whole slide images powered by DigitalScope technology
- Four shipments of glass slides 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 fine-needle aspiration of pancreas and lung topics.
- May include rarely captured cases that may not be available on the glass slide
- See system requirements on page 12.

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 Health and Health Care (IHC).
- 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

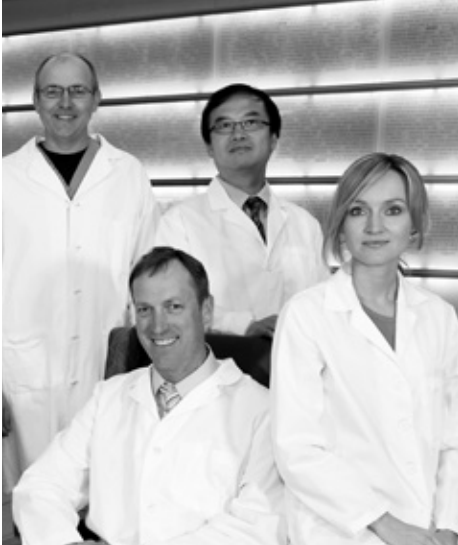
- The Fine-Needle Aspiration Glass Slide program gets pathologists and cytotechnologists ready to succeed through an interlaboratory educational opportunity to assess participants' screening and interpretive skills. Program FNAG cases may include more than one slide of varying stains and/or preparations 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 the laboratory form via fax.

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 Health and Health Care (IHC).
- 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 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 Health and Health Care (IHHC).
- 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

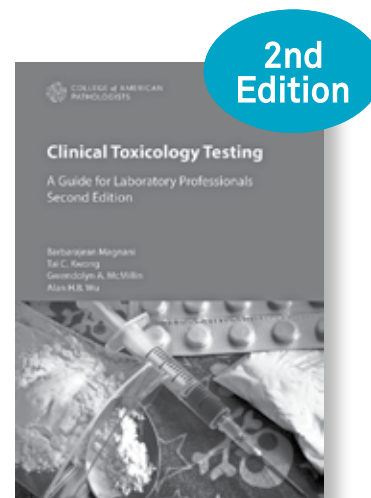
This book is a practical guide to directing hospital toxicology laboratory operations. This edition features expanded sections on testing in the clinical setting, methodologies, and more user-friendly information on specific analytes. It provides the reader with a comprehensive view of what is needed—and 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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Item number: PUB227
Softcover; 368 pages; 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	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
Carbamazepine-10, 11-epoxide	Hydromorphone	Norfentanyl	Salicylate
Carisoprodol	Hydroxybupropion	Norfluoxetine	Sertraline
Chlordiazepoxide	Hydroxyzine	Norketamine	Strychnine
Chlorpheniramine	Ibuprofen	Normeperidine	Tapentadol
Citalopram	Imipramine	Normirtazapine	Temazepam
Clomipramine	Ketamine	Noroxycodone	Topiramate
Clonazepam	Lamotrigine	Norsertaline	Tramadol
Clozapine	Levetiracetam	Nortrimipramine	Trazodone
Cocaethylene	Lidocaine	Nortriptyline	Trimipramine
Cocaine	Lorazepam	Norverapamil	Valproic acid
Codeine	Lysergic acid diethylamide (LSD)	O-desmethyltramadol	Venlafaxine
Cyclobenzaprine*	Meperidine*	Olanzapine	Verapamil
Delta-9-THC	Mephedrone	Oxazepam	Zolpidem
Delta-9-THC-COOH	Meprobamate	Oxycodone	
Demoxepam	Methadone		
Desipramine	Methadone metabolite (EDDP)		
Desmethylclomipramine	Methamphetamine		

*and/or metabolite(s)

22 Analyte/Procedure Index



Performance Analytics Dashboard: Bringing it all together

The complimentary dashboard helps you monitor your CAP PT/EQA and accreditation performance.

- Access all graded PT/EQA result forms, evaluations, and participant summaries from one location.
- Benchmark your laboratory against your peers' and CAP-wide performance.
- View performance to quickly identify trends/patterns to mitigate risk.

Analyte/Procedure Index

The following Analyte/Procedure Index is a comprehensive listing of analytes and corresponding CAP program options. It also includes Calibration Verification/Linearity (CVL) and Quality Cross Check (QCC) programs.

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 CAP-accredited laboratories outside the US, enrollment in CAP PT/EQA 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	86	17-hydroxyprogesterone	X	Y/YY	Sex Hormones	84
1,5-anhydroglucitol		AG	1,5-Anhydroglucitol	71	17-ketosteroids		N	Urine Chemistry-Special	69
3-methoxytyramine		N	Urine Chemistry-Special	69	25-OH vitamin D, total	X	ABVD	Accuracy-Based Vitamin D	114
4-hydroxytriazolam		DFC	Drug-Facilitated Crime	111			LN40	Vitamin D CVL	134
5-hydroxyindoleacetic acid, qualitative		N	Urine Chemistry-Special	69		X	VITD	25-OH Vitamin D	84
5-hydroxyindoleacetic acid, quantitative	X	N	Urine Chemistry-Special	69	50:50 mixing study, aPTT		CGE/CGEX	Coagulation, Extended	167
6-acetylmorphine (6-AM)		DMPM	Drug Monitoring for Pain Management	110			CGS1	Coag Special, Series 1	168
		FTC	Forensic Toxicology, Criminalistics	107	50:50 mixing study, PT		CGE/CGEX	Coagulation, Extended	167
		OFD	Oral Fluid for Drugs of Abuse	103			CGS1	Coag Special, Series 1	168
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		UDS, UDS6	Urine Drug Screen	100			JATE1	Transfusion Medicine, Automated, Educational	233
		UT	Urine Toxicology	98			JATQ	QCC, Transfusion Medicine	48
7-aminoclonazepam		DFC	Drug-Facilitated Crime	111			TMCA	Transfusion Medicine, Competency Assessment	239
		DMPM	Drug Monitoring for Pain Management	110	ABO subgroup typing		ABOSG	ABO Subgroup Typing	235
		FTC	Forensic Toxicology, Criminalistics	107			J, JXM	Transfusion Medicine	232
		T	Toxicology	98			JAT, JATXM	Transfusion Medicine, Automated	233
		UT	Urine Toxicology	98	Acetaminophen	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54-56
7-aminoflunitrazepam		DFC	Drug-Facilitated Crime	111			CZQ	QCC, Chemistry and TDM	37
		FTC	Forensic Toxicology, Criminalistics	107			FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98			LN3	TDM CVL	125
		UT	Urine Toxicology	98			SDS	Serum Drug Screen	104
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		T	Toxicology	98			UDS, UDS6	Urine Drug Screen	100
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17-hydroxycorticosteroids		N	Urine Chemistry-Special	69			SDS	Serum Drug Screen	104

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Acinetobacter calcoaceticus-baumannii complex	X	IDPN	Infectious Disease, Pneumonia Panel	211
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		CTQ, CT1Q, CT2Q, CT3Q, CT5Q	QCC, ACT	46
		POC14, POC15, POC16	Competency Activated Clotting Time	52
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		CGE/CGEX	Coagulation, Extended	167
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		CGS1	Coag Special, Series 1	168
		CGS3	Coag Special, Series 3	168
		CGS4	Coag Special, Series 4	168
		DBGN	Anticoagulant Monitoring, Dabigatran	170
		FNPX	Anticoagulant Monitoring, Fondaparinux	170
		RVBN	Anticoagulant Monitoring, Rivaroxaban	170
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		CZQ	QCC, Chemistry and TDM	37
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		FLD2	Body Fluid Chemistry 2	73	Aluminum, whole blood		TMWB	Trace Metals, Whole Blood	106
		IFS	Interfering Substances	138	Amikacin	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
		LN2	Chemistry, Lipid, Enzyme CVL	124			CZQ	QCC, Chemistry and TDM	37
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124			LN3	TDM CVL	125
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Alpha-1 antitrypsin	X	IG/IGX	Immunology, General	216			BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		LN7	Immunology CVL	126	Amitriptyline		DFC	Drug-Facilitated Crime	111
Alpha-1 antitrypsin genotyping (<i>SERPINA1</i>) gene	X	AAT	Alpha-1 Antitrypsin Genotyping	259			FTC	Forensic Toxicology, Criminalistics	107
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		LN5S	Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	125	Amphetamine		DFC	Drug-Facilitated Crime	111
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		DMPM	Drug Monitoring for Pain Management	110			FTC	Forensic Toxicology, Criminalistics	107
		FTC	Forensic Toxicology, Criminalistics	107			OFD	Oral Fluid for Drugs of Abuse	103
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		UT	Urine Toxicology	98
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		FLD	Body Fluid	72
		FLDQ	QCC, Body Fluid Chemistry	38
Amylase, pancreatic		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
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Anticardiolipin IgG, IgM, polyclonal; quantitative		ACL, APS	Antiphospholipid Antibody	219
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	X	RMC	Routine Microbiology Combination	180		X	AHIVW	Anti-HIV Rapid Methods, Waived	244
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		IFS	Interfering Substances	138		X	D	Bacteriology	177
		LN2	Chemistry, Lipid, Enzyme CVL	124		X	D6	Rapid Group A Strep	182
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124		X	D9	Rapid Group A Strep, Waived	182
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Atenolol		FTC	Forensic Toxicology, Criminalistics	107			SBAS	<i>S. pneumoniae</i> Antigen Detection	183
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		UT	Urine Toxicology	98		X	D1, D2, D3, RMC	Throat, Urine, GC Cultures	179–180
Automated WBC differential	X	FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140		X	D8	Group B Strep	183
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						X	GIP5	Gastrointestinal Panel, 5 Challenge	212
						X	HC6/HC6X	<i>C. trachomatis</i> /GC by Nucleic Acid Amp	191

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		MBT	Microbiology Bench Tools Competency	178
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		MRS	Methicillin-Resistant <i>Staphylococcus aureus</i> Screen	188
		MRS2M	MRSA Screen, Molecular, 2 Challenge	188
	X	MRS5	Methicillin-Resistant <i>Staphylococcus aureus</i> Screen	188
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	x	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	187
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	x	GIP5	Gastrointestinal Panel, 5 Challenge	212
		GIPN	Gastrointestinal Panel, Global	213
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		MRD1	Measurable (Minimal) Residual Disease	279
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		OFD	Oral Fluid for Drugs of Abuse	103
		SDS	Serum Drug Screen	104
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		UDS, UDS6	Urine Drug Screen	100
Benzoylcegonine		UT	Urine Toxicology	98
		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
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		UDC	Forensic Urine Drug Testing, Confirmatory	102
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		CZQ	QCC, Chemistry and TDM	37	Blood or hemoglobin, urine	X	CMP, CMP1	Clinical Microscopy	152
		LN2	Chemistry, Lipid, Enzyme CVL	124	Blood parasite	X	BP	Blood Parasite	198
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124		X	P	Parasitology	197
	X	NB, NB2	Neonatal Bilirubin	64	Blood parasite, rapid	X	RML5	Rapid Malaria, 5 Challenge	198
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		CZQ	QCC, Chemistry and TDM	37	Bloom syndrome (<i>BLM</i> gene)	X	MGL4	Molecular Genetics	262–263
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		LN2	Chemistry, Lipid, Enzyme CVL	124	Body fluid cell differential		VBF	Virtual Body Fluid	154
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124	Body fluid (cell count) manual	X	HFC, HFCI	Hemocytometer Fluid Count	158
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Blood cannabinoids		THCB	Blood Cannabinoids	109		X	IDR	Infectious Disease Respiratory Panel	210
Blood cell identification		EHE1	Expanded Virtual Peripheral Blood Smear	150	<i>Bordetella pertussis</i>		BOR	<i>Bordetella pertussis/ parapertussis</i> , Molecular	185
		VPBS	Virtual Peripheral Blood Smear	149			IDN, IDO	Nucleic Acid Amp, Organisms	207
Blood cell identification, photographs	X	BCP	Blood Cell Identification	142		X	IDR	Infectious Disease Respiratory Panel	210
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Brompheniramine		DFC	Drug-Facilitated Crime	111
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		UT	Urine Toxicology	98
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Buprenorphine		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UDS, UDS6	Urine Drug Screen	100
		UT	Urine Toxicology	98
Bupropion		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Butalbital		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
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		UDC	Forensic Urine Drug Testing, Confirmatory	102
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<i>C. difficile</i> toxin (see <i>Clostridioides (Clostridium) difficile</i> toxin)				

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		CZQ	QCC, Chemistry and TDM	37
Calcitonin	X	TM/TMX	Tumor Markers	89
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		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
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		AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
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		LN13C	Blood Gas CVL	128
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Canavan disease (ASPA gene)	X	MGL4	Molecular Genetics	262–263			FTC	Forensic Toxicology, Criminalistics	107
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Candida culture	X	F3	<i>Candida</i> Culture	195			UT	Urine Toxicology	98
Candida glabrata vaginal, molecular	X	MVP	Molecular Vaginal Panel	191	Carnitine	X	BGL1	Biochemical Genetics	257
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Candida sp. group, vaginal, molecular	X	MVP	Molecular Vaginal Panel	191	CD3	X	FL, FL1	Lymphocyte Subset Immunophenotyping	224
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		CZQ	QCC, Chemistry and TDM	37	CD4	X	FL, FL1	Lymphocyte Subset Immunophenotyping	224
		FTC	Forensic Toxicology, Criminalistics	107			LN22	Flow Cytometry CVL	130
		LN3	TDM CVL	125	CD8	X	FL, FL1	Lymphocyte Subset Immunophenotyping	224
		T	Toxicology	98			LN22	Flow Cytometry CVL	130
		UT	Urine Toxicology	98	CD20		PM3	Immunohistochemistry	298
Carbamazepine-10,11-epoxide		FTC	Forensic Toxicology, Criminalistics	107	CD30		CD30	CD30 Immunohistochemistry	299
		T	Toxicology	98			RFAV3	Rare Flow Antigen Validation, CD30	229
		UT	Urine Toxicology	98	CD34		CBT	Cord Blood Testing	240
Carbamazepine, free		CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56		X	FL4	Flow Cytometry CD34+	224
		CZQ	QCC, Chemistry and TDM	37			SCP	Stem Cell Processing	240
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Carbapenemase resistance mechanism detection		CRE	Carbapenemase Detection	186			FL4	Flow Cytometry CD34+	224
Carbon dioxide (CO₂)	X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	54–56			SCP	Stem Cell Processing	240
		LN2	Chemistry, Lipid, Enzyme CVL	124	CD49d		ZAP70	ZAP-70 Analysis by Flow Cytometry	230
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124	CD117 (c-kit)		PM1	Immunohistochemistry	295
Carboxyhemoglobin	X	SO	Blood Oximetry	95	CEA		FLD	Body Fluid	72
		SOQ	QCC, Blood Oximetry	41			FLDQ	QCC, Body Fluid Chemistry	38
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							LN5	Ligand CVL	125
							LN5S	Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	125
					Cell-free DNA		CFDNA	Cell-Free Tumor DNA	276
							NIPT	Noninvasive Prenatal Testing	88
					Ceruloplasmin	X	S2, S4	Immunology, Special	217
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							SCP	Stem Cell Processing	240

