

EQA Interpretative Scheme: iEQA

Friday 11th October 2013

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Deputy Director

*UK NEQAS for Immunology, Immunochemistry & Allergy, Sheffield,
UK*

What is interpretative EQA?

- External Quality Assessment that requires an element of interpretation
- Generally based on a response from an individual or group of individuals
- Many types of interpretative schemes are available

Lots of Different Resources

Interpretive systems are diverse

Commentaries and educational cases on website

Some are interactive, some “virtual hospital” or laboratory, Digital morphology

All support individual or departmental subscriptions

Most CPD registered

Some linked to material distribution

Comparative performance indices, reflective learning/self-assessment

UK NEQAS Immunology iEQA



Interpretative External Quality Assessment

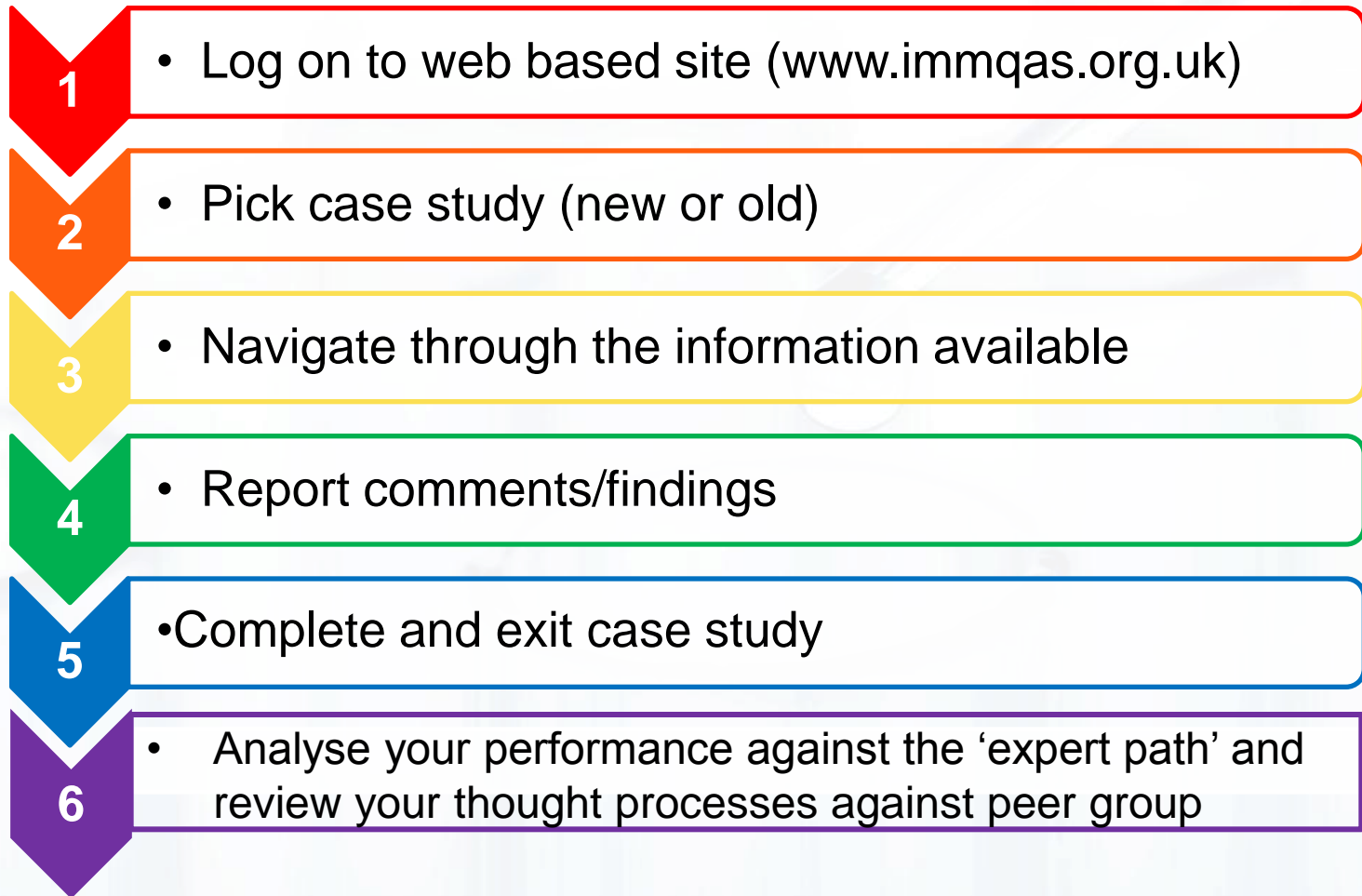
iEQA - What is it?

- Multi-disciplinary, self-directed, reflective learning resource
 - Focused upon QA & current lab practice
- Convenient & cost-effective
 - Web-based, login anywhere, anytime
- Aimed at ALL staff grades
- Bite-sized
 - Save cases for completion later
 - Cases always open (>1 attempt per case)

Why iEQA?

- Provides a dynamic and rich information source to improve knowledge
- Helps staff to acquire new skills quickly, and enable them to keep up to date with new research and best practice in Pathology
- There are currently over 80 cases to choose from and 2 new ones are being developed every month

How does iEQA work?



How to use iEQA

You are here: [Home](#) >> [Participation](#) >> [iEQA](#)

EQA Interpretative Scheme iEQA

The iEQA System provides a:

- Web based educational scheme which tests real-time proficiency
- is CPD accredited
- All scientific laboratory and medical staff in participating laboratories can register
- Enables users to practice clinical and scientific interpretative skills in a reflective manner
- Cases include assay results, scans, x-rays, images, sample information and clinical history
- May be used by individuals as a training resource in clinical or laboratory practice
- Contains extended clinical details associated with Scheme Distributions

To register for iEQA please complete the [registration form](#)

Any case can be repeated as often as required to demonstrate improvement or to assist with learning

Payments are accepted via laboratory scheme registration form on-line using PayPal

For further information regarding iEQA or any of our Schemes, please either complete the relevant registration form or send an email to eqacases@immqas.org.uk



[Join / Participate](#)



[Add / Remove Scheme](#)



[Launch Interpretative Scheme](#)



[Data Entry System](#)



Contacts

- General Enquiries
- UK NEQAS Centres
- PRU Contacts
- Maps & Directions

Help & FAQ

Click here to view answers to the most common questions that we are asked about our work and our schemes.


