

# ALQEP

## Alberta Facility CAP Proficiency Testing User Guide

### Selecting a Laboratory or Laboratories:

- Once you have been granted access to a laboratory, you can log into the CAP Web site anytime to access that laboratory's program data.
- If you have access to more than one laboratory's program data, you must first select the laboratory whose program data you want to access or click on your regional access ID.
  1. Click on the **Select or Change Laboratory** link. A list is displayed of all laboratories to which you have been granted access.
  2. Select a laboratory using the appropriate radio button and click Select.
  3. If you have access to more than one laboratory's program data (<5), you must first select the laboratory whose program data you want to access
  4. For those regional coordinators who have >5 facilities in their purview choose your regional access ID (e.g. AB001) to gain access to all facilities in your jurisdiction.

To change which laboratory is selected, return to the **Select or Change Laboratory** page.

## Result Submission Process and Reporting Turn Around Timing:

### Due Dates:

- Domestic due date = kit ship date + 22 days (this is the standard domestic due date, but may vary depending on Survey)
- International due date = domestic due date + additional 21 days (grace period). The additional 21 days are added as a courtesy/grace period should there be any shipping delays or customs issues, which international laboratories sometimes experience.

### Verifying Accuracy of Instrument /Reagent Reporting Codes:

- Check the kit instructions that come with each shipment for detailed information on how to amend your manufacturer, method, instrument, reagent codes.
- Any changes made to the codes will be incorporated on your forms for the next survey shipment:

#### Example:

*Each mailing, verify the accuracy of your reporting codes (e.g., manufacturer, method, instrument, reagent) by reviewing the online result form or the Method Summary Page attached to the front of your result form.*

#### Using drop-down master lists:

1. Click on the reporting code boxes, binoculars will appear
2. Click on the binoculars
3. Click on your reporting code
4. The code will appear in the reporting code boxes

<b>Reporting Code</b>	<b>Action</b>
<i>Is listed correctly</i>	<i>No action is required</i>
<i>Is listed incorrectly</i>	<i>Locate the new code on the master list and enter it on the result form or if there is no master list, select the code directly on the result form</i>
<i>If you have changed your methodology</i>	<i>Locate the new code on the master list and enter it on the result form or if there is no master list, select the code directly on the result form</i>
<i>If “other” or “Please Provide a Valid Code” is listed</i>	<i>Review the master list for a more appropriate code and enter it on the result form or if there is no master list, select the code directly on the result form</i>
<i>If you cannot find an appropriate code</i>	<i>Select the code for “other” and describe your method in the “Use of Other” section at the end of the result form</i>

**For any testing that you do not routinely perform in your laboratory, leave all reporting areas for that test blank unless otherwise noted.**

### Code 11 (Unable to Analyze):

When a lab uses code 11 because they cannot analyze a result we ask that they ALWAYS provide an explanation. The last page of the CAP result form provides a space to put free-form comments.

ALQEP captures that information routinely in a way that allows us to see the information as results are processed. The explanatory comments are very helpful in helping us determine the nature of the problem and taking action where warranted (monitoring of sample / shipment problems for example). The comments may also in many cases prevent the issuance of a performance letters.

Comments are also supposed to be filled out (in fact all the Kit Instructions specify this) whenever a laboratory select "Other" in the peer group information.

### Reporting of Direct Bilirubins on VITROS Instruments:

The value for direct bilirubin, as reported by the VITROS System, includes all bilirubin fractions that react in the Jendrassik-Grof reaction without the addition of promoters. These include conjugated (mono- and diconjugates) and delta bilirubins. VITROS Systems use two types of VITROS Slides (TBIL and BuBc) to determine the concentration of bilirubin components in human serum. Total bilirubin (TBIL) is measured by the TBIL Slide as the diazo derivatives of unconjugated Bu, conjugated, and covalently protein-bound .delta. bilirubins. Conjugated and unconjugated bilirubins are measured simultaneously on the BuBc Slide using a dual-wavelength spectral measurement. Direct bilirubin values are calculated on VITROS Systems using these measured results and the following equation: Direct bilirubin = TBIL . Bu