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	X	HC7	<i>C. trachomatis</i> /GC DNA by NAA	191
	X	STIM	Sexually Transmitted Infection Detection, Molecular	191
		VR1	Virology Culture	200
<i>Chlamydia pneumoniae</i>		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	107
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		UT	Urine Toxicology	98
Chloride	X	AQ, AQH, AQIS	Critical Care Blood Gas	92–93
		AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	138
		LN13C	Blood Gas CVL	128
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
		POC10, POC11	POC Competency Blood Gases	51
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Chloride, urine		LN6	Urine Chemistry CVL	126
	X	U	Urine Chemistry–General	68
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Chlorpheniramine		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
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		CZQ	QCC, Chemistry and TDM	37
		FLD	Body Fluid	72
		FLDQ	QCC, Body Fluid Chemistry	38
	X	LCW	Chemistry–Ltd, Waived	64
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
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Chromium, urine		TMU	Trace Metals, Urine	106
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		FTC	Forensic Toxicology, Criminalistics	107
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		UT	Urine Toxicology	98
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		CRTQ	QCC, Cardiac Markers	38
		HCRQ	QCC, High-Sensitivity Cardiac Markers	39
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
	X	PCARM/ PCARMX	Point-of-Care Cardiac Markers	64
		POC12	POC Cardiac Markers Competency	51
CK2 (MB)		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
CK2 (MB) (cont.)		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124	c-Myc/Bcl-2 immunohistochemistry tumor markers		MYCB	c-Myc/Bcl-2 Immunohistochemistry TMA	301
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Clomipramine		FTC	Forensic Toxicology, Criminalistics	107	Cobalt, whole blood		TMWB	Trace Metals, Whole Blood	106
		T	Toxicology	98	Cocaethylene		FTC	Forensic Toxicology, Criminalistics	107
		UT	Urine Toxicology	98			T	Toxicology	98
Clonazepam		DMPM	Drug Monitoring for Pain Management	110			UT	Urine Toxicology	98
		FTC	Forensic Toxicology, Criminalistics	107	Cocaine		DMPM	Drug Monitoring for Pain Management	110
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		UT	Urine Toxicology	98			OFD	Oral Fluid for Drugs of Abuse	103
Clonidine		DFC	Drug-Facilitated Crime	111			T	Toxicology	98
Clostridioides (Clostridium) difficile antigen		CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	187			UDS, UDS6	Urine Drug Screen	100
	X	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	187			UT	Urine Toxicology	98
	X	D	Bacteriology–Antigen Detection	177	Codeine		DFC	Drug-Facilitated Crime	111
		SP, SPN	Stool Pathogens–Rapid and Molecular	189			DMPM	Drug Monitoring for Pain Management	110
Clostridioides (Clostridium) difficile toxin		CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	187			FTC	Forensic Toxicology, Criminalistics	107
	X	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	187			OFD	Oral Fluid for Drugs of Abuse	103
	X	D	Bacteriology–Antigen Detection	177			T	Toxicology	98
		GIP	Gastrointestinal Panel	212			UDC	Forensic Urine Drug Testing, Confirmatory	102
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212	Compatibility testing	X	J, JXM, JAT, JATXM	Transfusion Medicine	232–233
		GIPN	Gastrointestinal Panel, Global	213			JATE1	Transfusion Medicine, Automated, Educational	233
		SP, SPN	Stool Pathogens–Rapid and Molecular	189			TMCA	Transfusion Medicine, Competency Assessment	239
Clozapine		DFC	Drug-Facilitated Crime	111	Complement C3	X	IG/IGX	Immunology, General	216
		FTC	Forensic Toxicology, Criminalistics	107			LN7	Immunology CVL	126
		T	Toxicology	98	Complement C4	X	IG/IGX	Immunology, General	216
		UT	Urine Toxicology	98			LN7	Immunology CVL	126
		ZE	Therapeutic Drug Monitoring, Extended	59	Complexed PSA		K/KK	Ligand–General	82
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					Connexin 26 (<i>GJB2</i> gene)	X	MGL3	Molecular Genetics	262–263
					Copper	X	R	Trace Metals	78
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		CZQ	QCC, Chemistry and TDM	37
	X	K/KK	Ligand–General	82
		LN5	Ligand CVL	125
		LN5S	Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	125
Cortisol, salivary		SALC	Salivary Cortisol	77
Cortisol, urinary free	X	N	Urine Chemistry–Special	69
Cotinine		NTA	Nicotine and Tobacco Alkaloids	105
		OFD	Oral Fluid for Drugs of Abuse	103
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C-peptide		ABGIC	Accuracy-Based Glucose, Insulin, and C-peptide	118
	X	ING	Insulin, Gastrin, C-peptide	86
		LN46	C-peptide/Insulin CVL	135
C-reactive protein (CRP)	X	CRP, IL	Immunology	216
		LN12	C-reactive Protein CVL	128
C-reactive protein, high-sensitivity (hsCRP)	X	HSCRCP	High-Sensitivity C-reactive Protein	63
		LN21	High-Sensitivity C-reactive Protein CVL	130
Creatine kinase (CK)	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124

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		AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		FLD	Body Fluid	72
		FLDQ	QCC, Body Fluid Chemistry	38
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN24	Creatinine Accuracy Cal CVL	131
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
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Creatinine, urine		ABU	Accuracy-Based Urine	115
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		DAI	Urine Drug Adulterant/ Integrity Testing	101
		LN20	Urine Albumin CVL	129
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		UDC	Forensic Urine Drug Testing, Confirmatory	102
	X	UMC	Urine Albumin/ Creatinine	160
Creatinine, vitreous fluid		VF	Vitreous Fluid, Postmortem	104
Creatinine, whole blood	X	WBCR	Whole Blood Creatinine	66
Crossmatching	X	J, JXM, JAT, JATXM	Transfusion Medicine	232–233
	X	MXC, MXEP	HLA Analysis, Class I/II	248
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Cryptococcal antigen detection	X	CRYP	Cryptococcal Antigen Detection	195
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	X	F1	Yeast	194
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Cryptosporidium		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212

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Cryptosporidium (cont.)		GIPN	Gastrointestinal Panel, Global	213	Cytogenomic microarray		CYCGH	Constitutional Microarray Analysis	256
Cryptosporidium immunoassay, preserved specimen	X	P, P3, P4, P5	Parasitology	197			CYCMA	Cytogenomic Microarray Analysis for Oncologic Abnormality	256
Crystal identification (bile)		BCR	Bile Crystals	157	Cytology proficiency testing (see Cytopathology GYN proficiency testing)				
Crystal identification, body fluid		BFC	Body Fluid Crystals	157	Cytomegalovirus (CMV)		ID1	Nucleic Acid Amp, Viruses	201
Crystal identification, urine		URC	Urine Crystals	157			IDME	Meningitis/Encephalitis Panel	209
Crystals, urine (semiquantitative)		UAA	Automated Urinalysis	156		X	IDM5	Meningitis/Encephalitis Panel	209
CSF antigen detection	X	D	Bacteriology	177			LN38	CMV Viral Load CVL	133
CSF IgG calculations		OLI	CSF Chemistry and Oligoclonal Bands	74			VLS, VLS2	Viral Load	206
C-telopeptide (CTX)		BMV5	Bone Markers and Vitamin	86		X	VM3	Viral Markers–Series 3	243
<i>Cutibacterium avidum/granulosum</i>		JIP	Joint Infection Panel	208		X	VR1	Virology Culture	200
Cyclic citrullinated peptide antibody		CCP	Cyclic Citrullinated Peptide Antibody	220		X	VR2	Virology by DFA	200
Cyclobenzaprine		DFC	Drug-Facilitated Crime	111		X	VR3	Infectious Disease Serology	214
		FTC	Forensic Toxicology, Criminalistics	107	Cytopathology GYN education		PAPCE1	PAP Edu, Conventional	307
		T	Toxicology	98			PARJE1	PAP Edu, All Technologies	307
		UT	Urine Toxicology	98			PAPKE1	PAP Edu, SurePath	307
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<i>CYP2C9</i>	X	PGX	Pharmacogenetics	264			FNAG/ FNAG1	Fine-Needle Aspiration, Glass	312
<i>CYP2C19</i>	X	PGX	Pharmacogenetics	264			NGC/NGC1	Nongynecologic Cytopathology Education Program	310
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<i>CYP3A5</i>		PGX	Pharmacogenetics	264	D-dimer, qualitative		CGDF	Coagulation, D-dimer/ FDP	166
<i>CYP4F2</i>		PGX	Pharmacogenetics	264			CGL	Coagulation, Limited	166
Cystatin C		CYS	Cystatin C	74	D-dimer, quantitative	X	CGDF	Coagulation, D-dimer/ FDP	166
		LN49	Cystatin C CVL	135			CGL	Coagulation, Limited	166
Cystic fibrosis (CFTR gene)	X	MGL2, MGL5	Molecular Genetics	262–263			CGLQ	QCC, Coagulation, Limited	46
Cystine		KSA	Kidney Stone Risk Assessment	69					
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		POC12	POC Cardiac Markers Competency	51
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Delta-9-THC		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		THCB	Blood Cannabinoids	109
		UT	Urine Toxicology	98
Delta-9-THC-COOH		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		THCB	Blood Cannabinoids	109
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UDS, UDS6	Urine Drug Screen	100
		UT	Urine Toxicology	98
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Demoxepam		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
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Dermatophyte identification	X	F	Mycology and Aerobic Actinomycetes	194
Desipramine		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
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Desmethylsertraline		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
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Dextromethorphan		DFC	Drug-Facilitated Crime	111

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DHEA sulfate	X	Y/YY	Sex Hormones	84
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Diazepam		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UT	Urine Toxicology	98
Differential, automated	X	FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140
		FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
Differential (bone marrow), manual		BMD	Bone Marrow Cell Differential	145
Differential (fluid), manual		HFC, HFCI	Hemocytometer Fluid Count	158
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		VPBS	Virtual Peripheral Blood Smear	149
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		CZQ	QCC, Chemistry and TDM	37
		LN3	TDM CVL	125
Digoxin, free		CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
Dihydrocodeine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Diltiazem		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
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Dimeric inhibin A (DIA)	X	FP/FPX	Maternal Screen	87	Doxylamine		DFC	Drug-Facilitated Crime	111
Diphenhydramine		DFC	Drug-Facilitated Crime	111			FTC	Forensic Toxicology, Criminalistics	107
		FTC	Forensic Toxicology, Criminalistics	107			T	Toxicology	98
		T	Toxicology	98			UT	Urine Toxicology	98
		UT	Urine Toxicology	98	DPYD		PGX3	Pharmacogenetics	264
Diphenylhydantoin (see Phenytoin)					Duloxetine		FTC	Forensic Toxicology, Criminalistics	107
Direct antiglobulin testing	X	DAT	Direct Antiglobulin Testing	237			T	Toxicology	98
		TMCAD	Transfusion Medicine, Competency Assessment	239			UT	Urine Toxicology	98
Direct antiglobulin testing, automated		ADAT	Direct Antiglobulin Testing—Automated	237	EBV (see Epstein-Barr virus)				
Direct bilirubin	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56	Ecgonine ethyl ester		FTC	Forensic Toxicology, Criminalistics	107
		CZQ	QCC, Chemistry and TDM	37	Ecgonine methyl ester		FTC	Forensic Toxicology, Criminalistics	107
		LN2	Chemistry, Lipid, Enzyme CVL	124			T	Toxicology	98
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124			UT	Urine Toxicology	98
	X	NB, NB2	Neonatal Bilirubin	64	E. coli 0157 (see Escherichia coli 0157)				
Disease association/ drug risk		DADR1, DADR2	Disease Association/ Drug Risk	251	eGFR		LN24	Creatinine Accuracy CVL	131
Disopyramide		CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56	EGFR (see Epidermal growth factor receptor)				
		CZQ	QCC, Chemistry and TDM	37	Electronic crossmatch		JXM, JATXM	Transfusion Medicine	232–233
DMD/Becker (DMD gene)	X	MGL2	Molecular Genetics	262–263	Electrophoresis	X	HG	Hemoglobinopathy	147
DNA analysis	X	DML	HLA Molecular Typing	249			LPE	Lipoprotein Electrophoresis	76
	X	PARF	Parentage/Relationship	246		X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
DNA content/cell cycle analysis		FL, FL2	Flow Cytometry	224			SPE	Protein Electrophoresis	76
DNA extraction and amplification		MHO5	Molecular Oncology Hematologic	274, 278			UBJP	Urine Bence Jones Protein	76
DNA fingerprinting		IDN, IDO	Nucleic Acid Amp, Organisms	207	Elution, antibody		ELU	Eluate	238
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		MMR	DNA Mismatch Repair	299	Embryology		EMB	Embryology	163
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Dopamine	X	N	Urine Chemistry—Special	69		X	GIP5	Gastrointestinal Panel, 5 Challenge	212
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		FTC	Forensic Toxicology, Criminalistics	107	Enterobacter cloacae complex	X	IDPN	Infectious Disease, Pneumonia Panel	211
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		UT	Urine Toxicology	98	<i>Enterococcus faecalis</i>		JIP	Joint Infection Panel	208
					<i>Enterococcus faecium</i>		JIP	Joint Infection Panel	208

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	X	GIP5	Gastrointestinal Panel, 5 Challenge	212
		GIPN	Gastrointestinal Panel, Global	213
Enterotoxigenic <i>E. coli</i> (ETEC)		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212
		GIPN	Gastrointestinal Panel, Global	213
Enterovirus		ID1	Nucleic Acid Amp, Viruses	201
		IDME	Meningitis/Encephalitis Panel	209
	X	IDM5	Meningitis/Encephalitis Panel	209
	X	IDR	Infectious Disease, Respiratory Panel	210
	X	VR1	Virology Culture	200
		SCM2	Special Clinical Microscopy	159
Eosinophils, urine		SCM2	Special Clinical Microscopy	159
Ephedrine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Epidermal growth factor receptor (<i>EGFR</i>)	X	EGFR	Mutation Testing	276
	X	MTP	Multigene Tumor Panel	277
Epinephrine	X	N	Urine Chemistry–Special	69
Epithelial cells, urine, semiquantitative		UAA1	Automated Urinalysis	156
Epstein-Barr virus (EBV)		ID1	Nucleic Acid Amp, Viruses	201
	X	ISH	In Situ Hybridization	274
		VLS, VLS2	Viral Load	206
		VR3	Antibody Detection–Infectious Disease Serology	214
ER by immunohistochemistry	X	PM2	ER, PgR by Immunohistochemistry	297
ER by immunohistochemistry, interpretation only		HERI	HER2 and ER Immunohistochemistry Interpretation Only	298
<i>ERBB2</i> (<i>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	88
<i>Escherichia coli</i>	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208