News & Events

[EQA Interpretative Scheme iEQA](#)


Update - 17/09/2013

AINCA Commentary Dist 132
Pilot Interferon Gamma Release Assays (IGRA TB) Scheme


[More News ..](#)

Lab Number	<input type="text"/>
Username	<input type="text"/>
Password	<input type="password"/>
Grade	Please Select <input type="button" value="v"/>
Other Grade	<input type="text"/>
Area	
	Scotland and Northern Ireland Please Select <input type="button" value="v"/>
	The North and Midlands Please Select <input type="button" value="v"/>
	Wales and the South Please Select <input type="button" value="v"/>
Log in	

After Registration



Interpretative
External
Quality
Assessment



IMMQAS
Immunology Quality Services

IMMQAS External Quality Assessment

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Welcome Hazel Wilkinson to Online EQA

Instructions for Use

You have successfully logged into the participant area of the IMMQAS online educational tool. Before you start on your case we would like you to read the following information which should help you navigate through the case.



[How to use Assessment Area \(Flash Demo*\)](#)

[Text Instruction on use of the system](#)

Flash Demo* - Depending on your connection speed loading process will take from 2 to 5 minutes. Demo will be opened in new window to allow you to use the system simultaneously.


Please remember to turn off your browsers Pop-up blocker

Assessments - General



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Assessment



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Immunology Quality Services

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Categories (Number Of Cases)

All Cases (90)
Allergy (13)
Autoimmunity and Rheumatology (30)
Clinical (77)
Haematinics (1)
IGRA (42)
Immunochemistry (31)
Immunodeficiency (8)
Laboratory (59)
Quality Assurance/Quality Control (57)
Tumour Markers and Oncology (10)

General Feedback

- We would like to hear your thoughts on how you found this system to use
- If you have any feedback please email eqacases@immqas.org.uk

Choose a Case!

UK NEQAS iEQA Interpretative External Quality Assessment

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Category

Level Up

All Cases

	Saved/Started Cases
Case 01: 77 year old male with back pain	No Cases in Progress
Case 02: 20 year old male with tingling lips	No Cases in Progress
Case 03: 55 year old male with rash and cough	Saved Cases
Case 04: Allergy - what to?	No Cases in Progress
Case 05: Proteinuria and Haematuria	No Cases in Progress

click to start an assessment of this case

Navigate from request card

IMMQAS - Case 20: Recurrent Infections?


What test would you like to do next?

Biochemistry Cytopathology Genetics Haematology Histopathology Immunology Microbiology Nuclear Medicine Radiology Virology

Request Card

Seek Further Information
Search
Save till later

- Below is the Request Card for this case.
- Once you have finished reading the card use the test buttons at the top to navigate through the case.
- The buttons at the top of the page are split into medical fields and may contain data – this maybe an image, text or tabular data.
- Alternatively if you know the name of the test you are looking for you can use the blue search button above.
- Each page that you will see has a blue box of "help" text like this – if you are unsure of what to do next always read the "help" text on the page.
- You can come back to this request card at any point during the assessment.

IMMUNOLOGY		Northern General Hospital, Sheffield Tel.: 434343	
SURNAME CORKER	HOSPITAL NUMBER 740573	SURGERY ADDRESS OR STAMP	LABORATORY NUMBER
FORENAME ARTHUR	DATE OF BIRTH / AGE 14/02/48	SEX M	<div style="border: 1px solid #ccc; padding: 5px; display: inline-block;"> LAB Request Card ONLY </div>
PATIENT ADDRESS 10 JERSEY DRIVE MIDDLESFIELD MD17 7ZZ		NHS <input type="checkbox"/>	LABORATORY USE ONLY  BIOHAZARD SAMPLES FROM ALL PATIENTS SUSPECTED OF
		PRIVATE <input type="checkbox"/>	
		CAT II <input type="checkbox"/>	
CONSULTANT or G.P. HJC	HOSPITAL / WARD / OPD K9		
INVESTIGATIONS REQUIRED IgG SUBCLASSES	CLINICAL DETAILS Recurrent chest infections		

Can't find what you're looking for?

IMMQAS - UK NEQAS

What test would you like to do next?

[Biochemistry](#) [Cytopathology](#) [Genetics](#) [Haematology](#) [Histopathology](#) [Immunology](#) [Microbiology](#) [Nuclear Medicine](#) [Radiology](#) [Virology](#)

Search for a Test

[Seek Further Information](#) [Request Card](#) [Back To Serum \(SEP\)](#) [Finish and send report](#)

- Enter the name of the test you wish to search for and then click "Search".
- You can use any of the main test buttons at the top of this page to navigate through the test results.
- Alternatively you can navigate back to your previous area by clicking on the green "Back to .." button.

[Search](#)

Immunology selected

IMMQAS - Case 20: Recurrent Infections? (19/01/09) UK NEQAS

What test would you like to do next?

Biochemistry Cytopathology Genetics Haematology Histopathology **Immunology** Microbiology Nuclear Medicine Radiology Virology

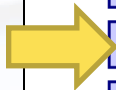
Immunology

Immunology

[Seek Further Information](#) [Search](#) [Request Card](#) [Report](#) [Save till later](#)

- Below are further tests within this field.
- Click on any of the buttons below to navigate into the results.
- Click on the green report button when you are ready to make some comments for your report.
- **You can navigate to the report at any stage and write a comment, once you have written a comment you must click the save button.**
- The report page also has a list of statements. You should click on the "select" button alongside your chosen statements.
- Once you have finished your assessment you should click the "Finish and send report button". Only do this when you have completed the assessment.
- If you wish to look at other test areas you can use the white buttons at the top of the page or the search facility above this box.
- You can use the blue location bar above to navigate within this test area.

Direct Immunofluorescence of Tissue Biopsy	Tumour Markers
Complement	Acute Phase Proteins
Immunoglobulins (Igs)	Monoclonal Typing
Electrophoresis or CZE	Antibody Assays (Autoimmunity and Other)
Flow Cytometry	Monoclonal Quantitation
Cell Proliferation Assays	Genetic Studies
Allergy	Alpha 1 antitrypsin (AAT)



Immunoglobulins selected

IMMQAS - Case 20: Recurrent Infections? (19/01/09)

UK NEQAS

What test would you like to do next?