### The CAP Kit instructions give the following instructions for VITROS user bilirubin reporting:

Users should **ONLY** report the following method codes:

- 1122 (Diazonium Salt-dyphilline) for total bilirubin
- 1120 (spectrophotometric without blank-Bc) for direct bilirubin
- 

When reporting direct bilirubin, **report ONLY the Bc result from the BuBc slide. Although some laboratories may routinely report out direct bilirubin as TBIL-Bu CAP asks that you report out the BC result for this Survey to facilitate concordance of results.**

### Coagulation Survey Reporting /ALQEP Follow-up:

- Although it is currently a 'CAP' requirement to report both the PT (seconds) and the INR, facilities may leave the PT reporting section blank.
- Facilities are reminded to be careful when entering results to NOT input their INR results in the PT result fields.
- **ALQEP will only be evaluating INR** performance as this is the patient reporting convention for this analyte in Alberta laboratories.

### Automated Differential Reporting:

- If facilities **ONLY** report absolute differential values on patients then it is acceptable to **ONLY** report the CAP survey absolute differential results and leave the relative differential value reporting sections blank.

### Corrections of Results:

- Corrections can be made at any time **PRIOR** to the due date indicated on the result form.
- For results that are entered, reviewed and approved on-line, corrections must also be done on-line.

### Reporting Turnaround Time:

- Canadian laboratories currently fall into the international due date category BUT are advised that these posted due dates as they apply to all international customers and in some parts of the world laboratories can experience shipping/custom delays and find the additional 21 days a necessity.
- **The CAP will be modifying their program coding logic to selectively remove the extended 21 day grace period for Canadian facilities and include Canada under the standard US domestic deadline.**
- Alberta laboratories are strongly encouraged to submit their PT results **prior to the posted due date, as soon as they complete testing**. This also ensures that their PT results are included in the data pool for the statistics run.
- **CAP runs the statistics as soon as 80% of all the PT data is submitted.**
- These statistics include setting the grading parameters. All laboratories, whether included in the statistics or not, are graded against those parameters.
- The average turnaround time for evaluation of results is two weeks after statistics are calculated, but no sooner than the domestic due date. This turnaround time may be longer or shorter depending on the nature of the Survey and the extensiveness of the grading parameters. In general, evaluations will be available for online viewing 5-6 weeks after the scheduled mailing ship date.
- Another key element to note is that the CAP provides “peer group” assessment and does not grade to a standard, which contributes to the timing involved and added value the CAP’s PT program provides. This is one of the key differences in CAP’s PT program as compared to others.



## Accessing CAP Surveys Evaluations and Reports Online:

- Log into your Web account
- Click on “e-LAB Solutions” in the Personalized Options list
- Click on “Evaluations and Reports” under “Surveys/EXCEL Proficiency Testing”

### Proficiency Testing Programs

Effective immediately, as a notice to our proficiency testing customers, for any CMS regulated analytes that your laboratory does not report or may have discontinued, you MUST notify the CAP to avoid receiving a ZERO score on your next PT evaluation. If you have any questions, please contact the CAP at 800-323-4040, option 1. If you have recently updated your CMS Analyte Reporting Selections, then this does not apply to you. Thank you.

Start Using e-LAB Solutions

New to e-LAB Solutions?