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	X	IDM5	Meningitis/Encephalitis Panel	209
<i>Escherichia coli</i> O157		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212
Estazolam		DFC	Drug-Facilitated Crime	111
Estradiol		ABS	Accuracy-Based Testosterone and Estradiol	115
		LN8	Reproductive Endocrinology CVL	127
	X	Y/YY	Sex Hormones	84
Estriol, unconjugated (uE3)	X	FP/FPX	Maternal Screen	87
	X	Y/YY	Sex Hormones	84
Estrogen receptors by immunohistochemistry	X	PM2	ER, PgR by Immunohistochemistry	297
Estrogen receptors by immunohistochemistry, interpretation only		HERI	HER2 and ER Immunohistochemistry Interpretation Only	298
Ethanol	X	AL1	Whole Blood Alcohol/Volatiles	104
	X	AL2	Serum Alcohol/Volatiles	104
		LN11	Serum Ethanol CVL	127
Ethanol, urine		UDS, UDS6	Urine Drug Screen	100
Ethanol, vitreous fluid		VF	Vitreous Fluid, Postmortem	104
		CZ/CZX/CZX, Z	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
Ethyl glucuronide (EtG)		ETB	Ethanol Biomarkers	105
Ethyl sulfate (EtS)		ETB	Ethanol Biomarkers	105
Ethylene glycol		AL1	Whole Blood Alcohol/Volatiles	104
		AL2	Serum Alcohol/Volatiles	104
Etizolam		DFC	Drug-Facilitated Crime	111
		T	Toxicology	98
		UT	Urine Toxicology	98
Everolimus		EV	Everolimus	58
Factor II		CGE/CGEX	Coagulation, Extended	167
		ECF	Expanded Coagulation Factors	167
Factor II (<i>F2</i> gene)	X	MGL1	Molecular Genetics	262–263
	X	TPM	Thrombophilia Mutations	265
Factor V		CGE/CGEX	Coagulation, Extended	167
		ECF	Expanded Coagulation Factors	167

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Factor V Leiden (<i>F5</i> gene)	X	MGL1	Molecular Genetics	262–263	Ferritin	X	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
	X	TPM	Thrombophilia Mutations	265			CZQ	QCC, Chemistry and TDM	37
Factor VII		CGE/CGEX	Coagulation, Extended	167		X	K/KK	Ligand–General	82
		ECF	Expanded Coagulation Factors	167			LN5	Ligand CVL	125
Factor VIII		CGE/CGEX	Coagulation, Extended	167			LN5S	Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	125
		CGS3	Coag Special, Series 3	168	Fetal fibronectin	X	FF	Fetal Fibronectin	88
		ECF	Expanded Coagulation Factors	167	Fetal hemoglobin (gastric fluid)		APT	Fetal Hemoglobin	157
	LN51	Factor VIII CVL	133	Fetal hemoglobin identification	X	HG	Hemoglobinopathy	147	
Factor VIII inhibitor		CGS3	Coag Special, Series 3	168	Fetal membrane rupture		ROM1	Fetal Membranes/ Preterm Labor	159
Factor IX		CGE/CGEX	Coagulation, Extended	167	Fetal red cell quantitation	X	HBF	Fetal Red Cell Detection	238
		ECF	Expanded Coagulation Factors	167			TMCAF	Transfusion Medicine, Competency Assessment	239
Factor X		CGE/CGEX	Coagulation, Extended	167	Fetal screen (Rosette testing)	X	HBF	Fetal Red Cell Detection	238
		ECF	Expanded Coagulation Factors	167			TMCAF	Transfusion Medicine, Competency Assessment	239
Factor XI		CGE/CGEX	Coagulation, Extended	167	Fibrin degradation products, plasma		CGDF	Coagulation, D-dimer/ FDP	166
		ECF	Expanded Coagulation Factors	167			CGL	Coagulation, Limited	166
Factor XII		CGE/CGEX	Coagulation, Extended	167			CGLQ	QCC, Coagulation, Limited	46
		ECF	Expanded Coagulation Factors	167	Fibrin degradation products, serum		CGDF	Coagulation, D-dimer/ FDP	166
Factor XIII		CGE/CGEX	Coagulation, Extended	167			CGL	Coagulation, Limited	166
		ECF	Expanded Coagulation Factors	167	Fibrin monomer		CGDF	Coagulation, D-dimer/ FDP	166
Familial dysautonomia (<i>ELP1</i> gene)	X	MGL4	Molecular Genetics	262–263	Fibrinogen	X	CGL	Coagulation, Limited	166
Fanconi anemia, complementation grp. C (<i>FANCC</i> gene)	X	MGL4	Molecular Genetics	262–263			CGLQ	QCC, Coagulation, Limited	46
Fecal calprotectin		FCAL	Fecal Calprotectin	75			LN44	Fibrinogen, CVL	134
Fecal fat, qualitative		FCFS	Fecal Fat	75	Fibrinogen antigen		CGE/CGEX	Coagulation, Extended	167
Fecal lactoferrin		FLAC	Fecal Lactoferrin	187	<i>Finegoldia magna</i>		JIP	Joint Infection Panel	208
Fecal occult blood		OCB	Occult Blood	159	Fine-needle aspiration, digital slide program		FNA/FNA1	Online Digital Slide Program	311
		OCBQ	QCC, Occult Blood	45	Fine-needle aspiration, glass slides		FNAG/ FNAG1	Fine-Needle Aspiration	312
Fentanyl		DFC	Drug-Facilitated Crime	111					
		DMPM	Drug Monitoring for Pain Management	110					
		FTC	Forensic Toxicology, Criminalistics	107					
		OFD	Oral Fluid for Drugs of Abuse	103					
		T	Toxicology	98					
		UDC	Forensic Urine Drug Testing, Confirmatory	102					
		UDS, UDS6	Urine Drug Screen	100					
		UT	Urine Toxicology	98					
Fern test (vaginal)	X	CMMP	Clinical Microscopy, Misc	153					

Analyte/Procedure	LAP ENR	Program Code	Description	Page
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FISH for breast carcinoma hybridization and interpretation on site <i>ERBB2 (HER2)</i> amplification	X	CYH	FISH for <i>ERBB2 (HER2)</i> Amplification	255
FISH for breast carcinoma, interpretation only, <i>ERBB2 (HER2)</i> gene amplification		CYHI	FISH for <i>ERBB2 (HER2)</i> Amplification, Interpretation Only Exercise	255
FISH for constitutional and hematologic disorders		CYF	Fluorescence In Situ Hybridization and Interpretation on Site	254
FISH for lung cancer, <i>ALK</i> rearrangement		CYALK	Fluorescence In Situ Hybridization and Interpretation on Site, Lung Cancer	255
FISH for lymphoma		CYL	Fluorescence In Situ Hybridization and Interpretation on Site, Lymphoma	255
FISH for paraffin-embedded tissue	X	CYH	FISH for <i>ERBB2 (HER2)</i> Amplification	255
		CYJ	Fluorescence In Situ Hybridization and Interpretation on Site, Brain/Glioma Tissue	255
		CYK	Fluorescence In Situ Hybridization and Interpretation on Site, Solid Tumor	255
		CYL	Fluorescence In Situ Hybridization and Interpretation on Site, Lymphoma	255
FISH for solid tumor		CYK	Fluorescence In Situ Hybridization and Interpretation on Site, Solid Tumor	255
FISH for urothelial carcinoma hybridization and interpretation	X	CYI	Fluorescence In Situ Hybridization and Interpretation on Site, Urothelial Carcinoma	254
FLOR1		PM5	IHC Tissue Microarray Series	295
Flow cytometry, post-immunotherapy analysis		FL6	Flow Cytometry, Post-immunotherapy Analysis	225
Fluconazole		AFD	Antifungal Drugs Monitoring	109
Flunitrazepam		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98

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Flunitrazepam (cont.)		UT	Urine Toxicology	98
Fluorescent microscope check		I	Instrumentation	137
Fluoxetine		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Folate, RBC	X	FOL	RBC Folate	88
Folate, serum	X	K/KK	Ligand-General	82
		LN5	Ligand CVL	125
		LN5S	Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	125
Follicle-stimulating hormone (FSH)		ABS	Accuracy-Based Testosterone, Estradiol	115
		LN8	Reproductive Endocrinology CVL	127
	X	Y/YY	Sex Hormones	84
Fondaparinux		FNPX	Anticoagulant Monitoring, Fondaparinux	170
Forensic pathology		FR/FR1	Forensic Pathology	314
Forensic toxicology		FTC	Forensic Toxicology, Criminalistics	107
Fragile X (<i>FMR1</i> gene)	X	MGL1	Molecular Genetics	262–263
Free beta hCG		FP1B	First Trimester Maternal Screening, Free Beta	88
Free Kappa/Lambda ratio		SFLC	Serum Free Light Chains	223
Free testosterone		Y	Sex Hormones	84
Friedreich ataxia (<i>FXN</i> gene)	X	MGL2	Molecular Genetics	262–263
Fructosamine		FT	Fructosamine	75
Fungal culture		CBT	Cord Blood Testing	240
		SCP	Stem Cell Processing	240
Fungal serology		FSER	Fungal Serology	196
Fungus identification	X	F	Mycology and Aerobic Actinomycetes	194
	X	F1	Yeast	194
	X	F3	<i>Candida</i> Culture	195
	X	IDM5	Infectious Disease Meningitis/Encephalitis	209
	X	MVP	Molecular Vaginal Panel	191
	X	VS	Vaginitis Screen	190
	X	YBC	Yeast Blood Culture, Molecular	195
<i>G6PD</i>		PGX1	Pharmacogenetics	264
Gabapentin		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110

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		UT	Urine Toxicology	98	Giemsa stain	X	BP	Blood Parasite	198
		ZE	Therapeutic Drug Monitoring, Extended	59		X	P	Parasitology	197
Galactomannan		FGAL	Galactomannan	195	Glioma by FISH		CYJ	Fluorescence In Situ Hybridization and Interpretation on Site, Brain/Glioma Tissue	255
Gamma globulin		M, OL1	CSF Chemistry	74			ABGIC	Accuracy-Based Glucose, Insulin, and C-peptide	118
		SPE	Serum Electrophoresis	76		X	AQ, AQH, AQIS	Critical Care Blood Gas	92–93
Gamma glutamyl transferase (GGT)	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56			AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
		CZQ	QCC, Chemistry and TDM	37		X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56
		IFS	Interfering Substances	138			CZQ	QCC, Chemistry and TDM	37
		LN2	Chemistry, Lipid, Enzyme CVL	124			FLD	Body Fluid	72
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124			FLDQ	QCC, Body Fluid Chemistry	38
Gamma hydroxybutyrate (GHB)		DFC	Drug-Facilitated Crime	111			IFS	Interfering Substances	138
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Gardnerella vaginalis, DNA probe	X	VS	Vaginitis Screen	190			LN2	Chemistry, Lipid, Enzyme CVL	124
Gastric occult blood		GOCB	Gastric Occult Blood	157			LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
Gastric pH		GOCB	Gastric Occult Blood	157	Glucose, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Gastrin		ABGIC	Accuracy Based Glucose, Insulin and C-peptide	118	Glucose, urine	X	CMP, CMP1	Clinical Microscopy	152
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Gaucher disease (GBA gene)	X	MGL4	Molecular Genetics	262–263		X	HCC2	Waived Combination	66
GDH antigen		CDF2	<i>Clostridioides (Clostridium) difficile</i> Detection	187			LN6	Urine Chemistry CVL	126
	X	CDF5	<i>Clostridioides (Clostridium) difficile</i> Detection	187			POC3	POC Urine Dipstick Competency	50
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Gentamicin	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56	Glucose, whole blood	X	HCC	Waived Combination	65
		CZQ	QCC, Chemistry and TDM	37			HCC2	Waived Combination	66
		LN3	TDM CVL	125		X	LCW	Chemistry–Ltd, Waived	64
Giardia		GIP	Gastrointestinal Panel	212			LN17	Whole Blood Glucose CVL	129
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212			POC2	POC Glucose Competency	50
							POC7	POC/Waived Glucose and Hemoglobin Competency	50

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Glutaraldehyde, urine		DAI	Urine Drug Adulterant/ Integrity Testing	101
Glycated serum albumin		GSA	Glycated Serum Albumin	63
Glycine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Glycogen storage disease type Ia (G6PC gene)	X	MGL4	Molecular Genetics	262–263
Glycohemoglobin	X	GH5, GH5I	Hemoglobin A1c	62–63
		GHQ	QCC, Hemoglobin A1c	38
		LN15	Hemoglobin A1c CVL	128
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		CZQ	QCC, Chemistry and TDM	37
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		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
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		FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140
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		POC10, POC11	POC Competency Blood Gases	51
		SCP	Stem Cell Processing	240

