

# Surveys and Anatomic Pathology Education Programs





# 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.



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# **New Developments**



# 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 <sub>2</sub>	C1, C3/C3X, C4, CZ/CZX/CZ2X	Chemistry	54-56	
C-reactive protein (high-sensitivity)	HSCRP	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 <sub>2</sub>	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 <sub>12</sub>	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	Trichomonas vaginalis, 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		
H. pylori 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

# **Continuing Education**



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

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

# **Continuing Education**

Continuing Education Programs	. 8
Competency Assessment Hub	15
QM <i>Ed</i> ™ Online Educational Courses	18

# **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.



#### 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.



#### credif 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).

CE Crectified 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	Е	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	Р	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 PAPJPT/APAPJPT 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 <u>via email</u> 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 Yea	
	CPIP/CPIP1		
Online cases in clinical pathology	I	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<sup>™</sup>) per year.
- Twelve cases per year; your CAP shipping contact will be notified <u>via email</u> 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

**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 QM*Ed* 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<sup>™</sup> Online Educational Courses

# Tailored education and quality tools developed with pathologist input



- 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 15189<sup>SM</sup> 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.



# **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**

Quality Management Tools	22
Short-Term Quality Studies and Morphology/Competency Assessments	24
Continuous Quality Monitors	29

# New Programs NEW



Laboratory Staffing Ratios QP251 (QPR-A	
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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**

#### 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 Mo	rphology/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 Q	uality 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	Test	ing Ph	ase				Purp	ose			
Select from the following studies to support your quality improvement initiatives.	Preanalytic	Analytic	Postanalytic	Anatomic Pathology	<b>Clinical Pathology</b>	Turnaround Time	Patient Safety	Microbiology	Transfusion Medicine	Chemistry/ Hematology	Customer Satisfaction
Laboratory Staffing Ratios QP251 (QPR-A) NEW	I			I			I				
Assessment of Consistency of Body Fluid Morphologic Observations (QPB10/QPB25)					I		I			I	
Assessment of Consistency of Peripheral Blood Morphologic Observations (QPC10/QPC25)			I				I			I	
Assessment of Consistency of Gram Stain Morphologic Observations (QPD10/QPD25)		I	I				I	I			
Blood Culture Contamination (QT2)	•						I				
Laboratory Specimen Acceptability (QT3)	I									I	
In-Date Blood Product Wastage (QT4)							I				
Satisfaction with Outpatient Specimen Collection (QT7)	I						I				
Stat Test Turnaround Time Outliers (QT8)						I	I			I	
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 alllaboratories, institution, and individual study results.
  - Data Analysis and Critique has commentaries from subject matter experts on the importance of each case with links for viewing.

Case Number Source					Criteria						No. of points		
Case 1	•	Indicate p	olymorph	onuclear leu	ikocytes a	ire pres	ent		è.		10		
Cerebrospinal		o Identify	Gram-p	ositive cocci	i in pairs a	ind/or cl	hains (	(full credit)			90		
fluid		o Identify	Gram-p	ositive cocci	only (par	tial cred	飼				70		
Case 2	•	Indicate p	olymorph	onuclear leu	ikocytes a	ire pres	ient				10		
Sputum		<ul> <li>Identify stain) (</li> </ul>	y Gram-po /full credit	ositive bead	ed, brand	hing ba	cilli (re	flex to mo	dified Aci	d Fast	90		
		o Identifi	Gram.n	r osifiye branı	china haci	lli only i	Inartia	credit			80		
		<ul> <li>Identify</li> </ul>	Gram.n	ositive bacil	i only (na	tial crea	(1970) (1970)	creaty			70		
Case 3		Indicate n	olymomh	onuclear les	ikocytes a	ICO DOM	lent				10		
Bronchoalveolar	-	o Identify	Sentate	hunhae //u	Long(it)	and press					90		
lavage			ochane.	Triphac (no	rcreary						- 00		
Case 4 Blood culture	·	1	OLLEGE (	AMERICA	QPD1	0/QPD25	: Tech	nical Compe	Q tency Ass	uality Managessment of	gement Tool Gram Stain	s	
Crood Canare		Institution 5	Score (%) Sur	nmary			(	Juality Man	igement K	eport: instit	ution Repor	t	
Case 6		Case	No. of tech. scores	Min-max scores	Average score	No. Labs	All In 105	stitutions Pero Site	entiles Mb	Performan	ce Distribution		
Blood culture		1	10	70 - 100	78.0	114	73.3	84.5	100.0		•	-	
		2	10	10 - 100	55.0	115	17.0	76.3	100.0		•		
Case 6	•												
Tissue culture	•	3	10	10 - 100	53.0	114	10.0	45.0	86.8		•		
Case 7	•												
Respiratory	•	4	10	80 - 100	92.0	114	86.0	98.0	100.0		•		
culture	•	5	10	90 - 100	91.0	194	56.1	89.2	99.1		ŀ		
		6	10	CO PAT	HOLOGIS	AMERIC TS	AN	OPD10/Q	PD25: Tech	nical Compe	Qua tency Asses	lity Mana sment of	gement Tools Gram Stains
		7	10		-chi - mporg	Enals BRED CTR			Qu	ality Manage	ment Report	t Technol	logist Report
					Cane		Case 2	Case 3	Cat	4 0	lase 5	Canar 6	Case 7
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# 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
  - <sup>o</sup> Histology blocks/Histology non-management FTE
  - o Cytology accessions/Cytology non-management FTE
  - o Non-management FTE/Management FTE
- Chemistry/Hematology/Immunology

   Total billable tests/Non-management FTE
   Non-management FTE/Management FTE

#### Microbiology

o Total billable tests/Non-management FTE
o Non-management FTE/Management FTE

#### Molecular Pathology

o Total billable tests/Non-management FTEo Non-management FTE/Management FTE

#### Phlebotomy

o Total inpatient blood draws/Inpatient phlebotomist FTEo Total outpatient blood draws/Outpatient phlebotomist FTE

- Point-of-Care Testing (POCT)
   POCT billable tests/Laboratory FTE overseeing POCT
- Transfusion Medicine
   O Crossmatches or type and screens/Non-management FTE
  - o Transfused units/Non-management FTE
  - Non-management FTE/Management FTE

**Ouality Management Tools** 

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

### 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.

### 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 tothe 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.

3

### 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	Your Data (%)	Aggregate Percent*
Specimen hemolyzed	49.5	22.2
Specimen clotted	19.1	14.7
Wrong collection container	8.1	2.0
Contaminated specimen (IV fluid dilution)	7.6	1.9
Requisition does not match specimen	5.6	1.5
Unlabeled specimen	5.6	0.7
Wrong temperature	1.2	0.6
Insufficient specimen quantity	1.2	12.6
Other reason	1.1	32.8
Mislabeled specimen	0.5	1.0
Specimen lost/hot 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

#### 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

3

# 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. (diptheroids); or *Bacillus* sp. Participants have the option to monitor institution-specific subgroups (for example, a specific department or patient population).

#### Performance Indicators

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

• Overall contamination rate (%)

## 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

#### Performance Breakdown

• Specimen rejection rate (%)

• 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.

3

# 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

#### Performance Breakdown

• Overall blood wastage rate (%)

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

## 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

#### Performance Breakdowns

• Stat test TAT outlier rate (%)

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

# 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 (%)

Quality Management Tools

### 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

#### Performance Breakdown

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

• Order entry error rates by type (%)
# **Quality Cross Check**



4

#### 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.

#### 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	I	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	I	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

- 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	I	3
CA19-9		1
Carcinoembryonic antigen (CEA)		1
Cholesterol		3
Creatinine	I	3
Glucose		3
Lactate		3
Lactate dehydrogenase (LD)	I	3
рН		3
Protein, total		3
Triglycerides	I	3
Urea nitrogen	I	1

#### 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

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.

# Quality Cross Check—Hemoglobin A1c GHQAnalyteProgram CodeChallenges per ShipmentGHQGHQ3

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.

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

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

## Quality Cross Check—High-Sensitivity Cardiac Markers HCRQ

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

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

# Endocrinology

# Quality Cross Check—Parathyroid Hormone PTHQ

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

This program does not meet regulatory requirements for proficiency testing; see program PTH on page 86. For additional information about the Quality Cross Check program, see page 36.

- 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	I	3		
Hematocrit, estimated		3		
Hemoglobin, total		3		
Methemoglobin	I	3		
Oxyhemoglobin	I	3		

This program does not meet regulatory requirements for proficency testing; see program SO on page 95. For additional information about the Quality Cross Check program, see page 36.

- 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

AQQ, AQHQ, AQSQ				
Analyte	F	Program Coc	Challenges per Shipment	
	AQQ	AQHQ	AQSQ	
Calcium, ionized	I			3
Chloride	I			3
Creatinine	I			3
Glucose	I			3
Hematocrit				3
Hemoglobin, estimated				3
Lactate	I			3
Magnesium, ionized	I			3
pCO <sub>2</sub>	I			3
рН	I			3
pO <sub>2</sub>	I			3
Potassium	I		L	3
Sodium	I			3
tCO <sub>2</sub> (measured)			I	3
Urea nitrogen (BUN)	I	I		3

# Quality Cross Check—Critical Care Blood Gas

#### **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 no 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		Progra	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)				I	3
Platelet count					3
RDW					3
Red blood cell count					3
WBC differential	I				3
White blood cell count					3

#### **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

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.

#### 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		I		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			I	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.

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

#### **Program Information**

**Program Information** 

specimens

• RTQ - Three 1.0-mL stabilized

red blood cell specimens
RT3Q, RT4Q - Three 3.0-mL stabilized red blood cell

 Includes percentage and absolute result reporting

• Two shipments per year

Report up to three instruments.

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

This program does not meet regulatory requirements for proficiency testing; see programs CMP and CMP1 on page 152. For additional information about the Quality Cross Check program, see page 36.

Quality Cro	ss Check—Occult Blo	od OCBQ
Analyte	Program Code	Challenges per Shipment

 OCBQ

 Occult blood
 I
 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

# 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
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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	I	3
D-dimer	I	2
Fibrin(ogen) degradation products, plasma	I	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.

#### 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 <sup>®</sup> 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**

- 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

#### **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

4

# 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.

# Quality Cross Check—SARS-CoV-2 Antigen COVAQ

Analyte	Program Code	Challenges per Shipment
	COVAQ	
SARS-CoV-2 antigen	I	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.

#### Quality Cross Check—Nucleic Acid Amplification, Respiratory Limited ID3Q

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

#### **Program Information**

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

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

# **Transfusion Medicine**

# Quality Cross Check—Transfusion Medicine JATQProcedureProgram CodeChallenges per ShipmentJATQJATQ3ABO groupingI3Antibody detectionI3Rh typingI3

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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# **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.

POC1, POC2, POC3, POC4					
Program Name		Progra	m Code		Challenges per Shipment
	POC1	POC2	POC3	POC4	
hCG Competency					10
Glucose Competency					10
Urine Dipstick Competency					10
Strep Screen Competency					10

POC Competency Challenges

#### **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			I		10
Fecal Occult Blood Competency					10

- 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<sup>®</sup> B, HemoCue 201, and Stanbio HemoPoint<sup>®</sup> H2 instruments
- POC8 One 1.5-mL positive liquid specimen for influenza A; one 1.5-mL positive liquid specimen for influenza B
- POC9 One positive 2.0-mL fecal specimen
- Each program provides material to test up to 10 staff.

# POC Competency Challenges POC10, POC11, POC12

Program Name		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<sup>®</sup> 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 wellbeing 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	I			5
Hemochron <sup>®</sup> Jr., IL GEM PCL ACT-LR Competency		I		5
Hemochron Jr., Signature, IL GEM PCL ACT Competency			I	5

#### **Program Information**

- POC14 Five abnormal

   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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# **General Chemistry and Therapeutic Drug Monitoring**



6

#### **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



ived 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)	I	•		I		5
Albumin						5
Alkaline phosphatase						5
Amylase						5
Aspartate aminotransferase (AST/SGOT)				I		5
Bilirubin, direct				I		5
Bilirubin, total*				I		5
Calcium				I		5
Chloride						5
Cholesterol, total				I		5
Cortisol				I		5
Creatine kinase (CK)						5
Creatinine				I		5
Glucose				I		5
HDL cholesterol						5
Human chorionic gonadotropin (hCG), quantitative	I		I	I		5
Iron				I		5
Lactate dehydrogenase (LD)						5
LDL cholesterol, measured				I		5
Lipoprotein (a)				I		5
Magnesium				I		5
Pancreatic amylase				I		5
Potassium						5
Protein, total				I		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

#### **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.



6

NB, NB2, on page 64.

#### 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				I		5
Thyroxine (T4), total				I		5
Thyroid-stimulating hormone (TSH)	I	I		I		5
Triglycerides				I		5
Urea nitrogen (BUN)						5
Uric acid				I		5
Acid phosphatase				I		5
Ammonia				I		5
Apolipoprotein A1				I		5
Apolipoprotein B				I		5
Calcium, ionized				I		5
Carbon dioxide (CO <sub>2</sub> )				I		5
Ferritin				I		5
Gamma glutamyl transferase (GGT)				I		5
Iron binding capacity, total (measured)						5
Iron binding capacity, unsaturated (measured)				I		5
Lactate				I		5
Lipase				I		5
Osmolality				I		5
Phosphorus				I		5
Prealbumin				I		5
Transferrin				I		5
Lithium				I		5
Acetaminophen				I		5
Amikacin				I		5
Caffeine				I		5
Carbamazepine				I		5
Carbamazepine, free				I		5
Digoxin				I		5
Digoxin, free				I		5
Disopyramide				I		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.



6

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

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

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

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

l le une en le cel The	
Harmonized i n	VIOLO ABIH

Analyte	Program Code	Challenges per Shipment
	ABTH	
Triiodothyronine (T3), free	I	3
Triiodothyronine (T3), total	I	3
Thyroxine (T4), free		3
Thyroxine (T4), total	I	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.

Thyroid	Panel	NEW
Calibration Verificatio	on/Linearity L	N50
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
Thryoid-stimulating hormone (TSH)		0.1–120.0 µIU/mL

#### **Program Information**

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

#### Program Information

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

#### Program Information

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

6

## CAP/ADLM Immunosuppressive Drugs CS

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

#### **Program Information**

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



# General Chemistry and Therapeutic Drug Monitoring O

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

#### **Program Information**

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

Everolimus EV				
Analyte	Program Code	Challenges per Shipment		
	EV			
Everolimus	I	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	

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

Thoropoutio Drug	Manitaring Extanded	78
Inerabeutic Drug	wonitoring—cxtended	
	6	

Analyte	Program Code	Challenges per Shipment
	ZE	
Clozapine	I	3
Gabapentin	I	3
Lacosamide	I	3
Lamotrigine	I	3
Levetiracetam	I	3
Oxcarbazepine	I	3
Oxcarbazepine metabolite	I	3
Pregabalin		3
Rufinamide	I	3
Teriflunomide	I	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	I	3
Desipramine	I	3
Imipramine		3
Nortriptyline		3
Tricyclics, total (qualitative/ quantitative)	I	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	I	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, on page 60.

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

Natriuretic Peptides BNPQ		
Analyte	Program Code	Challenges per Shipment
	BNPQ	
BNP	I	3
NT-proBNP	I	3

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

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

#### **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**

- 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

6

#### Quality Cross Check—High-Sensitivity Cardiac Markers HCRQ

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

6

**Program Information** 

specimens
Report up to three instruments.

• Three 2.0-mL liquid serum

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.

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, below.
- This program has limited stability. Laboratories outside the US or Canada should consider purchase of GH5I, which has longer stability.

#### 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**

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

#### Program Information

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

#### **Program Information**

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

6

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 Shipn		
	GSA		
Glycated serum albumin		3	

High-Sensitivity C-reactive Protein HSCRP			
nalyte Program Code Challenges per Shipme			
	HSCRP		
High-sensitivity C-reactive protein		5	

Homocysteine HMS			
Analyte	Program Code	Challenges per Shipment	
	HMS		
Homocysteine		3	

# Three 1.0-mL liquid serum specimens

**Program Information** 

• Two shipments per year

#### **Program Information**

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

#### **Program Information**

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

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

- Two 2.0-mL serum specimens
- For 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	I	3
LDL cholesterol	I	3
Triglycerides		3

#### Program Information

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

# Neonatal Bilirubin NB, NB2AnalyteChallenges r ShipmentProgram CodeProgram CodeBilirubin, direct22Bilirubin, total52

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 Challe		Challenges per Shipment
	PCARM	PCARMX	
BNP			5
СК-МВ			5
D-dimer			2
Myoglobin			2
NT-proBNP			5
Troponin I			5

- 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 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	01,04	54-56
Cholestech LDX®	Total cholesterol		64
	HDL cholesterol		64
	Triglycerides	LCVV	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

#### Whole Blood Chemistry Compatibility Matrix

Waived Combination HCC			
Analyte	Program Code	Challenges per Shipment	
	HCC		
Hemoglobin	I	2	
Whole blood glucose	I	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.

6

#### Waived Combination HCC2

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

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

# Quality Cross Check—Whole Blood Glucose WBGQ

Analyte	Program Code	Challenges per Shipment
	WBGQ	
Glucose		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	I	3	
Creatinine	I	3	
Glucose		3	
Magnesium		3	
Nitrogen, total	I	3	
Osmolality		3	
Phosphorus		3	
Potassium	I	3	
Protein, total	I	3	
Sodium	I	3	
Urea nitrogen	I	3	
Uric acid	I	3	
Urine albumin, quantitative	I	3	
Urine albumin:creatinine ratio	I	3	

#### **Program Information**

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

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

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

Kidney Stone Risk Assessment KSA			
Analyte	Program Code	Challenges per Shipment	
	KSA		
Citrate	I	3	
Cystine		3	
Oxalate	I	3	

#### Program Information

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

Urine Chemistry—Special N			
Analyte	Program Code	Challenges per Shipment	
	Ν		
3-methoxytyramines	I	3	
5-hydroxyindoleacetic acid		3	
17-hydroxycorticosteroids	I	3	
17-ketosteroids		3	
Aldosterone	I	3	
Coproporphyrins		3	
Cortisol, urinary free		3	
Dopamine	I	3	
Epinephrine		3	
Homovanillic acid		3	
Metanephrine		3	
Norepinephrine		3	
Normetanephrine		3	
Uroporphyrin		3	
Vanillylmandelic acid	L	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	I	2	

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

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

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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

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

#### **Program Information**

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

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

6
# **Special Chemistry**

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

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

#### **Program Information**

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

Aldolase ADL		
Analyte	Program Code	Challenges per Shipment
	ADL	
Aldolase		2

#### **Program Information**

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

Angiotensin Converting Enzyme ACE			
Analyte Program Code Challenges pe			
	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	
рН		3	
Protein, total	I	3	
Triglycerides		3	
Urea nitrogen		1	

- 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
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# Quality Cross Check—Body Fluid Chemistry FLDQ

Analyte	Program Code	Challenges per Shipment
	FLDQ	
Albumin		3
Amylase		3
CA19-9	I	1
Carcinoembryonic antigen (CEA)		1
Cholesterol		3
Creatinine	I	3
Glucose		3
Lactate		3
Lactate dehydrogenase (LD)	I	3
рН		3
Protein, total		3
Triglycerides	I	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	I	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	I	3	
Cadmium, urine	I	3	
Cadmium, whole blood	I	3	
Creatinine, urine	I	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
	М	OLI	
Albumin, quantitative			3
Electrophoresis (albumin and gamma globulin)		I	3
Glucose			3
lgG, quantitative			3
Lactate		I	3
Lactate dehydrogenase (LD)			3
Protein, total	I	I	3
Oligoclonal bands		I	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

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

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

- 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

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

Fructosamine FT			
Analyte	Program Code		
	FT		
Fructosamine		2	

Glucose-6-Phosphate Dehydrogenase G6PDS			
halyte Program Code Challenges per Ship			
	G6PDS		
G6PD, qualitative and quantitative		2	

# Program InformationTwo 0.5-mL lyophilized

- hemolysate specimens
- Two shipments per year

H. pylori Breath Test HPBT			
Analyte	Program Code	Challenges per Shipment	
	HPBT		
H. pylori breath test		2	

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

#### **Program Information**

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

#### **Program Information**

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

Lipoprotein Electrophoresis LPE			
Analyte/Procedure	Program Code Challenges per Shipme		
	LPE		
Lipoprotein electrophoresis		2	

- 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	

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

#### **Program Information**

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

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

Pseudocholinesterase C7			
Analyte Program Code Challenges per Shipn			
	C7		
Pseudocholinesterase		1	

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

Salivary Cortisol SALC			
Analyte	Program Code	Challenges per Shipment	
	SALC		
Salivary cortisol	l	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	I	3
Cortisol	I	3
Estradiol	I	3
Follicle-stimulating hormone (FSH)	I	3
Luteinizing hormone (LH)	I	3
Prostate-specific antigen (PSA), total	I	3
Sex hormone-binding globulin (SHBG)	I	3
Testosterone	I	3
Thyroid-stimulating hormone (TSH)	I	3

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 Shipme		
	TBLA		
Total bile acids	I	3	

#### **Program Information**

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

6

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

Trace Metals R				
Analyte Program Code Challenges per Shipn				
	R			
Aluminum		3		
Chromium		3		
Copper		3		
Manganese		3		
Selenium		3		
Zinc		3		

- 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	I	3	
Cobalt	I	3	
Copper	I	3	
Lead	I	3	
Manganese	I	3	
Mercury		3	
Selenium	I	3	
Thallium	I	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

6

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

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

# Sweat Analysis Series SW2, SW4

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

For method compatibility, see chart below.

#### Sweat Analysis Series Compatibility Matrix

Method/Procedure	Progra	m 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		

#### **Program Information**

**Program Information** 

• SW2, SW4 - Three

5.0-mL simulated liquid human sweat specimensTwo shipments per year

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

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

#### **Program Information**

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

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- 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	М	74

#### **Program Information**

• Three 5.0-mL simulated liquid spinal fluid specimens

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# Endocrinology



## Be confident in the accuracy of your endocrinology testing.

Test your laboratory's proficiency with our new PT/EQA program exclusively for parathyroid hormone levels.

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



#### 

## **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 NEW		5
Carcinoembryonic antigen (CEA)	I	5
Cortisol	I	5
Ferritin	I	5
Folate, serum	I	5
Human chorionic gonadotropin (hCG), quantitative	I	5
Immunoglobulin E (IgE)	I	5
Prostate-specific antigen (PSA), total	I	5
p2PSA		5
Prostate-specific antigen, complexed (cPSA)	I	5
Prostate-specific antigen (PSA), free	I	5
Prostatic acid phosphatase (PAP)		5
Triiodothyronine (T3), free	I	5
Triiodothyronine (T3), total		5
T3 uptake and related tests		5
Thyroxine (T4), free	I	5
Thyroxine (T4), total		5
Thyroid-stimulating hormone (TSH)		5
Vitamin B <sub>12</sub>	l	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



Analyte/Procedure	Program Code	Challenges per Shipment
	ММА	
Active vitamin B <sub>12</sub>		3
Methylmalonic acid		3

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

# B-type Natriuretic Peptides BNP5

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

## 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

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

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

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

- 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 Shipme				
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 Shipm				
VITD				
25-OH vitamin D, total 3				

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

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

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

# Accuracy-Based Vitamin D ABVDAnalyteProgram CodeChallenges per ShipmentABVDABVD325-OH vitamin D (D2 and D3)13Calcium13

#### 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

7

# Laboratory Administration for Pathologists, Second Edition

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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				I		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

Insulin, Gastrin, and C-peptide ING			
Analyte	Program Code		
	ING		
C-peptide		3	
Gastrin	I	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 Hor	NEW	
Analyte/Procedure	Program Code	Challenges per Shipment
	PTH	
Parathyroid hormone (PTH)		5

- 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)	I	3

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

## 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.

## Second Trimester Maternal Screening FP/FPX

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

The CAP designed these 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**

- 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

#### **Program Information**

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

#### **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	I		5
Free beta hCG			5
PAPP-A	I		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
 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 Shipm					
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 Shipme					
	FOL				
RBC folate 2					

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

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

- 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			
Adrenocorticotropic hormone (ACTH)		3		
Beta-2 microglobulin		3		
CA 15-3	I	3		
CA 19-9	I	3		
CA 27.29		3		
CA 72-4	I	3		
Calcitonin	I	3		
Thyroglobulin		3		

#### **Program Information**

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

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

#### **Program Information**

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

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

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

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

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

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

Validated Material	Program Code	Corresponding Program	Page
Ligand—General	KVM	К	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

# Lead your organization in laboratory stewardship.

With immense pressure to provide fast, accurate results with limited resources, your laboratory will benefit from the CAP's **Test Ordering Program**.