Biochemistry

Cytopathology

Genetics

Haematology

Histopathology

Immunology

Microbiology

Nuclear Medicine

Radiology

Virology

Immunoglobulins (Igs)

[Immunology](#) / Immunoglobulins (Igs)

Seek Further Information

Search

Request Card

Report

Finish and send report

Save till later

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IgG, IgA, IgM

IgG Subclasses

IgD

IgA subclasses

Cryoglobulin

Total IgE

IgG subclasses selected

IMMQAS - Case 20: Recurrent Infections? (19/01/09)

UK NEQAS

What test would you like to do next?

Biochemistry

Cytopathology

Genetics

Haematology

Histopathology

Immunology

Microbiology

Nuclear Medicine

Radiology

Virology

IgG Subclasses

[Immunology](#) / [Immunoglobulins \(Igs\)](#) / [IgG Subclasses](#)

[Seek Further Information](#)

[Search](#)

[Request Card](#)

[Report](#)

[Finish and send report](#)

[Save till later](#)

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- You can use the blue location bar above to navigate within this test area.

IgG1

IgG2

IgG3

IgG4

IgG subclasses selected

IMMQAS - Case 20: Recurrent Infections? (19/01/09)

UK NEQAS

What test would you like to do next?

Biochemistry

Cytopathology

Genetics

Haematology

Histopathology

Immunology

Microbiology

Nuclear Medicine

Radiology

Virology

IgG2

[Immunology](#) / [Immunoglobulins \(Igs\)](#) / [IgG Subclasses](#) / [IgG2](#)

[Seek Further Information](#)

[Search](#)

[Request Card](#)

[Report](#)

[Finish and send report](#)

[Save till later](#)

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Test Results

IgG2

0.1 g/L (Reference Range 1.2 - 6.6 g/L)

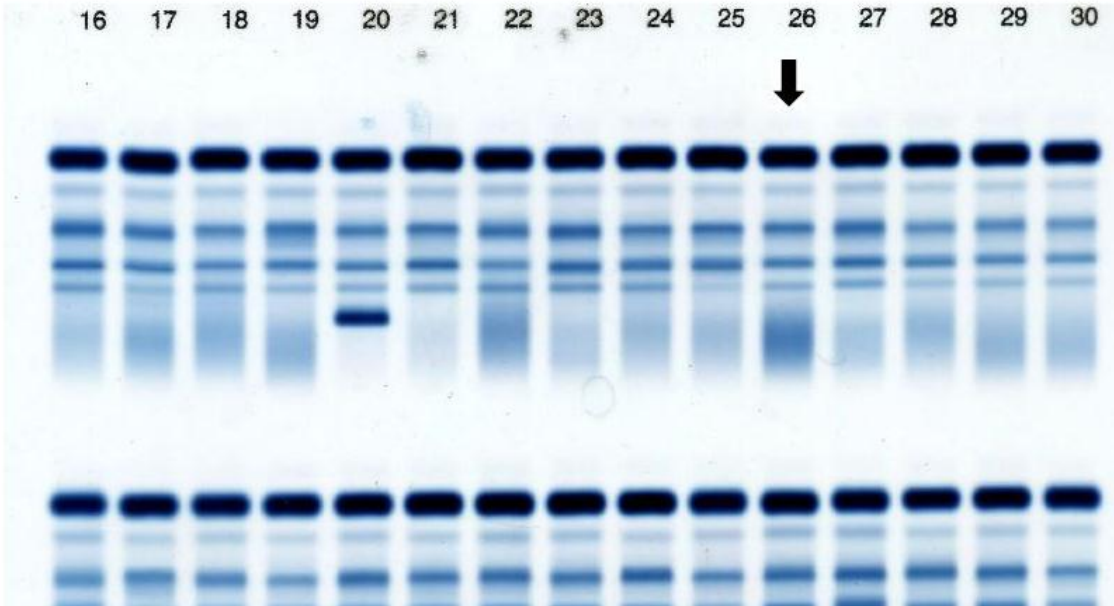
Images available-Serum electrophoresis

Serum (SEP)

[Immunology](#) / [Electrophoresis or CZE](#) / [Electrophoresis](#) / [Serum \(SEP\)](#)

[Seek Further Information](#) [Search](#) [Request Card](#) [Report](#) [Finish and send report](#) [Save till later](#)

- Below are the results for this test shown as an image.
- Below are the results for this test.
- Click on the green report button when you are ready to make some comments for your report.
- You can navigate to the report at any stage and write a comment, once you have written a comment you must click the save button.
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- You can use the blue location bar above to navigate within this test area.



done Internet 100%

Write a report - Instructions

Report Page

Seek Further InformationSearchRequest CardBack To Serum (SEP)Finish and send report

- Below are the results for this test shown as an image.
- Below are the results for this test.
- Click on the green report button when you are ready to make some comments for your report.
- You can navigate to the report at any stage and write a comment, once you have written a comment you must click the save button.
- The report page also has a list of statements. You should click on the "select" button alongside your chosen statements.
- Once you have finished your assessment you should click the "Finish and send report button". Only do this when you have completed the assessment.
- If you wish to look at other test areas you can use the white buttons at the top of the page or the search facility above this box.
- You can use the blue location bar above to navigate within this test area.

Once you have clicked on report, remember to click save

Current Path

Serum (SEP)

Fixed Text Comments

Immunochemistry

AAT: Carrier of the S deficiency allele.	SELECT
AAT: Carrier of the S deficiency allele.	SELECT
AAT: Carrier of the Z deficiency allele.	SELECT
AAT: Heterozygous for a rare deficiency allele. Suggest family studies. Please send more information.	SELECT

Write a report - fixed text

SEP: Kappa monoclonal free light chains detected	<input type="checkbox"/> SELECT
SEP: lambda monoclonal free light chains detected	<input type="checkbox"/> SELECT
SEP: Low albumin level	<input type="checkbox"/> SELECT
SEP: Nephrotic pattern seen	<input type="checkbox"/> SELECT
SEP: No significant abnormality detected	<input checked="" type="checkbox"/> UNSELECT
SEP: Oligoclonal increase in immunoglobulins	<input type="checkbox"/> SELECT
SEP: Oligoclonal restriction in gamma spectrum	<input type="checkbox"/> SELECT
SEP: Reduced alpha 1 band, suggest check for AAT deficiency	<input type="checkbox"/> SELECT
SEP: Sample shows some in vivo degradation. Please repeat.	<input type="checkbox"/> SELECT
SEP: Small monoclonal present without evidence of immunoparesis:	<input type="checkbox"/> SELECT

Write a report - free text

Free Text Comment

IgG 2 deficient

Finish Assessment

Finish

Finish Assessment of

Exit

- By Clicking the finish button you have begun the process of terminating your assesement.
- Below you can see the Comments you have selected and the Free Comments you have entered.
- Should you wish to carry on with your assessment click on the green "Back to" button.
- Alternatively you may wish to search for another test by clicking on the blue "Search" button.
- Should you wish to end your assessment click on the red "Exit" button.
- After you have clicked "Exit", this report will be submitted and it will end your current session on this assessment.