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		SOQ	QCC, Blood Oximetry	41		X	MGL2	Molecular Genetics	262–263
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Hematology bone marrow case studies		BMD	Bone Marrow Cell Differential	145			CMQ	QCC, Urinalysis	44
Hematology case studies		VPBS	Virtual Peripheral Blood Smear	149		X	HCC2	Waived Combination	66
Hematology peripheral blood case studies		EHE1	Expanded Virtual Peripheral Blood Smear	150			POC3	POC Urine Dipstick Competency	50
Hematopathology online education		HPATH, HPATH1	Hematopathology Online Education	151	Hemolytic complement, total		CH50	Total Hemolytic Complement	222
Hemochromatosis (<i>HFE</i> gene)	X	MGL1	Molecular Genetics	262–263	Hemosiderin, urine		SCM1	Special Clinical Microscopy	159
Hemocytometer fluid count	X	HFC, HFCI	Hemocytometer Fluid Count	158	Heparin assay		CGS4	Coag Special, Series 4	168
Hemoglobin	X	FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140	Heparin-induced thrombocytopenia		CGE/CGEX	Coagulation, Extended	167
		FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43			CGS5	Coag Special, HIT	168
	X	HCC	Waived Combination	65	Heparin, low molecular weight		LN36	Heparin CVL	133
	X	HCC2	Waived Combination	66	Heparin, unfractionated		LN36	Heparin CVL	133
	X	HCC1	Waived Hemoglobin	65	Heparin/platelet Factor IV		CGS5	Coag Special, HIT	168
	X	HE	Basic Hematology	140	Hepatitis B virus	X	HBVL, HBVL5	Hepatitis Viral Load	205
		LN9	Hematology CVL	127		X	NAT	Nucleic Acid Testing	245
		POC7	POC/Waived Glucose and Hemoglobin Competency	50			LN52	HBV Viral Load CVL	133
		SCP	Stem Cell Processing	240	Hepatitis C virus	X	HCV2	Hepatitis Viral Load, Genotyping and Qualitative	205
	X	SO	Blood Oximetry	95			LN45	HCV Viral Load CVL	133
		SOQ	QCC, Blood Oximetry	41		X	NAT	Nucleic Acid Testing	245
Hemoglobin A1c	X	GH2	Hemoglobin A1c, Waived	62	<i>HER2</i> by immunohistochemistry	X	HER2	<i>HER2</i> by Immunohistochemistry	297
	X	GH5, GH5I	Hemoglobin A1c	62–63	<i>HER2</i> by immunohistochemistry, interpretation only		HERI	<i>HER2</i> and ER Immunohistochemistry Interpretation Only	298
		GHQ	QCC, Hemoglobin A1c	38	<i>HER2</i> by molecular testing	X	MTP	Multigene Tumor Panel	277
		LN15	Hemoglobin A1c CVL	128	<i>HER2</i> , gastric	X	GHER2	Gastric <i>HER2</i>	297
Hemoglobin A2 quantitation	X	HG	Hemoglobinopathy	147	<i>HER2</i> (<i>ERBB2</i>) gene amplification by FISH, hybridization and interpretation on site	X	CYH	FISH for <i>ERBB2</i> (<i>HER2</i>) Amplification	255
Hemoglobin electrophoresis	X	HG	Hemoglobinopathy	147	<i>HER2</i> (<i>ERBB2</i>) gene amplification by FISH, interpretation only		CYHI	<i>ERBB2</i> (<i>HER2</i>) Amplification by FISH, Interpretation Only	255
Hemoglobin, estimated	X	AQH, AQIS	Critical Care Blood Gas	92–93	<i>HER2</i> (<i>ERBB2</i>) gene amplification by ISH	X	ISH2	In Situ Hybridization	274
		AQH, AQSQ	QCC, Critical Care Blood Gas Series	42	Herpes simplex virus (HSV)	X	HC4	HSV Culture	201
		POC10, POC11	POC Competency Blood Gases	51			ID1	Nucleic Acid Amp, Viruses	201
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	X	VR2	Viral Antigen by DFA	200
	X	VR3	Antibody Detection–Infectious Disease Serology	214
HHV6		ID1	Nucleic Acid Amp, Viruses	201
		IDME	Meningitis/Encephalitis Panel	209
	X	IDM5	Meningitis/Encephalitis Panel	209
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HHV8		ID1	Nucleic Acid Amp, Viruses	201
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		LN21	High-Sensitivity C-reactive Protein CVL	130
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HLA-(class I/II) antibody screen		MXC, MXEP, MXS	HLA Analysis, Class I/II	248
HLA-(class I/II) crossmatching	X	MXC, MXEP	HLA Analysis, Class I/II	248
HLA-A*31:01		DADR1	Disease Association, Drug Risk	251
HLA-B27 typing	X	B27	HLA-B27 Typing	249
HLA-B*57:01		DADR1	Disease Association, Drug Risk	251
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HLA-DQA1*03/DQB1*03:02		DADR2	Disease Association, Drug Risk	251
HLA-DQA1*05/DQB1*02		DADR2	Disease Association, Drug Risk	251
HLA molecular typing	X	DML	HLA Molecular Typing	249
Homocysteine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
	X	HMS	Homocysteine	63
		LN16	Homocysteine CVL	129
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HSV (see Herpes simplex virus)				
Human chorionic gonadotropin (hCG), serum	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
	X	FP/FPX, FP1T	Maternal Screen	87–88
	X	HCG, IL	Immunology	216
	X	K/KK	Ligand–General	82
		LN5	Ligand CVL	125

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		LN8	Reproductive Endocrinology CVL	127	Human parechovirus		IDME	Meningitis/Encephalitis Panel	209
		SCO	Serum Carryover	137		X	IDM5	Meningitis/Encephalitis Panel	209
Human chorionic gonadotropin (hCG), urine	X	CMP, CMP1	Clinical Microscopy	152	Huntington disease (<i>HTT</i> gene)	X	MGL2	Molecular Genetics	262–263
		CMQ	QCC, Urinalysis	44	Hydrocodone		DFC	Drug-Facilitated Crime	111
	X	HCC2	Waived Combination	66			DMPM	Drug Monitoring for Pain Management	110
		POC1	POC hCG Competency	50			FTC	Forensic Toxicology, Criminalistics	107
		POC3	POC Urine Dipstick Competency	50			OFD	Oral Fluid for Drugs of Abuse	103
	X	UHCG	Urine HCG	160			T	Toxicology	98
Human epididymis protein 4		HUEP	Human Epididymis Protein 4	89			UDC	Forensic Urine Drug Testing, Confirmatory	102
Human herpesvirus 6		ID1	Nucleic Acid Amp, Viruses	201			UDS, UDS6	Urine Drug Screen	100
		IDME	Meningitis/Encephalitis Panel	209			UT	Urine Toxicology	98
	X	IDM5	Meningitis/Encephalitis Panel	209	Hydromorphone		DFC	Drug-Facilitated Crime	111
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Human herpesvirus 8		ID1	Nucleic Acid Amp, Viruses	201			FTC	Forensic Toxicology, Criminalistics	107
Human immuno-deficiency virus (HIV)		HIVG	HIV Genotyping	206			OFD	Oral Fluid for Drugs of Abuse	103
	X	NAT	Nucleic Acid Testing	245			T	Toxicology	98
	X	HV2	HIV Viral Load	206			UDC	Forensic Urine Drug Testing, Confirmatory	102
		LN39	HIV Viral Load CVL	133			UT	Urine Toxicology	98
Human metapneumovirus		ID2	Nucleic Acid Amp, Respiratory	204	Hydroxyproline, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
	X	IDPN	Infectious Disease, Pneumonia Panel	211	Hydroxybupropion		FTC	Forensic Toxicology, Criminalistics	107
	X	IDR	Infectious Disease, Respiratory Panel	210			T	Toxicology	98
Human papillomavirus (cytology) high-risk	X	CHPVD	Digene Specimen Transport Medium	308			UT	Urine Toxicology	98
	X	CHPVJ	Mixed Medium	308	Hydroxyzine		DFC	Drug-Facilitated Crime	111
	X	CHPVK	SurePath Preservative Fluid Transport Medium	308			FTC	Forensic Toxicology, Criminalistics	107
	X	CHPVM	ThinPrep PreservCyt Transport Medium	308			T	Toxicology	98
		HPV	Digene Hybrid Capture Technology Only	201			UT	Urine Toxicology	98
	X	ISH	In Situ Hybridization	274	Ibuprofen		FTC	Forensic Toxicology, Criminalistics	107
Human papillomavirus (high-risk) for cytopathology genotyping		CHPVJ	Mixed Medium	308			T	Toxicology	98
		CHPVK	SurePath Preservative Fluid Transport Medium	308			UT	Urine Toxicology	98
					<i>IDH1</i>	X	GLI	Glioma	277
					<i>IDH2</i>	X	GLI	Glioma	277
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IgE multi-allergen screen	X	SE	Diagnostic Allergy	221
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		LN7	Immunology CVL	126
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<i>IGHV</i>	X	IGHV	Mutation Analysis	279
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		LN7	Immunology CVL	126
IgM, electrophoresis	X	SPE	Protein Electrophoresis	76
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		PM1	CD117 by Immunohistochemistry	295
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Infectious mononucleosis (IM)	X	IL, IM	Immunology	216
	X	IMW	Infectious Mononucleosis, Waived	217
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	X	ID3	Nucleic Acid Amplification, Respiratory Limited	204
		ID3Q	QCC, Nucleic Acid Amplification, Respiratory Limited	47
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	X	IDR	Infectious Disease, Respiratory Panel	210
		POC8	POC Influenza A/B Ag	50
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		LN16	Homocysteine CVL	129			LN46	C-peptide/Insulin CVL	135
		LN17	Whole Blood Glucose CVL	129	Interleukin (IL)-1 beta		CTKN	Cytokines	220
		LN19	Reticulocyte CVL	129	International normalized ratio (INR)	X	CGB	Basic Coagulation	166
		LN2	Chemistry, Lipid, Enzyme CVL	124		X	CGL	Coagulation, Limited	166
		LN20	Urine Albumin CVL	129			CGS1	Coag Special, Series 1	168
		LN21	High-Sensitivity C-reactive Protein CVL	130			CGS4	Coag Special, Series 4	168
		LN22	Flow Cytometry CVL	130			POC6	POC PT/INR, CoaguChek XS Plus	50
		LN23	PSA CVL	130			WP10	Whole Blood Coagulation	173
		LN24	Creatinine Accuracy CVL	131		X	WP3, WP4, WP6, WP9	Whole Blood Coagulation	173
		LN25	Troponin I CVL	131	Ionized calcium	X	AQ, AQH, AQIS	Critical Care Blood Gas	92–93
		LN2BV	Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	124			AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
		LN3	TDM CVL	125		X	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		LN30	BNP CVL	131			POC10, POC11	POC Competency Blood Gases	51
		LN31	Immunosuppressive Drugs CVL	132	Iron	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		LN32	Ammonia CVL	132			CZQ	QCC, Chemistry and TDM	37
		LN33	Serum Myoglobin CVL	132			IFS	Interfering Substances	138
		LN34	Tumor Markers CVL	132			LN2	Chemistry, Lipid, Enzyme CVL	124
		LN35	Thrombophilia CVL	133			LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
		LN36	Heparin CVL	133	Isoleucine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		LN37	von Willebrand Factor Ag CVL	133	Isopropanol	X	AL1	Whole Blood Alcohol/ Volatiles	104
		LN38	CMV Viral Load CVL	133		X	AL2	Serum Alcohol/Volatiles	104
		LN39	HIV Viral Load CVL	133	Itraconazole		AFD	Antifungal Drugs Monitoring	109
		LN40	Vitamin D CVL	134	JC virus		ID1T	Nucleic Acid Amp, JC and BK	201
		LN41	Procalcitonin CVL	134	Jo-1 (antihistidyl t-RNA synthetase)		RDS	Rheumatic Disease Special	221
		LN42	D-dimer CVL	134	Kappa/Lambda	X	ISH	In Situ Hybridization	274
		LN44	Fibrinogen CVL	134	Kappa/Lambda ratio		IG/IGX	Immunology, General	216
		LN45	HCV Viral Load CVL	133			S2, S4	Immunology, Special	217
		LN46	C-peptide/Insulin CVL	135					
		LN47	High-Sensitivity Troponin T CVL	135					
		LN48	High-Sensitivity Troponin I CVL	135					
		LN49	Cystatin C CVL	135					
		LN50	Thyroid CVL	136					
		LN51	Factor VIII CVL	133					
		LN52	HBV Viral Load CVL	133					
		LN6	Urine Chemistry CVL	126					
		LN7	Immunology CVL	126					
		LN8	Reproductive Endocrinology CVL	127					
		LN9	Hematology CVL	127					

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Karyotype nomenclature	X	CY, CYBK	Cytogenetics	254
Ketamine		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Ketones, serum		KET	Ketones	63
Ketones, urine	X	CMP, CMP1	Clinical Microscopy	152
		CMQ	QCC, Urinalysis	44
	X	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	50
Ki-67		KI67	Ki-67 Immunohistochemistry TMA	301
Kidney stone risk assessment		KSA	Kidney Stone Risk Assessment	69
<i>Kingella kingae</i>		JIP	Joint Infection Panel	208
<i>KIT</i>	X	KIT	<i>KIT/PDGFRA</i>	276
	X	MTP	Multigene Tumor Panel	277
<i>Klebsiella aerogenes</i>	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
<i>Klebsiella oxytoca</i>	X	IDPN	Infectious Disease, Pneumonia Panel	211
<i>Klebsiella pneumoniae</i> group	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
KOH prep (skin)	X	CMMP	Clinical Microscopy, Misc	153
KOH prep (skin or vaginal)	X	FSM	Fungal Smear	196
<i>KRAS</i>	X	KRAS	Colorectal Cancer Mutation	276
	X	MTP	Multigene Tumor Panel	277
Laboratory preparedness exercise		LPX	Laboratory Preparedness Exercise	189
Lacosamide		ZE	Therapeutic Drug Monitoring, Extended	59
Lactate	X	AQ, AQH, AQIS	Critical Care Blood Gas	92-93
		AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
	X	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54-56
		CZQ	QCC, Chemistry and TDM	37
		FLD	Body Fluid	72
		FLDQ	QCC, Body Fluid Chemistry	38
		LN13C	Blood Gas CVL	128
		POC10, POC11	POC Competency Blood Gases	51

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Lactate, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Lactate dehydrogenase (LD)	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54-56
		CZQ	QCC, Chemistry and TDM	37
		FLD	Body Fluid	72
		FLDQ	QCC, Body Fluid Chemistry	38
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
		SCO	Serum Carryover	137
Lactate dehydrogenase (LD), CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Lamellar body count		LBC	Lamellar Body Count	158
Lamotrigine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
		ZE	Therapeutic Drug Monitoring, Extended	59
Large unstained cells (LUC)		FH4	Hematology Automated Differential	140
		FH4Q	QCC, Hematology	43
LD isoenzymes		CRTI, HCRTI	Cardiac Markers	60
LD1/LD2 ratio		CRTI, HCRTI	Cardiac Markers	60
LDL cholesterol, calculated		ABL	Accuracy-Based Lipid	114
LDL cholesterol, measured		ABL	Accuracy-Based Lipid	114
	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54-56
		CZQ	QCC, Chemistry and TDM	37
LDL cholesterol, waived	X	LCW	Chemistry-Ltd, Waived	64
Lead (blood)	X	BL	Blood Lead	105
Lead, urine		TMU	Trace Metals, Urine	106
<i>Legionella pneumophila</i> antigen		LBAS	<i>Legionella</i> Ag	183
<i>Legionella pneumophila</i>		IDN, IDO	Nucleic Acid Amp, Organisms	207
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	X	IDR	Infectious Disease, Respiratory Panel	210