Guide this effort in your organization and

- Find ways to use your resources more efficiently.
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- Review your testing patterns for efficacy and utility.

The Test Ordering Program—now available to CAP customers—includes analytical tools, the latest expert-written recommendations, and suggested interventions.





# Blood Gas, Critical Care, and Oximetry



8

# 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	Progra	Challenges per Shipment		
	AQ	AQH		
Calcium, ionized	I		2	
Chloride	I	I	5	
Creatinine			5	
Glucose			5	
Hematocrit		I	5	
Hemoglobin, estimated			5	
Lactate	I	I	2	
Magnesium, ionized	I	I	2	
pCO <sub>2</sub>	I	I	5	
рН	I	I	5	
p0 <sub>2</sub>	I		5	
Potassium	I	I	5	
Sodium	I	I	5	
tCO <sub>2</sub>	I	I	5	
Urea nitrogen (BUN)	I	I	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



tCO<sub>2</sub> Urea nitrogen (BUN) For multiple instrument re and AQHQ, on page 94.

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	e Program Code			
	AQIS			
Calcium, ionized		2		
Chloride	I	5		
Creatinine	I	5		
Glucose	I	5		
Hematocrit	I	5		
Hemoglobin, estimated	I	5		
Lactate	I	2		
pCO <sub>2</sub>	I	5		
рН	I	5		
pO <sub>2</sub>		5		
Potassium	I	5		
Sodium		5		
tCO <sub>2</sub>		5		
Urea nitrogen (BUN)		5		

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

#### **Program Information**

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



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

Analyte	Program Code			Challenges per Shipment
Anatyte				enationgee per empirient
	AQQ	AQHQ	AUSU	
Calcium, ionized	I			3
Chloride	I			3
Creatinine	I			3
Glucose	I			3
Hematocrit				3
Hemoglobin, estimated				3
Lactate	I			3
Magnesium, ionized	I			3
pCO <sub>2</sub>				3
рН				3
pO <sub>2</sub>				3
Potassium				3
Sodium	I			3
tCO <sub>2</sub> (measured)				3
Urea nitrogen (BUN)	I			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 no 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 SO			
Analyte	Program Code	Challenges per Shipment	
	SO		
Carboxyhemoglobin	I	5	
Hematocrit, estimated	I	5	
Hemoglobin, total	I	5	
Methemoglobin	I	5	
Oxyhemoglobin	l	5	

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

#### Additional Information

- This 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	I	3
Hemoglobin, total		3
Methemoglobin		3
Oxyhemoglobin		3

# This program does not meet regulatory requirements for proficency testing; see program SO, 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.

- 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

# Our PT/EQA resources are with you every step of the way.



Everything you need is all in one place. With the CAP's online PT/EQA resources, you can:

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- Understand how to get the most out of your evaluations and participant summaries.
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# Toxicology



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# New Analyte/Drug Additions

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.



9

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

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

## T and UT Programs Drug Listing

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

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

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

Meta-chlorophenylpiperazine (m-CPP) Methadone Methadone metabolite (EDDP) Methamphetamine Methylenedioxyamphetamine (MDA) Methylenedioxymethamphetamine (MDMA) Methylenedioxypyrovalerone (MDPV) Methylphenidate Metoprolol Mirtazapine Mitragynine (Kratom) Morphine N-desmethyltramadol Naproxen Norbuprenorphine Norchlordiazepoxide Norclomipramine Norcodeine Norcyclobenzaprine\* Nordiazepam Nordoxepin Norfentanyl Norfluoxetine Norketamine Normeperidine Normirtazapine Nornaloxone Noroxycodone Norpropoxyphene Norsertraline Nortrimipramine

Nortriptyline Norverapamil O-desmethyltramadol Olanzapine Opiate group Oxazepam Oxycodone Oxymorphone Paroxetine Pentobarbital Phencyclidine Pheniramine Phenobarbital Phentermine Phenylephrine Phenytoin Pregabalin Propoxyphene Propranolol Pseudoephedrine Quetiapine Salicylates Sertraline Tapentadol Temazepam Topiramate Tramadol Trazodone Tricyclic group Trimipramine Valproic acid Venlafaxine Verapamil Xylazine NEW Zolpidem

\*Same compound

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

Analyte	Program Code	
	Challenges p	er 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
Benzoylecgonine/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

- 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 nonconfirmatory 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	I	3
Glutaraldehyde	I	3
Nitrite	I	3
Oxidants		3
рН	I	3
Specific gravity	I	3

#### Program Information

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

9

# 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
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## CAP/ADLM Forensic Urine Drug Testing, Confirmatory UDC

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

- Ten 50.0-mL liquid urine specimens
- For laboratories that perform both screening and confirmatory testing, including quantitation, for drugs of abuse in urine specimens; laboratories are asked to report creatinine, pH, and specific gravity for each specimen to ensure specimen adulteration has not occurred
- Participants will have access to the 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
Benzoylecgonine		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

- 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	

- 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



#### **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

## Serum Drug Screening SDS

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

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

# CAP/ADLM Alcohol/Volatiles AL1, AL2

Analyte	Prograi	n Code	Challenges per Shipment
	AL1 Whole Blood	AL2 Serum	
Acetone, quantitative	I	I	5
Ethanol, quantitative	I.	I	5
Ethylene glycol, qualitative and quantitative	I	I	5
Isopropanol, quantitative	I	I	5
Methanol, quantitative		I	5

- 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



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Ethanol Biomarkers ETB		
Analyte	Program Code	Challenges per Shipment
	ETB	
Ethyl glucuronide (EtG), qualitative and quantitative	I	3
Ethyl sulfate (EtS), quantitative	l	3

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

# CAP/ADLM Blood Lead BL

Analyte	Program Code	Challenges per Shipment
	BL	
Lead	I	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)].

**Cadmium** CD

**Program Code** 

CD

I.

I.

I.

Challenges per Shipment

3

3

3

3

Analyte

Beta-2-microglobulin, urine

Cadmium, whole blood

Cadmium, urine

Creatinine, urine

#### **Program Information**

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

# ADLM:

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	I	3
Nicotine		3

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

#### **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	I	3
Chromium		3
Copper	I	3
Manganese	I	3
Selenium		3
Zinc		3

- 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	I	3
Mercury		3
Selenium	I	3
Thallium	I	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
	ТМЖВ	
Aluminum	I	3
Arsenic, total	I	3
Chromium	I	3
Cobalt	I	3
Copper	I	3
Manganese	I	3
Mercury	I	3
Selenium	I	3
Thallium	L	3
Zinc		3

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

Analyte	Program Code	Challenges per Shipment
	FTC	
See drug listing below		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) 7-aminoclonazepam 7-aminoflunitrazepam 7-hydroxymitragynine Acetaminophen Alpha-hydroxyalprazolam Alprazolam Amitriptyline Amphetamine Aripiprazole Atenolol Atropine Benzoylecgonine Brompheniramine Buprenorphine Bupropion Butalbital Carbamazepine Carbamazepine-10. 11-epoxide Carisoprodol Chlordiazepoxide Chlorpheniramine Citalopram Clomipramine Clonazepam Clozapine Cocaethylene Cocaine Codeine Cyclobenzaprine\* Delta-9-THC Delta-9-THC-COOH Demoxepam Desipramine Desmethylclomipramine

Desmethylsertraline Dextromethorphan Diazepam Dihydrocodeine Diltiazem Diphenhydramine Doxepin Doxylamine Duloxetine Ecgonine ethyl ester Ecgonine methyl ester Ephedrine Fentanyl\* Flunitrazepam Fluoxetine Gabapentin Gamma-hydroxybutyrate (GHB) Hydrocodone Hydromorphone Hydroxybupropion Hydroxyzine Ibuprofen Imipramine Ketamine Lamotrigine Levetiracetam Lidocaine Lorazepam Lysergic acid diethylamide (LSD) Meperidine\* Mephedrone Meprobamate Methadone Methadone metabolite (EDDP) Methamphetamine

Methylenedioxyamphetamine (MĎA) Methylenedioxymethamphetamine (MDMA) Methylenedioxypyrovalerone (MDPV) Methylphenidate Metoprolol Midazolam Mirtazapine Mitragynine (Kratom) Morphine\* N-desmethyltramadol Naproxen Norbuprenorphine Norchlordiazepoxide Norclomipramine Norcodeine Norcyclobenzaprine Nordiazepam Nordoxepin Norfentanyl Norfluoxetine Norketamine Normeperidine Normirtazapine Noroxycodone Norpropoxyphene Norsertraline Nortrimipramine Nortriptyline Norverapamil O-desmethyltramadol Olanzapine Oxazepam Oxycodone

Oxymorphone Paroxetine Pentobarbital Phencyclidine Phenethylamine Pheniramine Phenobarbital Phentermine Phenylephrine Phenytoin Pregabalin Propoxyphene Propranolol Pseudoephedrine Quetiapine Quinine Ranitidine Ritalinic acid Salicylate Sertraline Strychnine Tapentadol Temazepam Topiramate Tramadol Trazodone Trimipramine Valproic acid Venlafaxine Verapamil Zolpidem

\*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	I	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 Shi			
	THCB		
Delta-8-THC		3	
Delta-9-THC		3	
Delta-9-THC-COOH		3	
11-hydroxy-THC	I	3	

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

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

#### **Program Information**

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

9

# 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

	Vanitaring for	Dain Managaman	
Drug	Nonitoring for	Pain Managemen	

Analyte	Program Code	Challenges per Shipment
	DMPM	
See drug listing below		3

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

# **DMPM Program Drug Listing**

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

Amphetamine group	Fentanyl	Nordiazepam
6-acetylmorphine (6-AM)	Fentanyl and/or metabolites	Norfentanyl
7-aminoclonazepam	Gabapentin	Norhydrocodone
Alpha-hydroxyalprazolam	Hydrocodone	Normeperidine
Alprazolam	Hydromorphone	Noroxycodone
Amphetamine	I-amphetamine	Noroxymorphone
Barbiturate group	I-methamphetamine	Norpropoxyphene
Benzodiazepine group	Lorazepam	O-desmethyltramadol
Benzoylecgonine	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	Methylenedioxyamphetamine (MDA)	Propoxyphene
Clonazepam	Methylenedioxymethamphetamine	Propoxyphene and/or metabolites
Cocaine	(MDMA)	Tapentadol
Cocaine and/or metabolites	Morphine	Tapentadol-O-sulfate
Codeine	N-desmethyltramadol	Temazepam
Delta-9-THC-COOH	Naloxone	Tramadol
Diazepam	Norbuprenorphine	Tramadol and/or metabolites

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

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



Norvenlafaxine O-desmethyltramadol Oxazepam Oxycodone Oxymorphone Paroxetine Pentobarbital Phencyclidine (PCP) Phenobarbital Phenytoin Promethazine Propoxyphene Quetiapine Scopolamine Secobarbital Sertraline **Tapentadol** Temazepam Tetrahydrozoline Topiramate Tramadol Valproic acid Venlafaxine Zaleplon Ziprasidone Zolpidem Zolpidem carboxylic acid **NEW** Zopiclone/Eszopiclone

Toxicology

# Hydrocodone Hydromorphone

**DFC Program Drug Listing** Challenges will include a mix of drugs from the list below.

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

Fluoxetine

4-hydroxytriazolam

Gabapentin Gamma hydroxybutyrate (GHB) Hydroxyzine Imipramine Ketamine Lorazepam Meperidine Meprobamate Meta-chlorophenylpiperazine (m-CPP) Methadone Methadone metabolite (EDDP) Methamphetamine Methylenedioxyamphetamine (MDA) Methylenedioxymethamphetamine (MDMA) Midazolam Morphine Norbuprenorphine Nordoxepin Norfentanyl Norfluoxetine Norketamine Normeperidine Norpropoxyphene Norsertraline Nortriptyline

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

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

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

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

#### **Toxicology, Validated Material**

Validated Material	Program Code	Corresponding 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**

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

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- ebooks at ebooks.cap.org



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

# **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

Accuracy-Based Programs	114	÷
Validated Materials	119	)

# New Analyte Additions

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

# **Accuracy-Based Programs**

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

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

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

# Accuracy-Based Programs

# Accuracy-Based Vitamin D ABVD

Analyte	Program Code	Challenges per Shipment
	ABVD	
25-OH vitamin D (D2 and D3)	I	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 human serum specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

#### **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)	I	3
Testosterone	I	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.

Accuracy-Based Urine ABU			
Analyte	Program Code	Challenges per Shipment	
	ABU		
Calcium		3	
Creatinine	I	3	
Protein, total	I	3	
Urine albumin, quantitative	I	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	I	0.6-4.0 mg/dL
Estimated glomerular filtration rate (eGFR)		

#### **Program Information**

- Six 1.0-mL human serum specimens
- 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.

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**

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

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

• Six 0.8-mL liquid human

whole blood specimensTwo 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.

# Hemoglobin A1c Waived GH2 Analyte Program Code Challenges per Shipment GH2 GH2

I.

3

## Hemoglobin A1c

#### 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.

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

10

#### Program Information

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

Accuracy-Based Glucose, Insulin, and C-peptide ABGIC					
Analyte Program Code Challenges per Shipm					
	ABGIC				
C-peptide		3			
Gastrin NEW	I	3			
Glucose	l	3			
Insulin	I	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

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Item number: PUB229 Hardcover; 408 pages; 2023

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# 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	М	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 Code Corresponding Program Page					
Ligand—General KVM K 82					
Sex Hormones YVM Y 84					

Toxicology, Validated Material					
Validated Material Code Corresponding Program Page					
Urine Drug Testing, Screening UDSM UDS 10					

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# **1** 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

Calibration Verification/Linearity	122
Instrumentation Quality Management Programs	137

# New Programs NEW

Factor VIII Calibration Verification/Linearity (LN51)	. 133
HBV Viral Load Calibration Verification/Linearity (LN52)	. 133
Thyroid Panel Calibration Verification/Linearity (LN50)	. 136

# **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
  - Kit Instructions—Contain important information to help you complete testing and accurately report your results
  - Specimens—The majority of CAP CVL programs offer human-based materials to closely mimic your patient results.
- Customized Report Package
  - Executive Summary—A quick overview of both your calibration verification and linearity results for all reported analytes
  - Calibration Verification Evaluation
  - o 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.

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Your Iotal 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			
LN2BV - Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124	CZ/CZX/CZ2X	54-56		
LN3 - Therapeutic Drug Monitoring CVL	125	CZ/CZX/CZ2X/Z	54-56		
LN5 - Ligand CVL	125				
LN5S - Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP) and Atellica IM	125	K/KK	82		
LN6 - Urine Chemistry CVL	126	U	68		
LN7 - Immunology CVL	126	IG/IGX	216		
LN8 - Reproductive Endocrinology CVL	127	Y/YY	84		
LN9 - Hematology CVL	127	FH series, HE	140		
LN11 - Serum Ethanol CVL	127	AL2	104		
LN12 - C-reactive Protein CVL	128	CRP	216		
LN13, LN13C - Blood Gas/Critical Care CVL	128	AQ, AQH, AQIS	92-93		
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		
LN30 - B-type Natriuretic Peptides CVL	131	BNP5	59		
LN31 - Immunosuppressive Drugs CVL	132	CS	58		
LN32 - Ammonia CVL	132	C1, C3/C3X, CZ/CZX/CZ2X	54-56		
LN33 - Serum Myoglobin CVL	132	CRT, CRTI	60		
LN34 - Tumor Markers CVL	132	TM/TMX	89		
LN35 - Thrombophilia CVL	133	CGS2	168		
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		
LN40 - Vitamin D CVL	134	VITD	84		
LN41 - Procalcitonin CVL	134	PCT	76		
LN42 - D-dimer CVL	134	CGL, CGDF	166		
LN44 - Fibrinogen CVL	134	CGL	166		
LN45 - HCV Viral Load CVL	133	HCV2	205		
LN46 - C-peptide/Insulin CVL	135	ING	86		
LN47 - High-Sensitivity Troponin T CVL	135	HCRT, HCRTI	60		
LN48 - High-Sensitivity Troponin I CVL	135	HCRT, HCRTI	60		
LN49 - Cystatin C CVL	135	CYS	74		
LN50 - Thyroid Panel CVL NEW	136	C1. C3/C3X. CZ/C7X/C72X. K/KK	54-56.82		
LN51 - Factor VIII CVL NEW	133	CGE/CGEX. CGS3. FCF	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	LN2BV Target Ranges		Units
	LN2, LN2BV	(All Instruments)	All Beckman (Except AU)	Vitros	
Albumin	I		1.5-9.0		g/dL
Calcium			4.0-18.0		mg/dL
Chloride	I		60-180		mmol/L
CO <sub>2</sub>	I		7–42		mmol/L
Creatinine			0.8-34.0		mg/dL
Glucose	I		20-750		mg/dL
Iron	I		10-950		µg/dL
Magnesium			0.5-9.0		mg/dL
Osmolality			200-600		m0sm/kg $H_2$ 0
Phosphorus	I		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	I	50–1,800	50-700	185–3,000	U/L
Lipase	I	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	I	35-625		mg/dL	
HDL	I	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.

# Therapeutic Drug Monitoring Calibration Verification/Linearity LN3

Program Code	
LN3	LN3 Target Ranges
I	20–350 µg/mL
I	2–45 μg/mL
I	2–25 µg/mL
I	0.5-4.4 ng/mL
I	1–11 µg/mL
I	1–10 µg/mL
I	0.3–4.0 mmol/L
I	8–80 μg/mL
I	5–35 μg/mL
I	7–90 mg/dL
I	5–35 μg/mL
I	1–10 µg/mL
	15–140 µg/mL
	7−85 µg/mL
	Program Code LN3 I I I I I I I I I I I I I I I I I I I

#### **Program Information**

- Six 4.0-mL liquid serum specimens
- A seventh 4.0-mL liquid serum specimen for acetaminophen, carbamazepine, and vancomycin
- 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.

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 <sub>12</sub>		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

# 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 <sub>2</sub> 0
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

**Program Information** 

- Twenty 4.0-mL liquid simulated urine specimens
- 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.

# Immunology Calibration Verification/Linearity LN7 Analyte Program Code

	LN/	LN7 larget Ranges
Alpha-1 antitrypsin	I	35–500 mg/dL
Complement C3	I	21–420 mg/dL
Complement C4	I	5–125 mg/dL
IgA	I	32–650 mg/dL
lgG	I	160–3,800 mg/dL
IgM	I	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

# **Reproductive Endocrinology** Calibration Verification/Linearity LN8

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

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

# Hematology Calibration Verification/Linearity LN9

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

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

# Serum Ethanol Calibration Verification/Linearity LN11

Analyte	Program Code	
	LN11	LN11 Target Range
Serum ethanol	I	15-550 mg/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

#### **Program Information**

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

#### **Program Information**

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

C-reactive Protein Calibration Verification/Linearity LN12		
Analyte	Program Code	
	LN12	LN12 Target Range
C-reactive protein	I	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.

**Blood Gas/Critical Care** 

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

#### **Program Information**

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

#### **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

# 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.

## Whole Blood Glucose Calibration Verification/Linearity LN17

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

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

#### **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)	I	0.5%-28.0%

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

# Urine Albumin Calibration Verification/Linearity LN20

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

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**

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

#### Program Information

- Six 5.0-mL urine specimens
- Conventional and International System of Units (SI) reporting offered
- Two shipments per year

11

# High-Sensitivity C-reactive Protein Calibration Verification/Linearity LN21

Analyte	Program Code	
	LN21	LN21 Target Range
High-sensitivity C-reactive protein	I	0.5–18.0 mg/L

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

#### **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+	I	50%–70% positive	
CD3+ T lymphocytes absolute	I	350–4,000 cells/μL	
CD3+/CD4+	I	1%–40% positive	
CD3+/CD4+ T lymphocytes absolute	I	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

Instrumentation Verification Tools

Prostate-Specific Antigen Calibration Verification/Linearity LN23			
lyte	Program Code		

Program Code	
LN23	LN23 Target Range
	0.1-90.0 ng/mL
_	Program Code LN23

#### **Program Information**

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

Creatinine Accuracy	
Calibration Verification/Linearity	LN24

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

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.

### 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**

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

#### **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	I	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

# Calibration Verification/Linearity LN31 Analyte Program Code LN31 LN31 Tar

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

**Immunosuppressive Drugs** 

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

# Ammonia Calibration Verification/Linearity LN32

		<b>3</b>
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 liquid whole blood hemolysate specimens
- Two shipments per year

#### **Program Information**

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

# 11

Serum Myoglobin Calibration Verification/Linearity LN33			
Analyte	Program Code		
	LN33	LN33 Target Range	

Myoglobin		25–900 ng/mL
View your expedited linearity evaluati	ons within two busines	s 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	I	1–1,000 U/mL
CA 15-3	I	2–190 U/mL
CA 19-9	I	10-900 U/mL

**Program Information** 

- Seven 3.0-mL liquid serum specimens
- 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.

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

Analyte		Program Code			
	LN35	LN36	LN37	LN51 NEW	Target Ranges
Antithrombin activity					10%–130%
Protein C activity					10%–100%
Heparin, low molecular weight					0.1–2.0 U/mL
Heparin, unfractionated					0.1–1.3 U/mL
von Willebrand factor antigen					5%-140%
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		Progra	m Code		
	LN38	LN39	LN45	LN52	Target Ranges
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

11

# 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.

# Procalcitonin Calibration Verification/Linearity LN41

Analyte	Program Code	
	LN41	LN41 Target Range
Procalcitonin	I	0.3–175.0 ng/mL

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

## 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.

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

#### **Program Information**

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

#### **Program Information**

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

#### **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.

11

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.

# 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.

# 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)	I	

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 2.0-mL serum specimens
- Two shipments per year

#### **Program Information**

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

#### **Program Information**

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

NEW
-----

Inyrold Panel	
Calibration Verification/Linea	rity LN50

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

#### 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 I. Thyroxine (T4), free I. 0.7-7.0 ng/dL Thyroxine (T4), total 1.0-27.0 µg/dL I. Thryoid-stimulating hormone (TSH) I. 0.1-120.0 µIU/mL

# 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	I	
Microtiter plate linearity	I	
Refractometer calibration	I	
Spectrophotometer (stray light check)	I	
Fluorescent intensity check – fluorescent microscopes	I	
pH meter check	I	

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	I	

#### **Program Information**

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

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

#### **Program Information**

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

Instrumentation Verification Tools

Interfering Substance IF	S
--------------------------	---

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

The material expires December 1, 2025.

#### **Program Information**

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

# **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.
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# Hematology and Clinical Microscopy

Hematology	140
Clinical Microscopy	152

# 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	I	5			
MPV		5			
Platelet count		5			
RDW	I	5			
Red blood cell count	I	5			
White blood cell count	I	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 Shipmen		
	FH1–FH4, FH9–FH10, FH13, FH16–FH17			
Hematocrit	I	5		
Hemoglobin		5		
Immature granulocyte (IG)		5 (FH9 and FH17)		
Immature platelet fraction (IPF)/reticulated platelet (RP)	I	5 (FH9 only)		
Large unstained cell (LUC)	I	5 (FH4 only)		
MCV, MCH, and MCHC		5		
MPV	I	5		
Nucleated red blood cell count (nRBC)	I	5 (FH3, FH9, FH13, FH16, and FH17)		
Platelet count		5		
RDW	I	5		
Red blood cell count	I	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.

Instrument				FH ar	nd FHQ S	eries			
	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	I								
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					I				
Beckman Coulter AcT 5diff (AL, CP, OV)									
DIRUI BF series									
Horiba ABX Pentra 60, 80, 120, Pentra DF Nexus						I			
Beckman Coulter LH 750, LH 755, LH 780, LH 785, UniCel DxH series (except DxH 500 series)							I		
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									

## Hematology Automated Differential Series, Instrument Matrix

# 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)	I		I	I	3
Platelet count					3
RDW					3
Red blood cell count					3
WBC differential					3
White blood cell count				I	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.