Selected Comments

Immunochemistry

- SEP: No significant abnormality detected

Tumour Markers

Autoimmunity

General Comments

Free Text Comment

Comment 1

Time (GMT): 09:00:41

IgG 2 deficient

Finish Assessment – Structured Answer

Answer

Suggested Report

Complete IgA deficiency with low IgG2 antibodies. Note that there is no response to recent pneumococcal vaccination or Influenza vaccination. Bronchiectasis is present bilaterally. Suggest referral to exclude immunodeficiency. Negative endomysial antibody is not reliable in presence of IgA deficiency. Dr X, 1234567.

Learning Points

1. Consider the possibility of immunodeficiency when bronchiectasis is present
2. Know the presenting features/warning signs of immunodeficiency (see web-based diagnostic aid link in references) - particularly bacterial infections of the upper and lower airways and gastroenteritis/diarrhoea.
3. Know that many immunodeficiencies present in childhood but CVID and others can start at any age.
4. Know the clinical significance of complete IgA deficiency
 1. Not uncommon at 1 in 4-500
 2. Often asymptomatic but increased risk of reactions to IgA containing blood products
 3. Associated with small increases in risk for other disorders like Coeliac disease and organ-specific autoimmunity
 4. Many appear entirely healthy
 5. Many have lesser degree of susceptibility to recurrent viral infections but are otherwise relatively healthy
 6. May be a marker of a more severe immune deficiency which behaves like CVID
 7. Total IgA deficiency is <0.07g/L and causes false-negative IgA assays (e.g. for IgA TTG or IgA EMA in Coeliac disease screening)
 8. Lesser degrees of isolated low IgA are often of little clinical significance.
 9. Subclass deficiencies plus IgA deficiency may be more severe.
5. Know how to investigate/refer for further investigation.
6. Know the place of IgG subclass assays in investigation as a second line, not first line, test.
7. Be aware of appropriate internal consistency and quality assurance checks that can be applied to improve laboratory quality - put in place limits in SOP for believable results, delta checks etc and train your staff to recognise unusual or unbelievable results which require checking before release.
8. Know that there are other non-antibody immune deficiencies that can lead to bronchiectasis - including ciliary function defects.



Discussion

This is a gentleman in late middle age who has presented with a recent diagnosis of bronchiectasis but who was well as a child, had all the normal childhood vaccinations but gradually became ill in his 40s with recurrent chest infections - many of which required admission to hospital and he was eventually diagnosed with bilateral bronchiectasis and had a lobectomy (see HRCT). Although IgG subclasses were requested the appropriate investigation would be total immunoglobulins in the first instance. You are asking if there is any possibility of antibody deficiency.

Total immunoglobulins revealed IgA deficiency. His IgG subclasses suggested a low IgG2. There is no evidence of a monoclonal paraprotein on the SEP and UEP, and an abdominal ultrasound was normal.

While someone presenting in their 60s with bronchiectasis is not uncommon, this gentleman also has problems with recurrent diarrhoea and this increases the chance of antibody deficiency. The IgA endomysial or tTG assay is likely to be unreliable in the presence of IgA deficiency but a biopsy may be needed. Seronegative coeliac or coeliac disease should be excluded. He has normal ferritin despite an anaemia, and probably has an anaemia of chronic disease.

This patient has no obvious clues in the past medical history to suggest an underlying pre-disposition to chronic chest disease, he had never smoked, his alpha 1 anti-trypsin is normal.


He received the usual recommended vaccinations for individuals with chronic respiratory disease (influenza and pneumococcal) recently and if this was noted in the history, it would have been possible to check antibody responses and discover that these revealed a failure to respond to influenza and pneumococcal vaccinations. While not wholly diagnostic in itself, this is highly suspicious and could suggest a referral for further immunological investigation was needed. He also has a low MBL, is this relevant?

He was finally diagnosed as an IgA deficient patient with Specific Antibody Deficiency (SPAD - a failure to respond appropriately to bacterial polysaccharide capsular antigens which leads to a clinical picture similar to hypogammaglobulinaemia in some cases and responds to immunoglobulin replacement or prophylactic antibiotics). He responded well to immunoglobulin replacement. His jejunal biopsy did not suggest coeliac disease and he did not require a gluten free-diet.

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QC issues

- Summation of the immunoglobulin subclasses reveals a >2 g per litre difference with the total immunoglobulin and should have alerted individuals in the laboratory to a possible quality control issue and those assays would both need to be repeated. In general there should not be greater than a 0.5 g/L difference between the summation and the total IgG, not withstanding the different calibration issues that have arisen in the past.
- Furthermore his HiB antibody level is unbelievably high (unless recent infection or vaccination) and this should be repeated too. The usual laboratory processes of checking for internal quality control, sample transposition and identity checks should be conducted if the repeat results are different.



Further Reading

- Clinical Immunology Review Series: An approach to the management of pulmonary disease in primary antibody deficiency. Tarzi, M.D. et al, *Clinical and Experimental Immunology* 2008, 155: 147-155.
- Web-based article on IgA and IgG subclass deficiencies <http://emedicine.medscape.com/article/885348-overview>
- UK Primary Immunodeficiency Network (UKPIN) Web-based diagnostic tool for immunodeficiencies. Patient-centred screening for primary immunodeficiency: a multi-stage diagnostic protocol designed for non-immunologists <http://www.ukpin.org.uk/ESID/index.htm>

How have I done? Personal Achievements Area

Personal Achievements

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Achievements



Welcome to the Personal Achievements area, from here you can view the analysis of the assessments that you performed.

Assessments

Please click on the name of the assessment below that you wish to view.