Opt In Your Lab or Organization  
Request Access to Laboratory Data

Getting Started  
Frequently Asked Questions  
Users guide (PDF, 935 K)

Select or Change Laboratory



#### Surveys/EXCEL Proficiency Testing

#### Anatomic Pathology Education Programs

#### Resources

##### Testing

- Result Forms
- Evaluations and Reports
- Analyte Scorecard

- Result Forms
- Evaluations and Reports

*Per the Federal Register, specimens must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory. Sharing of proficiency testing results with another laboratory prior to evaluation is not permitted.*

- 2008 Surveys Manual (PDF, 1 MB)
- 2008 Surveys - Hematology, Clinical Microscopy, and Body Fluids Glossary (PDF, 733 K)
- 2008 Surveys Analyte Index (PDF, 472 K)
- CMS Analyte Reporting Selections (PDF, 30 K)
- Catalogs and Shipping Calendars (PDF, 743K)
- 2008 EXCEL Manual (PDF, 743K)
- 2008 EXCEL Glossary (PDF, 836 K)

#### CAP LINKS

- View Quarterly Reports

- Select the kit you are interested in (choose a mailing name from the list or use the filter options to change what kits are listed) and click on ‘Refine List’

**Personalized Options**

- > Education Transcript
- > Committee Resources
- > Pay Dues Online
- > Change My Password
- > Update My Profile

Logout

### Evaluations and Reports

Click "View details" for the kit you wish to view. Use the filter options to modify the list of kits displayed. [View help](#) (PDF, 1.1 MB).

For some programs (PIP, NGC, PAP, DSP, NP, and FR), you must submit your results via fax. [More details](#)

[View Exception Report](#)

[View Summary Report](#)

Eval Date	Mailing	Kit #	Seq	CAP #
No results match the selected criteria. Please refine your filter options.				

**Filter Options**

Evaluated since: Select Month Select Year    Mailing(s) starting with: FH

CAP Number:   -      Kit Number:  

Refine List
Clear

- Click on "View details" link on the right side of the listed kit to access information for a specific kit



- Click on the arrow in the drop-down box under Available Reports, choose the report you wish to view and click "View Report". The following reports are available:
  - Interactive Evaluation – a dynamic report reflecting the most current data.
  - Printed Evaluation (original – includes challenge specific data and peer statistics; available in PDF format)
  - Participant Summary Report – report that details the statistics for all peer groups for the survey and provides educational material.

Logout

Evaluation Date: 8-Apr-08

**Available Reports**

Select a Report
View Report

Select a Report

Interactive Evaluation

Printed Evaluation (Original) - 8-Apr-08

Participant Summary

related education activities:

[Return to kit list](#)

▶ Contact Us

## CAP Survey Report Explanations:

### Original Evaluation Reports:

- Performance details on all analytes in the CAP survey will be included on the first several pages of the report.
- **The back/summary page on each report should be viewed with the following considerations/cautions:**
  - This summary page is designed for US laboratories only.
  - It is intended for use for the reporting to the Centers for Medicare & Medicaid (CMS) which is the US federal regulatory agency to which all US diagnostic laboratories are required to report regulated proficiency testing data.
  - CAP includes this CMS summary page in their evaluation reports as they are required to provide laboratories with an exact copy of the summary that is provided to the CMS.
  - This summary includes CLIA/CMS regulated analytes only and IS NOT comprehensive of all analytes performed in the survey. For example in the US, MCV, RDW and INR are not regulated analytes and would therefore not be included on the summary page.
  - The summary page also may contain performance summary data from multiple surveys as they list data from all programs that are included in a particular subspecialty. For example, hematology, coagulation and clinical microscopy data will be shown together on a summary page.
  - Laboratories that receive 'non-graded' codes will notice that on the summary page some analytes are not 'penalized' as having unacceptable performance (e.g. not enough participants in peer group). The effect of these 'not graded reason codes' is as follows:

#### **Assessed as satisfactory for CMS purposes:**

Benefit codes = 11, 20, 22, 27, 28, 30, 33, 44, 55, 88 and 92

Ignore codes = 21, 26, 29, 31, 35, 43 and 46

#### **Note:**

- A laboratory should only utilize code 11 if there is some extra ordinary event that prevents them from performing the test (i.e., the specimen broke and no replacements were available).