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Leukemia/lymphoma immunophenotype		FL3	Flow Cytometry	224			LN2	Chemistry, Lipid, Enzyme CVL	124
Leukemia/lymphoma, interpretation only		FL5	Flow Cytometry Interpretation Only	225			LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
Leukocyte esterase, urine	X	CMP, CMP1	Clinical Microscopy	152	Lipoprotein (a)	X	ABL	Accuracy-Based Lipid	114
		CMQ	QCC, Urinalysis	44		X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
	X	HCC2	Waived Combination	66			CZQ	QCC, Chemistry and TDM	37
		POC3	POC Urine Dipstick Competency	50	Lipoprotein-associated phospholipase		PLA	Lipoprotein-Associated Phospholipase A ₂	75
Leukocyte-reduced platelets		TRC	Transfusion-Related Cell Count	237	Lipoprotein electrophoresis		LPE	Lipoprotein Electrophoresis	76
Leukocyte-reduced RBC		TRC	Transfusion-Related Cell Count	237	Listeria monocytogenes		IDME	Meningitis/Encephalitis Panel	209
Leukocyte, stool, Wright-Giemsa		CMMP	Clinical Microscopy, Misc	153		X	IDM5	Meningitis/Encephalitis Panel	209
Levetiracetam		FTC	Forensic Toxicology, Criminalistics	107	Lithium	X	C1, C3/C3X, CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
		T	Toxicology	98			CZQ	QCC, Chemistry and TDM	37
		UT	Urine Toxicology	98			LN3	TDM CVL	125
		ZE	Therapeutic Drug Monitoring, Extended	59	Liver-kidney microsomal antibody		LKM	Liver-Kidney Microsomal Antibody	221
Levorphanol		T	Toxicology	98	Lorazepam		DFC	Drug-Facilitated Crime	111
		UT	Urine Toxicology	98			DMPM	Drug Monitoring for Pain Management	110
Lidocaine	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56			FTC	Forensic Toxicology, Criminalistics	107
		CZQ	QCC, Chemistry and TDM	37			T	Toxicology	98
		FTC	Forensic Toxicology, Criminalistics	107			UDC	Forensic Urine Drug Testing, Confirmatory	102
		LN3	TDM CVL	125			UT	Urine Toxicology	98
		T	Toxicology	98	Lupus anticoagulant (screen, confirmation)		CGS1	Coag Special, Series 1	168
		UT	Urine Toxicology	98	Luteinizing hormone (LH)		ABS	Accuracy-Based Testosterone, Estradiol	115
Lipase	X	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56			LN8	Reproductive Endocrinology CVL	127
		CZQ	QCC, Chemistry and TDM	37		X	Y/YY	Sex Hormones	84
		FLD2	Body Fluid Chemistry 2	73	Lysine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		IFS	Interfering Substances	138	Lyme disease		TTD	Tick-Transmitted Disease	214
		LN2	Chemistry, Lipid, Enzyme CVL	124	Lymphocyte immunophenotyping	X	FL, FL1	Flow Cytometry	224
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124					
Lipids		ABL	Accuracy-Based Lipid	114					
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56					

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Lymphoma by FISH		CYL	Fluorescence In Situ Hybridization and Interpretation on Site, Lymphoma	255
Lysergic acid diethylamide (LSD)		FTC	Forensic Toxicology, Criminalistics	107
		UDS, UDS6	Urine Drug Screen	100
Magnesium	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
Magnesium, ionized	X	AQ, AQH	Critical Care Blood Gas	92–93
		AQQ, AQHQ	QCC, Critical Care Blood Gas Series	42
		POC10, POC11	POC Competency Blood Gases	51
Magnesium, urine	X	U	Urine Chemistry–General	68
Malaria	X	RML5	Rapid Malaria, 5 Challenge	198
		RMAL	Rapid Malaria	198
Manganese		R	Trace Metals	78
Manganese, urine		TMU	Trace Metals, Urine	106
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Mature B-cell leukemia/ lymphoma measurable (minimal) residual disease		FL8	Flow Cytometry Mature B-cell Leukemia/ Lymphoma Measurable (Minimal) Residual Disease	227
MCAD	X	IMD2	MCAD	263
MCH		FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140
		FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
		HE	Basic Hematology	140
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		HE	Basic Hematology	140
MCV		FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140
		FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
		HE	Basic Hematology	140
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		FL8	Flow Cytometry Mature B-cell Leukemia/ Lymphoma Measurable (Minimal) Residual Disease	227
		FL9	Flow Cytometry Plasma Cell Myeloma Measurable (Minimal) Residual Disease	228
		MRD	Measurable (Minimal) Residual Disease, <i>BCR/ABL1</i> p210	279
		MRD1	Measurable (Minimal) Residual Disease, <i>BCR/ABL1</i> p190	279
		MRD2	Measurable (Minimal) Residual Disease, <i>PML/RARA</i>	279
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<i>MECP2</i> genotyping	X	RETT	Rett Syndrome Genotyping	265
MEN2 (<i>RET</i> gene)	X	MGL3	Molecular Genetics	262–263
Meperidine		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UDS, UDS6	Urine Drug Screen	100
		UT	Urine Toxicology	98
Mephedrone		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Meprobamate		DFC	Drug-Facilitated Crime	111

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		FTC	Forensic Toxicology, Criminalistics	107			AL2	Serum Alcohol/Volatiles	104
		T	Toxicology	98	Methaqualone		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98			UDS, UDS6	Urine Drug Screen	100
Meprobamate/Carisoprodol		UDS, UDS6	Urine Drug Screen	100	Methemoglobin	X	SO	Blood Oximetry	95
Mercury, urine		TMU	Trace Metals, Urine	106			SOQ	QCC, Blood Oximetry	41
Mercury, whole blood		TMWB	Trace Metals, Whole Blood	106	Methionine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Metabolic disease testing		BGL	Biochemical Genetics	257	Methicillin-resistant Staphylococcus aureus (MRSA)		BCS1	Blood Culture <i>Staphylococcus aureus</i>	184
Meta-chlorophenylpiperazine (m-CPP)		DFC	Drug-Facilitated Crime	111			IDN, IDO	Nucleic Acid Amp, Organisms	207
		T	Toxicology	98			MRS	Methicillin-Resistant <i>S. aureus</i> Screen	188
		UT	Urine Toxicology	98			MRS2M	MRSA Screen, Molecular, 2 Challenge	188
Metanephrine	X	N	Urine Chemistry—Special	69		X	MRS5	Methicillin-Resistant <i>S. aureus</i> Screen	188
Methadone		DFC	Drug-Facilitated Crime	111		X	MRS5M	MRSA Screen, Molecular, 5 Challenge	188
		DMPM	Drug Monitoring for Pain Management	110	Methotrexate	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56
		FTC	Forensic Toxicology, Criminalistics	107			CZQ	QCC, Chemistry and TDM	37
		OFD	Oral Fluid for Drugs of Abuse	103	Methylenedioxy-amphetamine (MDA)		DFC	Drug-Facilitated Crime	111
		T	Toxicology	98			DMPM	Drug Monitoring for Pain Management	110
		UDC	Forensic Urine Drug Testing, Confirmatory	102			FTC	Forensic Toxicology, Criminalistics	107
		UDS, UDS6	Urine Drug Screen	100			OFD	Oral Fluid for Drugs of Abuse	103
		UT	Urine Toxicology	98			T	Toxicology	98
Methadone metabolite (EDDP)		DFC	Drug-Facilitated Crime	111			UDC	Forensic Urine Drug Testing, Confirmatory	102
		DMPM	Drug Monitoring for Pain Management	110			UT	Urine Toxicology	98
		FTC	Forensic Toxicology, Criminalistics	107	Methylenedioxyethyl-amphetamine (MDEA)		UDC	Forensic Urine Drug Testing, Confirmatory	102
		T	Toxicology	98	Methylenedioxymethamphetamine (MDMA)		DFC	Drug-Facilitated Crime	111
		UDC	Forensic Urine Drug Testing, Confirmatory	102			DMPM	Drug Monitoring for Pain Management	110
		UDS, UDS6	Urine Drug Screen	100			FTC	Forensic Toxicology, Criminalistics	107
		UT	Urine Toxicology	98			OFD	Oral Fluid for Drugs of Abuse	103
Methamphetamine		DFC	Drug-Facilitated Crime	111			T	Toxicology	98
		DMPM	Drug Monitoring for Pain Management	110			UDC	Forensic Urine Drug Testing, Confirmatory	102
		FTC	Forensic Toxicology, Criminalistics	107			UDS, UDS6	Urine Drug Screen	100
		OFD	Oral Fluid for Drugs of Abuse	103			UT	Urine Toxicology	98
		T	Toxicology	98					
		UDC	Forensic Urine Drug Testing, Confirmatory	102					
		UDS, UDS6	Urine Drug Screen	100					
		UT	Urine Toxicology	98					

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Methylenedioxy-pyrovalerone (MDPV)		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Methylenetetrahydrofolate reductase (MTHFR gene)		MGL1	Molecular Genetics	262–263
Methylmalonic acid		MMA	MMA and Active B ₁₂	82
Methylphenidate		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Metoprolol		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
MGMT		GLI	Glioma	277
Microalbumin, urine		LN20	Urine Albumin CVL	129
	X	U	Urine Chemistry–General	68
	X	UMC	Urine Albumin (Microalbumin)/Creatinine	160
Microarray, constitutional disorders		CYCGH	Constitutional Microarray Analysis	256
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Midazolam		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
Mirtazapine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
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Mitragynine (Kratom)		FTC	Forensic Toxicology, Criminalistics	107
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		UT	Urine Toxicology	98
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		CGS1	Coag Special, Series 1	168

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Molecular genetics	X	MGL1, MGL2, MGL3, MGL4, MGL5	Molecular Genetics	262–263
Molecular hematologic oncology	X	MHO, MH01, MH02, MH03	Molecular Hematologic Oncology	278
		MHO5	Molecular Hematologic Oncology	274, 278
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Molecular typing		IDN, IDO	Nucleic Acid Amp, Organisms	207
Monitoring engraftment	X	ME	Monitoring Engraftment	249
Mononuclear cell count		CBT	Cord Blood Testing	240
		SCP	Stem Cell Processing	240
Moraxella catarrhalis	X	IDPN	Infectious Disease, Pneumonia Panel	211
<i>Morganella morganii</i>		JIP	Joint Infection Panel	208
Morphine		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98
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		HE	Basic Hematology	140

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
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Mucopolysaccharide IV (MCOLN1 gene)	X	MGL4	Molecular Genetics	262–263	Myotonic dystrophy (DMPK gene)	X	MGL2	Molecular Genetics	262–263
Mucopolysaccharide (Glycosaminoglycan)	X	BGL	Biochemical Genetics	257	N-acetylprocainamide (NAPA)		CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56
Multimodality biomarker assessment		NMBA, NMB1	Navigating Multimodality Biomarker Assessment	300			CZQ	QCC, Chemistry and TDM	37
Multiple endocrine neoplasia type 2 (RET gene)	X	MGL3	Molecular Genetics	262–263	N-desmethyltramadol		DMPM	Drug Monitoring for Pain Management	110
Mumps-IgG		VR3M	Virology	214			FTC	Forensic Toxicology, Criminalistics	107
Mycobacterial culture	X	E1	Mycobacteriology, Ltd	193			T	Toxicology	98
Mycobacterial identification	X	E	Mycobacteriology	193			UT	Urine Toxicology	98
<i>Mycobacterium tuberculosis</i>		IDO	Nucleic Acid Amp, Organisms	207	Naloxone		DMPM	Drug Monitoring for Pain Management	110
<i>Mycobacterium tuberculosis</i> antibody detection		QF	<i>M. tuberculosis</i> Infection Detection	221	Naproxen		FTC	Forensic Toxicology, Criminalistics	107
<i>Mycobacterium tuberculosis</i> identification and resistance detection		MTBR	Molecular MTB Detection and Resistance	193			T	Toxicology	98
	X	MTR5	Molecular MTB Detection and Resistance, 5 Challenge	193			UT	Urine Toxicology	98
Mycophenolic acid	X	MPA	Mycophenolic Acid	58	Nasal smears, eosinophil		CMMP	Clinical Microscopy, Misc	153
<i>Mycoplasma genitalium</i>		MGEN	<i>Mycoplasma genitalium</i> , Molecular	190	<i>Neisseria gonorrhoeae</i>	X	D3	GC Cultures	179
		STIM	Sexually Transmitted Infection Detection, Molecular	191		X	HC6/HC6X	<i>C. trachomatis</i> /GC by Nucleic Acid Amp	191
<i>Mycoplasma pneumoniae</i>		IDN, IDO	Nucleic Acid Amp, Organisms	207		X	HC7	<i>C. trachomatis</i> /GC DNA by NAA	191
	X	IDPN	Infectious Disease, Pneumonia Panel	211			JIP	Joint Infection Panel	208
	X	IDR	Infectious Disease, Respiratory Panel	210		X	RMC	Routine Microbiology Combination	180
		VR3	Antibody Detection–Infectious Disease Serology	214		X	STIM	Sexually Transmitted Infection Detection, Molecular	191
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		CRTQ	QCC, Cardiac Markers	38		X	IDM5	Meningitis/Encephalitis Panel	209
		HCRQ	QCC, High-Sensitivity Cardiac Markers	39	Neoplastic cellularity		NEO	Neoplastic Cellularity	275
		LN33	Serum Myoglobin CVL	132	Neuropathology		NP/NP1	Neuropathology Program	305
	X	PCARM/PCARMX	Point-of-Care Cardiac Markers	64	Neutral fats		FCFS	Fecal Fat	75
		POC12	POC Cardiac Markers Competency	51	Next-generation sequencing		CNVST	Copy Number Variant–Solid Tumor	273
							NGS	NGS–Germline	266
							NGSB1	NGS Solid Tumor Bioinformatics	267
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							NGSB4	NGS Solid Tumor Bioinformatics Hybrid	268
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Next-generation sequencing (cont.)		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	105
Niemann-Pick type A/B (SMPD1 gene)	X	MGL4	Molecular Genetics	262–263
NIPT (see Noninvasive prenatal testing)				
Nitrite, urine	X	CMP, CMP1	Clinical Microscopy	152
		CMQ	QCC, Urinalysis	44
		DAI	Urine Drug Adulterant/ Integrity Testing	101
	X	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	50
Nitrogen, urine; total		U	Urine Chemistry–General	68
Nongynecologic cytopathology		FNA/FNA1	Fine-Needle Aspiration, Digital	311
		FNAG/ FNAG1	Fine-Needle Aspiration, Glass	312
		NGC/NGC1	Nongynecologic Cytopathology Education Program	310
Non-HDL cholesterol, calculated		ABL	Accuracy-Based Lipid	114
Noninvasive prenatal testing		NIPT	Noninvasive Prenatal Testing	88
Norbuprenorphine		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98
Norchlordiazepoxide		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
		FTC	Forensic Toxicology, Criminalistics	107
Norclomipramine		T	Toxicology	98
		UT	Urine Toxicology	98
		FTC	Forensic Toxicology, Criminalistics	107