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- [Case 02: 20 year old male with tingling lips](#)
- [Case 03: 55 year old male with rash and cough](#)
- [Case 04: Allergy - what to?](#)
- [Case 05: Proteinuria and Haematuria](#)
- [Case 06: An unusual electrophoresis](#)
- [Case 07: Informed Choice?](#)
- [Case 08: Tired all the time?](#)
- [Case 09: 35 year old female with a rash on wearing gloves](#)
- [Case 10: Subarachnoid haemorrhage?](#)
- [Case 11: Likely SAH?](#)
- [Case 12: Recurrent Bronchitis?](#)
- [Case 13: Abdominal pain in a 16 year old](#)
- [Case 14: Death during Coronary Angiography](#)
- [Case 15: Multiple positive tests - but what is the diagnosis?](#)
- [Case 16: Abnormal immunoglobulins?](#)
- [Case 17: Familial Liver Disease](#)
- [Case 18: Positive ANA - what does it mean?](#)
- [Case 19: Abdominal pain and jaundice](#)
- [Case 20: Recurrent Infections?](#)
- [Case 21: Muscle Weakness](#)
- [Case 22: Autoimmune Screen please](#)
- [Case 23: Dysuria in a man](#)
- [Case 24: Raised Haemoglobin](#)
- [Case 25 \(0911\) : Asylum Seeker with a cough](#)
- [Case 26 \(0912\) : Another Asylum Seeker with a cough](#)

System logs each session



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[home](#) | Case 38: Serial Immunoglobulins - biological variation?

Achievements



Case 38: Serial Immunoglobulins - biological variation?

Below are the sessions which have been performed on this assessment, click on to view more details


CPD certificates and certificates of participation are available for completed cases where at least 10 minutes has been spent considering the case

Date	Time	Time Spent on Case		
8 Jun 2011	10:45	0 h : 11 m : 31 s	View the session	Print/Save Certificate(s)

'View the session'



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home | [Case 38: Serial Immunoglobulins - biological variation?](#) | session (08/06/2011 10:45:29)

Achievements

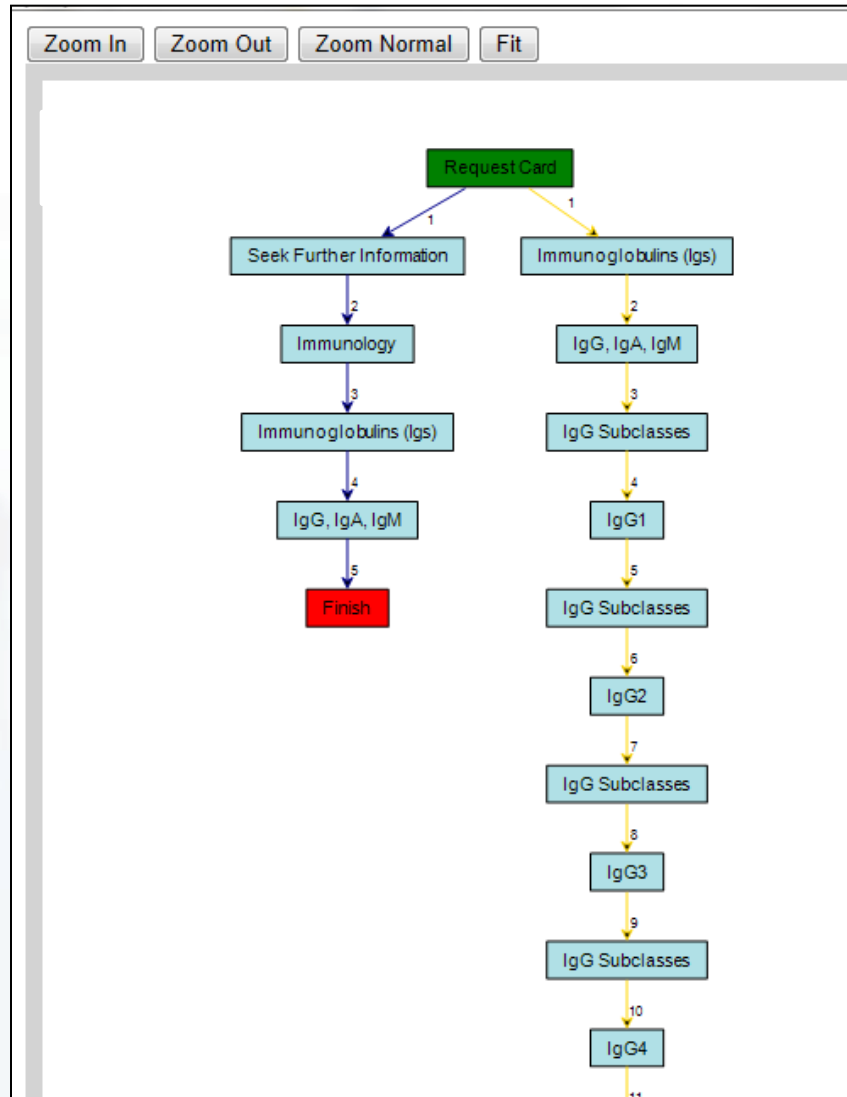
Case 38: Serial Immunoglobulins - biological variation?

Session (08/06/2011 10:45:29)

- [Test travelled to in this session](#)
- [Your report](#)
- [Same grade comparison](#)
- [All iEQA participants comparison](#)
- [Expert pathway comparison](#)

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View a comparison of your session against the 'expert path'



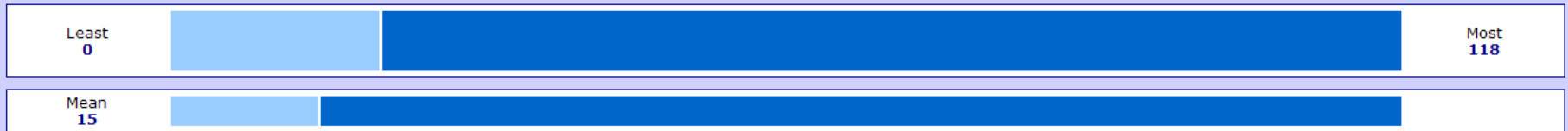
Comparison of your assessment against your peers

Tests Visited

- You have visited **4** out of **28** of the **Important** tests
- You have visited **0** out of **12** of the **Red Herring** tests