- CMS requires a scorecard for every regulated analyte and the absence of a scorecard is considered a failure to perform PT, so this is the fundamental explanation for why CAP can not simply list N/A for the analytes coded as 11 or 20. CMS needs to know that the laboratory attempted to perform PT and the 5/5 score indicates such. CMS has indicated that Code 20 and 11 should be a benefit. The exception codes are provided along with the scorecards so that the regulatory agency is aware of the extenuating circumstances.
- The PT Exception and Summary Reports will include reference to these codes, so that it is clear that the score was due to a specific exception code. These codes can be a benefit (as in the case of code 20 and 11) or a penalty (as in code 42).

**Assessed as unsatisfactory for CMS purposes:**

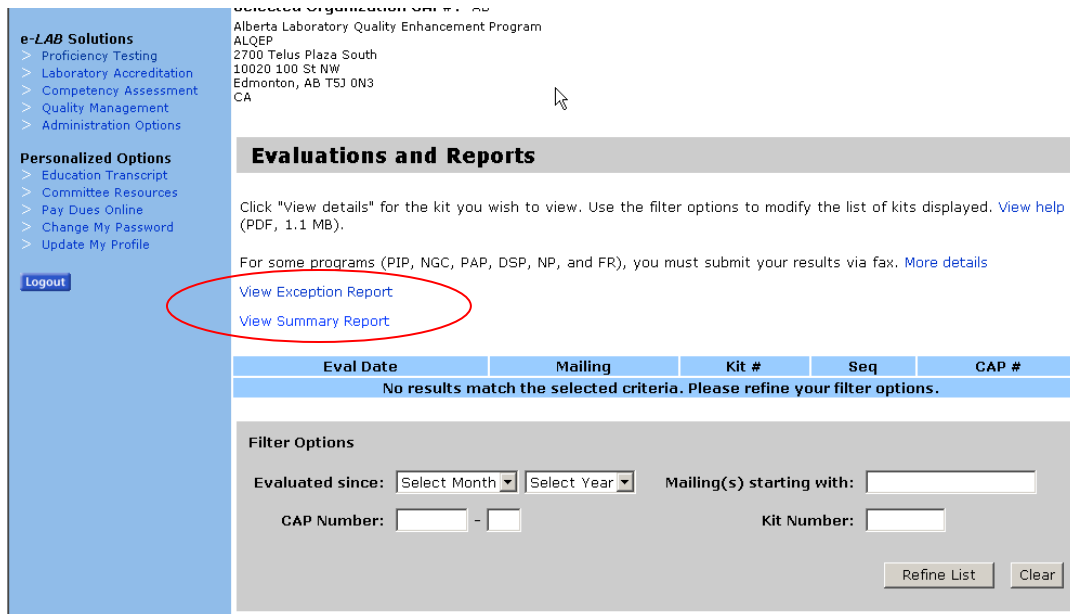
Penalty codes = 24, 25, 40, 41, 42, 77 and 91

- **Canadian laboratories are encouraged to focus on the on-line e-LAB solution tools/reports (PT Exception or PT Summary Reports).**

## On-line Management Reports: Exception Reports and PT Summary Reports (multiple kits/facilities)

\*\*\*only available through the regional access ID

- Go to e-LAB Solutions
- Click on Proficiency testing link on left side of screen
- Click on *Evaluations and Reports* under Surveys/EXCEL Proficiency Testing



**e-LAB Solutions**

- > Proficiency Testing
- > Laboratory Accreditation
- > Competency Assessment
- > Quality Management
- > Administration Options

**Personalized Options**

- > Education Transcript
- > Committee Resources
- > Pay Dues Online
- > Change My Password
- > Update My Profile

[Logout](#)

**Selected Organization CAP#: AB**  
Alberta Laboratory Quality Enhancement Program  
ALQEP  
2700 Telus Plaza South  
10020 100 St NW  
Edmonton, AB T5J 0N3  
CA

### Evaluations and Reports

Click "View details" for the kit you wish to view. Use the filter options to modify the list of kits displayed. [View help](#) (PDF, 1.1 MB).