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Norcodeine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Norcyclobenzaprine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Nordiazepam		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
Nordoxepin		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98
		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
Norepinephrine		T	Toxicology	98
		UT	Urine Toxicology	98
	X	N	Urine Chemistry–Special	69
		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
Norfentanyl		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98
Norfluoxetine		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Norhydrocodone		DMPM	Drug Monitoring for Pain Management	110
		DFC	Drug-Facilitated Crime	111
Norketamine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
		DFC	Drug-Facilitated Crime	111
Normeperidine		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Normeperidine (cont.)		T	Toxicology	98	Novel opioids and benzodiazepines		NOB	Novel Opioids and Benzodiazepines	108
		UT	Urine Toxicology	98					
Normetanephrine	X	N	Urine Chemistry—Special	69	NRAS	X	MTP	Multigene Tumor Panel	277
Normirtazapine		FTC	Forensic Toxicology, Criminalistics	107	nRBC		FH3, FH9, FH13, FH16–FH17	Hematology Automated Differential	140
		T	Toxicology	98					
Nornaloxone		UT	Urine Toxicology	98			FH3Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
		T	Toxicology	98	NT-pro B-natriuretic peptides	X	BNP5	B-type Natriuretic Peptides, 5 Challenge	59
		UT	Urine Toxicology	98				BNPQ	QCC, B-type Natriuretic Peptides
Norovirus		GIP	Gastrointestinal Panel	212			LN30	BNP CVL	131
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212		X	PCARM/PCARMX	Point-of-Care Cardiac Markers	64
		GIPN	Gastrointestinal Panel, Global	213	Nucleated cells, total		ABF3	Automated Body Fluid	154
Noroxycodone		SP1	Stool Pathogens	189			CBT	Cord Blood Testing	240
		DMPM	Drug Monitoring for Pain Management	110			SCP	Stem Cell Processing	240
		FTC	Forensic Toxicology, Criminalistics	107	Nucleated red blood cell count		FH3, FH9, FH13, FH16–FH17	Hematology Automated Differential	140
	T	Toxicology	98				FH3Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
Noroxymorphone		UT	Urine Toxicology	98			CBT	Cord Blood Testing	240
		DMPM	Drug Monitoring for Pain Management	110	Nucleic acid amplification	X	HBVL, HBVL5, HCV2	Hepatitis Viral Load	205
Norpropoxyphene		DFC	Drug-Facilitated Crime	111			X	HC6/HC6X	<i>C. trachomatis</i> /GC by Nucleic Acid Amp
		DMPM	Drug Monitoring for Pain Management	110		X	HC7	<i>C. trachomatis</i> /GC DNA by NAA	191
		FTC	Forensic Toxicology, Criminalistics	107		X	HIVG, HV2	HIV Viral Load	206
Norsertaline		T	Toxicology	98			ID1, ID1T	Nucleic Acid Amp, Viruses	201
		UDC	Forensic Urine Drug Testing, Confirmatory	102			ID2	Nucleic Acid Amp, Respiratory	204
		UT	Urine Toxicology	98	Nortrimipramine	X	ID3	Nucleic Acid Amplification, Respiratory Limited	204
Nortriptyline		DFC	Drug-Facilitated Crime	111				ID3Q	QCC, Nucleic Acid Amplification, Respiratory Limited
		FTC	Forensic Toxicology, Criminalistics	107			IDN, IDO	Nucleic Acid Amp, Organisms	207
Nortriptyline		T	Toxicology	98			MRS2M	MRSA Screen, Molecular, 2 Challenge	188
		UT	Urine Toxicology	98		X	MRS5M	MRSA Screen, Molecular, 5 Challenge	188
	X	ZT	TDM, Special	59			SP, SPN, SP1	Stool Pathogens	189
Norvenlafaxine		DFC	Drug-Facilitated Crime	111			VLS, VLS2	Viral Load	206
Norverapamil		FTC	Forensic Toxicology, Criminalistics	107			T	Toxicology	98
		T	Toxicology	98			UT	Urine Toxicology	98

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Nucleic acid amplification (cont.)		VRE	Vancomycin-Resistant Enterococcus	192
Nucleic acid testing	X	NAT	Nucleic Acid Testing	245
<i>NUDT15</i>		PGX3	Pharmacogenetics	264
Nugent scoring		VS2	Vaginitis Screen, Virtual Gram Stain	192
Occult blood		OCB	Occult Blood	159
		OCBQ	QCC, Occult Blood	45
		POC9	POC Fecal Occult Blood	50
Occult blood, gastric		GOCB	Gastric Occult Blood	157
O-desmethyltramadol		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Olanzapine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Oligoclonal bands		OLI	Oligoclonal Bands	74
Opiate group		DMPM	Drug Monitoring for Pain Management	110
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDS, UDS6	Urine Drug Screen	100
		UT	Urine Toxicology	98
		UTCO	Urine Toxicology Carryover	137
<i>OPRM1</i>		PGX1	Pharmacogenetics	264
Organic acids, urine; qualitative	X	BGL	Biochemical Genetics	257
Organic acids, urine; quantitative		BGL	Biochemical Genetics	257
Ornithine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Osmolality, measured	X	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
Osmolality, urine	X	CMP, CMP1	Clinical Microscopy	152
		CMQ	QCC, Urinalysis	44

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Osmolality, urine (cont.)		LN6	Urine Chemistry CVL	126
		POC3	POC Urine Dipstick Competency	50
	X	U	Urine Chemistry–General	68
Osteocalcin		BGS	Bone and Growth	85
Oxalate		KSA	Kidney Stone Risk Assessment	69
Oxazepam		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98
Oxcarbazepine		ZE	Therapeutic Drug Monitoring, Extended	59
Oxcarbazepine metabolite		ZE	Therapeutic Drug Monitoring, Extended	59
Oxidants, urine		DAI	Urine Drug Adulterant/ Integrity Testing	101
Oxycodone		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UDS, UDS6	Urine Drug Screen	100
		UT	Urine Toxicology	98
Oxyhemoglobin	X	SO	Blood Oximetry	95
		SOQ	QCC, Blood Oximetry	41
Oxymorphone		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98
p16		P16	p16 Immuno-histochemistry TMA	301
p53		P53	p53 Immuno-histochemistry TMA	296

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
p2PSA		K/KK	Ligand-General	82	pCO ₂	X	AQ, AQH, AQIS	Critical Care Blood Gas	92-93
Pancreatic amylase	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54-56			AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
		CZQ	QCC, Chemistry and TDM	37			LN13, LN13C	Blood Gas CVL	128
PAPP-A		FP1B	First Trimester Maternal Screening, Free Beta	88			POC10, POC11	POC Competency Blood Gases	51
		FP1T	First Trimester Maternal Screening, Total hCG	88	PDGFRA	X	KIT	KIT/PDGFRA	276
Parainfluenza virus		ID2	Nucleic Acid Amp, Respiratory	204		X	MTP	Multigene Tumor Panel	277
	X	IDPN	Infectious Disease, Pneumonia Panel	211	PD-L1	X	PDL1	PD-L1 Immunohistochemistry	299
	X	IDR	Infectious Disease, Respiratory Panel	210	Pentobarbital		DFC	Drug-Facilitated Crime	111
	X	VR1	Virology Culture	200			FTC	Forensic Toxicology, Criminalistics	107
	X	VR2	Viral Antigen Detection by DFA	200			T	Toxicology	98
Paraprotein identification	X	SPE	Protein Electrophoresis	76			UT	Urine Toxicology	98
Parasite identification	X	BP	Blood Parasite	198	Peptoniphilus spp.		JIP	Joint Infection Panel	208
		GIP, GIPN	Gastrointestinal Panel	212-213	Peptostreptococcus anaerobius		JIP	Joint Infection Panel	208
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212	Performance improvement program in surgical pathology		PIP/PIP1, PIPW/ PIPW1	Performance Improvement Program in Surgical Pathology	282-283
	X	MVP	Molecular Vaginal Panel	191	Peripheral blood cell identification		EHE1	Expanded Virtual Peripheral Blood Smear	150
	X	P, P3, P4, P5	Parasitology	197	Peripheral blood smear, virtual		VPBS	Virtual Peripheral Blood Smear	149
		PEX	Expanded Parasitology	198	pH		AFL	Amniotic Fluid Leakage	154
	X	STIM	Sexually Transmitted Infection Detection, Molecular	191		X	AQ, AQH, AQIS	Critical Care Blood Gas	92-93
		TMO	Ticks, Mites, and Other Arthropods	198			AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
		TVAG	T. vaginalis, Molecular	197			FLD	Body Fluid	72
	X	TVG5	T. vaginalis, Molecular, 5 Challenge	197			FLDQ	QCC, Body Fluid Chemistry	38
X	VS	Vaginitis Screen	190			GOCB	Gastric Occult Blood	157	
	WID	Worm Identification	198			LN13, LN13C	Blood Gas CVL	128	
Parathyroid hormone (PTH)	X	PTH	Parathyroid Hormone	86			POC10, POC11	POC Competency Blood Gases	51
		PTHQ	QCC, PTH	40	pH, gastric		GOCB	Gastric Occult Blood	157
Parentage/relationship testing	X	PARF	Parentage/Relationship	246	pH interpretation		AFL	Amniotic Fluid Leakage	154
Paroxetine		DFC	Drug-Facilitated Crime	111	pH meters		I	Instrumentation	137
		FTC	Forensic Toxicology, Criminalistics	107	pH, urine	X	CMP, CMP1	Clinical Microscopy	152
		T	Toxicology	98			CMQ	QCC, Urinalysis	44
		UT	Urine Toxicology	98			DAI	Urine Drug Adulterant/ Integrity Testing	101
		JIP	Joint Infection Panel	208		X	HCC2	Waived Combination	66
Parvovirus B19		ID1	Nucleic Acid Amp, Viruses	201			POC3	POC Urine Dipstick Competency	50
							UDC	Forensic Urine Drug Testing, Confirmatory	102
							DFC	Drug-Facilitated Crime	111

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Phencyclidine (cont.)		FTC	Forensic Toxicology, Criminalistics	107
		OFD	Oral Fluid for Drugs of Abuse	103
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UDS, UDS6	Urine Drug Screen	100
		UT	Urine Toxicology	98
Phenethylamine		FTC	Forensic Toxicology, Criminalistics	107
Pheniramine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Phenobarbital	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		LN3	TDM CVL	125
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UT	Urine Toxicology	98
		Phentermine		FTC
	T		Toxicology	98
	UT		Urine Toxicology	98
Phenylalanine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Phenylephrine		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Phenytoin	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		DFC	Drug-Facilitated Crime	111
		FTC	Forensic Toxicology, Criminalistics	107
		LN3	TDM CVL	125
		SCO	Serum Carryover	137
		T	Toxicology	98
Phenytoin, free	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Phenytoin, free (cont.)		CZQ	QCC, Chemistry and TDM	37
Phosphorus	X	C1, C3/C3X, CZ/CZX/CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
Phosphorus, urine		LN6	Urine Chemistry CVL	126
	X	U	Urine Chemistry–General	68
PIK3CA	X	MTP	Multigene Tumor Panel	277
Pinworm prep	X	CMMP	Clinical Microscopy, Misc	153
Pipette calibration, gravimetric		I	Instrumentation	137
Plasma cell myeloma, measurable (minimal) residual disease		FL9	Flow Cytometry Plasma Cell Myeloma Measurable (Minimal) Residual Disease	228
Plasma cell neoplasms		PCNEO	Flow Cytometry, Plasma Cell Neoplasms	228
Plasma hemoglobin		PHG	Plasma Hemoglobin	76
Plasminogen activator inhibitor		CGE/CGEX	Coagulation, Extended	167
Plasminogen activator inhibitor (PAI)-1 (SERPINE1 gene)		MGL1	Molecular Genetics	262–263
Plasminogen antigen		CGE/CGEX	Coagulation, Extended	167
Plasmodium falciparum antigen	X	RML5	Rapid Malaria, 5 Challenge	198
		RMAL	Rapid Malaria	198
Platelet aggregation		PF	Platelet Function	171
Platelet antibody detection	X	PS	Platelet Serology	238
Platelet calculator		TRC	Transfusion-Related Cell Count	237
Platelet count	X	FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140
		FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
		HE	Basic Hematology	140
		LN9	Hematology CVL	127
Platelet count, estimated		EHE1	Expanded Virtual Peripheral Blood Smear	150

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Platelet count, estimated (cont.)		VPBS	Virtual Peripheral Blood Smear	149	Potassium (cont.)		CZQ	QCC, Chemistry and TDM	37
Platelet count (platelet-rich plasma)	X	TRC	Transfusion-Related Cell Count	237			FLD2	Body Fluid Chemistry 2	73
Platelet crossmatch		PS	Platelet Serology	238			IFS	Interfering Substances	138
Platelet function		PF1	Platelet Function	171			LN13C	Blood Gas CVL	128
Platelet mapping		PLTM	Platelet Mapping	174			LN2	Chemistry, Lipid, Enzyme CVL	124
Plesiomonas shigelloides		GIP	Gastrointestinal Panel	212			LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212			POC10, POC11	POC Competency Blood Gases	51
		GIPN	Gastrointestinal Panel, Global	213	Potassium, urine		LN6	Urine Chemistry CVL	126
PML/RARA		MHO2, MHO3	Molecular Hematologic Oncology	278		X	U	Urine Chemistry–General	68
		MRD2	Measurable (Minimal) Residual Disease	279	Potassium, vitreous fluid		VF	Vitreous Fluid, Postmortem	104
Pneumocystis detection		PCP1	<i>Pneumocystis jirovecii</i> , Calcofluor White Stain	196	Prader-Willi/Angelman syndrome	X	MGL1	Molecular Genetics	262–263
		PCP2	<i>Pneumocystis jirovecii</i> , DFA Stain	196	Prealbumin (transthyretin)	X	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		PCP4	<i>Pneumocystis jirovecii</i> , GMS Stain	196			CZQ	QCC, Chemistry and TDM	37
PNH immunophenotype		PNH	Paroxysmal Nocturnal Hemoglobinuria, RBC	229		X	S2, S4	Immunology, Special	217
pO₂	X	AQ, AQH, AQIS	Critical Care Blood Gas	92–93	Predictive markers by immunohistochemistry	X	GHER2	Gastric HER2	297
		AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42		X	HER2	HER2 by Immunohistochemistry	297
		LN13, LN13C	Blood Gas CVL	128		X	PDL1	PD-L1 Immunohistochemistry	299
		POC10, POC11	POC Competency Blood Gases	51			PM1	CD117 by Immunohistochemistry	295
Porphobilinogen, urine		UPBG	Porphobilinogen, Urine	70		X	PM2	ER, PgR by Immunohistochemistry	297
Posaconazole		AFD	Antifungal Drugs Monitoring	109			PM3	CD20 by Immunohistochemistry	298
Post-immunotherapy analysis, flow cytometry		FL6	Post-immunotherapy Flow Analysis	225			PM5	Immunohistochemistry TMA	295
Postanalytical DNA sequencing		SEC	DNA Sequencing Count	264		X	PM6	Anaplastic Lymphoma Kinase IHC	298
Postvasectomy sperm count, automated		PV1	Postvasectomy Sperm Count	162	Pregabalin		DMPM	Drug Monitoring for Pain Management	110
Postvasectomy sperm count, manual	X	PV	Postvasectomy Sperm Count	162			FTC	Forensic Toxicology, Criminalistics	107
Postvasectomy sperm presence/absence, manual	X	PV	Postvasectomy Sperm Count	162			T	Toxicology	98
Potassium	X	AQ, AQH, AQIS	Critical Care Blood Gas	92–93			UT	Urine Toxicology	98
		AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42			ZE	Therapeutic Drug Monitoring, Extended	59
	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56	Prekallikrein		CGE/CGEX	Coagulation, Extended	167
					Primidone		CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
							CZQ	QCC, Chemistry and TDM	37