#### 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 Ship					
	BCP					
Blood cell identification		5				
Educational challenge(s)		5				

#### **Program Information**

**Program Information** 

• FH3Q, FH4Q, FH9Q, FH13Q -

 For method compatibility, see instrument matrix on

International System of Units (SI) reporting offered • Two shipments per year

page 141. • Conventional and

Three 2.5-mL whole blood specimens in vials with pierceable caps
Report up to three instruments.

- 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	I	5
Educational challenge		5

#### **Program Information**

- Ten online images
- Three shipments per year



12
# Go ahead. Double-check.



# Rely on these Benchtop Reference Guides in your laboratory.

### Hematology

Bone Marrow Benchtop Reference Guide (BMBRG)

Hematology Benchtop Reference Guide (HBRG)

Urinalysis Benchtop Reference Guide (UABRG)

Body Fluids Benchtop Reference Guide (BFBRG)

# Microbiology

Mycology Benchtop Reference Guide (MBRG)

Parasitology Benchtop Reference Guide (PBRG)

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Gram Stain Benchtop Reference Guide (GSBRG)

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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 tothe 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, Pl.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.

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Blood Parasite BP				
Procedure	Challenges per Shipment			
	BP			
Blood parasite identification (thin/thick film sets*)	I	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	Challenges per Shipment			
	BMD			
Bone marrow differential	I	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.

# Erythrocyte Sedimentation Rate ESR, ESR1, ESR2, ESR3

Procedure	Program Code			e	Challenges per Shipment
	ESR	ESR1	ESR2	ESR3	
All methods except the ALCOR, Alifax <sup>®</sup> , Sedimat 15 <sup>®</sup> , and Sedimat 15 Plus					3
Sedimat 15, Sedimat 15 Plus					3
Alifax					3
Mindray BC 700 series, Mindray BC 6800 Plus, Mindray BC 7600/7800/7900, and Mindray BP 200n series					3
ALCOR iSED <sup>®</sup> , miniiSED <sup>®</sup>					3

# **Program Information**

- One online bone marrow aspirate whole slide image that includes five annotated cells for identification
- Powered by DigitalScope<sup>®</sup> technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



- 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 F	IBF
----------------------------	-----

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

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

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# 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	I			3
Beckman Coulter, LH 500, LH 700 series, UniCel DxH series		I		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			I	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.

Hemoglobinopathy HG				
Procedure	Program Code	Challenges per Shipment		
	HG			
Hemoglobin identification and quantification	I	4		
Educational dry challenges	I	2		
Hemoglobin A2 quantitation	I	4		
Hemoglobin F quantitation		1		
Sickling test, qualitative		4		

### **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

### **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 Ship					
	RWBC				
Rapid total white blood cell count	I	5			

- 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 Shipme					
	SCS				
Sickling test, qualitative <b>1</b> 3					

- 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)	I	5
WBC count	I	4
Dry challenge	I	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 leukocytereduced platelet material
- Two 1.0-mL vials leukocytereduced red blood cells
- Three shipments per year

# Waived Combination HCC

Analyte	Program Code	Challenges per Shipment
	HCC	
Hemoglobin	I	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.

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Waived Hem	NEW	
Analyte	Program Code	Challenges per Shipment
	HCC1	
Hemoglobin	l	2

- 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 Ship					
	HCC2				
Hematocrit	I	2			
Hemoglobin	I	2			
Urinalysis/urine hCG	I	2			
Whole blood glucose	I	3			

- 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	ire Program Code			
	VPBS			
WBC differential	I	3		
Platelet estimate	I	3		
RBC morphology	I	3		
Blood cell identification	I	15		

### Additional Information

- Examine online whole slide images that include a manual 100 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 <u>via email</u> when the activity is available

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# Expanded Virtual Peripheral Blood Smear EHE1

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

- Two online peripheral blood whole slide images that include 10 annotated cells for identification
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available

# Hematopathology Online Education HPATH/HPATH1

Program	Program Code	Challenges per Shipment	
	HPATH/HPATH1		
Hematopathology online case review	I	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 <u>via email</u> when the activity is available



# Hematology and Clinical Microscopy

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.

Add it to your order, or view sample pages and purchase online.

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**Item number:** BMBRG Spiral bound; 66 pages; 2019

# **Clinical Microscopy**

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

Urinalysis and Clini	CMP, CMP1		
Analyte/Procedure	Progra	m Code	Challenges per Shipment
	СМР	CMP1	
Bilirubin			3
Blood or hemoglobin			3
Body fluid photographs		I	3
Glucose			3
hCG urine, qualitative			3
Ketones			3
Leukocyte esterase			3
Nitrite			3
Osmolality			3
рН			3
Protein, qualitative			3
Reducing substances	I	I	3
Specific gravity			3
Urine sediment photographs			3
Urobilinogen	I	I	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

For multiple instrument reporting options, see the Quality Cross Check program, CMQ, on page 153.



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

This program does not meet regulatory requirements for proficiency testing; see 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
	СММР	
Fern test (vaginal)		1
KOH preparation (skin)	I	1
Nasal smear	I	1
Pinworm preparation		1
Spermatozoa		1
Stool for leukocytes	I	1
Urine sediment photographs		3
Vaginal wet preparation photographs (for clue cells, epithelial cells, trichomonas, or yeast)	I	1

# **Program Information**

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

### **Program Information**

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

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

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

**Program Information** 

specimens

 ABF1-3 - Two 3.0-mL simulated body fluid

• 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

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.

- Two online whole slide body fluid images that include 10 annotated cells for identification
- Powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



# 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	I		2
White blood cells, quantitative/ qualitative	I		2

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

### **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



# Automated Urine Microscopy, Instrument Matrix

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

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

- 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	

Fecal Fat FCFS

**Program Code** 

FCFS

Challenges per Shipment

2

Analyte

Fecal fat, qualitative

### **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

# **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)	I	2	

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

# **Program Information**

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

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

Glucose-6-Phos	nhate Deh	vdrogenaee	GEDDS
Glucose-0-Phos	phate Dell	yulugellase	GUPDS

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

# Hemocytometer Fluid Count HFC

Procedure	Program Code	Challenges per Shipment
	HFC	
Cytopreparation differential	I	3
Red blood cell fluid count	I	3
Total nucleated cell/WBC fluid count	I	3

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

# **Program Information**

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

# **Program Information**

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

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

Hemocytometer Fluid Count, International HFCI

# Additional Information

- This program meets the CAP's Laboratory Accreditation Program requirements.
- Examine online whole slide images that include a manuaøl differential count.
- See system requirements on page 12.

12

Lamellar Body Count LBC			
Procedure	Program Code	Challenges per Shipment	
	LBC		
Lamellar body 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

- 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	I	3		
		01 1 0000		

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:

Analyte/Procedure

Urine hemosiderin, Prussian blue

Urine eosinophils, Wright stain

- 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	I	3

**Program Code** 

SCM1

SCM2

I.

# **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

# Special Clinical Microscopy SCM1, SCM2 Program Information

**Challenges per Shipment** 

3

3

- SCM1, SCM2 Three images, each available as photographs and online images
- Two shipments per year

Ticke Mitee	and Other Arthrono	
	, and other Arthropo	

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

- 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 <b>I</b> 5					

# Program InformationFive 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	I	2
Urine albumin (microalbumin): creatinine ratio	I	2
Urine albumin (microalbumin), semiquantitative/qualitative		2

Worm Identification WID

**Program Code** 

WID

**Challenges per Shipment** 

3

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

# **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

# **Program Information**

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

Procedure

Worm identification

# **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

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-nigrosinstained slides
- ASA Two 0.3-mL serum specimens
- Two shipments per year



# **Program Information**

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



# 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

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

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



Sex Hormones Y/YY					
Analyte	Program Code	Challenges per Shipment			
	Y/YY				
11-deoxycortisol		5			
17-hydroxyprogesterone	I	5			
Androstenedione	I	5			
DHEA sulfate	I	5			
Estradiol	I	5			
Estriol, unconjugated (uE3)	I	5			
Follicle-stimulating hormone (FSH)	I	5			
Growth hormone (GH)	I	5			
IGF-1 (somatomedin C)	I	5			
Luteinizing hormone (LH)		5			
Progesterone	I	5			
Prolactin	I	5			
Sex hormone-binding globulin (SHBG)	I	5			
Testosterone	I	5			
Testosterone, bioavailable (measured)	I	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 Shipmen						
	AMH						
Antimüllerian hormone	I	3					

- 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	Pr	ogram Co	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	I	3			
Prothrombin time	I	3			
D-dimer	I	2			
Fibrin(ogen) degradation products, plasma	I	1			
Fibrin(ogen) degradation products, serum	L	1			

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

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

Coagulation—Extended CGE/CGEX							
Analyte	Program Code Challenges per Shipr						
	CGE/CGEX						
See analyte listing below		2					

- CGE Two 1.0-mL lyophilized plasma specimens (three vials each)
- CGEX Two 1.0-mL lyophilized plasma specimens (five vials each)
- Two shipments per year

# Coagulation Analyte Listing (Quantitative Results)

50:50 mixing study, PT and aPTT
Activated partial thromboplastin time
Activated protein C resistance
Alpha-2-antiplasmin
Antithrombin activity/antigen
Dilute prothrombin time
Factors II, V, VII, VIII, IX, X, XI, XII, and XIII
Fibrinogen antigen
Heparin-induced thrombocytopenia (HIT)

Plasminogen activator inhibitor Plasminogen activity/antigen Prekallikrein Protein C Protein S Prothrombin time Reptilase time Thrombin time

Expanded Coagulation Factors ECF						
Analyte/Procedure	Program Code	Challenges per Shipment				
	ECF					
Factor II		3				
Factor V	I	3				
Factor VII		3				
Factor VIII clot based	I	3				
Factor VIII chromogenic	I	3				
Factor IX	I	3				
Factor IX chromogenic		3				
Factor X clot based		3				
Factor X chromogenic	I	3				
Factor XI		3				
Factor XII		3				
Factor XIII		3				
Fibrinogen antigen		3				
Reptilase time		3				
Thrombin time	I	3				

- 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 St	udies M	odule				
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 Mod	lule	1		1	1	1
Factor VIII assay			2			
von Willebrand factor (antigen, activity, multimers)			2			
Factor VIII inhibitor			2			
Heparin Module					1	
Heparin activities using methodologies including Anti-Xa (unfractionated, low molecular weight, and hybrid curve)				3		
Thrombin time				3		
Heparin-Induced Thrombocytopen	ia Modul	e				
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 lgG)						3

\*Not appropriate for meeting regulatory requirements; see page 166.

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

# 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.

# 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.

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

Analyte		Progra	m Code		
	LN35	LN36	LN37	LN51 NEW	Target Ranges
Antithrombin activity					10%–130%
Protein C activity					10%–100%
Heparin, low molecular weight					0.1–2.0 U/mL
Heparin, unfractionated					0.1–1.3 U/mL
von Willebrand factor antigen					5%-140%
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**

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

# **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

- 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*		I			3
Thrombin time		I			3
Apixaban					3
Dabigatran					3
Fondaparinux					3
Rivaroxaban					3

### **Program Information**

- APXBN, DBGN, FNPX, RVBN - Three 1.0-mL lyophilized plasma specimens
- Two shipments per year

\*Not appropriate for meeting regulatory requirements; see page 166.

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

Instrument/Cartridge	Program Code				Challenges per Shipment	
	СТ	CT1	CT2	СТЗ	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

# **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

For multiple instrument reporting options, see the Quality Cross Check programs, CTQ, CT1Q, CT2Q, CT3Q, and CT5Q, on page 171.

# 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 <sup>®</sup> 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 Shipm					
	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

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- 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 Shipme					
	VES				
TEG <sup>®</sup> 5000, TEG 6s, ROTEM <sup>®</sup> delta		2			

- 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>	I	2

This program requires the draw of a normal donor sample.

# **Program Information**

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

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



Item number: PUB231 Softcover; 342 pages; 2023

# 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<sup>®</sup> System
- Kit includes sufficient material to perform one assay; multiple assay reporting requires the purchase of PIAX.
- Two shipments per year

# 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 WP3, WP4, WP6, WP9, WP10

Analyte	Challenges per Shipment				
	Program Code				
	WP3 WP4 WP6 WP9				
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.

# 14

14 Coagulation

# Whole Blood Coagulation, Instrument Matrix

Instrument		Pro	gram C	ode	
	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 Xprecia Stride					

Platelet Mapping PLTM					
Analyte	Program Code	Challenges per Shipment			
	PLTM				
AA % aggregation/inhibition	I	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.

# Coagulation—Limited, Validated Material

Validated Material	Program Code	Corresponding Program	Page
Coagulation	CGM	CGL	166

# **Program Information**

- One 3.2% sodium citrate and two heparin vacuum tubes; two 3.5-mL plastic tubes; one vial of 0.2M CaCl<sub>2</sub>
- For use with the Haemonetics Platelet Mapping<sup>®</sup> assay
- Two shipments per year

# **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.

Microbiology	176
Bacteriology	177
Mycobacteriology	193
y ology	194
Parasitology	197
/irology	199
Multidiscipline Microbiology	207
nfectious Disease Serology	214

# New Programs NEW



Trichomonas vaginalis, 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.

Do you perform molecular testing on <i>Chlamydia</i> or GC only?	Do you perform nucleic acid amplification other than GC?	Do you perform viral load testing only?	Do you perform molecular multiplexing?
VES	VES	¥ES	VES
Select from the following: • HC6, HC6X, HC7 <i>Chlamydia/</i> GC Nucleic Acid Amplification (page 191)	Select from the following: • ID1, ID1T, ID2, ID5, IDN, IDO Nucleic Acid Amplification (pages 201, 204-205, 207) • D1 Group A Streptococcus Culture/Molecular (page 179) • MRS2M, MRS5M MRSA Screen, Molecular (page 188) • BOR Bordetella pertussis/ parapertussis (page 185) • CDF5 C. difficile Detection (page 187) • MGEN Mycoplasma genitalium (page 190) • TVAG, TVG5 Trichomonas vaginalis (page 197) • VBDM Zika (page 206) • COV2, COVM SARS-CoV-2 (pages 202-203)	Select from the following: • HV2 HIV Viral Load (page 206) • HCV2, HBVL, HBVL5 Hepatitis Viral Load (page 205) • VLS, VLS2 Viral Load (page 206)	Select from the following: • ID3 Nucleic Acid Amplification, Respiratory Limited (page 204) • IDM5, IDME Meningitis/Encephalitis Panel (page 209) • IDPN Infectious Disease Pneumonia Panel (page 211) • IDR Infectious Disease Respiratory Panel (page 210) • GIP, GIP5, GIPN Gastrointestinal Panel (pages 212-213) • BCM Bacterial Blood Culture (page 184) • MVP Molecular Vaginal Panel (page 191) • STIM Sexually Transmitted Infection Detection (page 191)

# **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	I					
Gram stain and morphology	I	I				
Antimicrobial susceptibility testing	I	I				
Bacterial antigen/toxin detection	I					

Participants must report five specimens for each mailing to meet CLIA requirements for the subspecialty of bacteriology. See the following pages for more detailed information about each program.

Bacteriology D					
Procedure	Program Code	Challenges per Shipment			
	D				
Antimicrobial susceptibility testing	I	2 graded			
Bacterial antigen/toxin detection		2			
Bacterial identification	I	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





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

Expanded Bacteriology DEX					
Analyte	Program Code	Challenges per Shipment			
	DEX				
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

# Microbiology Bench Tools Competency MBT

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

### Additional Information

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

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

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

### **Program Information**

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



### **Program Information**

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



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### Group A Streptococcus Culture/Molecular D1

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

### **Program Information**

- Five swab specimens with diluents in duplicate
- Throat swabs compatible with molecular- and culturebased methods

• Three shipments per year



GC and Urine Cultures D2, D3					
Procedure	Prograi	Challenges per Shipment			
	D2	D3			
Antimicrobial susceptibility testing	I		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 Neisseria gonorrhoeae 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 (

### Routine Microbiology Combination RMC

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

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

Urine Colony Count MC3, MC4

### **Program Information**

- Five loop specimens with diluents in duplicate, three swab specimens with diluents in duplicate, and one swab specimen for bacterial antigen detection
- Urine culture will have two susceptibility challenges.
- Throat swabs compatible with molecular- and culturebased methods
- Three shipments per year



### **Program Information**

- MC3 Two urine specimens with diluents
- MC4 Five urine specimens with diluents, three swab specimens with diluents in duplicate, and three swab specimens for bacterial antigen detection
- Throat swabs compatible with molecular- and culturebased methods
- Three shipments per year



### **Program Information**

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



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

**Challenges per Shipment** 

**Program Code** 

MC4

5

3

3

MC3

2

Procedure

Urine colony count/urine culture identification

Group A Streptococcus antigen detection\*

Throat culture/molecular

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

✐

### 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.

Procedure	Progra	m 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.

Group A Streptococcus antigen detection

### Rapid Group A Strep Antigen Detection D6

Procedure	Program Code	Challenges per Shipment
	D6	
Group A Streptococcus 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**

- VGS1, VGS2 Three online whole slide images
- Results included in the kit to assess personnel competency
- Powered by DigitalScope<sup>®</sup> technology
- · Two shipments per year

### **Program Information**

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



### Rapid Group A Strep Antigen Detection, Waived D9 **Program Code Challenges per Shipment** D9

2

### **Program Information**

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

Procedure

Group B Strep Detection D8			
Analyte	Program Code	Challenges per Shipment	
	D8		
Group B Streptococcus		5	

- Five swab specimens with diluents
- Program includes A549 cells to meet sample adequacy control requirement.
- · Compatible with molecularand culture-based methods
- · Three shipments per year



alt alohazard

Bacterial Antigen Detection LBAS, SBAS			
Procedure	Progra	m Code	Challenges per Shipment
	LBAS	SBAS	
Legionella pneumophila antigen detection	I		2
Streptococcus pneumoniae 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	P	2		

\$

### **Program Information**

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



### Blood Culture, Staphylococcus aureus BCS1

Analyte	Program Code	Challenges per Shipment
	BCS1	
Staphylococcus aureus/MRSA		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	I	5

### 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.

### **Program Information**

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

### 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.



### 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. (diptheroids); or *Bacillus* sp. Participants have the option to monitor institution-specific subgroups (for example, a specific department or patient population).

### Performance Indicators

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

• Overall contamination rate (%)

Look 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			
Bordetella pertussis	I	3		
Bordetella parapertussis		3		

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

Carbapenemase Detection CRE			
Procedure	cedure Program Code Challenges per Shipme		
CRE			
Resistance mechanism detection	I	3	

- · 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 I. 3 IMP 3 NDM 3 OXA-48 3 VIM 3

### **Program Information**

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

Analyte

Campylobacter

### Campylobacter CAMP **Program Code**

### **Challenges per Shipment** CAMP 2

### **Program Information**

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



C. difficile, 2 Challenge CDF2		
Analyte	Program Code	Challenges per Shipment
	CDF2	
Clostridioides (Clostridium) difficile antigen/toxin		2

C. difficile, 5 Challenge CDF5		
Analyte	Program Code	Challenges per Shipment
	CDF5	
Clostridioides (Clostridium) difficile antigen/toxin		5

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

### **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 Shipme			
НСЗ			
C. trachomatis antigen detection (EIA)		5	

### **Program Information**

**Program Information** 

specimens

• Five 2.0-mL liquid specimens for *Chlamydia* antigen testing by EIA

• Three 0.5-mL simulated stool

For use with rapid methodsTwo shipments per year

• Three shipments per year

Fecal Lactoferrin FLAC		
Analyte	Program Code	Challenges per Shipment
	FLAC	
Fecal lactoferrin	I	3

Pr	ogram Information
•	Two 0.5-mL fecal
	•

suspensionsTwo shipments per year



15

Helicobacter pylori Antigen, Stool HPS		
Procedure	Program Code	Challenges per Shipment
	HPS	
Helicobacter pylori antigen	l	2

### 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 ChallengeMRS2MProcedureProgram CodeChallenges per ShipmentMRS2MMRSA/MSSA/SA detection12

### For use with molecular methods that detect mecA

### Methicillin-Resistant *Staphylococcus aureus* Screen, 5 Challenge MRS5

Procedure	Program Code	Challenges per Shipment
	MRS5	
MRSA/MSSA detection		5

### **Program Information**

Program InformationTwo swab specimens (in

duplicate)

• Five swab specimens with diluents

Two shipments per year

- For laboratories performing culture-based testing only or using culture and molecular testing
- Three shipments per year



### **Program Information**

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

15

MRSA Screen, Molecul	ar, 5 Challeng	ge MRS5M
ocedure	Program Code	Challenges per Ship

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

Laboratory Preparedness Exercise LPX					
Analyte Program Code Challenges per Shipmer					
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.

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

### Program Information

- Three swab specimens with diluents
- Not available to customers outside the US due to US export law restrictions
- Two shipments per year



### **Program Information**

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

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

Ø

### 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

Shiga Toxin ST					
Analyte Program Code Challenges per Shipmen					
	ST				
Shiga toxin 2					

- Two 0.5-mL liquid specimens
- For use with direct shiga toxin testing only; not compatible with culture methods, cytotoxicity assays, or PCR
- Not available to 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	I	3		

### **Program Information**

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

Vaginitis Screen VS, VS1					
Analyte Program Code Challenges per Shipmer					
	VS* VS1**				
Candida sp.			5		
Gardnerella vaginalis	I		5		
Trichomonas vaginalis ***	I	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<sup>™</sup> VP III probe detection method; three shipments per year



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

### **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.

### Mycoplasma genitalium, Molecular MGEN

Analyte	Program Code	Challenges per Shipment
	MGEN	
Mycoplasma genitalium		3

Ð

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

- 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 C	ode	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.

Mycoplasma genitalium

Trichomonas vaginalis

Ð.

### **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<br/>Detection, Wolecular STIMAnalyteProgram CodeChallenges per ShipmentSTIMSTIMChlamydia trachomatis5Neisseria gonorrhoeaeI5

### **Program Information**

- Five 2.0-mL simulated urogenital specimens
- Designed for molecular multiplex methods
- Three shipments per year

5

5

### Vaginitis Screen, Virtual Gram Stain VS2

Procedure	Program Code	Challenges per Shipment
	VS2	
Interpretation of gram-stained vaginal smears	I	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 <u>via email</u> 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.