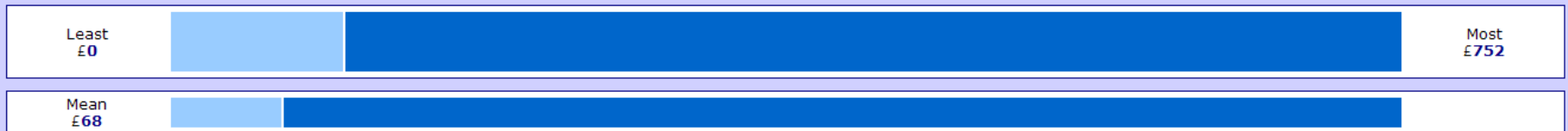
Hops

- You made **19** hops



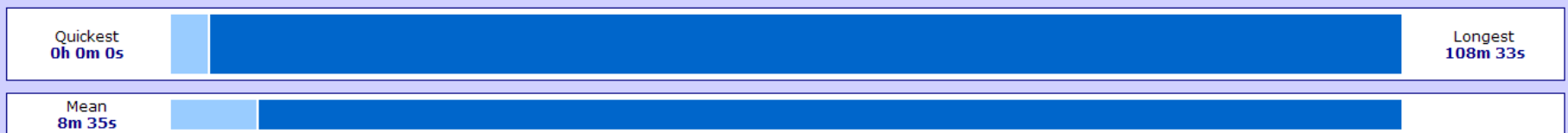
Cost

- The cost of your assessment was £ **103**



Time

- You took **2 minutes and 30 seconds**



Continuing Professional Development - CPD

iEQA Certificate



UK NEQAS for Immunology Allergy and Immunochemistry

Department of Immunology
PO Box 894, Sheffield, S5 7YT

www.immqas.org.uk

Certificate of Participation

This document confirms that

Hazel Wilkinson

IMMQAS
Immunology
Northern General
Sheffield
South Yorks

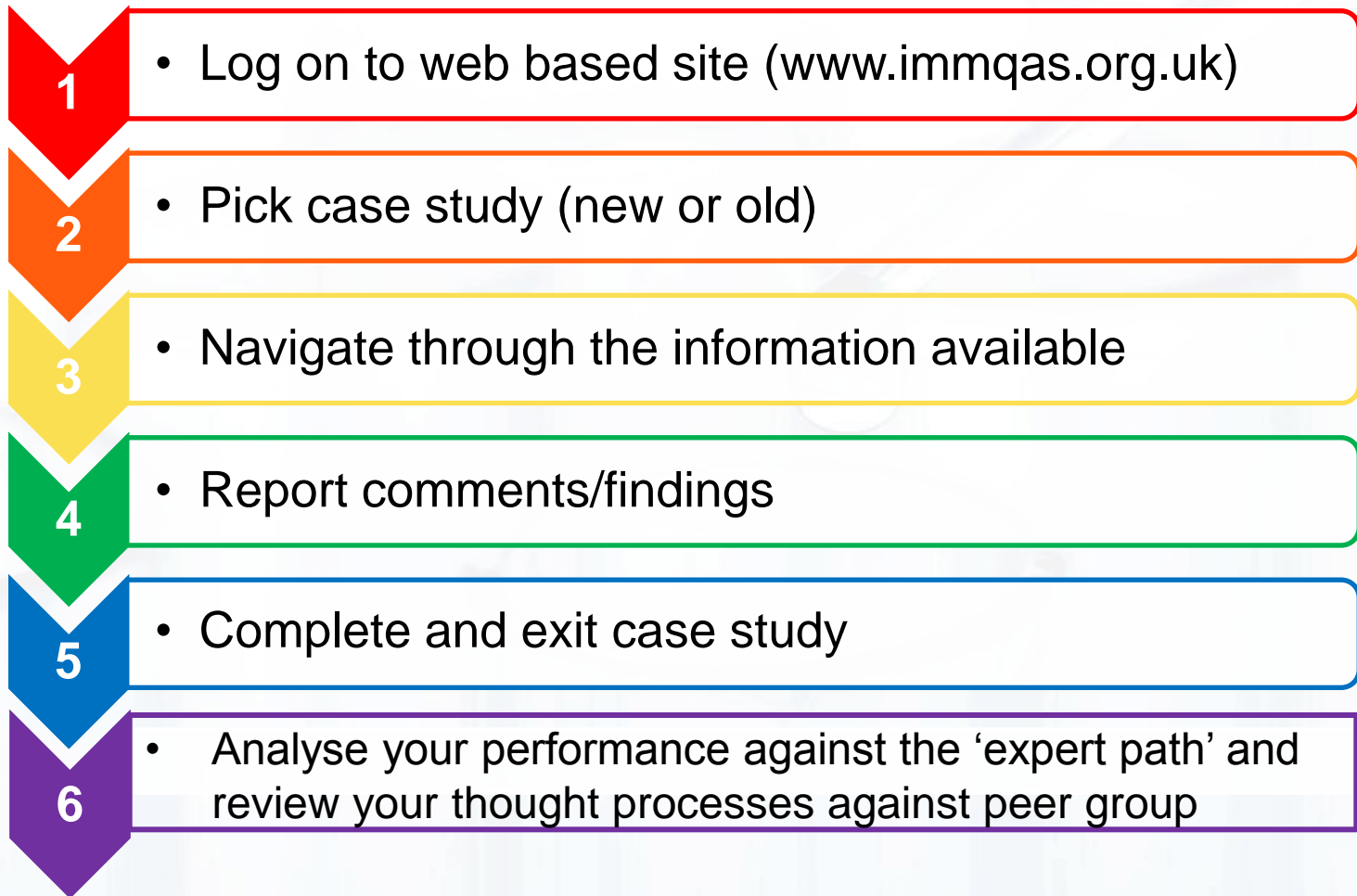
S5 7AU

has participated in the UK NEQAS Immunology Interpretative scheme on

08 June 2011

and has spent 0 hours and 11 minutes considering the following case

iEQA summary



Lab Manager Functionality

Licences

UK NEQAS



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Lab Manager Menu

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KPMD IT Solutions Ltd

Licences For Lab: **000 - Administrator**

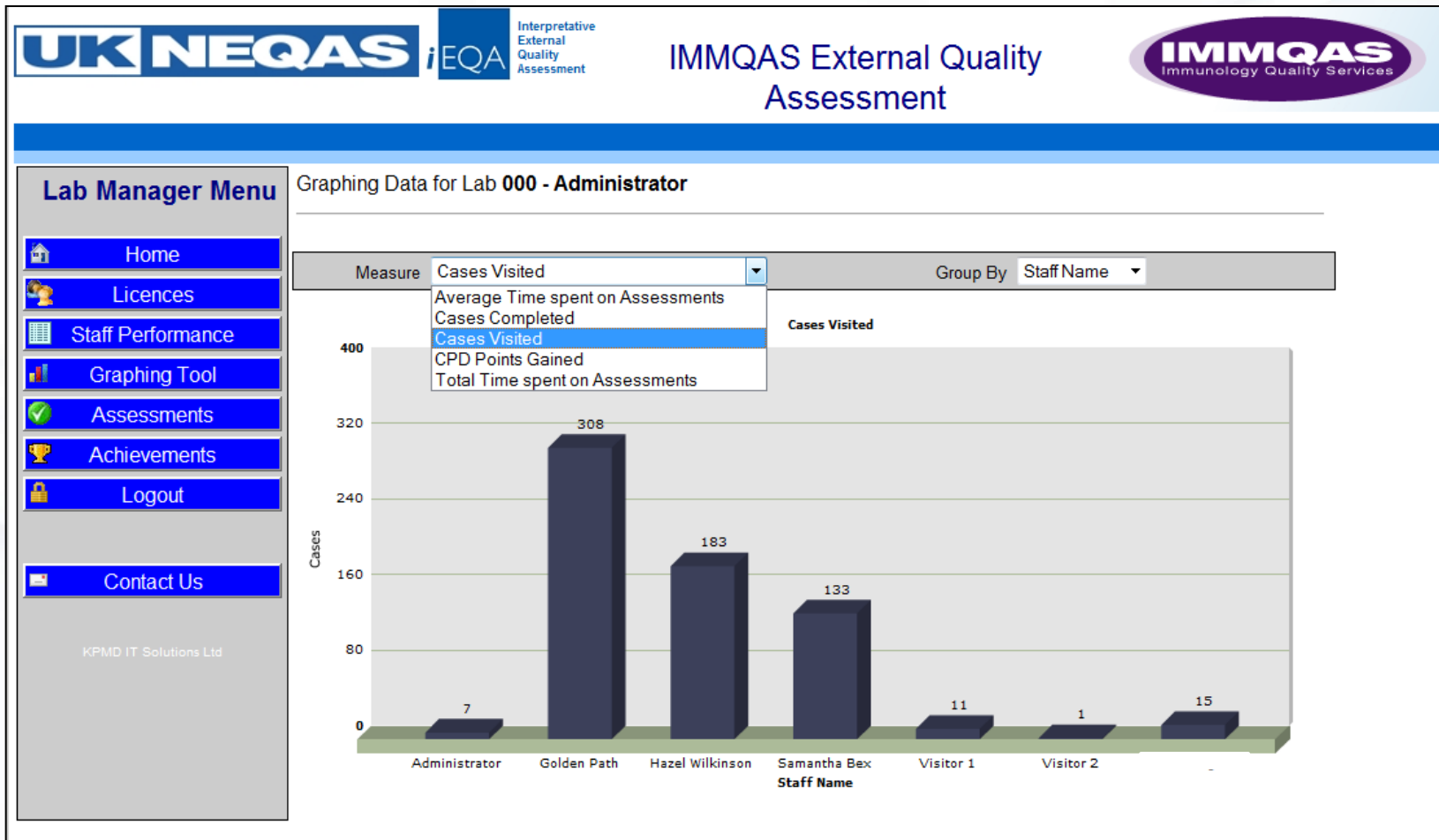
Subscription Year: **2012/2013**

[Buy More Licences](#) [Invoices](#) [New Participant](#) [Lab Details](#) [Transfer In](#)

Licences Purchased: **25** Remaining Licences: **14** Licences Applications Pending: **0**

No	Name	EMail	Grade	Tel No	Status
1	Administrator		Cons	0114 2715715	Active
2	Golden Path		Cons		Active
3	Administrator 2		BMS1	0114 2715715	Active
4	Administrator 3		BMS1		Active
5	Administrator 4		BMS1		Active
6	Hazel Wilkinson	hazel@immqas.org.uk	BMST	0114 2269755	Active
7	Samantha Bex	sam@immqas.org.uk	BMS2	0114 2269107	Active
8	Visitor 1	hazel@immqas.org.uk	BMS1	0114 2269755	Active
9	Visitor 2	hazel@immqas.org.uk	BMS1	0114 2269755	Active
10	William Egner	bill@immqas.org.uk	Cons	0114 2715715	Active
11	Admin 5	hazel@immqas.org.uk	BMS1	0114 2715715	Active

Staff Performance - Graphing Tool



Type of Registration

- Annual Registration
- Licenses issued
 - One, five, ten users per lab
- Payment by invoice or
- On line via **PayPal**[™]

Registration

IMM-QAS
Immunology Quality Services

Search

UK NEQAS **PRU** Protein Reference Units

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You are here: Home >> Participation >> iEQA

