# **Questionnaire Traceability in EQA**



#### Proficiency Testing/External Quality Assessment: Current Challenges and Future Directions

W. Greg Miller,1\* Graham R.D. Jones,2 Gary L. Horowitz,3 and Cas Weykamp4

Table 3. Evaluation capabilities of PT/EQA related to scheme design.											
							Evaluation capability				
				Accuracy							
					Individual laboratory				Standardi harmoni		
	Sample characteristics				Relative to par- ticipant results		Reproducibility		Measurement procedure calibration traceability		
Category	Commutable	Value assigned with RMP <sup>a</sup> or CRM	Replicate samples in survey	Absolute vs RMP or CRM	Overall	Peer group	Individual laboratory intralab CV	Measurement procedure interlab CV	Absolute vs RMP or CRM	Relative to participant results	
1	Yes	Yes	Yes	Χ	Χ	Х	Χ	Χ	Χ	Х	
2	Yes	Yes	No	X	Χ	X		Χ	Χ	X	
3	Yes	No	Yes		Χ	X	X	X		X	
4	Yes	No	No		Х	X		X		X	
5	No	No	Yes			X	X	Х			
6	No	No	No			X		Х			

<sup>&</sup>lt;sup>a</sup> RMP, reference measurement procedure; CRM, certified reference material.

<sup>&</sup>lt;sup>b</sup> Standardization when patient results are equivalent between measurement procedures and calibration is traceable to SI by use of a reference measurement procedure; harmonization when patient results are equivalent between measurement procedures and calibration is not traceable to a reference measurement procedure.



	QUESTIONNAIRE	ON TRACEABILITY	1								
EQALM)											
is specification to the of the first have small											
GENERAL INFORMATION											
Name EQA organisation											
Country											
Specify the total number of measurands in the schemes of your EQA organisation											
(includes all different disciplines like clinical chemistry, immunology, haematology etc).											
Specify the total number of measurands with target values traceable to primary standard											
SPECIFIC INFORMATION FOR MEASURA			ALUES_								
Please, complete the table below for each measure	rand with traceable target	values									
Measurand	Primary Standard	Reference Method	Value Assigment	No. of Reference Laboratories	Accreditation Reference Laboratories	No. of surveys with reference method target values per year	No. of participants	Do you have also for this measurand surveys without reference method target values	No. of surveys without reference method target values per year	Accreditation EQA programme for this measurand	Comments
			1=EQA organisation 2=Reference laboratory 3=both	If reference laboratories are used for value assigment, how many labs are used?	How many of the reference laboratories are accredited and which standard?			(Yes/No)		(Yes/No)	

# <u>Aim</u>:

Investigation of the implementation of the use of value assignment with CRM or RMP's



No. of EQA organisations: 58

No. of responders: 13 (= 22.5%)

No. of responders without CRM / RMP – VA: 5

No. of responders with CRM / RMP – VA: 8

No. of responders with CRM / RMP – VA: 8

Total no. of measurands: 47 - 1500

No. of measurands with CRM / RMP – VA: 2-43

Percentage measurands with CRM / RMP – VA: 1% - 11%



Measurands	
	Measurands
Serum - 17-OH-progesterone	Serum - LDH
Serum - Aldosterone	Serum - Lithium
Serum - ALP	Serum - Magnesium
Serum - ALT	Serum - Phoshate inorganic
Serum - Amylase	Serum - Potassium
Serum - AST	Serum - Progesterone
Serum - Bilirubin total	Serum - 17-OH-progesterone
Serum - Bile acids total	Serum - Protein total
Serum - Calcium	Serum - Sodium
Serum - Chloride	Serum - Testosterone
Serum - Cholesterol	Serum - Theophylin
Serum - CK	Serum - Triglycerides
Serum - Cortisol	Serum - tT3
Serum - Creatinine	Serum - tT4
Serum - CRP	Serum - Urea
Serum - Digoxin	Serum - Uric acid
Serum - Digitoxin	Urine - Creatinine
Serum - Estradiol	Blood - Hemoglobin A1c
Serum - Estriol	Blood - Hemoglobin total
Serum - GGT	Blood - Erythrocytes
Serum - Glucose	Blood - Leucocytes
Serum - Glycerides total	