### Vancomycin-Resistant Enterococcus VRE

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

### **Program Information**

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

### **Program Information**

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





### Mycobacteriology

Procedure

✐

Acid-fast smear

Mycobacterial culture

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 Ship					
	E				
Acid-fast smear		1			
Antimycobacterial susceptibility testing		1 graded, 1 ungraded			
Mycobacterial identification*		5			

Mycobacteriology—Limited E1

**Program Code** 

E1

**Challenges per Shipment** 

5

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



### **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		
Mycobacterium tuberculosis 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

### 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 Shipmer					
	F				
Antifungal susceptibility testing	ifungal susceptibility testing 1				
Cryptococcal antigen detection 1					
Mold and yeast identification I 5					

### **Program Information**

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

### **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 molecularand culture-based methods.
- · Three shipments per year





Candida Culture F3						
Procedure	Program Code Challenges per Shipmen					
	F3					
Yeast identification	5					

- 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 Shipme						
YBC						
Blood culture yeast identification	5					

### 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	I	5

### **Program Information**

**Program Information** 

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

- Five 1.0-mL simulated cerebrospinal fluids
- Three shipments per year

Galactomannan FGAL					
Analyte	Program Code Challenges per Shipmen				
	FGAL				
Galactomannan - Aspergillus		3			

### Program Information

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

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

- 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 Shipme					
	IND				
India ink		2			

### **Program Information**

- Two liquid specimens
- Two shipments per year

### Pneumocystis jirovecii PCP1, PCP2, PCP4

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

- 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	Cha	allenges p	er Shipme	ent
	Program Code			
	Р	P3	P4	P5
Fecal suspension (wet mount)	2	5	2	
Fecal suspension (Giardia and Cryptosporidium immunoassays and/or modified acid-fast stain)	2	1	1	5
Giemsa-stained blood smear	1			
Preserved slide (for permanent stain)	2		3	

### Additional Information

- The proficiency testing materials used for the Parasitology programs contain formalin as a preservative.
- 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

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

15

Blood Parasite BP		
Procedure	Program Code	Challenges per Shipment
	BP	
Blood parasite identification (thin/thick film sets*)	I	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 Malar	ia RMAL, RML	.5
Analyte	Prog	ram Code
	Challenges per Shipment	
	RMAL	RML5 NEW
Rapid malaria detection	3	5
Plasmodium falciparum only	3	5

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

### Expanded Parasitology PEX

Procedure	Program Code	Challenges per Shipment
	PEX	
Parasite identification	I	3

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

### **Program Information**

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

### **Program Information**

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

Ticks, Mites, and Other Arthropods TMO

**Program Code** 

тмо

Challenges per Shipment

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

Tick, mite, and arthropod identification

Procedure

### Virology

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

Due gue m Ce de	Proce	edure
Program code	Viral Identification	Viral Antigen Detection
VR1		
VR2		
VR4		
HC4		
ID3		
ID5		
COVM		
CVAG		I

### Guide for Ordering Regulated Virology Programs

### **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.

For Comprehensive Virology Culture Testing	 Select <b>VR1</b> (page 200)
For Virology Antigen Testing by Immunofluorescence	 Select <b>VR2</b> (page 200)
For Viral Serology Testing	 Select <b>VR3, VR3M</b> (page 214)
For Virology Antigen by EIA or Latex Agglutination	 Select <b>VR4, CVAG</b> (pages 200, 203)
For Herpes Simplex Virus Culture Testing	 Select <b>HC4</b> (page 201)
For Viral Load Testing	 Select HV2, HCV2, HBVL, HBVL5, VLS, VLS2 (pages 205-206)
For Nucleic Acid Amplification	 Select <b>COV2, COVM</b> , <b>ID1,</b> <b>ID1T, ID2, ID3, ID5,</b> <b>MPOX, VBDM</b> (pages 201-206)

Virology Culture VR1			
Procedure Program Code Challenges per Shipment			
	VR1		
Chlamydia trachomatis culture	I	1	
Viral isolation/identification		5	

- Five 0.5-mL specimens for viral culture and one 0.5-mL specimen for Chlamydia trachomatis culture
- Three shipments per year



### **Program Information**

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

Virology Antigen Detection (DFA) VR2				
Analyte/Procedure	Program Code	Challer	nges per Sł	nipment
	VR2	Α	В	С
Adenovirus antigen		1	1	
Cytomegalovirus antigen		1	1	
Herpes simplex virus (HSV) antigen	I		1	1
Influenza A antigen	I	1		1
Influenza B antigen			1	
Parainfluenza antigen	I	1		1
Respiratory syncytial virus (RSV) antigen	I	1		1
Varicella-zoster (VZV) antigen			1	1
Educational challenge		1		

### 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	I	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

Microbiology

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Herpes Simplex Virus HC4				
Procedure Program Code Challenges per Shipmen				
HC4				
Herpes simplex virus (HSV) culture		5		

Human Papillomavirus HPV

Analyte

1

Human papillomavirus

**Program Code** 

HPV

**Challenges per Shipment** 

2

### **Program Information**

- Five 0.5-mL lyophilized specimens
- Three shipments per year



### **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

For laboratories using Digene, SurePath, and/or ThinPrep collection media, see page 308.

Analyte	Progra	ım 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

Mpox Molecular MPOX			
Procedure Program Code Challenges per Shipment			
МРОХ			
I	3		
	olecular MPOX Program Code MPOX		

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	l	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.

- 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	I	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.

### SARS-CoV-2 Antigen, 5 Challenge CVAG Analyte Program Code Challenges per Shipment CVAG CVAG 5

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

### 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
- Designed for antigen test
- Two shipments per year

### Program Information

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

### 15

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

RNase P gene.

on page 205.

SAPS-CoV-2 Serology	cove	
SARS-COV-Z Servicey	6003	

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	I	1
Coronavirus/Rhinovirus*		1
Human metapneumovirus		1
Influenza virus*		1
Parainfluenza virus		1
Respiratory syncytial virus (RSV)		1

### **Program Information**

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

\*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

### 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)	I	5
SARS-CoV-2	I	5

This program does not contain human genome material or sequences from human

For multiple instrument reporting options, see the Quality Cross Check program, ID3Q,

- 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	I	3
Influenza B virus	I	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.

HSV, VZV—Molecular ID5				
Analyte Program Code Challenges per Shipmer				
	ID5			
Herpes simplex virus (HSV)		5		
Varicella-zoster virus (VZV)		5		

### 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**

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

### **Program Information**

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

### 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

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HIV Viral Load HV2, HIVG				
Procedure	Progra	m Code	Challenges per Shipment	
	HV2	HIVG		
HIV-RNA viral load			5	
HIV genotyping*			1	

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

### **Program Information**

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

Viral Load VLS, VLS2				
Procedure	Progra	m Code	Challenges per Shipment	
	VLS	VLS2		
BK viral load			2	
CMV viral load	I		2	
EBV viral load	I		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

Program Code				
LN38	LN39	LN45	LN52	Target Ranges
				316.0-8.0M IU/mL
				50.0-5.0M IU/mL
				50.0-280.0M IU/mL
				1.3 log-8.5 log IU/mL
	LN38	Program LN38 LN39 I I I I I I I I I I I I I I I I I I I	Program Code LN38 LN39 LN45 I I I I I I I I I I I I I I I I I I I	Prograw CodeLN38LN39LN45LN52IIIIIIIIIIIIIIIIIIIIIIIIIIII

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 Shi			
	VBDM		
Zika virus		3	

- 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	
Bordetella pertussis/parapertussis			1
Legionella pneumophila/Chlamydia pneumoniae*	I	I	1
Methicillin-resistant Staphylococcus aureus	I	I	1
Molecular typing (bacterial isolates)			1
Mycobacterium tuberculosis			1
Mycoplasma pneumoniae			1
Vancomycin-resistant Enterococcus			1

### **Program Information**

- IDO Seven liquid or swab simulated clinical isolate specimens and two diluents
- IDN Six liquid or swab simulated clinical isolate specimens and two diluents; designed for international laboratories that cannot receive MTB
- Two shipments per year



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

Shipment A: Chlamydia pneumoniae
Shipment B: Legionella pneumophila



Joint Infection Panel JIP			
Analyte	Program Code	Challenges per Shipment	
	JIP		
Anaerococcus prevotii/vaginalis	I	5	
Bacteroides fragilis		5	
Candida albicans	I	5	
Citrobacter spp.	I	5	
Cutibacterium avidum/granulosum	I	5	
Enterobacter cloacae complex	I	5	
Enterococcus faecalis	I	5	
Enterococcus faecium	I	5	
Escherichia coli	I	5	
Finegoldia magna	I	5	
Haemophilus influenzae	I	5	
Kingella kingae	I	5	
Klebsiella aerogenes	I	5	
Klebsiella pneumoniae group	I	5	
Morganella morganii	I	5	
Neisseria gonorrhoeae	I	5	
Parvimonas micra	I	5	
Peptoniphilus spp.	I	5	
Peptostreptococcus anaerobius	I	5	
Proteus spp.	I	5	
Pseudomonas aeruginosa	I	5	
Salmonella spp.	I	5	
Serratia marcescens	I	5	
Staphylococcus aureus	I	5	
Staphylococcus lugdunensis	I	5	
Streptococcus agalactiae	I	5	
Streptococcus pneumoniae	L	5	
Streptococcus pyogenes		5	

- 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-48like, *vanA/B*, and VIM.
- Three shipments per year

### Meningitis/Encephalitis Panel IDME, IDM5

Analyte	Challenges	s per Shipment	
	Program Code		
	IDME	IDM5	
Escherichia coli K1	3	5	
Haemophilus influenzae	3	5	
Listeria monocytogenes	3	5	
Neisseria meningitidis	3	5	
Streptococcus agalactiae	3	5	
Streptococcus pneumoniae	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	
Cryptococcus neoformans/gattii	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

# World-class recognition deserves to be displayed. Image: Contract of the provide the

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### Infectious Disease, Respiratory Panel IDR

Analyte	Program Code	Challenges per Shipment
	IDR	
Adenovirus		5
Bocavirus	I	5
Bordetella (pertussis, parapertussis, bronchiseptica, holmesii)	I	5
Chlamydia pneumoniae		5
Coronavirus	I	5
Human metapneumovirus	I	5
Influenza A	I	5
Influenza B	I	5
Legionella pneumophila	I	5
Mycoplasma pneumoniae		5
Parainfluenza	I	5
Respiratory syncytial virus (RSV)	I	5
Rhinovirus/Enterovirus		5
SARS-CoV-2*		5

### **Program Information**

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

\*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.

Infectious	Disease. Phei	imonia Panel	IDPN

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

- 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
Campylobacter	3	5
Clostridioides (Clostridium) difficile, toxin A/B	3	5
Cryptosporidium	3	5
Cyclospora cayetanensis	3	5
Entamoeba histolytica	3	5
Enteroaggregative E. coli (EAEC)	3	5
Enteropathogenic <i>E. coli</i> (EPEC)	3	5
Enterotoxigenic E. coli (ETEC) LT/ST	3	5
Escherichia coli 0157	3	5
Giardia duodenalis (lamblia)	3	5
Norovirus GI/GII	3	5
Plesiomonas shigelloides	3	5
Rotavirus A	3	5
Salmonella	3	5
Sapovirus	3	5
Shiga-like toxin producing <i>E. coli</i> (STEC) stx1/stx2	3	5
Shigella/Enteroinvasive E. coli (EIEC)	3	5
Shigella	3	5
Vibrio cholerae/Vibrio group	3	5
Yersinia enterocolitica	3	5

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.

- 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

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

(NEW)

- 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	I		1
Helicobacter pylori – 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	I		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
	ттр	
Antibodies to tick-transmitted disease organisms		3

- Three 0.4-mL liquid specimens
- Designed for the detection of antibodies to Borrelia burgdorferi, Babesia microti, and Anaplasma phagocytophilum
- Two shipments per year
# **16** Immunology and Flow Cytometry



# 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	
Flow Cytometry	

## **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			Pr	ogram	Code	e			Challenges per Shipment
	ANA	AS0	CRP	HCG	м	RF/ RFX	RUB/ RUBX	IL	
Antinuclear antibody (ANA)*									5
Antistreptolysin 0 (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	I	5	
Complement C3		5	
Complement C4		5	
Haptoglobin	I	5	
IgA		5	
lgE		5	
lgG	I	5	
lgM	I	5	
Total kappa/lambda ratio		5	

- 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	I			2
Antimitochondrial antibody				2
Antineutrophil cytoplasmic antibody (ANCA, anti-MPO, anti-PR3)	I			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	I	I		2
Ceruloplasmin				2
Haptoglobin				2
Helicobacter pylori, IgG antibody			I	2
lgD				2
lgG				2
IgG subclass proteins				2
Prealbumin (transthyretin)				2
Total kappa/lambda ratio				2
Transferrin				2

#### **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



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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	I	3

- Three 0.6-mL serum specimens
- Two shipments per year

Alpha-2-Macroglobulin A2MG				
Analyte Program Code Challenges per Shipn				
	A2MG			
Alpha-2-macroglobulin	I	3		

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

Antichromatin Antibody ACA				
Analyte Program Code Challenges per Shipme				
	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		

Antimitochondrial M2 Antibody H

**Program Code** 

н

Challenges per Shipment

2

#### **Program Information**

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



#### **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	I	2	
Anti-intrinsic factor antibody	l	2	

#### **Program Information**

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

Analyte

Antimitochondrial M2

antibody (AMA-M2)

Antiphospholipid Antibody ACL			
Analyte	Program Code	Challenges per Shipment	
	ACL		
Anticardiolipin antibody (polyclonal, lgG, lgM, and lgA)	I	3	
Beta-2-glycoprotein I (polyclonal, lgG, lgM, and lgA)	I	3	

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

Antiphosphatidylserine Antibody APS			
Analyte	Program Code	Challenges per Shipment	
	APS		
Anticardiolipin antibody (polyclonal, IgG, IgM, and IgA)	I	3	
Antiphosphatidylserine antibody (IgG, IgM, and IgA)	I	3	
Beta-2-glycoprotein I (polyclonal, IgG, IgM, and IgA)	I	3	
Antiphosphatidylserine/prothrombin antibody (aPS/PT)	I	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-Saccharomyces cerevisiae antibody (lgG and lgA)	I	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)		I	3
Anti-DGP and anti-tTG antibody screen (IgA and IgG)	I		3

- 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
	ССР	
Anti-CCP		2
Rheumatoid factor isotypes (IgA, IgM, and IgG)	I	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	I	3
IL-6	I	3
IL-8		3
IL-10		3
Tumor necrosis factor (TNF)-alpha	I	3
Vascular endothelial growth factor (VEGF)	I	3

- 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
lgE, total		5
Specific allergens		25

- Five 2.0-mL serum specimens
- Includes common allergens from North America as well as less-frequently tested allergens
- Three shipments per year

• Five 0.5-mL liquid serum

• Three shipments per year

**Program Information** 

specimens

#### High-Sensitivity C-Reactive Protein HSCRP Analyte **Program Code Challenges per Shipment** HSCRP 5 High-sensitivity C-reactive protein

## Liver-Kidney Microsomal Antibody (Anti-LKM) LKM

Analyte	Program Code	Challenges per Shipment
	LKM	
Anti-LKM		2

## M. tuberculosis-Stimulated Infection Detection QF

Analyte	Program Code	Challenges per Shipment
	QF	
M. tuberculosis		2

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)	I	1
Anti-Scl-70 (anti-DNA topoisomerase)		1

Two shipments per year

**Program Information** • Two 0.3-mL serum specimens

#### **Program Information**

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

#### **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

- 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	l	2

- 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 Shipmen			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 Ir	nformation
------------	------------

- 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	

- Two 1.5-mL stabilized human CD34+ specimens
- Two shipments per year

## Flow Cytometry, Interpretation Only FL5

Procedure	Program Code	Challenges per Shipment
	FL5	
Flow cytometry, interpretation only of leukemia/lymphoma	I	3

#### 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.

## Flow Cytometry—Post-immunotherapy Analysis FL6

Procedure	Program Code	Challenges per Shipment
	FL6	
Post-immunotherapy flow cytometry analysis	I	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; 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 <u>via email</u> when the activity is available

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

16

## Rely on this reference for a rapidly growing field.

#### 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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Item number: PUB221 Hardcover; 176 pages; 2012

Hematopathology Online Education HPATH/HPATH1		
Program	Program Code	Challenges per Shipment
	HPATH/HPATH1	

	HPATH/HPATH1	
Hematopathology online case review	I	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.

- 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<sup>®</sup> technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> 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	I	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.

## 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	I	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 B lymphoblastic leukemia/ lymphoma measurable (minimal) residual disease
- One online case consisting of gated dot plots
- Two shipments per year

- 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	I	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.

## 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**

- 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

- 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

#### **Program Information**

- Two 0.5-mL whole blood specimens for RBC and WBC analysis
- Two shipments per year

#### 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).

### Fetal Red Cell Detection HBF

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

#### **Program Information**

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

# Rare Flow Antigen ValidationRFAV1, RFAV3AnalyteProgram CodeChallenges per ShipmentCD1aIRFAV3ICD30II1

## Program Information

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

#### Additional Information

- Programs RFAV1 and RFAV3 do not meet the regulatory requirements for proficiency testing.
- These programs meet CAP Accreditation Checklist item FL0.23737, 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.

## ZAP-70/CD49d Analysis by Flow Cytometry ZAP70

Analyte	Program Code	Challenges per Shipment
	ZAP70	
Zeta-chain-associated protein kinase 70	I	3
CD49d	I	3

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



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## 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
Viral Markers	243
Parentage Testing	246

## New Programs



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	I				5
ABO subgroup					5
Rh typing					5
Antibody detection	I				5
Antibody identification					5
Compatibility testing					5
Red blood cell antigen typing	I				1
Electronic crossmatch					3
Educational challenge					1

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

- J Five 3.0-mL 3% red blood cell suspensions; five 3.0-mL corresponding serum specimens; one 3.0mL donor red blood cell suspension
- JXM Five 3.0-mL 3% red blood cell suspensions; five 3.0-mL corresponding serum specimens; one 3.0mL 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		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			I	1		

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

Quality Cross Check-	–Transfusion Me	dicine JATQ
Procedure	Program Code	Challenges per Shipme

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**

- 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



- 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

#### Performance Breakdown

• Overall blood wastage rate (%)

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

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	I	3	
Rh typing		3	

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

# Red Blood Cell Antigen Genotyping RAG

Procedure	Program Code	Challenges per Shipment
	RAG	
RBC blood group genotyping for phenotype prediction		3

## Red Blood Cell Antigen Typing RBCAT

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

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.

#### **Program Information**

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

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

	Antibody Titer ABT, ABT1, ABT2, ABT3					
Procedure			Progra	m Code		Challenges per Shipment
		ABT	ABT1	ABT2	ABT3	
Anti-A titer						1
Anti-B titer						1
Anti-D titer						1

- ABT One 2.0-mL 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)	I	5	
WBC count	I	4	
Dry challenge		2	

WBC counts must be performed using a Nageotte chamber, by fluorescence microscopy, or by flow cytometry.

Direct Antiglobulin Testing DAT			
Procedure	Program Code	Challenges per Shipment	
	DAT		
Direct antiglobulin testing		3	

# Direct Antiglobulin Testing—Automated ADATProcedureProgram CodeChallenges per ShipmentADATADAT3

#### **Program Information**

- Five 1.2-mL suspensions of platelet-rich plasma
- Two 1.0-mL vials leukocytereduced platelet material
- Two 1.0-mL vials leukocytereduced red blood cells
- Three shipments per year

#### **Program Information**

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

- 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 Shipm					
	ELU				
Antibody elution 2					

- Two 2.0-mL 50% red blood cell suspensions
- Two shipments per year

## Fetal Red Cell Detection HBF

Procedure	Program Code	Challenges per Shipment
	HBF	
Kleihauer-Betke and flow cytometry	I	2
Rosette fetal screen		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<sup>®</sup> technology
- Two shipments per year

Platelet Serology PS			
Procedure	Program Code	Challenges per Shipment	
	PS		
Antibody detection	I	3	
Platelet crossmatch		3	
Platelet antibody identification		3	

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

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

## Transfusion Medicine Comprehensive—Competency Assessment TMCA

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

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

## Direct Antiglobulin Test—Competency Assessment TMCAD

Procedure	Program Code	Challenges per Shipment
	TMCAD	
Direct antiglobulin testing	l	2

Program TMCAD does not meet the regulatory requirements for proficiency testing.

## 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.

## Fetal Red Cell Quantitation—Competency Assessment TMCAF

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

Program TMCAF 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

#### Program Information

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

#### **Program Information**

- Two 2.0-mL 50% red blood cell suspensions
- Two shipments per year; order shipments individually or for an entire year

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

#### **Program Information**

- CBT Two 2.5-mL cord blood specimens; designed for assays required for the production of umbilical cord blood stem cell programs
- SCP Two 3.0-mL peripheral blood specimens; designed for laboratories that process and assess the suitability of stem cells
- Two shipments per year



#### Additional Information

- Because these materials are human donor-based, the ship date is subject to change. If this should occur, notification will be provided prior to the scheduled date. In some instances, the program may ship in two installments.
- Due to material stability, no replacements will be available.
- 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.



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

## Bacterial Detection in Platelets BDP, BDP5

Procedure	Program Code		Challenges per Shipment
	BDP	BDP5	
Bacterial culture and detection systems	I		2
Bacterial culture and detection systems			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.

## 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**

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



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#### **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 Exe	ercises 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

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## 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
- Regulatory issues

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## **Viral Markers**

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

Viral Markers—Series 1 VM1			
Analyte	Program Code	Challenges per Shipment	
	VM1		
Anti-HAV (total: IgM and IgG)	I	5	
Anti-HAV (IgG)	I	5	
Anti-HBc (total: IgM and IgG)	I	5	
Anti-HBs	I	5	
Anti-HBs, quantitative		5	
Anti-HCV	I	5	
Anti-HIV-1	I	5	
Anti-HIV-1/2	I	5	
Anti-HIV-2	I	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	I	3
Anti-HTLV-I/II	I	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-Trypanosoma cruzi (Chagas disease)		2	

- 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)	I	5
Anti-HBc (IgM)	I	5

#### **Program Information**

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

Viral Markers—Series 6 VM6/VM6X			
Analyte	Program Code Challenges per Shipmen		
	VM6	VM6X	
Anti-HIV-1/2	I		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	I
Analyte/Procedure	Progra	m Code	Challenges per Shipment
	AHIV	AHIVW	
Anti-HIV-1, Anti-HIV-2, Anti-HIV-1/2			5
Anti-HIV-1, Anti-HIV-1/2, waived methods only		I	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 RHCVW			
Analyte/Procedure	Program Code	Challenges per Shipment	
	RHCVW		
Anti-HCV, waived methods only		3	

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

Nucleic Acid Testing NAT				
Analyte	Program Code Challenges per Shipment			
	NAT			
Babesia	I	1		
HBV	I	5		
HCV		5		
HIV	I	5		
West Nile virus		5		

- 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
  - Introduction Bed Bugs
  - Ticks Kissing Bugs
  - Mites Fleas
  - Lice Myiasis-Causing Fly Larvae
- A durable and water-resistant format to withstand years of benchtop use—6½" x 7"

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## **Parentage Testing**

Parentage/Relationship Test—Filter Paper PARF			
Analyte/Procedure Program Code Challenges per Ship			
	PARF		
DNA testing (PCR)	I	4	
Calculation challenge (dry challenge)	I	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

#### Competency Assessment Hub: Updated functions, same reliability.

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

## **Program Changes**

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

## **Discontinued Programs**

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

## 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.

- MXC Five 0.4-mL plasma specimens; two (approximately 7-8 x 10<sup>6</sup> cells) purified blood lymphocyte specimens
- MXEP Five 0.4-mL plasma specimens in duplicate (0.8 mL total plasma); two (approximately 7-8 x 10<sup>6</sup> 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)	I	5		
Molecular HLA-DR, -DQ, and -DP typing (Class II)		5		

- 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	l	5	

- 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			Progra	am Code	Challenges per Shipment			
		ABT	ABT1	ABT2	ABT3			
Anti-A titer						1		
Anti-B titer						1		
Anti-D titer						1		

- ABT One 2.0-mL 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

#### **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

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

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

18

# 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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Biochemical and Molecular Genetics	. 257
Next-Generation Sequencing	. 266
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# **Program Changes**

Next-Generation Sequencing—Solid Tumor (NGSST) additional	
paired normal specimen	. 266

# 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 Ship		
	CY	СҮВК	
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 <u>via email</u> when the activity is available
- CYBK Prints of metaphase cells; two shipments per year



#### **Program Information**

- CYF Four slides and four dry challenges
- CYI Two 250-µL cell samples suspended in ethanol from two different specimens; participants use FISH to detect chromosome abnormalities
- Two shipments per year



# CAP/ACMG Fluorescence In Situ Hybridization 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 del<sup>1</sup>
- CYF 2025-B:
  - Constitutional disorder (two slides)-HIRA (TUPLE1) Hematologic disorder (two slides)-CBFB<sup>2</sup>
- <sup>1</sup> For this challenge, participants should use the probe set used to interrogate deletion of 20q12 in their laboratories.
- <sup>2</sup> 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.

# CAP/ACMG Fluorescence In Situ Hybridization for Paraffin-Embedded Tissue CYH, CYJ, CYK, CYL, CYALK

Analyte/Procedure		Program Code			Challenges per Shipment		
	СҮН	CYJ	СҮК	CYL	CYALK	Α	В
Breast Cancer							
ERBB2 (HER2) amplification						10	10
Interpretive challenges for <i>ERBB2</i> ( <i>HER2</i> ) amplification						3	3
Brain/Glioma Tissue							
1p/19q						1	1
Solid Tumor							
ROS1 rearrangement						1	
DDIT3 (CHOP) rearrangement							1
Lymphoma Tissue							
CCND1 rearrangement						1	
ALK rearrangement							1
Lung Cancer							
ALK rearrangement						1	
ALK rearrangement dry challenge							1

#### **Program Information**

- CYH Two unstained, fivecore tissue microarray slides equivalent to 10 paraffinembedded 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



#### 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
	СҮНІ	
<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 <u>interpretation only</u> 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.

19



**Program Information** 

• Three online interpretation

challenges; your CAP shipping contact will be notified via email when the

activity is available

CAP/ACMG Constitutional Microarray	CYCGH
------------------------------------	-------

Procedure	Program Code	Challenges per Shipment
	CYCGH	
Cytogenomic microarray analysis for constitutional abnormalities	I	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.