For some programs (PIP, NGC, PAP, DSP, NP, and FR), you must submit your results via fax. [More details](#)

[View Exception Report](#)

[View Summary Report](#)

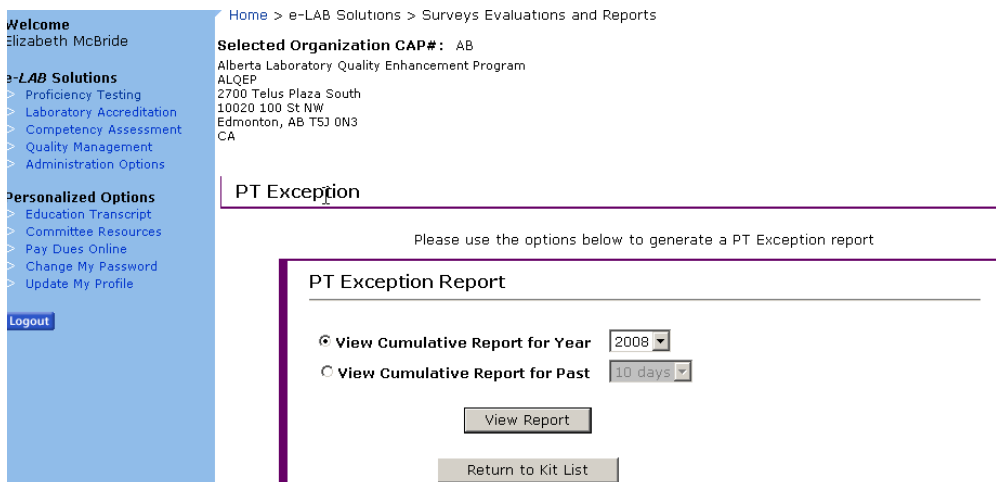
Eval Date	Mailing	Kit #	Seq	CAP #
No results match the selected criteria. Please refine your filter options.				

**Filter Options**

Evaluated since:   Mailing(s) starting with:

CAP Number:  -  Kit Number:

Click on *View Exception Report* to see all the PT exceptions for all facilities and all surveys under your purview



**Welcome**  
Elizabeth McBride

**e-LAB Solutions**

- > Proficiency Testing
- > Laboratory Accreditation
- > Competency Assessment
- > Quality Management
- > Administration Options

**Personalized Options**

- > Education Transcript
- > Committee Resources
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- > Update My Profile

[Logout](#)

Home > e-LAB Solutions > Surveys Evaluations and Reports

**Selected Organization CAP#: AB**  
Alberta Laboratory Quality Enhancement Program  
ALQEP  
2700 Telus Plaza South  
10020 100 St NW  
Edmonton, AB T5J 0N3  
CA