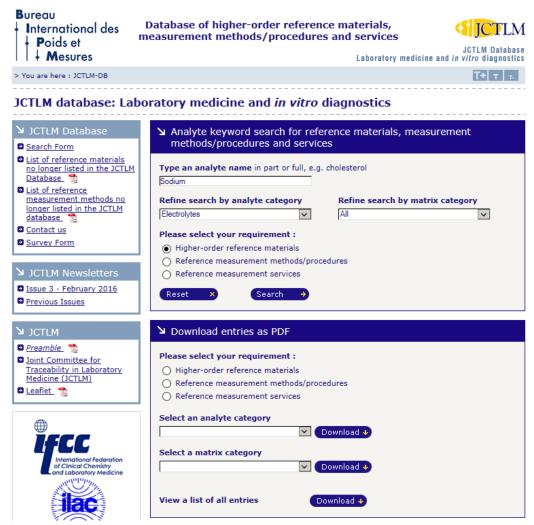
Serum - HDL Cholesterol

# **Electrolytes**

Measurand	Number	CRM	RMP
Sodium	4	SRM 919b, NIST	ICP-OES ICP-MS Flame atomic emmision
Potassium	4	SRM 918b, NIST	ICP-OES ICP-IDMS Flame atomic emmision
Calcium	4	SRM 915, NIST	ICP-OES ICP-IDMS Flame atomic emmision
Lithium	4	SRM 924a, NIST	ICP-OES ICP-IDMS Flame atomic emmision
Magnesium	4	SRM 929, NIST	ICP-OES ICP-IDMS Flame atomic emmision
Chloride	3	SRM 919b, NIST	Coulormetric titration ICP-IDMS



#### http://www.bipm.org/jctlm/home.do





## **Categories**:

- Blood counting
- Blood gases
- Blood grouping
- Coagulation Factors
- Drugs
- Electrolytes
- Enzymes
- Metabolites and substrates
- Micribial serology
- Non-electrolyte metals
- Non-peptide hormones
- Nucleic acids
- Proteins
- · Vitamines and micronutrients
- Other



## http://www.bipm.org/jctlm/home.do



						-	
Analyte	Matrix/Material	Name of the reference material	Producer	Quantity	Range of certified values in reference material	Range of expanded uncertainties for certified value	Listed in
potassium	potassium chloride; pure, crystalline compound	SRM 918b, Potassium Chloride (Clinical Standard)	NIST (National Institute of Standards and Technology), United States Phone: +1 301 975 6776 Fax: +1 301 948 3730 sminfo@nist.gov	Mass fraction	52.4121 %	0.0088 % relative Level of confidence 95 %	List I
potassium	2 % nitric acid solution	DMR-57, Potassium spectrometric solution	CENAM (Centro Nacional de Metrología), Mexico Phone: +52 (442) 211 05 00 Fax: +52 (442) 211 05 69 gsainz@cenam.mx	Mass concentration	996 mg/L	1.2 % Level of confidence 95 %	List I
potassium	frozen human serum	HRM-2002A, Potassium, Calcium and Sodium in Frozen Human Serum	HSA (Health Sciences Authority), Singapore Phone: +85 6775 1605 ext 104 Fax: +65 6775 1398 HSA_CML@hsa.gov.sg	Amount-of-substance concentration	4.03 mmol/l to 4.89 mmol/l	0.08 mmol/l to 0.13 mmol/l Level of confidence 95 %	List I
potassium	human serum	SRM 956c, Electrolytes in frozen human serum	NIST (National Institute of Standards and Technology), United States Phone: +1 301 975 6776 Fax: +1 301 948 3730 srminfo@nist.gov	Amount-of-substance concentration	1.982 mmol/L to 5.976 mmol/L	0.017 mmol/L to 0.051 mmol/L Level of confidence 95 %	List I



# **Conclusions from questionnaire**

- 1) Not all EQA organisers use samples with CRM/RMP assigned target values.
  - No CRM/RMP available?
  - Costs?
  - Organisational limitations?
- A maximum of 10% of the measurands included in an EQA programme is covered by the use of samples with CRM/RMP assigened target values.
  - Does the smaller portion reflects to largest portion of clinical test?
  - Are we limited by the fact no CRM/RMP for the neasurand is available?



#### **QUESTIONS TO BE DISCUSSED**

- 1) Can we only assess the "truth" using EQA sample with target value traceable to a CRM?
- 2) Can we only use sample directly traceable to a CRM/RMP or can we also use indirect traceability for samples used in EQA surveys?
- 3) Should all samples used in EQA surveys be traceable to a CRM/RMP?