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Pro B-natriuretic peptides (See NT-pro B-natriuretic peptides)				
Procainamide		CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
Procalcitonin		LN41	Procalcitonin CVL	134
	X	PCT	Procalcitonin	76
Progesterone		LN8	Reproductive Endocrinology CVL	127
	X	Y/YY	Sex Hormones	84
Progesterone receptors by immunohistochemistry		PM2	ER, PgR by Immunohistochemistry	297
Prolactin		LN8	Reproductive Endocrinology CVL	127
	X	Y/YY	Sex Hormones	84
Proline, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Promethazine		DFC	Drug-Facilitated Crime	111
Propoxyphene		DFC	Drug-Facilitated Crime	111
		DMPM	Drug Monitoring for Pain Management	110
		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UDC	Forensic Urine Drug Testing, Confirmatory	102
		UDS, UDS6	Urine Drug Screen	100
		UT	Urine Toxicology	98
Propranolol		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
Prostate-specific antigen (PSA)		ABS	Accuracy-Based Testosterone, Estradiol	115
	X	K/KK	Ligand-General	82
		LN23	PSA CVL	130
Prostate-specific antigen, complexed (cPSA)		K/KK	Ligand-General	82
Prostate-specific antigen (PSA), free, measured	X	K/KK	Ligand-General	82
Prostatic acid phosphatase (PAP)	X	K/KK	Ligand-General	82
Protein C		CGE/CGEX	Coagulation, Extended	167
		CGS2	Coag Special, Series 2	168
		LN35	Thrombophilia CVL	133
Protein, confirmatory urine		DSC	Dipstick Confirmatory	157

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Protein electrophoresis, serum, interpretation		SPE	Protein Electrophoresis	76
Protein S		CGE/CGEX	Coagulation, Extended	167
		CGS2	Coag Special, Series 2	168
Protein, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
Protein, total	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		FLD	Body Fluid	72
		FLDQ	QCC, Body Fluid Chemistry	38
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
		SPE	Lipoprotein and Protein Electrophoresis	76
Protein, urine		ABU	Accuracy-Based Urine	115
	X	CMP, CMP1	Clinical Microscopy	152
		CMQ	QCC, Urinalysis	44
		DSC	Dipstick Confirmatory	157
	X	HCC2	Waived Combination	66
		LN6	Urine Chemistry CVL	126
		POC3	POC Urine Dipstick Competency	50
	X	U	Urine Chemistry-General	68
Proteus spp.	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
Prothrombin mutation (F2 gene)	X	MGL1	Molecular Genetics	262–263
	X	TPM	Thrombophilia Mutations	265
Prothrombin time		APXBN	Anticoagulant Monitoring, Apixaban	170
	X	CGB	Basic Coagulation	166
	X	CGL	Coagulation, Limited	166
		CGLQ	QCC, Coagulation, Limited	46
		CGS1	Coag Special, Series 1	168
		CGS4	Coag Special, Series 4	168
		DBGN	Anticoagulant Monitoring, Dabigatran	170
		FNPX	Anticoagulant Monitoring, Fondaparinux	170

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Prothrombin time (cont.)		POC6	POC PT/INR, CoaguChek XS Plus	50	Quetiapine (cont.)		T	Toxicology	98
		RVBN	Anticoagulant Monitoring Rivaroxaban	170			UT	Urine Toxicology	98
	X	WP3, WP4, WP6, WP9	Whole Blood Coagulation	173	Quinidine		CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56
Prothrombin time, dilute		CGE/CGEX	Coagulation, Extended	167			CZQ	QCC, Chemistry and TDM	37
Protonitazene		NOB	Novel Opioids and Benzodiazepines	108	Quinine		FTC	Forensic Toxicology, Criminalistics	107
Provider-performed microscopy		CMMP	Clinical Microscopy, Misc	153	Ranitidine		FTC	Forensic Toxicology, Criminalistics	107
PRU test		PIA/PIAX	Drug-Specific Platelet Aggregation	173	Rapamycin (sirolimus)	X	CS	Immunosuppressive Drugs	58
Pseudocholinesterase	X	C7	Pseudocholinesterase	77	Rapid group A strep	X	D	Bacteriology	177
Pseudoephedrine		FTC	Forensic Toxicology, Criminalistics	107		X	D6	Rapid Group A Strep	182
		T	Toxicology	98		X	D9	Rapid Group A Strep, Waived	182
		UT	Urine Toxicology	98		X	MC4	Urine Colony Count Combination	180
<i>Pseudomonas aeruginosa</i>	X	IDPN	Infectious Disease, Pneumonia Panel	211		X	RMC	Routine Microbiology Combination	180
		JIP	Joint Infection Panel	208	RBC automated count, fluid		ABF1, ABF2, ABF3	Automated Body Fluid	154
Quality Management Tools		QP251	Laboratory Staffing Ratios	25	RBC count		ABF1, ABF2, ABF3	Automated Body Fluid	154
		QPB10, QPB25	Assessment of Consistency of Body Fluid Morphologic Observations	26		X	FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140
		QPC10, QPC25	Assessment of Consistency of Peripheral Blood Morphologic Observations	27			FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
		QPD10, QPD25	Assessment of Consistency of Gram Stain Morphologic Observations	28		X	HE	Basic Hematology	140
		QT10	Critical Values Reporting	33			LN9	Hematology CVL	127
		QT16	Corrected Results	34	RBC count, automated, urine; quantitative		UAA, UAA1	Automated Urinalysis	156
		QT17	Outpatient Order Entry Errors	34	RBC folate	X	FOL	RBC Folate	88
		QT2	Blood Culture Contamination	30	RBC manual count, fluid	X	HFC, HFCI	Hemocytometer Fluid Count	158
		QT3	Laboratory Specimen Acceptability	30	RBC morphology		EHE1	Expanded Virtual Peripheral Blood Smear	150
		QT4	In-Date Blood Product Wastage	31			VPBS	Virtual Peripheral Blood Smear	149
		QT7	Satisfaction With Outpatient Specimen Collection	32	RDW		FH1–FH4, FH9–FH10, FH13, FH16–FH17	Hematology Automated Differential	140
		QT8	Stat Test TAT Outliers	32			FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
Quetiapine		DFC	Drug-Facilitated Crime	111			HE	Basic Hematology	140
		FTC	Forensic Toxicology, Criminalistics	107	Red blood cell antigen detection		J, JXM, J1	Transfusion Medicine	232

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Red blood cell antigen typing		RBCAT	Red Blood Cell Antigen Typing	235
Reducing substance, urine		CMP, CMP1	Clinical Microscopy	152
		CMQ	QCC, Urinalysis	44
		HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	50
Refractometer check		I	Instrumentation	137
Renin	X	RAP	Renin and Aldosterone	89
Reptilase time		CGE/CGEX	Coagulation, Extended	167
		ECF	Expanded Coagulation Factors	167
Respiratory syncytial virus (RSV)		ID2	Nucleic Acid Amp, Respiratory	204
	X	ID3	Nucleic Acid Amplification, Respiratory Limited	204
		ID3Q	QCC, Nucleic Acid Amplification, Respiratory Limited	47
	X	IDPN	Infectious Disease, Pneumonia Panel	211
	X	IDR	Infectious Disease, Respiratory Panel	210
	X	VR1	Virology Culture	200
	X	VR2	Viral Antigen Detection by DFA	200
	X	VR4	Virology Antigen Detection by EIA and Latex	200
Reticulocyte count, absolute	X	RT, RT2, RT3, RT4	Reticulocyte	146
		RTQ, RT3Q, RT4Q	QCC, Reticulocyte	44
Reticulocyte count, percent		LN19	Reticulocyte CVL	129
	X	RT, RT2, RT3, RT4	Reticulocyte	146
		RTQ, RT3Q, RT4Q	QCC, Reticulocyte	44
Reticulocyte hemoglobin (RET-He)		RT4	Reticulocyte	146
Reticulocyte hemoglobin concentration (CHr)		RT3	Reticulocyte	146
Rett syndrome (<i>MECP2</i> gene)	X	RETT	Rett Syndrome Genotyping	265
Rett syndrome (<i>MECP2</i> gene) duplication deletion analysis	X	RETT	Rett Syndrome Genotyping	265
RhD		MGL2	Molecular Genetics	262–263

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	X	JAT, JATXM	Transfusion Medicine, Automated	233
		JATE1	Transfusion Medicine, Automated, Educational	233
		JATQ	QCC, Transfusion Medicine	48
		TMCA	Transfusion Medicine, Competency Assessment	239
Rheumatoid factor isotypes, IgA, IgG, and IgM		CCP	Cyclic Citrullinated Peptide Antibody	220
Rheumatoid factor, qualitative	X	IL, RF/RFX	Immunology	216
Rheumatoid factor, quantitative	X	IL, RF/RFX	Immunology	216
Rhinovirus		ID2	Nucleic Acid Amp, Respiratory	204
	X	IDR	Infectious Disease, Respiratory Panel	210
Rhinovirus/enterovirus	X	IDPN	Infectious Disease, Pneumonia Panel	211
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		MTR5	Molecular MTB Detection and Resistance, 5 Challenge	193
Ritalinic acid		FTC	Forensic Toxicology, Criminalistics	107
Rivaroxaban		RVBN	Anticoagulant Monitoring, Rivaroxaban	170
RNA sequencing		RNA	Fusion RNA Sequencing	276
Rotavirus		GIP	Gastrointestinal Panel	212
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212
		GIPN	Gastrointestinal Panel, Global	213
		SP, SPN	Stool Pathogens	189
	X	VR4	Viral Antigen Detection by EIA and Latex	200
RSV (see Respiratory syncytial virus)				
Rubella antibody, IgG; qualitative	X	IL, RUB/RUBX	Immunology	216
Rubella antibody, IgG; quantitative	X	IL, RUB/RUBX	Immunology	216
Rubeola antibody (English measles)	X	VR3	Antibody Detection–Infectious Disease Serology	214
Rufinamide		ZE	Therapeutic Drug Monitoring, Extended	59

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Russell's viper venom time, dilute		CGS1	Coagulation Special, Series 1	168	Selenium, urine		TMU	Trace Metals, Urine	106
Salicylate	X	CZ/CZX/CZ2X, Z	Chemistry and TDM	54–56	Selenium, whole blood		TMWB	Trace Metals, Whole Blood	106
		CZQ	QCC, Chemistry and TDM	37	Semen analysis		ASA, SM, PV1	Semen Analysis	162
		FTC	Forensic Toxicology, Criminalistics	107		X	SC, SC1, SV, PV	Semen Analysis	162
		LN3	TDM CVL	125		X	SMCD	Semen Analysis, Online	162
		SDS	Serum Drug Screen	104			SM1CD	Semen Analysis, Online	162
		T	Toxicology	98		X	SM2CD	Semen Analysis, Online	162
		UT	Urine Toxicology	98	Serine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Salmonella		GIP	Gastrointestinal Panel	212	<i>SERPINA1</i> genotyping	X	AAT	Alpha-1 Antitrypsin Genotyping	259
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212	Serratia marcescens	X	IDPN	Infectious Disease, Pneumonia Panel	211
		GIPN	Gastrointestinal Panel, Global	213			JIP	Joint Infection Panel	208
		JIP	Joint Infection Panel	208	Sertraline		DFC	Drug-Facilitated Crime	111
Sapovirus (I, II, IV, V)		GIP	Gastrointestinal Panel	212			FTC	Forensic Toxicology, Criminalistics	107
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212			T	Toxicology	98
		GIPN	Gastrointestinal Panel, Global	213			UT	Urine Toxicology	98
Sarcoma by FISH		CYK	Fluorescence In Situ Hybridization	255	Serum free light chains		SFLC	Serum Free Light Chains	223
Sarcoma translocation	X	SARC	Sarcoma Fusion Gene	275	Sex hormone-binding globulin (SHBG)		ABS	Testosterone and Estradiol Accuracy	115
SARS-CoV-2		COV2	SARS-CoV-2 Molecular	202		X	Y	Sex Hormones	84
		COV2Q	QCC, SARS-CoV-2 Molecular	47	Shiga toxin		SP	Stool Pathogens–Rapid and Molecular	189
		COVAG	SARS-CoV-2 Antigen	203			ST	Shiga Toxin	190
		COVAQ	QCC, SARS-CoV-2 Antigen	47	Shiga-like toxin producing E. coli (STEC)		GIP	Gastrointestinal Panel	212
	X	COVM	SARS-CoV-2 Molecular, 5 Challenge	203		X	GIP5	Gastrointestinal Panel, 5 Challenge	212
		COVS	SARS-CoV-2 Serology	222	Shigella		GIP	Gastrointestinal Panel	212
	X	CVAG	SARS-CoV-2 Antigen, 5 Challenge	203		X	GIP5	Gastrointestinal Panel, 5 Challenge	212
	X	ID3	Nucleic Acid Amplification, Respiratory Limited	204			GIPN	Gastrointestinal Panel, Global	213
		ID3Q	QCC, Nucleic Acid Amplification, Respiratory Limited	47	Sickle cell screen, qualitative	X	HG	Hemoglobinopathy	147
	X	IDR	Infectious Disease, Respiratory Panel	210		X	SCS	Sickle Cell Screen	148
Scl-70 (anti-DNA topoisomerase)		RDS	Rheumatic Disease Special	221	Sirolimus (rapamycin)	X	CS	Immunosuppressive Drugs	58
Scopolamine		DFC	Drug-Facilitated Crime	111	<i>SLC01B1</i>		PGX	Pharmacogenetics	264
Secobarbital		DFC	Drug-Facilitated Crime	111	Sodium	X	AQ, AQH, AQIS	Critical Care Blood Gas	92–93
		UDC	Forensic Urine Drug Testing, Confirmatory	102			AQQ, AQHQ, AQSQ	QCC, Critical Care Blood Gas Series	42
						X	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry and TDM	54–56