### PT Exception

Please use the options below to generate a PT Exception report

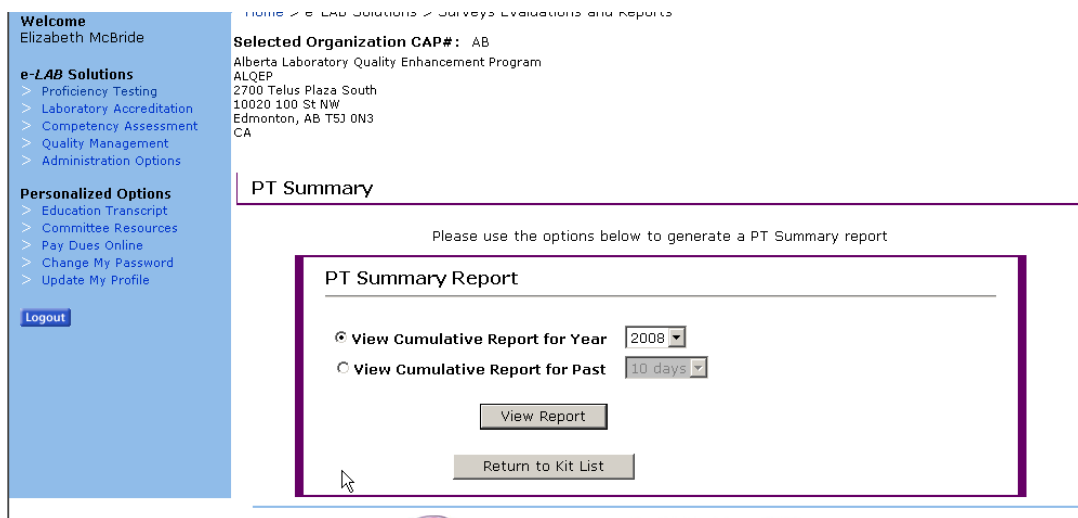
**PT Exception Report**

**View Cumulative Report for Year**

**View Cumulative Report for Past**

- Once the *PT Exception Report* is displayed click on the [blue underlined link](#) for the particular **test OR kit number** that has a PT exception to view the *Original Evaluation Report* complete with all evaluation and comparative method statistics.
- The Original Evaluation Report can be exported to PDF.

Click on **View Summary Report** to see a summary of all performance data for all facilities within your purview



The screenshot shows the ALQEP web application interface. On the left is a navigation menu with sections: 'Welcome Elizabeth McBride', 'e-LAB Solutions' (with sub-items: Proficiency Testing, Laboratory Accreditation, Competency Assessment, Quality Management, Administration Options), and 'Personalized Options' (with sub-items: Education Transcript, Committee Resources, Pay Dues Online, Change My Password, Update My Profile). A 'Logout' button is at the bottom of the menu. The main content area shows the 'Selected Organization CAP#: AB' and its address: 'Alberta Laboratory Quality Enhancement Program, ALQEP, 2700 Telus Plaza South, 10020 100 St NW, Edmonton, AB T5J 0N3, CA'. Below this is a 'PT Summary' section with a heading and a sub-heading 'Please use the options below to generate a PT Summary report'. A form titled 'PT Summary Report' contains two radio buttons: 'View Cumulative Report for Year' (selected) with a dropdown menu showing '2008', and 'View Cumulative Report for Past' with a dropdown menu showing '10 days'. Below the radio buttons are two buttons: 'View Report' and 'Return to Kit List'.

The *PT Summary Report* includes the following:

- CAP #
- Year
- Event
- Evaluation Date
- Kit #
- Survey
- Score (e.g. 5/5 )
- % Satisfactory
- Test name

**Important:**

- Both the *PT Exception* and the *PT Summary Report* may be exported either to Excel or PDF.**
- The analytes are sorted by the subspecialties as indicated on the left hand side of the reports (e.g. Hematology – includes hematology, coagulation and clinical microscopy)**

## For Analyte Scorecards:

- Go to e-LAB Solutions
- Click on Proficiency testing link on left side of screen
- Click on *Analyte Scorecard* under Surveys/EXCEL Proficiency Testing
- All Analyte Scorecard Search - this report lets you see a compiled version of all scorecard data currently on file for a laboratory and includes performance across up to six mailings.
- This report/functionality is only available for individual laboratory access (not via the regional access ID).

**CAP Contacts for Alberta Facilities:**

**Kathy Mortell**  
Manager, Client Relations  
[kmortel@cap.org](mailto:kmortel@cap.org)  
800-323-4040 ext. 7356  
Fax 847-832-8356

CAP point person working with  
ALQEP office

**Tammy Sabado**  
Customer Contact Center  
[tsabado@cap.org](mailto:tsabado@cap.org)  
800-323-4040 ext. 3640  
Fax 847-832-8640

CAP point person working with  
Alberta Regional Contacts

**Customer Contact Center**  
800-323-4040 option 1

Additional CAP representatives to  
assist with day to day operations

**Other CAP Resource Links:****2012 CAP Shipping Calendar**

[http://www.cap.org/apps/docs/proficiency\\_testing/2012\\_surveys\\_calendar.pdf](http://www.cap.org/apps/docs/proficiency_testing/2012_surveys_calendar.pdf)