# CAP/ACMG Oncology Microarray CYCMA

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

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

#### **Program Information**

- Two 2.0-µg DNA specimens
- Two shipments per year



#### **Program Information**

- One 2.0-µg DNA specimen
- Two shipments per year

Accing American College of Medical Genetics and Genomics Translating Genes Mro Health

# **Biochemical and Molecular Genetics**

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

CAP/ACMG Biochemical Genetics BGL, BGL1					
Analyte/Procedure	Progra	m Code	Challenges per Shipment		
	BGL BGL1				
Acylcarnitines, qualitative and quantitative	I		1		
Amino acids, qualitative and quantitative	I		1		
Carnitine, qualitative and quantitative			3		
Glycosaminoglycans (mucopolysaccharides), qualitative and quantitative	I		1		
Organic acids, qualitative and quantitative	I		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	I	3
Alloisoleucine	I	3
Arginine		3
Aspartic acid	I	3
Citrulline		3
Cystine	I	3
Glutamic acid	I	3
Glutamine		3
Glycine		3
Histidine	I	3
Homocystine		3
Hydroxyproline		3
Isoleucine	I	3
Leucine		3
Lysine		3
Methionine		3
Ornithine	I	3
Phenylalanine	I	3
Proline	L	3
Serine	I	3
Taurine	I	3
Threonine	I	3
Tryptophan	I	3
Tyrosine	I	3
Valine	I	3

- 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	I	3
Butyrylcarnitine	I	3
Isovalerylcarnitine		3
Glutarylcarnitine		3
Hexanoylcarnitine	I	3
Octanoylcarnitine		3
Dodecanoylcarnitine		3
Hexadecanoylcarnitine	I	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 (SERPINA1) genotyping		3

This program will test for the M, S, and Z alleles.

# CAP/ACMG Apolipoprotein E Genotyping APOE

Analyte/Procedure	Program Code	Challenges per Shipment
	APOE	
Apolipoprotein E (APOE) genotyping		3

This 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



- 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	I	3
BRCA1/2 duplication/deletion analysis	I	3

#### **Program Information**

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



#### Additional Information

Additional Information

with inherited forms of cardiomyopathy.

MYBPC3, MYH7, MYL2, MYL3, TNNI3, TNNT2, and TPM1.

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

# CAP/ACMG Cardiomyopathy Sequencing Panel CMSP

Analyte/Procedure	Program Code	Challenges per Shipment
	CMSP	
Cardiomyopathy sequencing panel		3

sequencing, and whole genome sequencing to detect germline variants associated

• This proficiency challenge is for laboratories performing gene panels, exome

• Participants will be asked to identify variants in the following genes: ACTC1,

- 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 Shipm					
	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	I	3

#### Additional Information

- This proficiency challenge is for laboratories performing gene panels, exome sequencing, and whole genome sequencing to detect germline variants associated with inherited forms of cancer.
- Participants will be asked to identify variants in the following genes: APC, ATM, BRCA1, BRCA2, CDKN2A, CHEK2, MLH1, MSH2, MSH6, PALB2, and PMS2.

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



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

		Pro		Challenges per		
Disease/Gene	MGL1	MGL2	MGL3	MGL4	MGL5	Shipment
Bloom syndrome ( <i>BLM</i> gene)						3
BRCA1/2						3
Canavan (ASPA gene)						3
Connexin 26 (GJB2 gene)						3
Cystic fibrosis (CFTR gene)						3/2(MGL5)
DMD/Becker ( <i>DMD</i> gene)						3
Factor V Leiden ( <i>F5</i> gene)						3
Familial dysautonomia (ELP1 gene)						3
Fanconi anemia complementation group C ( <i>FANCC</i> gene)				I		3
Fragile X (FMR1 gene)						3
Friedreich ataxia (FXN gene)						3
Gaucher (GBA gene)						3
Glycogen storage disease type la (G6 <i>P</i> C gene)				I		3
Hemochromatosis (HFE gene)						3
Hemoglobin S/C						3
Huntington (HTT gene)						3
Methylenetetrahydrofolate reductase ( <i>MTHFR</i> gene) c.665C>T (677C>T) and c.1286A>C (1298A>C)						3
Mucolipidosis IV (MCOLN1 gene)						3
Multiple endocrine neoplasia type 2 ( <i>RET</i> gene)						3
Myotonic dystrophy (DMPK gene)						3
Niemann-Pick type A/B (SMPD1 gene)						3
Plasminogen activator inhibitor (PAI)-1 (SERPINE1 gene)						3
Continued on the next page						

#### **Program Information**

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

ACMG

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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/Cone		Pro	Challenges per			
Disease/Gene	MGL1	MGL2	MGL3	MGL4	MGL5	Shipment
Prader-Willi/Angelman syndrome						3
Prothrombin (F2 gene)						3
RhD						3
Spinal muscular atrophy (SMN1 and SMN2 genes)						3
Spinocerebellar ataxia (ATXN1, ATXN2, ATXN3, CACNA1A, and ATXN7 genes)						3
Tay-Sachs (HEXA gene)						3

#### **Program Information**

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

ACMG

#### 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		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).

- IMD1, IMD2, IMD3 Three 50.0-µg extracted DNA specimens
- Two shipments per year



# CAP/ACMG Molecular Genetics Sequencing SEC, SEC1

Procedure	Program Code		Challenges per Shipment
	SEC	SEC1	
DNA sequencing interpretation challenge			3
DNA sequencing			3

#### Additional Information

- Test your skill at interpreting and reporting DNA sequence variants for inherited diseases using standard nomenclature.
- Receive a summary and discussion of responses, including comments on nomenclature, known or expected outcomes from identified variants, and teaching points about genes/disorders represented.

#### **Program Information**

- SEC DNA sequence electropherogram files with a range of variants, suitable for base-calling and analysis using a range of commercial or public domain software programs; also includes nomenclature/variant references. Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available
- SEC1 Three 30.0-µg extracted DNA specimens; forward and reverse lyophilized primers are provided; two shipments per year

American College of Medic Genetics and Genomics Translating Genes Into Health?

#### Pharmacogenetics PGX, PGX1, PGX3 Analyte/Procedure **Program Code Challenges per Shipment** PGX PGX1 PGX3 CYP2C19 I. 3 3 CYP2C9 I. CYP2B6 3 CYP2D6 3 I. CYP3A4 3 I. CYP3A5 3 I. CYP4F2 3 I. 3 SLC01B1 (rs4149056) L VKORC1 3 IL28B (rs12979860) 3 COMT (rs4680) 3 G6PD 3 3 OPRM1 (rs1799971, c.118A>G) DPYD 3 NUDT15 3 TPMT 3 UGT1A1 3

*UGT1A1* (PGX3 program) tests the laboratory's ability to detect variants in the TATA repeat sequence in the *UGT1A1* promotor (eg, *UGT1A1\*28* with seven TA repeats). The ability to detect variants in other regions of the *UGT1A1* gene is not part of this program.

- PGX, PGX1, PGX3 Three 25.0-µg extracted DNA specimens
- Includes allele detection (genotyping) and/or interpretive challenges
- · Two shipments per year

Analyte/Procedure	Program Code	Challenges per Shipment
	RETT	
Rett ( <i>MECP2</i> ) genotyping	I	3
Rett ( <i>MECP2</i> ) duplication/deletion analysis	I	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
	ТРМ	
Factor II (F2 gene, Prothrombin)	I	3
Factor V Leiden ( <i>F5</i> gene)	I	3

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 RAGProcedureProgram CodeChallenges per ShipmentRBC blood group genotyping for<br/>phenotype prediction13

#### **Program Information**

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



#### **Program Information**

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

# Noninvasive Prenatal Testing NIPT

Analyte	Program Code	Challenges per Shipment
	NIPT	
Cell-free DNA screening for fetal aneuploidy	I	3

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

- Three liquid specimens
- Two shipments per year

# **Next-Generation Sequencing**

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

All laboratories subject to US Clinical Laboratory Improvement Amendments (CLIA) Regulations: Proficiency testing (PT) challenges must NOT be referred to another laboratory for any portion of NGS testing, even if this is how patient testing is routinely performed. For PT challenges, any referral is strictly prohibited by CMS.

Next-Generation Sequencing—Germline NGS			
Procedure	Program Code	Challenges per Shipment	
	NGS		
Next-generation sequencing	l	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-µg 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

Three 1.0-µg gDNA (50 ng/µL)

One 3.0-µg gDNA (50 ng/µl) paired normal specimen
Two shipments per year

• Two shipments per year

**Program Information** 

specimens

# 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

# Next-Generation Sequencing—Hematologic Malignancies NGSHM

Procedure	Program Code	Challenges per Shipment
	NGSHM	
Next-generation sequencing		3

#### **Program Information**

- Three 1.0-µg gDNA (50 ng/µL) specimens
- Two shipments per year

### Additional Information

- This is a methods-based proficiency challenge for laboratories performing targeted next-generation sequencing of genes or mutation hotspots in hematologic malignancies.
- This program includes variants present with a variant allele fraction (VAF) potentially as low as 5%.

# Next-Generation Sequencing Solid Tumor Bioinformatics NGSB1

Procedure	Program Code	Challenges per Shipment
	NGSB1	
Illumina TruSight Tumor 15 Panel	I	1
Illumina TruSight Tumor 170 Panel		1
Illumina TruSight Oncology 500 Panel		1
Thermo Fisher Ion AmpliSeq Cancer Hotspot Panel v2	I	1
Thermo Fisher Oncomine Comprehensive Assay v3	I	1
Thermo Fisher Oncomine Focus Cancer Panel	I	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.

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

# Next-Generation Sequencing Solid Tumor Bioinformatics Hybrid NGSB4

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSB4	
<i>In silic</i> o mutagenized sequencing file(s) containing somatic variants of relevance in solid tumors - platform-agnostic	I	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 <u>unaligned</u> 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 <u>unaligned</u> 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:
  - o Single nucleotide variants
  - o Insertions, deletions, delins, and/or duplications ranging from 1-100bp (1-15bp, 16-50bp, 51-100bp)
  - o 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.

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

# Next-Generation Sequencing Hematologic Malignancies Bioinformatics NGSB3

Procedure	Program Code	Challenges per Shipment
	NGSB3	
Illumina TruSight Myeloid Sequencing Panel	I	1
Thermo Fisher Oncomine Myeloid Assay	I	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.

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

# Next-Generation Sequencing Hematologic Malignancies Bioinformatics Hybrid NGSB5

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSB5	
In silico 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 <u>unaligned</u> 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 <u>unaligned</u> 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:
  - o Single nucleotide variants
  - o 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.

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

# Next-Generation Sequencing Undiagnosed Disorders—Exome NGSE

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSE	
Exome analysis for germline undiagnosed disorders	I	1

#### Additional Information/Minimum Requirements

- This *in silico* based 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 <u>unaligned</u> 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 <u>unaligned</u> 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.

- One exome sequencing data file, originating from your laboratory and provided to the CAP, for *in silico* mutagenesis; the mutagenized exome sequencing data file is to be downloaded and analyzed by your bioinformatics pipeline
- The mutagenized exome sequencing file will be accompanied by a clinical history, relevant laboratory data, and results of ancillary studies, where appropriate.
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available

# Next-Generation Sequencing Undiagnosed Disorders—Trio Analysis NGSET

Analyte/Procedure	Program Code	Challenges per Shipment
	NGSET	
Trio (parents and proband) exome analysis for germline undiagnosed disorders	I	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 <u>unaligned</u> 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 NGSHM programs or additional Coriell/ Genome in a Bottle Consortium sources cannot be used for this program.
- FASTQs or <u>unaligned</u> 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.

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

Copy Number Variant-	—Solid Tumo	r 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.

Tumor Mutational Burden TMB				
Procedure	Program Code Challenges per Shipmen			
	ТМВ			
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

- One 20-µL gDNA (10ng/µL) specimen
- Two snap-frozen cell pellets
- Two shipments per year

- Three 10-µL gDNA (50ng/µL) specimens
- Three 10-µL gDNA (50ng/µL) 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		
MLH1 promoter methylation analysis		3		

Laboratories performing DNA mismatch repair assessment by immunohistochemistry methods should see program MMR on page 299.

#### In Situ Hybridization ISH, ISH2 Analyte/Procedure **Program Code** Challenges per Shipment ISH ISH2 Epstein-Barr virus (EBV) 4 4 Human papillomavirus (HPV) Kappa/Lambda (IGK/IGL) 4 ERBB2 (HER2) gene amplification 10 (brightfield)

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.

# DNA Extraction & Amplification FFPE MH05

Procedure	Program Code	Challenges per Shipment
	MH05	
DNA purification	I	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 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

#### **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

#### **Program Information**

- Three 10.0-micron paraffin sections
- Two shipments per year

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Neoplastic Cellularity NEO				
Procedure Program Code Challenges per Shipme				
	NEO			
Online assessment of percent neoplastic cellularity	I	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<sup>®</sup> technology
- Individual reporting fields for up to five pathologists are available.
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available

Sarcoma Fusion Gene SARC				
Gene	Program Code Challenges per Shipment			
	SARC			
Sarcoma fusion gene*	l	3		

\*See fusion gene listing below.

Laboratories performing FISH for sarcoma translocation refer to the Cytogenetics programs, page 255.

## Sarcoma Fusion Gene Listing

COL1A1::PDGFB, t(17;22)
<i>ETV6::NTRK3,</i> t(12;15)
EWSR1::ATF1, t(12;22)
EWSR1::ERG, t(21;22)
EWSR1::FLI1, t(11;22)
21101(111) 211) ((11,22)

EWSR1::FLI1 or EWSR1::ERG EWSR1::WT1, t(11;22) FUS::DDIT3, t(12;16) PAX3::FOX01, t(2;13) PAX7::FOX01, t(1;13)

## PAX3::FOXO1 or PAX7::FOXO1 SS18::SSX1, t(X;18) SS18::SSX2, t(X;18) SS18::SSX1 or SS18::SSX2

- 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

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%.

Fusion RNA Sequencing RNA				
Analyte/Procedure	Program Code	Challenges per Shipment		
	RNA			
RNA		3		

**Program Information** 

specimens

Three 125-ng DNA (25 ng/mL)

Two shipments per year

# Program Information Three 500-ng RNA (20 ng/

- Three 500-ng RNA (20 ng/µL) specimens
- Two shipments per year

#### 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.

# Solid Tumor—Other BRAF, EGFR, KRAS, KIT

Analyte	Program Code			•	Challenges per Shipment
	BRAF	EGFR	KRAS	KIT	
BRAF					3
EGFR					3
KRAS					3
KIT					3
PDGFRA					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

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Multigene Tumor Panel MTP				
Analyte	Program Code	Challenges per Shipment		
	MTP			
BRAF		3		
EGFR		3		
ERBB2 (HER2)	I	3		
KIT	I	3		
KRAS	I	3		
NRAS	I	3		
PDGFRA	I	3		
РІКЗСА		3		

#### **Program Information**

- Three 2.0-µg gDNA (50 ng/µL) specimens for laboratories performing molecular testing on multiple targets
- Two shipments per year

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.

Glioma GLI			
Analyte	Program Code	Challenges per Shipment	
	GLI		
MGMT		3	
IDH1, IDH2		3	

- Four 2.0-µg gDNA (50 ng/µL) specimens
- One specimen containing four 10.0-micron unstained paraffin section slides and one H&E slide
- For laboratories performing molecular testing using PCR
- Two shipments per year

# Molecular Oncology—Hematologic

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

# Molecular Hematologic Oncology MHO/MHO1, MHO2/MHO3, MHO5

Procedure/Gene	Program Code		Challenges per Shipment	
	MHO/MHO1	MH02/MH03	MH05	
Lymphoid Malignancy Genotyp	ing			^ 
IGH				3
IGH::BCL2 major				3
IGH::BCL2 minor				3
IGH::CCND1				3
IGK				3
TRB				3
TRG				3
Myeloid Malignancy Genotypin	g	1	1	1
BCR::ABL1 p190				3
BCR::ABL1 p210				3
CALR				3
CBFB::MYH11				3
FLT3 ITD				3
FLT3 TKD				3
JAK2 c.1849G>T p.V617F				3
KMT2A-PTD (MLL-PTD)				3
MPL				3
NPM1				3
PML::RARA		L		3
RUNX1::RUNX1T1				3
DNA extraction and amplification from formalin- fixed, paraffin-embedded (FFPE) tissue				1

- 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
- MH03 MH02 specimen in duplicate for additional DNA and RNA testing
- MH05 Three 10.0-micron paraffin sections; extraction and amplification from FFPE tissue will be assessed by a method-based challenge
- Two shipments per year; ships on dry ice (dry ice does not apply to MH05)

IGHV Mutation Analysis IGHV			
Analyte/Procedure	Program Code	Challenges per Shipment	
	IGHV		
IGHV		3	

#### **Program Information**

- Three 20-µg DNA specimens (200 ng/µL)
- 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	
BCR::ABL1 p190				3
BCR::ABL1 p210	I			3
PML::RARA				3

- 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	E	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.

- 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 <u>via email</u> 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

Surgical Pathology	282
General Immunohistochemistry	295
Immunohistochemistry Predictive Markers	297
Immunohistochemistry Prognostic Markers	301
Specialty Anatomic Pathology	302
Cytopathology	306





CAP/NSH HistoQIP Pediatric Program (HQPED)	CAP/NSH HistoQIP Pediatric Program	(HQPED)	288
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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	I	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:
  - o 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.

- 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<sup>™</sup>) 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<sup>®</sup> technology
- Four online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



# Performance Improvement Program in Surgical Pathology PIP/PIP1

Program	Program Code	Challenges per Shipment
	PIP/PIP1	
Surgical pathology case review		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

- 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, curettings, aspirate smears).
- See system requirements on page 12.

- 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 <u>via email</u> 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.

- 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<sup>™</sup>) per year.
- Twelve cases per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



Touch Imprint/Crush Preparation TICP/TICP1			
Procedure	Program Code	Challenges per 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.

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


CAP/NSH HistoQIP HQIP			
Stain/Tissue	Program Code	Challenges p	er Shipment
	HQIP	Α	В
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	I	1	
Special Stain - Reticulin, liver resection		1	
H&E - Stomach resection with gastrointestinal stromal tumor (GIST) and nonneoplastic stomach mucosa	I		1
H&E - Prostate biopsy, containing both adenocarcinoma and nonneoplastic acini	I		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

### • Parti

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

Includes photographs

**Program Information** 

• Two shipments per year



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.

CAP/NSH Pediatric Pro		NEW	
Stain/Tissue	Program Code	Challenges	per Shipment
	HQPED	Α	В
H&E - Colon resection for Hirschsprung disease	I	1	
IHC - Calretinin, colon resection for Hirschsprung disease	I	1	
H&E - Wilms tumor, renal resection	I	1	
IHC - WT1, Wilms tumor, renal resection	I	1	
H&E - Rhabdomyosarcoma	I		1
IHC - Myogenin, positive rhabdomyosarcoma	I		1
H&E - Hepatoblastoma, liver resection	I		1
IHC - B-catenin, hepatoblastoma liver resection	I		1

### **Program Information**

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



CAD/NEH HistoOID Call Plack Dranarations	
CAP/NOR RISLOUIP CELL DIOCK Preparations	

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



20

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.

# CAP/NSH HistoQIP Targeted Therapy HQTAR

Stain/Tissue	Program Code	Challenges per Shipmer	
	HQTAR	Α	В
H&E - Breast ductal carcinoma, core needle biopsy	I	1	
IHC - HER2, breast ductal carcinoma, core needle biopsy	I	1	
H&E - Breast resection, lobular carcinoma	I	1	
IHC - ER, breast resection, lobular carcinoma	I	1	
H&E - Gastroesophageal adenocarcinoma	I		1
IHC - HER2, gastroesophageal adenocarcinoma	I		1
H&E - Gastroesophageal adenocarcinoma			1
IHC - Claudin 18.2, gastroesophageal adenocarcinoma	I		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 Shipmer	
	HQWSI	Α	В
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 laboratoryspecific 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



CAP/NSH HISTOQIP BIODSY Series	HAILRY

Stain/Tissue	Program Code	Challenges p	er Shipment
	HQIPBX	Α	В
H&E - Bladder biopsy		1	
H&E - Cervical biopsy		1	
H&E - Skin punch biopsy		1	
H&E - Stomach biopsy		1	
H&E - Colon biopsy			1
H&E - Endometrial biopsy			1
H&E - Prostate needle biopsy			1
H&E - Breast core biopsy			1

#### **Program Information**

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



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.

20

# CAP/NSH HistoQIP Specialty Series HQBX1, HQBX2, HQBX3, HQBX4

Stain/Tissue		Program Code			Challenges pe Shipment	
	HQBX1	HQBX2	HQBX3	HQBX4	Α	В
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



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

Stain/Tissue	Program Code	Challenges per Shipment	
	HQISH	Α	В
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)	I	1	
ISH - Lambda ISH (Lambda probe, ISH)		1	
H&E - Bone marrow core biopsy			1
ISH - DNA/RNA negative control probe ISH	I		1
ISH - DNA/RNA positive control probe ISH			1
ISH - Kappa ISH (Kappa probe, ISH)			1
ISH - Lambda ISH (Lambda probe, ISH)			1

### **Program Information**

- Participant laboratories 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 ISH slides in all anatomic pathology laboratories that handle specimens undergoing analysis for Kappa and Lambda detection by chromogenic in situ hybridization.

# CAP/NSH HistoQIP IHC Series HQIHC

Stain/Tissue	Program Code	Challenges p	er Shipment
	HQIHC	Α	В
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

### **Program Information**

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



20

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.

# CAP/NSH HistoQIP Central Nervous System IHC HQNEU

Stain/Tissue	Program Code	Challenges p	er Shipment	
	HQNEU	Α	В	
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	

#### **Program Information**

- Participant laboratories may submit up to five 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 laboratories that handle central nervous system gliomas.

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

Otalia (Tiagua	Due due un Oe 1	Ohalland	oh in men i
Stain/lissue	Program Code	Challenges p	er Snipment
	HQNSC	Α	В
H&E - Lung adenocarcinoma		1	
IHC - TTF-1, lung adenocarcinoma		1	
IHC - Napsin A, lung adenocarcinoma	I	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

### **Program Information**

- Participants may submit up to three IHC and two H&E stained coverslipped glass slides (one from each category) per mailing.
- Two shipments per year



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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.

# CAP/NSH HistoQIP Melanoma IHC HQMEL

Stain/Tissue	Program Code	Challenges p	er Shipment
	HQMEL	Α	В
H&E - Melanoma skin biopsy	I	1	
IHC - Melan A/MART-1 melanoma skin biopsy	I	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	I		1
IHC - S100, melanoma skin resection	I		1
IHC - HMB-45, melanoma skin resection			1
H&E - Nevus resection			1
IHC - p16, nevus resection			1

### **Program Information**

- Participant laboratories may submit up to five 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 laboratories that handle skin specimens containing melanoma.

### CAP/NSH HistoQIP Mismatch Repair IHC HQMMR

Stain/Tissue	Program Code	Challenges p	er Shipment
	HQMMR	Α	В
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
		1	5

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



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.

20

# 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 Ship		
МК			
Immunohistochemistry	I	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

### **Program Information**

- One 10-core tissue
   microarray slide
- One shipment per year

Tissue Microarray PM1			
Analyte		Program Code	Challenges per Shipment
		PM1	
CD117			10

For ER/PgR testing, see the PM2 program on page 297.

004471

# Immunohistochemistry Tissue Microarray Series PM5

Analyte	Program Code	Challenges per Shipment
	PM5	
Folate 1 Receptor		10
SS18	I	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

# 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.

# 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**

- One 10-core tissue microarray slide
- Two shipments per year

### **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
	СҮНІ	
<i>ERBB2 (HER2)</i> amplification in breast cancer, interpretation only	I	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 <u>interpretation only</u> 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 <u>via email</u> when the activity is available
- Two shipments per year



20

# 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 Shipme		
HER2		
HER2	I	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.

Gastric HER2 GHER2			
Analyte	Program Code	Challenges per Shipment	
GHER2			
HER2		10	

### **Program Information**

Program Information
Two 10-core tissue microarray slides
Two shipments per year

- One 10-core tissue
   microarray slide
- Two shipments per year

### Additional Information

scheduled shipping date.

- 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.