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Sodium (cont.)		CZQ	QCC, Chemistry and TDM	37
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	138
		LN13C	Blood Gas CVL	128
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
		POC10, POC11	POC Competency Blood Gases	51
Sodium, urine		LN6	Urine Chemistry CVL	126
	X	U	Urine Chemistry–General	68
Sodium, vitreous fluid		VF	Vitreous Fluid, Postmortem	104
Soluble transferrin receptor		STFR	Soluble Transferrin Receptor	79
Somatomedin C (IGF-1)	X	Y, YY	Sex Hormones	84
Specific gravity	X	CMP, CMP1	Clinical Microscopy	152
		CMQ	QCC, Urinalysis	44
		DAI	Urine Drug Adulterant/ Integrity Testing	101
	X	HCC2	Waived Combination	66
		POC3	POC Urine Dipstick Competency	50
		UDC	Forensic Urine Drug Testing, Confirmatory	102
Spectrophotometer (stray light check)		I	Instrumentation	137
Sperm count	X	SMCD	Semen Analysis, Online	162
Sperm count, automated		PV1	Semen Analysis	162
	X	SC1	Semen Analysis	162
Sperm count, manual	X	PV	Postvasectomy Sperm Count	162
	X	SC	Semen Analysis	162
Sperm morphology		SM	Semen Analysis	162
		SM1CD	Semen Analysis, Online	162
Sperm motility		SMCD	Semen Analysis, Online	162
Sperm presence/ absence		SC	Semen Analysis	162
Sperm presence/ absence, postvasectomy, manual	X	PV	Semen Analysis	162
Sperm presence/ absence, vaginal		CMMP	Clinical Microscopy, Misc	153
Sperm viability	X	SM2CD	Semen Analysis, Online	162
	X	SV	Semen Analysis	162
Spinal fluid meningitis antigen panel	X	D	Bacteriology	177
Spinal muscular atrophy (SMN1 and SMN2 genes)	X	MGL2	Molecular Genetics	262–263

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Spinocerebellar ataxia (ATXN1, ATXN2, ATXN3, CACNA1A, and ATXN7 genes)	X	MGL2	Molecular Genetics	262–263
Split fats		FCFS	Fecal Fat	75
SS18		PM5	IHC Tissue Microarray Series	295
Staphylococcus aureus	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
<i>Staphylococcus aureus</i> , blood culture	X	BCS1	Blood Culture <i>Staphylococcus aureus</i>	184
<i>Staphylococcus lugdunensis</i>		JIP	Joint Infection Panel	208
STEC (See Shiga-like toxin producing E. coli)				
Strep screen		POC4	POC/Waived Strep Screen Competency	50
Streptococcus agalactiae	X	D8	Group B Strep	183
		IDME	Meningitis/Encephalitis Panel	209
	X	IDM5	Meningitis/Encephalitis Panel	209
	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
Streptococcus pneumoniae		IDME	Meningitis/Encephalitis Panel	209
	X	IDM5	Meningitis/Encephalitis Panel	209
	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
		SBAS	<i>S. pneumoniae</i> Ag Detection	183
Streptococcus pyogenes	X	D	Bacteriology	177
	X	D1	Group A <i>Streptococcus</i> Culture/Molecular	179
	X	D6	Rapid Group A Strep	182
	X	D9	Rapid Group A Strep, Waived	182
	X	IDPN	Infectious Disease, Pneumonia Panel	211
		JIP	Joint Infection Panel	208
	X	MC4	Urine Colony Count Combination	180
	X	RMC	Routine Microbiology Combination	180
Strychnine		FTC	Forensic Toxicology, Criminalistics	107
Sulfosalicylic acid (SSA)		DSC	Dipstick Confirmatory	157
Surgical pathology		DPATH/DPATH1	Online Digital Slide Program	303

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Surgical pathology (cont.)		PIP/PIP1, PIPW/ PIPW1	Performance Improvement Program in Surgical Pathology	282–283	Tapentadol (cont.)		FTC	Forensic Toxicology, Criminalistics	107
		VBP/VBP1	Online Virtual Biopsies Program	284	Tapentadol-O-sulfate		DMPM	Drug Monitoring for Pain Management	110
Synthetic cannabinoid/ designer drugs		SCDD	Synthetic Cannabinoid/ Designer Drugs	108	Taurine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Syphilis	X	G	Syphilis Serology	222	Tay-Sachs (<i>HEXA</i> gene)	X	MGL4	Molecular Genetics	262–263
T3, free (triiodothyronine)		ABTH	Harmonized Thyroid	116	tCO₂	X	AQ, AQH, AQIS	Critical Care Blood Gas	92–93
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56			AQSQ	Quality Cross Check— Critical Care Blood Gas	42
		CZQ	QCC, Chemistry and TDM	37	Temazepam		DFC	Drug-Facilitated Crime	111
	X	K/KK	Ligand–General	82			DMPM	Drug Monitoring for Pain Management	110
T3, total (triiodothyronine)		ABTH	Harmonized Thyroid	116			FTC	Forensic Toxicology, Criminalistics	107
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56			OFD	Oral Fluid for Drugs of Abuse	103
		CZQ	QCC, Chemistry and TDM	37			T	Toxicology	98
	X	K/KK	Ligand–General	82			UDC	Forensic Urine Drug Testing, Confirmatory	102
		LN50	Thyroid CVL	136			UT	Urine Toxicology	98
T3, uptake and related tests	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56	Teriflunomide		ZE	Therapeutic Drug Monitoring, Extended	59
		CZQ	QCC, Chemistry and TDM	37	Testosterone		ABS	Accuracy-Based Testosterone and Estradiol	115
	X	K/KK	Ligand–General	82			LN8	Reproductive Endocrinology CVL	127
T4, free (thyroxine)		ABTH	Harmonized Thyroid	116		X	Y/YY	Sex Hormones	84
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56	Testosterone, bioavailable, measured		Y	Sex Hormones	84
		CZQ	QCC, Chemistry and TDM	37	Testosterone, free, measured		Y	Sex Hormones	84
	X	K/KK	Ligand–General	82	Tetrahydrozoline		DFC	Drug-Facilitated Crime	111
T4, total (thyroxine)		ABTH	Harmonized Thyroid	116	Thallium, urine		TMU	Trace Metals, Urine	106
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56	Thallium, whole blood		TMWB	Trace Metals, Whole Blood	106
		CZQ	QCC, Chemistry and TDM	37	Theophylline	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
	X	K/KK	Ligand–General	82			CZQ	QCC, Chemistry and TDM	37
		LN50	Thyroid CVL	136			LN3	TDM CVL	125
Tacrolimus	X	CS	Immunosuppressive Drugs	58	Threonine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		LN31	Immunosuppressive Drugs CVL	132	Throat culture/molecular	X	D1	Group A <i>Streptococcus</i> Culture/Molecular	179
Tapentadol		DFC	Drug-Facilitated Crime	111		X	MC4	Urine Colony Count Combination	180
		DMPM	Drug Monitoring for Pain Management	110		X	RMC	Routine Microbiology Combination	180
		T	Toxicology	98					
		UT	Urine Toxicology	98					

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Thrombin time		CGE/CGEX	Coagulation, Extended	167
		CGS4	Coag Special, Series 4	168
		DBGN	Dabigatran	170
		ECF	Expanded Coagulation Factors	167
Thrombophilia mutations	X	TPM	Thrombophilia Mutations	265
Thyroglobulin	X	TM/TMX	Tumor Markers	89
Thyroid-stimulating hormone (TSH)		ABS	Accuracy-Based Testosterone and Estradiol	115
		ABTH	Harmonized Thyroid	116
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
	X	K/KK	Ligand–General	82
	LN50	Thyroid CVL	136	
Thyroxine (T4), free		ABTH	Harmonized Thyroid	116
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
	X	K/KK	Ligand–General	82
Thyroxine (T4), total		ABTH	Harmonized Thyroid	116
	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
	X	K/KK	Ligand–General	82
	LN50	Thyroid CVL	136	
Tick identification		TMO	Ticks, Mites, and Other Arthropods	198
Tissue parasite identification	X	BP	Blood Parasite	198
	X	P	Parasitology	197
		PEX	Expanded Parasitology	198
Tobramycin	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		LN3	TDM CVL	125
		DFC	Drug-Facilitated Crime	111
Topiramate		FTC	Forensic Toxicology, Criminalistics	107
		T	Toxicology	98
		UT	Urine Toxicology	98
		ZE	Therapeutic Drug Monitoring, Extended	59
	Total bile acids		TBLA	Total Bile Acid

Analyte/Procedure	LAP ENR	Program Code	Description	Page
Total bilirubin	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		FLD2	Body Fluid Chemistry 2	73
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
	X	NB, NB2	Neonatal Bilirubin	64
Total bilirubin, urine	X	CMP, CMP1	Clinical Microscopy	152
		DSC	Dipstick Confirmatory	157
	X	HCC2	Waived Combination	66
Total free fatty acids		FCFS	Fecal Fat	75
Total hCG	X	FP1T	First Trimester Maternal Screening, Total hCG	88
Total hemolytic complement		CH50	Total Hemolytic Complement	222
Total iron binding capacity, measured	X	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
Total nitrogen, urine		U	Urine Chemistry–General	68
Total nucleated cells		CBT	Cord Blood Testing	240
		SCP	Stem Cell Processing	240
Total nucleated cells manual differential count (body fluid)		HFC/HFCI	Hemocytometer Fluid Count	158
		VBF	Virtual Body Fluid	154
		ABF1, ABF2, ABF3	Automated Body Fluid	154
Total nucleated cells (WBC) automated count (body fluid)				
Total protein	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
		CZQ	QCC, Chemistry and TDM	37
		FLD	Body Fluid	72
		FLDQ	QCC, Body Fluid Chemistry	38
		IFS	Interfering Substances	138
		LN2	Chemistry, Lipid, Enzyme CVL	124
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
		SPE	Protein Electrophoresis	76

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Total protein, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74	Transfusion medicine (cont.)		TMCAD	Transfusion Medicine, Competency Assessment	239
Total protein, urine	X	CMP, CMP1	Clinical Microscopy	152			TMCAE	Transfusion Medicine, Competency Assessment	239
		CMQ	QCC, Urinalysis	44		TMCAF	Transfusion Medicine, Competency Assessment	239	
	X	HCC2	Waived Combination	66		X	TRC	Transfusion-Related Cell Count	237
		LN6	Urine Chemistry CVL	126	Trazodone		FTC	Forensic Toxicology, Criminalistics	107
	X	U	Urine Chemistry-General	68			T	Toxicology	98
Total tricyclics	X	SDS	Serum Drug Screen	104			UT	Urine Toxicology	98
	X	ZT	TDM, Special	59	Treponema pallidum	X	G	Syphilis Serology	222
Touch imprint/crush prep		TICP, TICP1	Touch Imprint/Crush Prep	309	Trichomonas vaginalis	X	MVP	Molecular Vaginal Panel	191
Toxicology, serum, qualitative	X	SDS	Serum Drug Screen	104		X	STIM	Sexually Transmitted Infection Detection, Molecular	191
	X	T	Toxicology	98		X	TVG5	<i>Trichomonas vaginalis</i> , Molecular, 5 Challenge	197
Toxicology, urine, qualitative	X	DMPM	Drug Monitoring for Pain Management	110			TVAG	<i>Trichomonas vaginalis</i> , Molecular	197
	X	T	Toxicology	98		X	VS, VS1	Vaginitis Screen	190
	X	UDS, UDS6	Urine Drug Screen	100	Tricyclic group		T	Toxicology	98
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LN15*	128	MHO	278	NMB1	300	PIP1	283
LN16*	129	MHO1	278	NMBA	300	PIPW	282
LN17*	129	MHO2	278	NOB*	108	PIPW1	282
LN19*	129	MHO3	278	NP	305	PLA*	75
LN20*	129	MHO5	274, 278	NP1	305	PLTM*	174
LN21*	130	MK	295	NTA*	105	PM1	295
LN22*	130	MMA*	82	OCB*	159	PM2	297
LN23*	130	MMR	299	OCBQ*	45	PM3	298
LN24*	131	MPA	58	OFD*	103	PM5	295
LN25*	131	MPOX	202	OLI*	74	PM6	298
LN30*	131	MRD	279	P*	197	PNH*	229
LN31*	132	MRD1	279	P3*	197	POC1	50
LN32*	132	MRD2	279	P4*	197	POC2	50
LN33*	132	MRS*	188	P5*	197	POC3	50
LN34*	132	MRS2M*	188	P16	301	POC4	50

*Program is ISO/IEC 17043 accredited.

Program Code	Pg	Program Code	Pg	Program Code	Pg	Program Code	Pg
POC6	50	RNA	276	STIM*	191	VES1*	172
POC7	50	ROM1*	159	SV*	162	VF*	104
POC8	50	RT*	146	SW2*	79	VGS1*	182
POC9	50	RTQ*	44	SW4*	79	VGS2*	182
POC10	51	RT2*	146	T*	98	VITD*	84
POC11	51	RT3*	146	TBLA*	77	VLS*	206
POC12	51	RT3Q*	44	THCB*	109	VLS2*	206
POC14	52	RT4*	146	TICP	309	VM1*	243
POC15	52	RT4Q*	44	TICP1	309	VM2*	243
POC16	52	RUB*	216	TM*	89	VM3*	243
PS*	238	RUBX*	216	TMB	273	VM4*	244
PTH*	86	RUR*	189	TMCA	239	VM5*	244
PTHQ*	40	RVBN*	170	TMCAD	239	VM6*	244
PV*	162	RWBC*	147	TMCAE	239	VM6X*	244
PV1*	162	S2*	217	TMCAF	239	VPBS*	149
QF*	221	S4*	217	TMO*	198	VR1*	200
QP251	25	S5*	217	TMU*	106	VR2*	200
QPB10	26	SALC*	77	TMWB*	106	VR3*	214
QPB25	26	SARC	275	TMX*	89	VR3M*	214
QPC10	27	SBAS*	183	TPM	265	VR4*	200
QPC25	27	SC*	162	TRC*	237	VRE*	192
QPD10	28	SC1*	162	TTD*	214	VS*	190
QPD25	28	SCDD*	108	TVAG*	197	VS1*	190
QT2	30	SCM1*	159	TVG5*	197	VS2*	192
QT3	30	SCM2*	159	U*	68	WBCR*	66
QT4	31	SCO	137	UAA*	156	WBGQ*	37
QT7	32	SCP*	240	UAA1*	156	WID*	198
QT8	32	SCS*	148	UBJP*	76	WP3*	173
QT10	33	SDS	104	UDC*	102	WP4*	173
QT16	34	SE*	221	UDS*	100	WP6*	173
QT17	34	SEC	264	UDS6*	100	WP9*	173
R*	78	SEC1	264	UDSM	112	WP10*	173
RAG*	235	SFLC*	223	UHCG*	160	Y*	84
RAP*	89	SM*	162	UMC*	160	YBC*	195
RBCAT*	235	SM1CD*	162	UPBG*	70	YVM	90
RDS*	221	SM2CD*	162	URC*	157	YY*	84
RETT	265	SMCD*	162	UT*	98	Z*	54-56
RF*	216	SO*	95	UTCO	137	ZAP70*	230
RFAV1	229	SOQ*	41	UVM	70	ZE*	59
RFAV3	229	SP*	189	V*	223	ZT*	59
RFX*	216	SP1*	189	VBDM*	206		
RHCWV*	244	SPE*	76	VBF*	154		
RMAL*	198	SPN*	189	VBP	284		
RMC*	180	ST*	190	VBP1	284		
RML5*	198	STFR*	79	VES*	172		

*Program is ISO/IEC 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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Notes

Notes

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