EQA Interpretative Scheme

iEQA

The iEQA System provides a:

- Web based educational scheme which tests real-time proficiency
- is CPD accredited
- All scientific laboratory and medical staff in participating laboratories can register
- Enables users to practice clinical and scientific interpretative skills in a reflective manner
- Cases include assay results, scans, x-rays, images, sample information and clinical history
- May be used by individuals as a training resource in clinical or laboratory practice
- Contains extended clinical details associated with Scheme Distributions

To register for iEQA please complete the **registration form**

Any case can be repeated as often as required to demonstrate improvement or to assist with learning

Payments are accepted via laboratory scheme registration form on-line using PayPal

For further information regarding iEQA or any of our Schemes, please either complete the relevant


Join / Participate

Add / Remove Scheme

Launch Interpretative Scheme **iEQA**

Data Entry System

Agree and Submit Registration

UK NEQAS Participant Number	<input type="text" value="12345"/>
Full Name	<input type="text" value="Samantha Bex"/>
Email Address	<input type="text" value="sam@immqas.org.uk"/>
Confirm Email	<input type="text" value="sam@immqas.org.uk"/>
Grade	<input type="text" value="Biomedical Scientist Grade 2"/>
Speciality	<input type="text" value="Immunology"/>
Hospital Address *	<input type="text" value="UK NEQAS"/>
Address Line 2	<input type="text" value="PO Box 894"/>
Address Line 3	<input type="text" value="Herries Road"/>
Town/City	<input type="text" value="Sheffield"/>
Region	<input type="text" value="South Yorkshire"/>
Country	<input type="text" value="UK"/>
Postcode	<input type="text" value="S5 7YT"/>
Primary Tel No.	<input type="text" value="0114 2715715"/>
Secondary Tel No.	<input type="text" value="0114 2269107"/>
Fax No.	<input type="text" value="0114 226754"/>
Application Type	<input type="text" value="Individual"/>
Payment Type	<input type="text" value="Workplace Invoice"/>
Order No.	<input type="text" value="1223354"/>
Number of Licences	<input type="text" value="1"/>
	