ER/PgR Immunohistochemistry Tissue Microarray PM2			
Analyte	Program Code	Challenges per Shipment	
	PM2		
Estrogen receptor (ER)		20	
Progesterone receptor (PgR)	l	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

**Program Information** 

- Four 10-core microarray slides, two for ER and two for PgR
- Two shipments per year

# HER2 and ER Immunohistochemistry Interpretation Only HERI

Analyte/Procedure	Program Code	Challenges per Shipment
	HERI	
HER2 online image review	I	10
ER online image review	I	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 <u>interpretation only</u> 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.

### 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.

# 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**

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

### **Program Information**

- One 10-core tissue microarray slide
- Two shipments per year

### **Program Information**

- One 10-core tissue
   microarray slide
- Two shipments per year

20

# BRAF V600E BRAFV

Analyte	Program Code	Challenges per Shipment
	BRAFV	
BRAF V600E		10

The purpose of this program is to assess the laboratory's ability to detect BRAF V600E mutant tumors using mutation-specific immunohistochemistry.

### **Program Information**

- One 10-core tissue
   microarray slide
- Two shipments per year

# CD30 Immunohistochemistry Tissue Microarray CD30

Analyte	Program Code	Challenges per Shipment
	CD30	
CD30		10

This program assesses the laboratory's ability to detect CD30 expression in lymphomas, which has emerged as a key therapeutic target.

# DNA Mismatch Repair MMR

Procedure	Program Code	Challenges per Shipment
	MMR	
MLH1 by IHC		10
MSH2 by IHC	I	10
MSH6 by IHC	I	10
PMS2 by IHC	l	10

If your laboratory performs DNA mismatch repair by molecular methods, see the MSI program on page 274.

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
- Two shipments per year

### **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

### **Program Information**

- One 10-core tissue microarray slide; additional slide provided for H&E
- Two shipments per year

# Navigating Multimodality Biomarker Assessment NMBA/NMB1

Program Name	Program Code	Cases per Mailing
	NMBA/NMB1	
Multimodality biomarker assessment case analysis	E	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.

- 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 <u>via email</u> 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
	МҮСВ	
с-Мус	I	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.

# 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.

# 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.

These immunohistochemistry programs assess instrument analytic and pathologist readout steps.

### **Program Information**

- Two 10-core tissue microarray slides, one for c-Myc and one for Bcl-2
- Two shipments per year

# One 10-core tissue microarray slide

**Program Information** 

Two shipments per year

- One 10-core cell line tissue microarray slide
- Two shipments per year

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



# Digital Slide Program—Dermatopathology DPATH/DPATH1

Program	Program Code	Challenges per Shipment
	DPATH/DPATH1	
Online dermatopathology case review		6

### Additional Information

- 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.

- 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 <u>via email</u> 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 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.

- 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 <u>via email</u> 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, toxicmetabolic, 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.

- NP Online activity providing eight cases and a minisymposium; 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 <u>via email</u> 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				Challenge	es per Year	
	PAPCPT	PAPKPT	PAPMPT	PAPLPT	PAPJPT	Proficiency Testing	Education
Conventional							
SurePath							
ThinPrep						10	10
Individual Participant Response Form	APAPCPT	APAPKPT	APAPMPT	APAPLPT	APAPJPT		

Programs PAPCPT, PAPKPT, PAPMPT, PAPLPT, and PAPJPT 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
    - o 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	I					
SurePath						
ThinPrep						10
Individual Participant Response Form	APAPCE	APAPKE	APAPME	APAPLE	APAPJE	10

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
    - o A mailing ships in February
    - B mailing ships in August
    - Series 2
      - A mailing ships in May
      - o 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 <u>via email</u> 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.

- 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	I		I	I	5
High-risk HPV genotyping (optional)			I	B	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<sup>®</sup> Specimen Transport Medium<sup>™</sup> (STM)
- CHPVM ThinPrep PreservCyt<sup>®</sup> transport medium
- CHPVK SurePath<sup>™</sup> 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.

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Touch Im	orint/Crush Pr	eparation	TICP/TICP1
		oparation	

Procedure	Program Code	Challenges per Shipment
	TICP/TICP1	
Online slide and image program in rapid assessment case review	I	4

### Additional Information

- The TICP program 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.

- 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 <u>via email</u> 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	I	5
Nongynecologic cytopathology case review – online	I	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 <u>via email</u> 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.

- 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.

- 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 (IHHC).
- Online whole slide images powered by DigitalScope technology
- Two online activities per year; your CAP shipping contact will be notified <u>via email</u> when the activity is available



Procedure	Program Code	Challenges per Shipment
	FNAG/FNAG1	
Fine-needle aspiration glass slide case review	I	5

### Additional Information

- The Fine-Needle Aspiration Glass Slide 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 <u>via email</u> 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 (IHHC).
- 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	l	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<sup>™</sup>) 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 <u>via email</u> when the activity is available



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

#### 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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Forensic	TOXICOLO2	7. UTIMINAUSLICS	

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) 7-aminoclonazepam 7-aminoflunitrazepam 7-hydroxymitragynine Acetaminophen Alpha-hydroxyalprazolam Alprazolam Amitriptyline Amphetamine Aripiprazole Atenolol Atropine Benzoylecgonine Brompheniramine Buprenorphine Bupropion Butalbital Carbamazepine Carbamazepine-10. 11-epoxide Carisoprodol Chlordiazepoxide Chlorpheniramine Citalopram Clomipramine Clonazepam Clozapine Cocaethylene Cocaine Codeine Cyclobenzaprine\* Delta-9-THC Delta-9-THC-COOH Demoxepam Desipramine

Desmethylsertraline Dextromethorphan Diazepam Dihydrocodeine Diltiazem Diphenhydramine Doxepin Doxylamine Duloxetine Ecgonine ethyl ester Ecgonine methyl ester Ephedrine Fentanyl\* Flunitrazepam Fluoxetine Gabapentin Gamma-hydroxybutyrate (GHB) Hydrocodone Hydromorphone Hydroxybupropion Hydroxyzine Ibuprofen Imipramine Ketamine Lamotrigine Levetiracetam Lidocaine Lorazepam Lysergic acid diethylamide (LSD) Meperidine\* Mephedrone Meprobamate Methadone Methadone metabolite (EDDP) Methamphetamine

Methylenedioxyamphetamine (MĎA) Methylenedioxymethamphetamine (MDMA) Methylenedioxypyrovalerone (MDPV) Methylphenidate Metoprolol Midazolam Mirtazapine Mitragynine (Kratom) Morphine\* N-desmethyltramadol Naproxen Norbuprenorphine Norchlordiazepoxide Norclomipramine Norcodeine Norcyclobenzaprine Nordiazepam Nordoxepin Norfentanyl Norfluoxetine Norketamine Normeperidine Normirtazapine Noroxycodone Norpropoxyphene Norsertraline Nortrimipramine Nortriptyline Norverapamil O-desmethyltramadol Olanzapine Oxazepam Oxycodone

Oxymorphone Paroxetine Pentobarbital Phencyclidine Phenethylamine Pheniramine Phenobarbital Phentermine Phenylephrine Phenytoin Pregabalin Propoxyphene Propranolol Pseudoephedrine Quetiapine Quinine Ranitidine Ritalinic acid Salicylate Sertraline Strychnine Tapentadol Temazepam Topiramate Tramadol Trazodone Trimipramine Valproic acid Venlafaxine Verapamil Zolpidem

\*and/or metabolite(s)

21

Desmethylclomipramine

# 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	86	17-hydroxyprogesterone	Х	Υ/ΥΥ	Sex Hormones	84
			Vitamins		17-ketosteroids		Ν	Urine Chemistry–Special	69
1,5-anhydroglucitol 3-methoxytyramine		AG N	1,5-Anhydroglucitol Urine Chemistry–Special	71 69	25-OH vitamin D, total	Х	ABVD	Accuracy-Based Vitamin D	114
4-hvdroxytriazolam		DEC	Drug-Facilitated Crime	111			I N40	Vitamin D CVI	134
5-hydroxyindoleacetic		N	Urine Chemistry-Special	69		X	VITD	25-OH Vitamin D	84
acid, qualitative					50:50 mixing study, aPTT		CGE/CGEX	Coagulation. Extended	167
5-hydroxyindoleacetic	Х	N	Urine Chemistry–Special	69			CGS1	Coag Special, Series 1	168
acid, quantitative					50:50 mixing study. PT		CGE/CGEX	Coagulation. Extended	167
6-acetylmorphine (6-AM)		DMPM	Drug Monitoring for Pain	110			CGS1	Coag Special, Series 1	168
			Management		ABO grouping	Х	J, JXM, J1	Transfusion Medicine	232
		FTC	Forensic Toxicology, Criminalistics	107		Х	JAT, JATXM	Transfusion Medicine, Automated	233
		OFD	Oral Fluid for Drugs of Abuse	103			JATE1	Transfusion Medicine, Automated. Educational	233
		T	Toxicology	98	I		JATQ	QCC. Transfusion	48
		UDC	Forensic Urine Drug	102				Medicine	
			Urine Drug Screen	100			TMCA	Transfusion Medicine,	239
		UT	Urine Toxicology	98				Competency Assessment	
7-aminoclonazepam		DFC	Drug-Facilitated Crime	111	ABO subgroup typing		ABOSG	ABO Subgroup Typing	235
		DMPM	Drug Monitoring for Pain	110			J. JXM	Transfusion Medicine	232
			Management				JAT. JATXM	Transfusion Medicine.	233
		FTC	Forensic Toxicology, Criminalistics	107	Asstaninashan	V	07/07//	Automated	
		Т	Toxicology	98	Acetaminophen	X	CZ2X,Z	Chemistry and I Divi	54-56
		UT	Urine Toxicology	98			CZQ	QCC, Chemistry and	37
7-aminoflunitrazepam		DFC	Drug-Facilitated Crime	111				TDM	
		FTC	Forensic Toxicology, Criminalistics	107			FTC	Forensic Toxicology, Criminalistics	107
		Т	Toxicology	98			LN3	TDM CVL	125
		UT	Urine Toxicology	98			SDS	Serum Drug Screen	104
7-hydroxymitragynine		FTC	Forensic Toxicology,	107			Т	Toxicology	98
			Criminalistics				UDS, UDS6	Urine Drug Screen	100
		Т	Toxicology	98			UT	Urine Toxicology	98
		UT	Urine Toxicology	98	Acetone	Х	AL1	Whole Blood Alcohol/	104
11-deoxycortisol		Y/YY	Sex Hormones	84				Volatiles	
11-hydroxy-THC		THCB	Blood Cannabinoids	109		Х	AL2	Serum Alcohol/Volatiles	104
17-hydroxycorticosteroids		N	Urine Chemistry–Special	69			SDS	Serum Drug Screen	104

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Acetone (cont.)		VF	Vitreous Fluid, Postmortem	104	Adenovirus (cont.)		ID2	Nucleic Acid Amp, Respiratory	204
Acid phosphatase		C3/C3X, CZ/CZX/	Chemistry and TDM	54-56		Х	IDPN	Infectious Disease, Pneumonia Panel	211
		CZ2X CZQ	QCC, Chemistry and	37		Х	IDR	Infectious Disease, Respiratory Panel	210
			TDM				VLS2	Viral Load	206
Acid-fast smear	X	E	Mycobacteriology	193		Х	VR1	Virology Culture	200
	X	E1	Mycobacteriology, Ltd	193		Х	VR2	Viral Antigen by DFA	200
Acinetobacter calcoaceticus- baumannii complex	X	IDPN	Infectious Disease, Pneumonia Panel	211		X	VR4	Viral Antigen by EIA and Latex	200
Activated clotting time	X	CT CT1	ACT	170	Adenovirus 40/41		SP, SPN	Stool Pathogen	189
Activated clotting time		CT2, CT3, CT5		170	Adrenocorticotropic hormone (ACTH)	X	TM/TMX	Tumor Markers	89
		CTQ, CT1Q, CT2Q, CT30, CT50	QCC, ACT	46	Alanine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
		POC14, POC15, POC16	Competency Activated Clotting Time	52	Alanine aminotransferase (ALT/SGPT)	Х	C1,C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54-56
Activated partial thromboplastin time		APXBN	Anticoagulant Monitoring, Apixaban	170			CZQ	QCC, Chemistry and TDM	37
	X	CGB	Basic Coagulation	166			IFS	Interfering Substances	138
		CGE/CGEX	Coagulation, Extended	167			LN2	Chemistry, Lipid,	124
	X	CGL	Coagulation, Limited	166				Chamietre Linid	10/
		CGLQ	QCC, Coagulation, Limited	46			LINZBV	Enzyme CVL – all Beckman (except AU),	124
		CGST	Coag Special, Series 1	168	Allerente		400	Vitros	445
		000	Coag Special, Series 3	168	Albumin		ABS	Accuracy-Based	115
		CGS4	Coag Special, Series 4	168				Estradiol	
			Anticoagulant Monitoring, Dabigatran	170		Х	C1,C3/C3X, CZ/CZX/	Chemistry and TDM	54-56
		FNPX	Monitoring, Fondaparinux	170			CZ2X CZQ	QCC, Chemistry and	37
		RVRN	Anticoagulant	170				TDM	
			Monitoring, Rivaroxaban				FLD	Body Fluid	72
Activated protein C resistance		CGE/CGEX	Coagulation, Extended	167			FLDQ	QCC, Body Fluid Chemistry	38
		CGS2	Coag Special, Series 2	168			IFS	Interfering Substances	138
Active vitamin $B_{12}$		MMA	MMA and Active Vitamin B <sub>12</sub>	82			LN2	Chemistry, Lipid, Enzyme CVL	124
Acylcarnitine		BGL	Biochemical Genetics	257			LN2BV	Chemistry, Lipid,	124
Acylcarnitine quantitation		BGL4	Acylcarnitine Quantitation for Inherited Metabolic	259				Enzyme CVL – all Beckman (except AU), Vitros	
			Disorders				SPE	Protein Electrophoresis	76
ADAMTS13 Adenovirus		CGS7 GIP	ADAMTS13 Gastrointestinal Panel	168 212	Albumin, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
	X	GIP5	Gastrointestinal Panel	212	Albumin, urine		ABU	Accuracy-Based Urine	115
			5 Challenge				LN20	Urine Albumin	129
		GIPN	Gastrointestinal Panel,	213		Х	U	Urine Chemistry–General	68
			Global		Albumin:creatinine ratio		ABU	Accuracy-Based Urine	115

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Albumin:creatinine ratio (cont.)		LN20	Urine Albumin CVL	129	Alpha-hydroxyalprazolam (cont.)		т	Toxicology	98
		U UMC	Urine Chemistry–General Urine Albumin	68 160			UDC	Forensic Urine Drug Testing, Confirmatory	102
			Creatinine				UT	Urine Toxicology	98
Alcohol, serum	Х	AL2	Serum Alcohol/Volatiles	104	Alpha-thalassemia		HGM	Hemoglobinopathies,	261
		LN11	Serum Ethanol CVL	127				Molecular Methods	
Alcohol, whole blood	Х	AL1	Whole Blood Alcohol/ Volatiles	104	Alprazolam		DMPM	Drug Monitoring for Pain Management	110
Aldolase		ADL	Aldolase	71			FTC	Forensic Toxicology,	107
Aldosterone, serum	Х	RAP	Renin and Aldosterone	89				Criminalistics	
Aldosterone, urine		Ν	Urine Chemistry–Special	69			OFD	Oral Fluid for Drugs of	103
Alkaline phosphatase	Х	C1,C3/C3X,	Chemistry and TDM	54–56			т	Toxicology	98
(ALP)		CZ/CZX/					UT		98
		0228	OCC Chamiotry and	27	Aluminum	x	R	Trace Metals	78
		CZQ	TDM	37	Aluminum urine	~	тми	Trace Metals Urine	106
		FLD2	Body Fluid Chemistry 2	73	Aluminum, whole blood		TMWB	Trace Metals, Whole	106
		IFS	Interfering Substances	138	Atuminani, whole blood		TIVITUD	Blood	100
		LN2	Chemistry, Lipid, Enzyme CVL	124	Amikacin	Х	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54-56
		LN2BV	Chemistry, Lipid, Enzyme CVL – all	124			CZQ	QCC, Chemistry and TDM	37
			Beckman (except AU),				LN3	TDM CVL	125
			Vitros		Amino acids, qualitative	Х	BGL	Biochemical Genetics	257
Allergens (specific)		SE	Diagnostic Allergy	221	Amino acids, quantitative		BGL	<b>Biochemical Genetics</b>	257
Alloisoleucine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258			BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258
Alpha-1 antitrypsin	Х	IG/IGX	Immunology, General	216	Amitriptyline		DFC	Drug-Facilitated Crime	111
Alpha-1 antitrypsin	Х	LN7 AAT	Immunology CVL Alpha-1 Antitrypsin	126 259			FTC	Forensic Toxicology, Criminalistics	107
genotyping (SERPINA1)			Genotyping				Т	Toxicology	98
gene							UT	Urine Toxicology	98
Alpha-1 globulin		SPE	Protein Electrophoresis	76		Х	ZT	TDM, Special	59
Alpha-2 globulin		SPE	Protein Electrophoresis	76	Ammonia		C3/C3X,	Chemistry and TDM	54-56
Alpha-2-antiplasmin		CGE/CGEX	Coagulation, Extended	167			CZ/CZX/		
Alpha-2-macroglobulin		A2MG	Alpha-2-Macroglobulin	218			CZ2X		
Alpha-fetoprotein (AFP), amniotic fluid	Х	FP/FPX	Maternal Screen	87			CZQ	QCC, Chemistry and TDM	37
Alpha-fetoprotein (AFP),	Х	FP/FPX	Maternal Screen	87			LN32	Ammonia CVL	132
serum					Amniotic fluid leakage		AFL	Amniotic Fluid Leakage	154
	Х	K/KK	Ligand–General	82	(nitrazine)				
		LN5	Ligand CVL	125	Amobarbital		DFC	Drug-Facilitated Crime	111
		LN5S	Ligand CVL – all	125	Amphetamine		DFC	Drug-Facilitated Crime	111
			Centaur, CP, and XP)				DMPM	Drug Monitoring for Pain Management	110
Alpha-hydroxyalprazolam		DFC	Drug-Facilitated Crime	111			FTC	Forensic Toxicology, Criminalistics	107
		DMPM	Drug Monitoring for Pain Management	110			OFD	Oral Fluid for Drugs of Abuse	103
		FTC	Forensic Toxicology, Criminalistics	107			Т	Toxicology	98

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Amphetamine (cont.)		UDC	Forensic Urine Drug Testing, Confirmatory	102	Antibody detection (cont.)		JATE1	Transfusion Medicine, Automated, Educational	233
		UDS, UDS6 UT	Urine Drug Screen Urine Toxicology	100 98			JATQ	QCC, Transfusion Medicine	48
		UTCO	Urine Toxicology	137		Х	PS	Platelet Serology	238
Amphetamine group		DMPM	Carryover Drug Monitoring for Pain	110			TMCA	Transfusion Medicine, Competency	239
		OFD	Management Oral Fluid for Drugs of Abuse	103	Antibody detection/ identification (HLA)	Х	MXC, MXEP	HLA Analysis, Class I/II	248
		т	Toxicology	98	Antibody identification		ETME1	Expanded Transfusion	242
		UDS, UDS6	Urine Drug Screen	100		V		Medicine Exercises	222
		UT	Urine Toxicology	98		X	J, JXIVI, JAI, JATXM	Iransfusion Medicine	232-
Amylase	X	C1,C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56			JATE1	Transfusion Medicine, Automated, Educational	233
		CZQ	QCC, Chemistry and TDM	37			TMCA	Transfusion Medicine, Competency Assessment	239
		FLD FLDQ	Body Fluid QCC, Body Fluid	72 38	Antibody screen (HLA)		MXC, MXEP, MXS	HLA Analysis, Class I/II	248
		IFS	Chemistry Interfering Substances	138	Antibody titer		ABT, ABT1,	Antibody Titer	236
		LN2	Chemistry, Lipid, Enzyme CVL	124	Antibody titer, automated		AABT, AABT1.	Antibody Titer, Automated	237
		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except ALI)	124			AABT2, AABT3		
		04.00/001/	Vitros	<u> </u>	Anticardiolipin IgA, qualitative		ACL, APS	Antiphospholipid Antibody	219
Amylase, pancreatic	X	C1, C3/C3X, CZ/CZX/ CZ2X	Chemistry and IDM	54-56	Anticardiolipin IgA, quantitative		ACL, APS	Antiphospholipid Antibody	219
		CZQ	QCC, Chemistry and TDM	37	Anticardiolipin IgG, IgM, polyclonal; qualitative	Х	ACL, APS	Antiphospholipid Antibody	219
Amylase, urine		LN6	Urine Chemistry CVL	126	Anticardiolipin IgG, IgM, polyclonal; quantitative		ACL, APS	Antiphospholipid Antibody	219
Angerococcus prevotii/	X	U JIP	Urine Chemistry–General Joint Infection Panel	68 208	Anti-CCP		CCP	Cyclic Citrullinated	220
vaginalis					Anticentromere antibody		<b>S</b> 2	Immunology Special	217
Anaplasma		TTD	Antibody Detection	214	Antichromatin antibody		ACA	Antichromatin Antibody	218
phagocytophilum			of Tick-Transmitted Diseases		Anti-CMV, IgG, IgM	Х	VR3	Infectious Disease Serology	214
Anaplastic lymphoma kinase	X	PM6	Anaplastic Lymphoma Kinase IHC	298	Anti-CMV, total	Х	VM3	Viral Markers–Series 3	243
Androstenedione	Х	Y/YY	Sex Hormones	84		Х	VR3	Infectious Disease	214
Angiotensin converting enzyme		ACE	Angiotensin Converting Enzyme	71	Anti-D titer		AABT,	Serology Antibody Titer,	237
Anti ADAMTS13 IgG		CGS7	ADAMTS13	168			AABIZ	Automated	200
Anti-A titer		AABT, AABT1	Antibody Titer, Automated	237	Anti-DNA (ds) antibody,	Х	АВТ, АВТ2 S2, S4	Immunology, Special	236
Anti-B titer		ABT, ABT1 AABT3	Antibody Titer Antibody Titer,	236 237	Anti-DNA (ds) antibody,		S2, S4	Immunology, Special	217
		ABT3	Automated Antibody Titer	236	Anti-DNA topoisomerase		RDS	Rheumatic Disease	221
Antibody detection	X	J, JXM, JAT, JATXM	Transfusion Medicine	232- 233	(ANTI-SCI-/U)			Special Serologies	<u> </u>

Analyte/Procedure	LAP ENR	Program Code	Description	Page	Analyte/Procedure	LAP ENR	Program Code	Description	Page
Antideamidated gliadin peptide antibody screen (IgA, IgG)		CES/CESX	Celiac Serology	220	Antiglomerular basement membrane, qualitative	Х	S2	Immunology, Special	217
Antideamidated gliadin peptide antibody, IgA; qualitative	X	CES/CESX	Celiac Serology	220	Antiglomerular basement membrane, quantitative		S2	Immunology, Special	217
Antideamidated gliadin		CES/CESX	Celiac Serology	220	Anti-HAV, IgG	Х	VM1	Viral Markers–Series 1	243
peptide antibody, IgG;					Anti-HAV, IgM	Х	VM5	Viral Markers–Series 5	244
Antidoomidated gliedin			Colice Serology	220	Anti-HAV, total		VM1	Viral Markers–Series 1	243
peptide antibody. IgA.		CES/CESA	Cellac Serology	220	Anti-HBc, IgM	Х	VM5	Viral Markers–Series 5	244
lgG; quantitative					Anti-HBc, total	Х	VM1	Viral Markers–Series 1	243
Antideamidated		CES/CESX	Celiac Serology	220	Anti-Hbe	X	VM2	Viral Markers–Series 2	243
gliadin peptide/tissue					Anti-HBs, qualitative	X	VM1	Viral Markers–Series 1	243
transglutaminase					Anti-HBs, quantitative		VM1	Viral Markers–Series 1	243
Antiendomysial antibody		CES/CESX	Celiac Serology	220	Anti-HCV	X	RHCVW	Anti-HCV, Rapid Methods, Waived	244
IgA, IgG; qualitative		0=0/0=01/				Х	VM1	Viral Markers–Series 1	243
Antiendomysial antibody IgA, IgG; quantitative		CES/CESX	Celiac Serology	220	Antihistidyl t-RNA synthetase (Jo-1)		RDS	Rheumatic Disease Special Serologies	221
Antifilamentous actin		FCN	Antifilamentous Actin	218	Antihistone antibody		AHT	Antihistone Antibody	218
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			Iuxicology	98	CD45	Х	FL, FL1	Lymphocyte Subset	224
Carbamazepine, free		CZ/CZX/	Chemistry and TDM	98 54–56			FI 4	Immunophenotyping	224
		CZ2X, Z					SCP	Stem Cell Processing	240
		CZQ	QCC, Chemistry and TDM	37	CD49d		ZAP70	ZAP-70 Analysis by Flow	230
Carbapenem-resistant		CRO	Carbapenem-Resistant	186			DM1		205
organisms		005	Organisms	100				Rody Eluid	295
Carbapenemase resistance mechanism detection		CRE	Detection	186			FLDQ	QCC, Body Fluid	38
Carbon dioxide (CO.)	x	C1.C3/C3X	Chemistry and TDM	54-56		x	K/KK	Ligand–General	82
		C4, CZ/		01 00			LN5	Ligand CVL	125
		LN2	Chemistry, Lipid, Enzyme CVL	124			LN5S	Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP)	125
		LN2BV	Chemistry, Lipid,	124				and Atellica IM	
			Beckman (except AU), Vitros		Cell-free DNA		CFDNA NIPT	Cell-Free Tumor DNA Noninvasive Prenatal	276 88
Carboxyhemoglobin	X	50	Blood Oximetry	95				Testing	
		500	QCC. Blood Oximetry	41	Ceruloplasmin	X	S2, S4	Immunology, Special	217
Cardiomvopathv		CMSP	Cardiomvopathy	260	CFU-GM	<u> </u>	CRI	Cord Blood Testing	240
sequencing panel			Sequencing Panel				SCP	Stem Cell Processing	240

