

4/4/2025
LLENVIOE
LLENVIOA

PROFICIENCY TESTING SERVICE
LABORATORY SERVICES PROGRAM
DEPARTMENT OF HEALTH OF PUERTO RICO

PAGE : 1 (23)
DATE : 4/4/2025
TIME : 11:56:10

SP: 40 IMMUNOLOGY

Lic. No.:

CLIA #:

SUB: 120 GENERAL

Lab:

Shipping Date: 04-07-2025

Report Date: 04-25-2025

Receiving Date: _____ ,

TEST	MET	2025-361	2025-362	2025-363	2025-364	2025-365	
094 C3	_____	_____	_____	_____	_____	_____	MG/DL
095 C4	_____	_____	_____	_____	_____	_____	MG/DL
099 IgA	_____	_____	_____	_____	_____	_____	MG/DL
100 IgG	_____	_____	_____	_____	_____	_____	MG/DL
102 IgM	_____	_____	_____	_____	_____	_____	MG/DL

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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TEST	MET	2025-371	2025-372	2025-373	2025-374	2025-375	
088 ALPHA-FETO	_____	_____	_____	_____	_____	_____	ng/ml
101 IgE	_____	_____	_____	_____	_____	_____	IU/ml

DATE: _____

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TEST	MET	2025-341	2025-342	2025-343	2025-344	2025-345
089 ANA-QUALI.	_____	_____	_____	_____	_____	_____
090 ANA-PATTER	_____	_____	_____	_____	_____	_____
124 ANA-QUANT.	_____	_____	_____	_____	_____	_____

DATE: _____

SIGNATURES: _____

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TEST	MET	2025-351	2025-352	2025-353	2025-354	2025-355
091 ASOT-QUALI	___	___	___	___	___	___
092 ASOT SEMIQ	___	___	___	___	___	___
103 MONO QUAL	___	___	___	___	___	___
104 MONO QUANT	___	___	___	___	___	___
105 RF(RA)-QUA	___	___	___	___	___	___
106 RA-SEMIQNT	___	___	___	___	___	___
144 CRP-QUALI.	___	___	___	___	___	___
145 CRP- QUANT	___	___	___	___	___	___
168 RA-QUANTI	___	___	___	___	___	___

MG/DL

DATE: _____

SIGNATURES: _____

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TEST	MET	2025-356	2025-357	2025-358	2025-359	2025-360	
392 NR ASOT SQ	___	___	___	___	___	___	
403 NR MONO QL	___	___	___	___	___	___	
404 NR MONO QN	___	___	___	___	___	___	
405 NR RF(RA)Q	___	___	___	___	___	___	
406 NR RA-SEMI	___	___	___	___	___	___	
468 NR RA-QUAN	___	___	___	___	___	___	
484 NR CRP-Qu1	___	___	___	___	___	___	
485 NR CRP-QNT	___	___	___	___	___	___	MG/DL
524 NR ASOT-QU	___	___	___	___	___	___	
525 NR CRP-QUA	___	___	___	___	___	___	
526 NR CRP- QU	___	___	___	___	___	___	MG/DL

DATE: _____

SIGNATURES: _____

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Report Date: 04-25-2025

Receiving Date: _____ ,

TEST	MET	2025-381	2025-382	2025-383	2025-384	2025-385
155 H. PYLORI	_____	_____	_____	_____	_____	_____

RESULT CODES DESCRIPTION:

01 - NEGATIVE OR NON REACTIVE

02 - POSITIVE OR REACTIVE

DATE: _____

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TEST	MET	2025-211	2025-212	2025-213	2025-214	2025-215
093 HIV	---	---	---	---	---	---
096 HBsAG	---	---	---	---	---	---
097 antiHBC	---	---	---	---	---	---
171 HCV Hep C	---	---	---	---	---	---
181 HAV Total	---	---	---	---	---	---
182 HBsAb	---	---	---	---	---	---
183 HAV IgM	---	---	---	---	---	---