	<input type="text" value="S6R85"/>
	Load New Code
I agree with the terms and conditions	<input checked="" type="checkbox"/>
<input type="button" value="Submit Registration Form"/>	

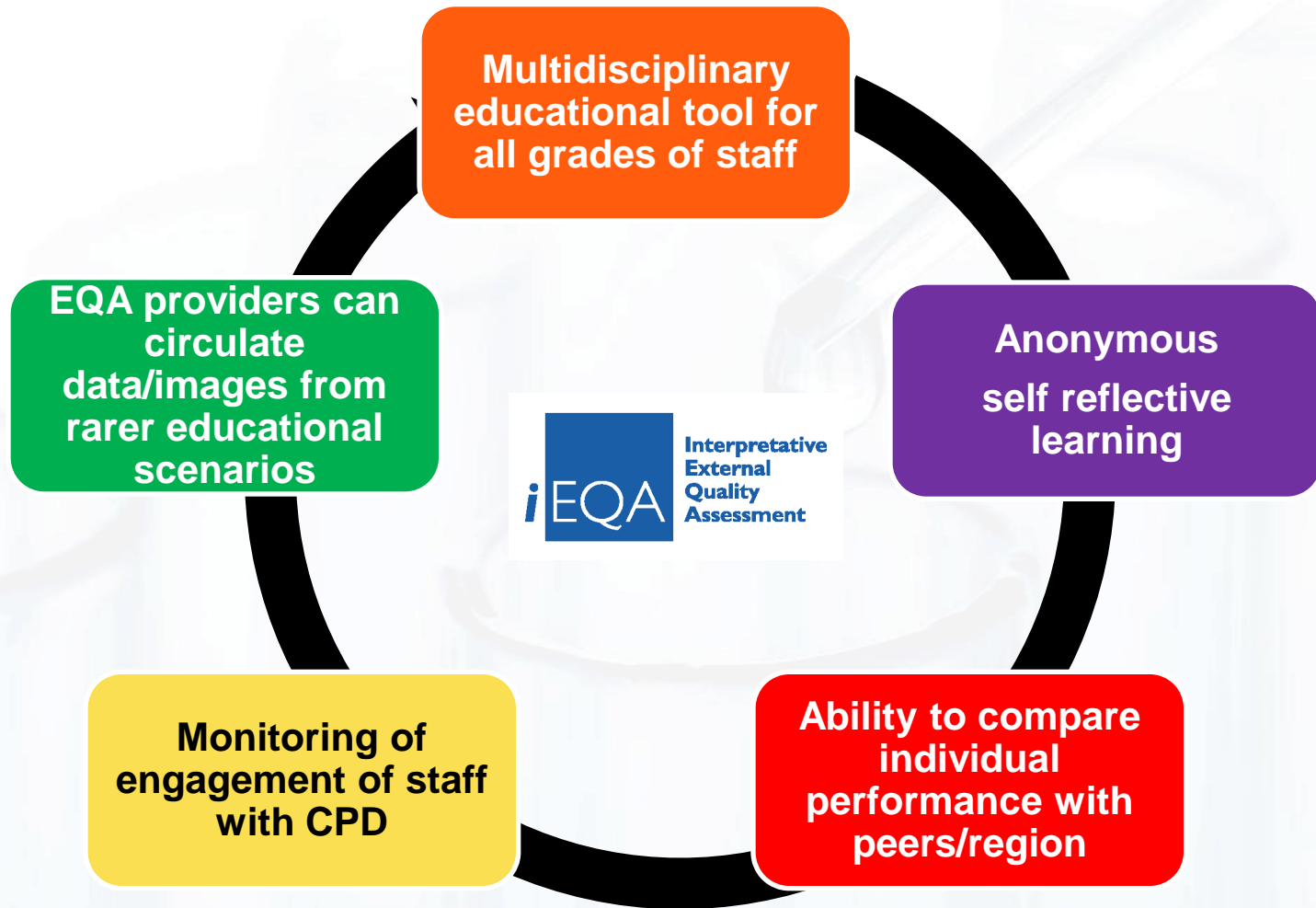
<http://www.immqas.org.uk>

- Individuals can attempt each case as many times as they like
- Materials should not be copied and remain copyrighted to UK NEQAS for Immunology, Immunochemistry & Allergy
- UK NEQAS for Immunology, Immunochemistry & Allergy reserve the right to suspend or terminate the subscription of an individual or group account in exceptional circumstances, for example (but not limited to):
 - A fraudulent payment has been made
 - Groups are using an individual subscription

- **Notes for all subscribers**
 - Subscriptions must be paid in full before access is allowed to the system (subscriptions run 1st April to 31st March annually). Once payment has been received, you will be emailed your personal login details
 - subscriptions run 1st April to 31st March annually
 - You will be sent reminder emails when the end of the subscription year is approaching; it is your responsibility to renew your subscription, and access will be terminated after 31st March until further payment is received
 - Once payment has been received, you will be emailed your personal login details
- **Notes for group subscribers**
 - Please be aware that your iEQA activity is summarised for your laboratory manager; they are able to view a summary of your activity including number of cases attempted and number of certificated gained.
- **Notes for individual subscribers**
 - Individual payments can be made via your workplace or per individual:
 - For workplace payments, please include the official order number
 - For individual payments, you will be sent an electronic invoice via PayPal
- **IGRA scheme subscribers**
 - One free iEQA registration is available for laboratories participating in the Pilot UK NEQAS for Interferon Gamma Release Assays (Mycobacterium tuberculosis) IGRA TB Scheme. Please select:

* Please Note : Individuals paying for themselves should put their home address

Why should I be interested?



What now?

- **Current status: Approximately 250 individuals are using the system**
- **Over 80 multidisciplinary cases available**
- **New cases added monthly**

Thank you for listening

Any Comments/Questions?

www.immqas.org.uk

ukneqas@immqas.org.uk

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