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			Complement				C4, CZ/		
Chlamydia trachomatis	Х	HC3	C. trachomatis by EIA	187				000.05	07
	Х	HC6, HC6X	C. trachomatis/GC by Nucleic Acid Amp	191			UZQ	TDM	37
	Х	HC7	C. trachomatis/GC DNA	191			FLD	Body Fluid	72
	v	CTIM	by NAA Sovuelly Transmitted	101			FLDQ	QCC, Body Fluid Chemistry	38
	^	31111	Infection Detection.	191		X	LCW	Chemistry-Ltd. Waived	64
			Molecular				LN2	Chemistry, Lipid,	124
		VR1	Virology Culture	200				Enzyme CVL	
Chlamydia pneumoniae		IDN, IDO	Nucleic Acid Amp, Organisms	207			LN2BV	Chemistry, Lipid, Enzyme CVL – all	124
	Х	IDPN	Infectious Disease, Pneumonia Panel	211				Beckman (except AU), Vitros	
	Х	IDR	Infectious Disease,	210	Chromium	Х	R	Trace Metals	78
			Respiratory Panel		Chromium, urine		TMU	Trace Metals, Urine	106
Chlordiazepoxide		FTC	Forensic Toxicology, Criminalistics	107	Chromium, whole blood		TMWB	Trace Metals, Whole Blood	106
		Т	Toxicology	98	Chromosomal	X	CY, CYBK	Cytogenetics	254
		UT	Urine Toxicology	98	abnormalities		DEO		
Chloride	Х	AQ, AQH, AQIS	Critical Care Blood Gas	92–93			DFC FTC	Forensic Toxicology.	107
		AQQ, AQHQ,	QCC, Critical Care Blood	42				Criminalistics	
		AQSQ	Gas Series				Т	Toxicology	98
	Х	C1, C3/C3X,	Chemistry and TDM	54–56			UT	Urine Toxicology	98
		C4,CZ/ CZX/CZ2X			Citrate		KSA	Kidney Stone Risk Assessment	69
		CZQ	QCC, Chemistry and	37	Citrobacter spp.		JIP	Joint Infection Panel	208
		FLD2	Body Fluid Chemistry 2	73	Citrulline, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic	258
		IFS	Interfering Substances	138				Disorders	
		LN13C	Blood Gas CVL	128	CK isoenzymes	X	CRTI, HCRTI	Cardiac Markers	60
		LN2	Chemistry, Lipid, Enzyme CVL	124	CK-MB (immunochemical)	X	CRT, CRTI, HCRT, HCRTI	Cardiac Markers	60
		LINZDV	Enzyme CVL – all	124			CRTQ	QCC. Cardiac Markers	38
			Beckman (except AU), Vitros				HCRQ	QCC, High-Sensitivity Cardiac Markers	39
		P0C10,	POC Competency Blood	51			IFS	Interfering Substances	138
Chlorido aveat	v	POC11	Gases	70			LN2	Chemistry, Lipid,	124
Chlorido urino	X	3WVZ, SW4	Sweat Analysis Series	126				Enzyme CVL	40 /
chionae, unne	v		Urine Chemistry GVL	68			LN2BV	Chemistry, Lipid,	124
Chloride, vitreous fluid	^	VF	Vitreous Fluid,	104				Beckman (except AU), Vitros	
Chlorphoniramina		DEC	Pustinorieni	111		Х	PCARM/	Point-of-Care Cardiac	64
		FTC	Forensic Toxicology,	107			PCARMX	Markers	
		т	Criminalistics	08			POC12	POC Cardiac Markers Competency	51
		UT		98	CK2 (MB)		IFS	Interfering Substances	138
Cholesterol		ABL	Accuracy-Based Lipids	114			LN2	Chemistry, Lipid, Enzyme CVL	124

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CK2 (MB) (cont.)		LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124	c-Myc/Bcl-2 immunohistochemistry tumor markers CO <sub>2</sub> (see Carbon dioxide)		МҮСВ	c-Myc/Bcl-2 Immunohistochemistry TMA	301
Clinical pathology		CPIP/CPIP1	Quality Management,	14	Cobalt		TMU	Trace Metals, Urine	106
improvement program			Education		Cobalt, whole blood		TMWB	Trace Metals, Whole	106
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Clomipramine		FTC	Forensic Toxicology, Criminalistics	107	Cocaethylene		FTC	Forensic Toxicology, Criminalistics	107
		Т	Toxicology	98			Т	Toxicology	98
		UT	Urine Toxicology	98			UT	Urine Toxicology	98
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		Т	Toxicology	98			OFD	Oral Fluid for Drugs of	103
		UT	Urine Toxicology	98				Abuse	
Clonidine		DFC	Drug-Facilitated Crime	111			Т	Toxicology	98
Clostridioides		CDF2	Clostridioides	187			UDS, UDS6	Urine Drug Screen	100
(Clostridium) difficile			(Clostridium) difficile				UT	Urine Toxicology	98
antigen	v	ODEE	Cleatridiaidea	107	Codeine		DFC	Drug-Facilitated Crime	111
		CDF5	(Clostridium) difficile	187	l		DMPM	Drug Monitoring for Pain Management	110
	X	D	Bacteriology-Antigen	177			FTC	Forensic Toxicology, Criminalistics	107
		SP, SPN	Stool Pathogens-Rapid	189			OFD	Oral Fluid for Drugs of Abuse	103
Clostridioides		CDE2	Clostridioides	187			Т	Toxicology	98
(Clostridium) difficile toxin		0012	(Clostridium) difficile Detection	107			UDC	Forensic Urine Drug Testing, Confirmatory	102
	X	CDF5	Clostridioides	187			UT	Urine Toxicology	98
			(Clostridium) difficile Detection		Compatibility testing	X	J, JXM, JAT, JATXM	Transfusion Medicine	232- 233
	X	D	Bacteriology–Antigen Detection	177			JATE1	Transfusion Medicine, Automated, Educational	233
		GIP	Gastrointestinal Panel	212			TMCA	Transfusion Medicine,	239
	X	GIP5	Gastrointestinal Panel, 5 Challenge	212				Competency Assessment	
		GIPN	Gastrointestinal Panel,	213	Complement C3	X	IG/IGX	Immunology, General	216
			Global				LN7	Immunology CVL	126
		SP, SPN	Stool Pathogens–Rapid	189	Complement C4	X	IG/IGX	Immunology, General	216
<u></u>	_		and Molecular				LN7	Immunology CVL	126
Clozapine		DFC	Drug-Facilitated Crime	111	Complexed PSA		K/KK	Ligand–General	82
		FIC	Forensic loxicology,	107			PGX1	Pharmacogenetics	264
		т	Tovicology	08	Conductivity, sweat	X	SW2, SW4	Sweat Analysis Series	/9
	_	IIT		90	Connexin 26 (GJB2 gene)	X	MGL3	wolecular Genetics	262-
		7F		59	Copper	Y	R	Trace Metals	78
			Monitoring, Extended	00	Conner urine		TMU	Trace Metale Urine	106
CMV (see Cytomegalovirus)			<u>,</u>		Copper, whole blood		TMWB	Trace Metals, Whole Blood	106
					Coproporphyrins	Y	N	Urine Chemistry-Special	60

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	Х	IDPN	Infectious Disease, Pneumonia Panel	211		Х	C1, C3/C3X, C4, CZ/	Chemistry and TDM	54-56
	Х	IDR	Infectious Disease, Respiratory Panel	210			CZX/CZ2X	QCC, Chemistry and	37
Cortisol		ABS	Accuracy-Based	115			FLD	TDM Body Fluid	72
			Estradiol				FLDQ	QCC, Body Fluid	38
	Х	C1, C3/C3X, CZ/CZX/	Chemistry and TDM	54–56			IFS	Chemistry Interfering Substances	138
		CZ2X	OCC Chamistry and	27			LN2	Chemistry, Lipid,	124
			TDM	37			LN24	Enzyme CVL Creatinine Accuracy	131
	Х	K/KK	Ligand–General	82				Cal CVL	
		LN5S	Ligand CVL Ligand CVL – all Siemens ADVIA (Centaur, CP, and XP)	125 125			LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
			and Atellica IM				SCO	Serum Carryover	137
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Cortisol, urinary free	X		Urine Chemistry-Special	69		Х	CD	Cadmium	105
Cotinine		NIA	Alkaloids	105			DAI	Urine Drug Adulterant/ Integrity Testing	101
		OFD	Oral Fluid for Drugs of	103			LN20	Urine Albumin CVL	129
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	Y	ING	C-peptide	86		X	UMC	Creatinine	160
	^		C-peptide	00	Creatinine, vitreous fluid		VF	Vitreous Fluid, Postmortem	104
	V	LN46	C-peptide/Insulin CVL	135	Creatinine, whole blood	Х	WBCR	Whole Blood Creatinine	66
C-reactive protein (CRP)	X	LN12	C-reactive Protein CVL	128	Crossmatching	Х	J, JXM, JAT, JATXM	Transfusion Medicine	232- 233
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sensitivity (hsCRP)		LN21	C-reactive Protein High-Sensitivity C-reactive Protein CVL	130			TMCA	Transfusion Medicine, Competency	239
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		CZQ	QCC, Chemistry and	37		Х	F	Mycology and Aerobic Actinomycetes	194
		IES	Interfering Substances	138		Х	F1	Yeast	194
		LN2	Chemistry, Lipid,	124	Cryptococcus neoformans/gatti		IDME	Meningitis/Encephalitis Panel	209
		LN2BV	Chemistry, Lipid,	124		Х	IDM5	Meningitis/Encephalitis Panel	209
			Enzyme CVL – all Beckman (overant AU)		Cryptosporidium		GIP	Gastrointestinal Panel	212
			Vitros			Х	GIP5	Gastrointestinal Panel, 5 Challenge	212

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Crystal identification, body fluid		BFC	Body Fluid Crystals	157	Cytopathology GYN proficiency testing)				
Crystal identification, urine		URC	Urine Crystals	157	Cytomegalovirus (CMV)		ID1	Nucleic Acid Amp, Viruses	201
Crystals, urine (semiquantitative)		UAA	Automated Urinalysis	156			IDME	Meningitis/Encephalitis Panel	209
CSF antigen detection	Х	D	Bacteriology	177		X	IDM5	Meningitis/Encephalitis	209
CSF IgG calculations		OLI	CSF Chemistry and Oligoclonal Bands	74			LN38	Panel CMV Viral Load CVL	133
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		DIVIVO	Vitamin	00		X	VM3	Viral Markers-Series 3	243
Cutibacterium avidum/		IIP	Joint Infection Panel	208		X	VR1	Virology Culture	200
granulosum		511	Some meetion ranet	200		v		Virology by DEA	200
Cyclic citrullinated		CCP	Cyclic Citrullinated Peptide Antibody	220		X	VR3	Infectious Disease	200
Cyclobenzaprine		DEC	Drug-Facilitated Crime	111	Cutonothology CVN			DAD Edu Conventional	207
oyetobenzaprine		FTC	Forensic Toxicology,	107	education		PAPCET	PAP Edu, Conventional	307
		Т	Toxicology	98			PAPJE1	PAP Edu, All Technologies	307
		UT	Urine Toxicology	98			PAPKE1	PAP Edu, SurePath	307
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CYP2D6		PGX	Pharmacogenetics	264			1100/11001	Cvtopathology	0.0
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			Cyctotin C	7/	Dabigatran		DBGN	Anticoagulant	170
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gene)		IVIGLD		203			CGL	Coagulation, Limited	166
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		PCARMX	Markers				UT	Urine Toxicology	98
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		OFD	Oral Fluid for Drugs of Abuse	103			FTC	Forensic Toxicology, Criminalistics	107
		Т	Toxicology	98			OFD	Oral Fluid for Drugs of	103
		THCB	Blood Cannabinoids	109				Abuse	
		UT	Urine Toxicology	98			Т	Toxicology	98
Delta-9-THC-COOH		DFC	Drug-Facilitated Crime	111			UT	Urine Toxicology	98
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		UTCO	Urine Toxicology Carryover	137	manual			Count	
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Desipramine		DFC	Drug-Facilitated Crime	111			LN3	TDM CVL	125
		FTC	Forensic Toxicology, Criminalistics	107	Digoxin, free		CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
		Т	Toxicology	98			CZQ	QCC, Chemistry and	37
		UT	Urine Toxicology	98				TDM	
Desmethylclomipramine	Х	ZT FTC	TDM, Special Forensic Toxicology	59 107	Dihydrocodeine		FTC	Forensic Toxicology, Criminalistics	107
Boomounytotomprammo			Criminalistics	107			Т	Toxicology	98
		Т	Toxicology	98			UT	Urine Toxicology	98
		UT	Urine Toxicology	98	Diltiazem		FTC	Forensic Toxicology,	107
Desmethylsertraline		FTC	Forensic Toxicology, Criminalistics	107			Т	Toxicology	98
		Т	Toxicology	98			UT	Urine Toxicology	98
		UT	Urine Toxicology	98	Dilute prothrombin time		CGE/CGEX	Coagulation, Extended	167
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Diphenhydramine		DFC	Drug-Facilitated Crime	111			FTC	Forensic Toxicology, Criminalistics	107
		110	Criminalistics	107			Т	Toxicology	98
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		CZX/CZ2X					Т	Toxicology	98
		CZQ	QCC, Chemistry and TDM	37	E. coli 0157 (see Escherichia coli 0157)		UT	Urine Toxicology	98
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		LN2BV	Chemistry, Lipid,	124	EGFR (see Epidermal growth factor receptor)				
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DNA analysis	X X	DML PARE	HLA Molecular Typing Parentage/Relationship	249 246			TMCAE	Eluate Competency Assessment	239
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		FTC	Forensic Toxicology, Criminalistics	107	complex	X	IDPN	Infectious Disease, Pneumonia Panel	211
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		UT	Urine Toxicology	98	Enterococcus faecalis		JIP	Joint Infection Panel	208
					Enterococcus faecium		JIP	Joint Infection Panel	208

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		GIPN	Gastrointestinal Panel,	213	Escherichia coli 0157		GIP	Gastrointestinal Panel	212
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DFC

Meprobamate

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		UT	Urine Toxicology	98			Divit Ivi	Management	110
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		UT	Urine Toxicology	98			1000	Amplification,	, ,
Nortriptyline		DFC	Drug-Facilitated Crime	111				Respiratory Limited	
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		T	Toxicology	98			CZ0	OCC Chemistry and	37
		UDC	Forensic Urine Drug Testing, Confirmatory	102			150	TDM	37
		UDS, UDS6	Urine Drug Screen	100				Interfering Substances	138
		UT	Urine Toxicology	98			LINZ	Enzyme CVI	124
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Pheniramine		FTC	Forensic Toxicology, Criminalistics	107				Beckman (except AU), Vitros	
		Т	Toxicology	98	Phosphorus, urine		LN6	Urine Chemistry CVL	126
		UT	Urine Toxicology	98		Х	U	Urine Chemistry–General	68
Phenobarbital	X	CZ/CZX/	Chemistry and TDM	54-56	PIK3CA	Х	MTP	Multigene Tumor Panel	277
		CZZX,Z CZQ	QCC, Chemistry and	37	Pinworm prep	Х	CMMP	Clinical Microscopy, Misc	153
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		FTC	Forensic Toxicology, Criminalistics	107	residual disease			Plasma Cell Myeloma Measurable (Minimal) Residual Disease	
		LN3	TDM CVL	125	Plasma cell neoplasms		PCNEO	Flow Cytometry, Plasma	228
		Т	Toxicology	98				Cell Neoplasms	
		UDC	Forensic Urine Drug Testing, Confirmatory	102	Plasma hemogloblin Plasminogen activator		PHG CGE/CGEX	Plasma Hemoglobin Coagulation, Extended	76 167
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		DFC	Drug-Facilitated Crime	111			FH16-FH17		
		FTC	Forensic Toxicology, Criminalistics	107			FH3Q, FH4Q,	QCC, Automated Hematology Series	43
		LN3	TDM CVL	125			FH9Q,		
		SCO	Serum Carryover	137		X	HF	Basic Hematology	140
		Т	Toxicology	98		Λ	1 N 9	Hematology CVI	127
		UT	Urine Toxicology	98	Platelet count. estimated		EHE1	Expanded Virtual	150
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		GIPN	Gastrointestinal Panel, Global	213			POC10,	POC Competency Blood	51
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		PCP2	Pheumocystis jirovecii,	196	Prealbumin	Y	C3/C3Y	Chemistry and TDM	54-56
		PCP4	Pneumocystis jirovecii, GMS Stain	196	(transthyretin)		CZ/CZX/ CZ2X	Chemistry and TDM	54-50
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Potassium	X	AQ, AQH, AQIS	Critical Care Blood Gas	92-93				Urine loxicology	98
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	v	AUGU C1 C2/C2V	Chamicter and TDM	54 56	Prekallikrein		CGE/CGEX	Coagulation, Extended	167
	×	C1, C3/C3X, C4, CZ/	Gnemistry and TDM	54-56	Primidone		CZ/CZX/ CZ2X, Z	Chemistry and TDM	54-56
		JLN/ULLA					CZQ	QCC, Chemistry and TDM	37

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		CZZX, Z CZQ	QCC, Chemistry and	37	Protein, CSF	X	M, OLI	CSF Chemistry and Oligoclonal Bands	74
-			IDM		Protein, total	Х	C1, C3/C3X,	Chemistry and TDM	54-56
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	Х	Y/YY	Sex Hormones	84			FLD	Body Fluid	72
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Proline, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic Disorders	258				Enzyme CVL – all Beckman (except AU), Vitros	
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Propoxyphene		DFC	Drug-Facilitated Crime	111				Electrophoresis	
		DMPM	Drug Monitoring for Pain Management	110	Protein, urine	X	ABU CMP, CMP1	Accuracy-Based Urine Clinical Microscopy	115 152
		FTC	Forensic Toxicology,	107			CMQ	QCC, Urinalysis	44
			Criminalistics				DSC	Dipstick Confirmatory	157
		Т	Toxicology	98		Х	HCC2	Waived Combination	66
		UDC	Forensic Urine Drug	102			LN6	Urine Chemistry CVL	126
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		UT	Urine Toxicology	98		Х	U	Urine Chemistry–General	68
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		UT	Urine Toxicology	98	Prothrombin mutation	Х	MGL1	Molecular Genetics	262-
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	X	<b>К/КК</b>	Ligand-General	82				Mutations	205
		LN23	PSA CVL	130	Prothrombin time		APXBN	Anticoagulant	170
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Protein C		CGE/CGEX	Coagulation, Extended	167			DBGN	Anticoagulant Monitoring, Dabigatran	170
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			XS Plus				UT	Urine Toxicology	98
		RVBN	Anticoagulant Monitoring Rivaroxaban	170	Quinidine		CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
	X	WP3, WP4, WP6, WP9	Whole Blood Coagulation	173			CZQ	QCC, Chemistry and TDM	37
Prothrombin time, dilute		CGE/CGEX	Coagulation, Extended	167	Quinine		FTC	Forensic Toxicology,	107
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		QPC10, QPC25	Assessment of Consistency of Peripheral Blood Morphologic Observations	27			FH3Q, FH4Q, FH9Q, FH13Q	QCC, Automated Hematology Series	43
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	Х	VR2	Viral Antigen Detection by DFA	200	Ritalinic acid		FTC	Forensic Toxicology,	107
	Х	VR4	Virology Antigen Detection by EIA and	200	Rivaroxaban		RVBN	Anticoagulant Monitoring, Rivaroxaban	170
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		RT3, RT4				Х	VR4	Viral Antigen Detection	200
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Rett syndrome ( <i>MECP2</i> gene) duplication	Х	RETT	Rett Syndrome Genotyping	265	(English measles)	~		Infectious Disease Serology	
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Russell's viper venom time, dilute		CGS1	Coagulation Special, Series 1	168	Selenium, whole blood		TMWB	Trace Metals, Whole Blood	106
Salicylate	X	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54-56	Semen analysis		ASA, SM, PV1	Semen Analysis	162
		CZQ	QCC, Chemistry and TDM	37		X	SC, SC1, SV, PV	Semen Analysis	162
		FTC	Forensic Toxicology, Criminalistics	107		Х	SMCD	Semen Analysis, Online	162
		LN3	TDM CVL	125		X	SM2CD	Semen Analysis, Online	162
		SDS	Serum Drug Screen	104	Sorino quantitativo	~	BGL 2	Amino Aoid Quantitation	250
		Т	Toxicology	98	Serine, quantitative		DGLZ	for Inherited Metabolic	200
		UT	Urine Toxicology	98				Disorders	
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	Х	GIP5	Gastrointestinal Panel, 5 Challenge	212	Serratia marcescens	X	IDPN	Genotyping	211
		GIPN	Gastrointestinal Panel,	213				Pneumonia Panel	
		-	Global				JIP	Joint Infection Panel	208
		JIP	Joint Infection Panel	208	Sertraline		DFC	Drug-Facilitated Crime	111
Sapovirus (I, II, IV, V)	x	GIP GIP5	Gastrointestinal Panel	212			FTC	Forensic Toxicology, Criminalistics	107
		ano	5 Challenge	212			Т	Toxicology	98
		GIPN	Gastrointestinal Panel,	213			UT	Urine Toxicology	98
			Global		Serum free light chains		SFLC	Serum Free Light Chains	223
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		COV2Q	QCC, SARS-CoV-2 Molecular	47			ST	and Molecular	190
		COVAG	SARS-CoV-2 Antigen	203	Shiga-like toxin		GIP	Gastrointestinal Panel	212
		COVAQ	QCC, SARS-CoV-2	47	producing <i>E. coli</i> (STEC)	v	CIDE	Costrointestinal Panel	212
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		001/0		222	Shigella		GIP	Gastrointestinal Panel	212
	X	CVAG	SARS-CoV-2 Serotogy SARS-CoV-2 Antigen,	203		X	GIP5	Gastrointestinal Panel, 5 Challenge	212
	X	ID3	Nucleic Acid	204			GIPN	Gastrointestinal Panel, Global	213
			Amplification, Respiratory Limited		Sickle cell screen, qualitative	X	HG	Hemoglobinopathy	147
		ID3Q	QCC, Nucleic Acid	47		Х	SCS	Sickle Cell Screen	148
			Amplification, Respiratory Limited		Sirolimus (rapamycin)	X	CS	Immunosuppressive Drugs	58
	X	IDR	Infectious Disease,	210	SLC01B1		PGX	Pharmacogenetics	264
Scl-70 (anti-DNA		RDS	Respiratory Panel Rheumatic Disease	221	Sodium	Х	AQ, AQH, AQIS	Critical Care Blood Gas	92–93
Sconolamino		DEC	Drug-Esoilitated Orima	111			AQQ, AQHQ,	QCC, Critical Care Blood	42
Soosbarbital			Drug-Facilitated Crime	111			AQSQ	Gas Series	
Seconardital		UDC	Forensic Urine Drug	102		X	C1, C3/C3X, C4, CZ/	Chemistry and TDM	54–56