RESULT CODES DESCRIPTION:

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- 02 - POSITIVE OR REACTIVE

DATE: _____

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TEST	MET	2025-331	2025-332	2025-333	2025-334	2025-335
107 RUBELLA-QL	_____	_____	_____	_____	_____	_____

DATE: _____

SIGNATURES: _____

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CLIA #:

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Lab:

Shipping Date: 04-07-2025

Report Date: 04-25-2025

Receiving Date: _____ ,

TEST	MET	UNI	2025-331	2025-332	2025-333	2025-334	2025-335
108 RUBELLA-QT	___	___	___	___	___	___	___

DATE: _____

SIGNATURES: _____

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Lab:

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Report Date: 04-25-2025

Receiving Date: _____ ,

TEST	MET	2025-121	2025-122	2025-123	2025-124	2025-125
548 MYCOPLASMA	_____	_____	_____	_____	_____	_____

DATE: _____

SIGNATURES: _____

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SUB: 120 GENERAL Lab:

Shipping Date: 04-07-2025

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Receiving Date: _____ ,

554 COVID-19 ANTIBODY IgM e IgG

SAMPLE No. R E S U L T C O D E

2025-271	_____
2025-272	_____
2025-273	_____
2025-274	_____
2025-275	_____

DATE: _____

SIGNATURES: _____

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SP: 40 IMMUNOLOGY Lic. No.: CLIA #:
SUB: 130 SYPHILIS SEROLOGY Lab:
Shipping Date: 04-07-2025
Report Date: 04-25-2025
Receiving Date: _____ ,

TEST MET REA 2025-321 2025-322 2025-323 2025-324 2025-325
109 SY.SERO-QL _____

REAGENT LOT# _____

RESULTS CODE

METHOD CODE: QUALITATIVE
01- VDRL 01- NR
02- RPR 02- WR
03- RST 03- R Non
 RPR
04- MHA-TP 04- R RPR
 Met
05- FTA-ABS
06- EIA
07- TPPA
997- OTHER, SPECIFY

110 SY.SERO-QT _____

REAGENT LOT# _____

RESULTS CODE

METHOD CODE: QUANTITATIVE
01- VDRL 01- NR 09- R- 64 DILS.
02- RPR 02- WR- 0 10- R- > 64 DILS.
 DIL.
03- RST 03- R- 1 DIL.
04- MHA-TP 04- R- 2 DILS.
05- FTA-ABS 05- R- 4 DILS.
06- EIA 06- R- 8 DILS.
07- TPPA 07- R- 16 DILS.
997- OTHER, SPECIFY 08- R- 32 DILS.

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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SP: 50 MICROBIOLOGY Lic. No.: CLIA #:

SUB: 140 BACTERIOLOGY Lab:

Shipping Date: 04-07-2025

Report Date: 04-25-2025

Receiving Date: _____ ,

111 BACTERIOLOGY GRAM STAIN

SAMPLE No. R E S U L T C O D E

2025-221	_____
2025-222	_____
2025-223	_____
2025-224	_____
2025-225	_____

RESULTS CODE:

01 - GRAM NEGATIVE

02 - GRAM POSITIVE

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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 SUB: 140 BACTERIOLOGY Lab:
 Shipping Date: 04-07-2025
 Report Date: 04-25-2025
 Receiving Date: _____ ,

TEST	2025-231	2025-232	2025-233	2025-234	2025-235
147 STREP DIRE	_____	_____	_____	_____	_____

RESULT CODES DESCRIPTION:

- 01 - NEGATIVE OR NON REACTIVE
- 02 - POSITIVE OR REACTIVE

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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SUB: 140 BACTERIOLOGY Lab:

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112 BACTERIOLOGY - IDENTIFICATION

SAMPLE No.	CULTURE TYPE	ID./METHOD CODE	BACTERIA ID. CODE	DESCRIPTION
2025-241	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-242	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-243	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-244	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-245	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