**2012 Surveys Catalog**

[http://www.cap.org/apps/docs/proficiency\\_testing/2012\\_surveys\\_catalog.pdf](http://www.cap.org/apps/docs/proficiency_testing/2012_surveys_catalog.pdf)

## 2012 ALQEP Mandated CAP Programs

Programs in red are newly mandated for 2012

Hematology & Coagulation	
CGL	Coagulation – Limited
HE	Basic Hematology
FH Series (FH1-4,6,9,10)	Hematology Automated Differentials
HCC	HemoCue (Hemoglobin – waived combination)
BP	Blood Parasite - ( for all laboratories performing manual peripheral blood smears)
Transfusion Medicine	
JAT	Transfusion Automated Testing
DAT	Direct Antiglobulin Testing
ABT	Antibody Titre
HBF	Fetal Red Cell Determination
Chemistry	
CZ	CZ - General Chemistry & Therapeutic Drugs (includes mandated endocrinology and lipid analytes)
K	Ligand Assay, general
BNP	B-type Natriuretic Peptides
PCARM	Plasma Cardiac Markers
CRT	Cardiac Markers - CK-MB, Myoglobin, Troponin I
CRTI	Cardiac Markers, Comprehensive – CRT plus CK isoenzymes, LD isoenzymes and ratios)
TNT	Troponin T (for labs only doing Troponin T)
GH2	Glycohemoglobin
NB	Neonatal Bilirubin
AL2	Alcohols/Volatiles
SO	Blood Oximetry
Blood Gases	
AQ	Critical Care Aqueous Blood Gas - blood gases, ionized calcium, electrolytes, hematocrit, estimated hemoglobin, lactate, ionized magnesium
AQ2	Critical Care Aqueous Blood Gas - AQ plus creatinine, glucose, urea nitrogen
AQ3	AQ for iSTAT
AQ4	AQ2 for iSTAT
Cytopathology	
*PAPKE1 / PAPME1	PAP Educational Gynecologic Cytopathology – SurePath™ / ThinPrep®
NGC	Non-gynecologic Cytopathology
FNAG	Fine Needle Aspirate – Glass Slides
CHPVM / CHPVK	HPV – CHPVM: ThinPrep PreservCyte® Transport Medium / CHPVK: SurePath™ Preservative Fluid Transport Medium

## 2012 ALQEP Mandated CAP Programs - continued

<b>Histotechnology</b>	
<b>**HQIP or HQIPBX</b>	NSH / CAP HistoQIP / HistoQIP Biopsy Series
<b>&amp; General Immunohistochemistry &amp; Predictive Markers</b>	
<b>MK</b>	Immunohistochemistry - general
<b>HER2</b>	Immunohistochemistry - HER2
<b>PM1, PM2, PM3, PM4</b>	Immunohistochemistry – Predictive Markers: PM1 – CD117, PM2 – ER/PR, PM3 – CD20, PM4 - EGFR

Note:

\* CAP PAP Educational Programs are intended for laboratories that are NOT subject to US regulations that perform gynecologic Cytopathology.

\*\* Laboratories are expected to enroll in the HistoQIP program that best suits their service (tissues / stains offered). The BX program is limited to H&E (Hematoxylin and Eosin) stain only and does not offer special or IHC stains.

& Laboratories are expected to enroll in all applicable immunohistochemistry and predictive marker surveys based on their scope of service.

All of the above programs are offered in SI units where appropriate. Participants receive directions from CAP regarding SI unit data entry.

### ALQEP Performance Follow-up

- As in the past, Laboratories are advised to perform their routine internal performance follow-up activities and are only required to submit an *ALQEP Performance Investigation Form* (PIF) documenting these actions if requested in writing to do so by ALQEP.
- The current assessment algorithms (2 unacceptable results on one survey, or one unacceptable result on two consecutive surveys) are still in place and will initiate ALQEP correspondence and a requirement for a PIF.