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			IDM Body Eluid Chemistry 2	73	CACNA1A, and ATXN7				203
		IES	Interfering Substances	138	genes)				
		I N13C	Blood Gas CVI	128	Split fats		FCFS	Fecal Fat	75
		LN2	Chemistry, Lipid,	124	SS18		PM5	IHC Tissue Microarray	295
			Enzyme CVL					Series	044
		LN2BV	Chemistry, Lipid, Enzyme CVL – all	124	Staphylococcus aureus	X	IDPN	Infectious Disease, Pneumonia Panel	211
			Beckman (except AU),				JIP	Joint Infection Panel	208
		D0010	Vitros	<b>F1</b>	Staphylococcus aureus,	X	BCS1	Blood Culture	184
		POC10, POC11	POC Competency Blood Gases	51	Staphylococcus		JIP	Joint Infection Panel	208
Sodium, urine		LN6	Urine Chemistry CVL	126	lugdunensis				
	Х	U	Urine Chemistry–General	68	STEC (See Shiga-like				
Sodium, vitreous fluid		VF	Vitreous Fluid, Postmortem	104	Strep screen		POC4	POC/Waived Strep	50
Soluble transferrin		STFR	Soluble Transferrin	79	Streptococcus	x	D8	Group B Strep	183
receptor	v	V VV	Receptor	0.4	agalactiae	^	00		105
Somatomedin C (IGF-1)	× v		Clinical Microscopy	152			IDME	Meningitis/Encephalitis	209
Specific gravity	^			44				Panel	
			Urine Drug Adulterant/	101		Х	IDM5	Meningitis/Encephalitis	209
		27.1	Integrity Testing	101				Panel	011
	Х	HCC2	Waived Combination	66		X	IDPN	Infectious Disease, Pneumonia Panel	211
		P0C3	POC Urine Dipstick	50			JIP	Joint Infection Panel	208
		UDC	Forensic Urine Drug	102	Streptococcus pneumoniae		IDME	Meningitis/Encephalitis Panel	209
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openni count, automateu	X	SC1	Semen Analysis	162			JIP	Joint Infection Panel	208
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T3, free (triiodothyronine)		ABTH	Harmonized Thyroid	116					263
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			TDM		Temazepam		DFC	Drug-Facilitated Crime	111
	Х	K/KK	Ligand–General	82			DMPM	Drug Monitoring for Pain	110
T3, total (triiodothyronine)		ABTH	Harmonized Thyroid	116			FTC	Management Forensic Toxicology,	107
	X	C1,C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56			OFD	Criminalistics Oral Fluid for Drugs of Abuse	103
		CZQ	QCC, Chemistry and	37			Т	Toxicology	98
	X	K/KK	TDM Ligand–General	82			UDC	Forensic Urine Drug Testing, Confirmatory	102
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T3, uptake and related tests	Х	C1,C3/C3X, CZ/CZX/	Chemistry and TDM	54-56	Teriflunomide		ZE	Therapeutic Drug Monitoring, Extended	59
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T4, free (thyroxine)		ABTH	Harmonized Thyroid	116				Endocrinology CVL	
	Х	C1,C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56	Testosterone, bioavailable. measured	X	<b>Y/YY</b> Y	Sex Hormones Sex Hormones	84 84
		CZQ	QCC, Chemistry and TDM	37	Testosterone, free, measured		Y	Sex Hormones	84
	Х	K/KK	Ligand–General	82	Tetrahydrozoline		DFC	Drug-Facilitated Crime	111
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	Х	C1,C3/C3X, CZ/CZX/	Chemistry and TDM	54-56	Thallium, whole blood		TMWB	Trace Metals, Whole Blood	106
		CZ2X CZQ	QCC, Chemistry and	37	Theophylline	Х	CZ/CZX/ CZ2X, Z	Chemistry and TDM	54–56
	V	17/17/2	IDM				CZQ	QCC, Chemistry and	37
	X		Ligand-General	82					105
Tacrolimus	X	CS	Immunosuppressive Drugs	58	Threonine, quantitative		BGL2	Amino Acid Quantitation for Inherited Metabolic	258
		LN31	Immunosuppressive Drugs CVL	132	Throat culture/molecular	Х	D1	Group A Streptococcus	179
Tapentadol		DFC DMPM	Drug-Facilitated Crime Drug Monitoring for Pain	111 110		X	MC4	Urine Colony Count	180
		Т	Management Toxicology	98		x	RMC	Routine Microbiology	180
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Thrombin time		CGE/CGEX	Coagulation, Extended	167	Total bilirubin	Х	C1,C3/C3X,	Chemistry and TDM	54-56
		CGS4	Coag Special, Series 4	168			C4,CZ/		
		DBGN	Dabigatran	170			CZA/CZZA	OCC Chamiatry and	27
		ECF	Expanded Coagulation Factors	167				TDM	37
Thrombophilia mutations	Х	TPM	Thrombophilia	265			FLD2	Body Fluid Chemistry 2	73
			Mutations				IFS	Interfering Substances	138
Thyroglobulin	Х	TM/TMX	Tumor Markers	89			LN2	Chemistry, Lipid,	124
Thyroid-stimulating hormone (TSH)		ABS ABTH	Accuracy-Based Testosterone and Estradiol Harmonized Thyroid	115			LN2BV	Chemistry, Lipid, Enzyme CVL – all Beckman (except AU), Vitros	124
	Х	C1,C3/C3X,	Chemistry and IDM	54-56		Х	<b>NB,</b> NB2	Neonatal Bilirubin	64
		CZ/CZX/			Total bilirubin, urine	Х	CMP, CMP1	Clinical Microscopy	152
		CZ0	OCC Chemistry and	37			DSC	Dipstick Confirmatory	157
		024	TDM	07		Х	HCC2	Waived Combination	66
	Х	K/KK	Ligand–General	82	Total free fatty acids		FCFS	Fecal Fat	75
		LN50	Thyroid CVL	136	Total hCG	Х	FP1T	First Trimester Maternal	88
Thyroxine (T4), free		ABTH	Harmonized Thyroid	116				Screening, Total hCG	
	Х	C1, C3/C3X, CZ/CZX/	Chemistry and TDM	54-56	Total hemolytic complement		CH50	Total Hemolytic Complement	222
		CZ2X CZQ	QCC, Chemistry and	37	Total iron binding capacity, measured	Х	C3/C3X, CZ/CZX/ CZ2X	Chemistry and TDM	54–56
	X	K/KK	ligand_General	82			CZQ	QCC, Chemistry and	37
Thyroxine (T4) total	~		Harmonized Thyroid	116				TDM	
Thyroxine (14), totat	Y	C1 C2/C3Y	Chemistry and TDM	54-56	Total nitrogen, urine		U	Urine Chemistry–General	68
	~	CZ/CZX/	onemistry and row	04 00	Total nucleated cells		CBT	Cord Blood Testing	240
		CZ2X					SCP	Stem Cell Processing	240
		CZQ	QCC, Chemistry and TDM	37	Total nucleated cells manual differential		HFC/HFCI	Hemocytometer Fluid Count	158
	Х	K/KK	Ligand–General	82	count (body fluid)				
		LN50	Thyroid CVL	136			VBF	Virtual Body Fluid	154
Tick identification		тмо	Ticks, Mites, and Other Arthropods	198	Total nucleated cells (WBC) automated count (body fluid)		ABF1, ABF2, ABF3	Automated Body Fluid	154
Tissue parasite identification	Х	BP	Blood Parasite	198	Total protein	Х	C1, C3/C3X,	Chemistry and TDM	54-56
	Х	Р	Parasitology	197			CZ2X		
Tobramycin	Х	PEX CZ/CZX/	Expanded Parasitology Chemistry and TDM	198 54-56			CZQ	QCC, Chemistry and TDM	37
		070	000 Chamiatry and	27			FLD	Body Fluid	72
			TDM	37			FLDQ	QCC, Body Fluid Chemistry	38
		LN3	TDM CVL	125			IFS	Interfering Substances	138
Topiramate		DFC	Drug-Facilitated Crime	111			LN2	Chemistry, Lipid,	124
		FTC	Forensic Toxicology, Criminalistics	107			I N2BV	Enzyme CVL	124
		Т	Toxicology	98				Enzyme CVL – all	127
		UT 7F	Urine Toxicology	98 59				Beckman (except AU), Vitros	
			Monitoring, Extended				SPE	Protein Electrophoresis	76
Total bile acids		TBLA	Total Bile Acid	77					
Total bile acids		ZE TBLA	Therapeutic Drug Monitoring, Extended Total Bile Acid	59 77			SPE	Vitros Protein Electrophoresis	76

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Total protein, CSF	Х	M, OLI	CSF Chemistry and Oligoclonal Bands	74	Transfusion medicine (cont.)		TMCAD	Transfusion Medicine, Competency Assessment	239
Total protein, urine	Х	CMP, CMP1	Clinical Microscopy	152 44			TMCAE	Transfusion Medicine, Competency Assessment	239
	Х	HCC2	Waived Combination	66			TMCAF	Transfusion Medicine,	239
	X	U U	Urine Chemistry CVL Urine Chemistry–General	126 68		X	TRC	Transfusion-Related	237
Total tricyclics	X X	SDS ZT	Serum Drug Screen TDM, Special	104 59	Trazodone		FTC	Forensic Toxicology,	107
Touch imprint/crush prep		TICP, TICP1	Touch Imprint/Crush Prep	309			Т	Toxicology	98
Toxicology, serum,	Х	SDS	Serum Drug Screen	104	Treponema pallidum	X	UT G	Urine Toxicology Syphilis Serology	98 222
qualitative	V	<b>–</b>	T 1.1.	00	Trichomonas vaginalis	X	MVP	Molecular Vaginal Panel	191
Toxicology, urine, qualitative	X X	DMPM	Drug Monitoring for Pain Management	98 110		X	STIM	Sexually Transmitted Infection Detection, Molecular	191
	Х	Т	Toxicology	98	I	X	TVG5	Trichomonas vaginalis	197
	Х	UDS, UDS6	Urine Drug Screen	100			1100	Molecular, 5 Challenge	107
Toxicology, urine,	X X	UT DMPM	Urine Toxicology Drug Monitoring for Pain	98 110			TVAG	Trichomonas vaginalis, Molecular	197
qualitative/quantitative			Management			X	<b>VS</b> , VS1	Vaginitis Screen	190
	X	UDC	Forensic Urine Drug	102	Tricyclic group		Т	Toxicology	98
	V	) (D0	lesting, Confirmatory	01/			UDS, UDS6	Urine Drug Screen	100
ioxopiasma gonali	X	VR3	Infectious Disease	214			UT	Urine Toxicology	98
			Serology		Tricyclics, total	Х	SDS	Serum Drug Screen	104
TPMT		PGX3	Pharmacogenetics	264		Х	ZT	TDM, Special	59
Tramadol		DFC	Drug-Facilitated Crime	111	Triglycerides		ABL	Accuracy-Based Lipid	114
		DMPM	Drug Monitoring for Pain Management	110		X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Chemistry and TDM	54–56
		FIC	Criminalistics	107			CZQ	QCC, Chemistry and	37
		Т	Toxicology	98	I		FCES	Fecal Fat	75
		UDS, UDS6	Urine Drug Screen	100	I	_	FLD	Body Fluid	72
Transferrin	X	UT C3/C3X,	Urine Toxicology Chemistry and TDM	98 54-56			FLDQ	QCC, Body Fluid Chemistry	38
		CZ/CZX/				X	LCW	Chemistry–Ltd, Waived	64
		CZQ	QCC, Chemistry and TDM	37			LN2	Chemistry, Lipid, Enzyme CVL	124
		LN7	Immunology CVL	126			LN2BV	Chemistry, Lipid,	124
	Х	S2, S4	Immunology, Special	217				Enzyme CVL – all	
Transfusion medicine		ETME1	Expanded Transfusion Medicine Exercises	242				Beckman (except AU), Vitros	
	Х	J, JXM. J1	Transfusion Medicine	232	Triiodothyronine (T3),		ABTH	Harmonized Thyroid	116
	Х	JAT, JATXM	Transfusion Medicine, Automated	233		X	C1,C3/C3X,	Chemistry and TDM	54-56
		JATE1	Transfusion Medicine, Automated, Educational	233			CZ2X	OCC Chamistry and	72
		JE1	Transfusion Medicine, Educational	232		V		TDM	3/
		ТМСА	Transfusion Medicine.	239	I	X		Ligand-General	82
			Competency Assessment		I		LINDU	Inyrold UVL	130

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Triiodothyronine (T3), free		ABTH	Harmonized Thyroid	116	Urea nitrogen (cont.)		CZQ	QCC, Chemistry and TDM	37
	Х	C1, C3/C3X,	Chemistry and TDM	54-56			FLD	Body Fluid	72
		CZ/CZX/ CZ2X					FLDQ	QCC, Body Fluid Chemistry	38
		CZQ	QCC, Chemistry and	37			IFS	Interfering Substances	138
	Y	K/KK	I Divi	82			LN2	Chemistry, Lipid,	124
Trimipramine	Λ	FTC	Forensic Toxicology, Criminalistics	107			LN2BV	Chemistry, Lipid, Enzyme CVL – all	124
		Т	Toxicology	98				Beckman (except AU),	
		UT	Urine Toxicology	98				Vitros	
Troponin I, plasma	Х	PCARM/ PCARMX	Point-of-Care Cardiac Markers	64	Urea nitrogen, urine	X	LN6 U	Urine Chemistry CVL Urine Chemistry–General	126 68
		POC12	POC Cardiac Markers Competency	51	Urea nitrogen, vitreous fluid		VF	Vitreous Fluid, Postmortem	104
Troponin I, serum	Х	CRT, CRTI	Cardiac Markers	60	Urease	Х	RUR	Rapid Urease	189
		CRTQ LN25	QCC, Cardiac Markers Troponin I CVL	38 131	Uric acid	Х	C1, C3/C3X, C4, CZ/	Chemistry and TDM	54-56
Troponin I, high- sensitivity, serum	Х	HCRT, HCRTI	Cardiac Markers	60			CZQ	QCC, Chemistry and	37
		HCRQ	QCC, High-Sensitivity	39			FLD2	Body Fluid Chemistry 2	73
		1 N// 8	High-Sensitivity	135			IFS	Interfering Substances	138
Terrerie Thigh	V		Troponin I CVL	60			LN2	Chemistry, Lipid, Enzyme CVI	124
sensitivity, serum	X	HCRTI HCRTI	Cardiac Markers	60			LN2BV	Chemistry, Lipid,	124
			QCC, High-Sensitivity Cardiac Markers	39				Beckman (except AU), Vitros	
		LIN47	Troponin T CVL	135	Uric acid, urine		LN6	Urine Chemistry CVL	126
Tryptophan, quantitative		BGL2	Amino Acid Quantitation	258		Х	U	Urine Chemistry–General	68
			for Inherited Metabolic		Urine albumin		ABU	Accuracy-Based Urine	115
-			Disorders				LN20	Urine Albumin CVL	129
lumor mutational burden		IMB	Iumor Mutational Burden	2/3		X	U	Urine Chemistry–General	68
Tumor necrosis factor		CTKN	Cytokines	220		X	UMC	Urine Albumin Creatinine	160
Tyrosine, quantitative		BGL2	Amino Acid Quantitation	258	Urine albumin:creatinine ratio		ABU	Accuracy-Based Urine	115
			tor Inherited Metabolic				U	Urine Chemistry–General	68
UGT1A1		PGX3	Pharmacogenetics	264			UMC	Urine Albumin Creatinine	160
Unsaturated iron binding	Х	C3/C3X,	Chemistry and TDM	54-56	Urine colony count		MC3	Urine Colony Count	180
capacity, measured		CZ/CZX/ CZ2X					MC4	Urine Colony Count Combination	180
		CZQ	QCC, Chemistry and TDM	37	Urine crystals identification		URC	Crystals	157
Urea nitrogen	Х	AQ, AQH, AQIS	Critical Care Blood Gas	92–93	Urine crystals, semiguantitative		UAA	Automated Urinalysis	156
		AQQ, AQHQ,	QCC, Critical Care Blood	42	Urine culture	Х	D2	Urine Culture	179
	v	AUSU C1 C2/C2V	Gas Series	54-56			MC3	Urine Colony Count	180
	X	C1, C3/C3X, C4, CZ/ CZX/CZ2X	Gnemistry and TDM	54-56		Х	MC4	Urine Colony Count Combination	180

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Urine culture (cont.)	х	RMC	Routine Microbiology Combination	180	Valproic acid, free (cont.)		CZQ	QCC, Chemistry and TDM	37
Urine dipstick	Х	CMP, CMP1	Clinical Microscopy	152	Vancomycin	Х	CZ/CZX/ CZ2X.Z	Chemistry and TDM	54-56
	Х	HCC2	Waived Combination	66			CZQ	QCC, Chemistry and	37
		POC3	POC/Waived Urine	50			LN3	TDM CVL	125
Urine drug screen	Х	DMPM	Drug Monitoring for Pain Management	110	Vancomycin-resistant enterococcus		IDN, IDO	Nucleic Acid Amp, Organisms	207
	Х	UDS, UDS6	Urine Drug Screen	100			VRE	Vancomycin-Resistant	192
Urine eosinophils, Wright		SCM2	Special Clinical	159	Vanillylmandelic acid	X	N	Linerococcus	69
Urine hCG qualitative	x	LIHCG		160	Varicella-zoster virus		ID1	Nucleic Acid	201
Urine hemosiderin.	~	SCM1	Special Clinical	159	(VZV)			Amplification	
Prussian blue stain	v		Microscopy	150		Х	ID5	Varicella-Zoster Virus, Molecular	205
photographs	×	CMP, CMPT, CMMP		152-			IDME	Meningitis/Encephalitis	209
Urobilinogen	X	CMP, CMP1	Clinical Microscopy	152		X	IDM5	Meningitis/Encephalitis	209
	v		QCC, Urinalysis	44 66			-	Panel	
	^	POC3	POC Urine Dinstick	50		Х	VR1	Virology Culture	200
		1000	Competency	00		X	VR2	Viral Antigen Detection by DFA	200
Uroporphyrin	X	N OV/I	Urine Chemistry-Special	69		Х	VR3	Antibody Detection-	214
FISH, hybridization and	X	CYI	Hubrescence in Situ Hybridization and	254				Infectious Disease Serology	
			Urothelial Carcinoma		Vascular endothelial growth factor (VEGF)		CTKN	Cytokines	220
Vaginal wet preparations	X	СММР	Clinical Microscopy, Misc	153	Venlafaxine		DFC	Drug-Facilitated Crime	111
trichomonas, or yeast)			Pastarial Vaginasia	100			FTC	Forensic Toxicology, Criminalistics	107
vaginitis screen			Molecular Vaginal Papel	190			Т	Toxicology	98
	x	VS	RD Affirm VP III Antigen	190			UT	Urine Toxicology	98
		VC1	Detection	100	Verapamil		FTC	Forensic Toxicology, Criminalistics	107
	^	V31	Trichomonas	190			Т	Toxicology	98
		VS2	Vaginitis Screen, Virtual	192			UT	Urine Toxicology	98
			Gram Stain		Viability		CBT	Cord Blood Testing	240
Valine, quantitative		BGL2	Amino Acid Quantitation	258			SCP	Stem Cell Processing	240
			for Inherited Metabolic		Vibrio cholerae		GIP	Gastrointestinal Panel	212
Valproic acid	Х	CZ/CZX/	Chemistry and TDM	54-56		X	GIP5	Gastrointestinal Panel, 5 Challenge	212
		CZZA, Z	OCC Chemistry and	37	Viral antigen detection		COVAG	SARS-CoV-2 Antigen	203
		DEO	TDM	111		X	CVAG	SARS-CoV-2 Antigen, 5 Challenge	203
		DFC	Drug-Facilitated Crime	107			POC8	POC Influenza A/B Ag	50
		FIC	Criminalistics	107		X	VR2	Viral Antigen Detection by DFA	200
		LN3	TDM CVL	125		Х	VR4	Viral Antigen Detection	200
		l UT	loxicology	98				by EIA and Latex	
Valproic acid, free	X	UT CZ/CZX/	Urine Toxicology Chemistry and TDM	98 54-56	Viral isolation/ identification		COV2	SARS-CoV-2 Molecular	202
		CZ2X, Z				X	COVM	SARS-CoV-2 Molecular, 5 Challenge	203

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	Х	HC4	HSV Culture	201	WBC count		ABF1,	Automated Body Fluid	154
	X	ID3	Nucleic Acid	204	I		ADFZ, ADF3	Cord Placed Testing	240
			Amplification, Respiratory Limited			v		Lord Blood Testing	240
		ID3Q	QCC, Nucleic Acid Amplification, Respiratory Limited	47		^	FH1-FH4, FH9-FH10, FH13, FH16-FH17	Differential	140
	Х	ID5	HSV, VZV–Molecular	205			FH3Q,	QCC, Automated	43
		IDME	Meningitis/Encephalitis Panel	209			FH4Q, FH9Q, FH130	Hematology Series	
	X	IDM5	Meningitis/Encephalitis Panel	209			FL4	Flow Cytometry CD34+	224
	х	IDPN	Pneumonia Panel	211		Х	HE	Basic Hematology	140
	Х	IDR	Infectious Disease,	210			LN9	Hematology CVL	127
	X	VR1	Respiratory Panel	200		Х	RWBC	Rapid Total White Blood Cell Count	147
Virtual biopsy program.	~	VBP/VBP1	Online Virtual Biopsies	284			SCP	Stem Cell Processing	240
online			Program		WBC count (leukocyte-		TRC	Transfusion-Related	237
Virtual gram stain		VGS1	Virtual Gram Stain Basic	182			TDO	Cell Count	007
		VGS2	Virtual Gram Stain Advanced	182	reduced RBCs)		IRC	Cell Count	237
Virtual peripheral blood		VPBS	Virtual Peripheral Blood	149	WBC count, urine		UAA, UAA1	Automated Urinalysis	156
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Viscoelastic testing.		VES1	Viscoelastic Testing-	172			VPBS	Virtual Peripheral Blood	149
whole blood			Whole Blood					Smear	
Viscosity		V	Viscosity	223	WBC differential,	Х	FH1–FH4,	Hematology Automated	140
Vitamin A		BMV3	Bone Markers and Vitamins	86	automated		FH9-FH10, FH13, FH16-FH17	Differential	
Vitamin B <sub>12</sub>	Х	K/KK	Ligand–General	82	I			OCC Automated	//3
Vitamin B <sub>12</sub> , active		MMA	MMA and Active $B_{12}$	82			FH4Q.	Hematology Series	43
Vitamin D, 1,25-dihydroxy		BMV1	Bone Markers and Vitamins	86			FH9Q, FH13Q		
Vitamin D, 25-OH	Х	ABVD	Accuracy-Based Vitamin D	114	WBC differential, body fluid		VBF	Virtual Body Fluid	154
		LN40	Vitamin D CVL	134	WBC manual count, fluid	Х	HFC, HFCI	Hemocytometer Fluid	158
	Х	VITD	25-OH Vitamin D	84				Count	
Vitamin E		BMV4	Bone Markers and	86	West Nile virus	Х	NAT	Nucleic Acid Testing	245
			Vitamins		Worm identification		WID	Worm Identification	198
VKORC1		PGX	Pharmacogenetics	264	Xylazine		Т	Toxicology	98
Volatiles	X	AL1	Whole Blood Alcohol/ Volatiles	104		V	UT	Toxicology	98
	Х	AL2	Serum Alcohol/Volatiles	104	Yeast Identification	^	F	Actinomycetes	194
von Willebrand factor		CGS3	Coag Special, Series 3	168		Х	F1	Yeast	194
		LN37	von Willebrand Factor	133		Х	F3	Candida Culture	195
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			Monitoring			Х	MVP	Molecular Vaginal Panel	191
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virus)				407		Х	YBC	Yeast Blood Culture	195
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\*Program is ISO/IEC 17043 accredited.

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#### Notes

#### Notes

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