CULTURE TYPE (CUT) CODE: 01 - AEROBIC 02 - ANAEROBIC

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

SP: 50 MICROBIOLOGY Lic. No.: CLIA #:
SUB: 140 BACTERIOLOGY Lab:
Shipping Date: 04-07-2025
Report Date: 04-25-2025
Receiving Date: _____ ,

113 BACTERIOLOGY-ANTIMICROBIAL SUSCEPTIBILI.

PLEASE INCLUDED ANTIMICROBIAL, SUSCEPTIBILITY METHOD CODE _____

SAMPLE No. 2025-244

ANTIMICROBIAL AGENT CODE	INTERPRETATION	INHIBITORY ZONE DIAM. (MM) - WHOLE NUMBER ONLY	MIC RANGE (MCG/ML)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

INTERPRETATION CODE:
01 - SUSCEPTIBLE 02 - INTERMEDIATE 03 - MODERATELY SUSCEPTIBLE 04 - RESITANT

DATE: _____ SIGNATURES: _____

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SUB: 140 BACTERIOLOGY Lab:

Shipping Date: 04-07-2025

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113 BACTERIOLOGY-ANTIMICROBIAL SUSCEPTIBILI.

PLEASE INCLUDED ANTIMICROBIAL, SUSCEPTIBILITY METHOD CODE _____

SAMPLE No. 2025-245

ANTIMICROBIAL AGENT CODE	INTERPRETATION	INHIBITORY ZONE DIAM. (MM) - WHOLE NUMBER ONLY	MIC RANGE (MCG/ML)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

INTERPRETATION CODE:
01 - SUSCEPTIBLE 02 - INTERMEDIATE 03 - MODERATELY SUSCEPTIBLE 04 - RESITANT

DATE: _____ SIGNATURES: _____

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SP: 50 MICROBIOLOGY Lic. No.: CLIA #:
SUB: 170 PARASITOLOGY Lab:
Shipping Date: 04-07-2025
Report Date: 04-25-2025
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120 IDENTIFICATION OF PARASITES

SAMPLE No.	PARASITE CODE	DESCRIPTION	STAGE	FREQUENCY
2025-311	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-312	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-313	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-314	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2025-315	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

DATE: _____ SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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SUB: 170 PARASITOLOGY Lab:

Shipping Date: 04-07-2025

Report Date: 04-25-2025

Receiving Date: _____ ,

420 Non Routine: PARASITOLOGY-CONCENTRATIONS PREPARATIONS

SAMPLE No. R E S U L T C O D E

2025-316	_____
2025-317	_____
2025-318	_____
2025-319	_____
2025-320	_____

DATE: _____

SIGNATURES: _____

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SUB: 170 PARASITOLOGY Lab:

Shipping Date: 04-07-2025

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121 PRESENCE OR ABSENCE OF PARASITES

SAMPLE No.	R E S U L T C O D E
2025-311	_____
2025-312	_____
2025-313	_____
2025-314	_____
2025-315	_____

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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SP: 50 MICROBIOLOGY Lic. No.: CLIA #:

SUB: 180 Virology Lab:

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176 INFLUENZA A&B QUALITATIVE RAPID TEST

SAMPLE No. R E S U L T C O D E

2025-251	_____
2025-252	_____
2025-253	_____
2025-254	_____
2025-255	_____

DATE: _____

SIGNATURES: _____

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SUB: 180 Virology Lab:

Shipping Date: 04-07-2025

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TEST	REA	2025-251	2025-252	2025-253	2025-254	2025-255
555 RSV Virus	_____	_____	_____	_____	_____	_____

DATE: _____

SIGNATURES: _____

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SUB: 180 Virology Lab:

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TEST	MET	2025-251	2025-252	2025-253	2025-254	2025-255
561 COV19ANT	_____	_____	_____	_____	_____	_____

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____