

4/6/2026  
LLENVIOE  
LLENVIOA

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

PAGE : 1 (22)  
DATE : 4/6/2026  
TIME : 11:15:56

SP: 40 IMMUNOLOGY

Lic. No.:

CLIA #:

SUB: 120 GENERAL

Lab:

Shipping Date: 04-06-2026

Report Date: 04-24-2026

Receiving Date: \_\_\_\_\_ ,

TEST	MET	2026-361	2026-362	2026-363	2026-364	2026-365	
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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LABORATORY SERVICES PROGRAM  
DEPARTMENT OF HEALTH OF PUERTO RICO

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TEST	MET	2026-371	2026-372	2026-373	2026-374	2026-375	
088 ALPHA-FETO	_____	_____	_____	_____	_____	_____	ng/ml
101 IgE	_____	_____	_____	_____	_____	_____	IU/ml

DATE: \_\_\_\_\_

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Lab:

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Receiving Date: \_\_\_\_\_ ,

TEST	MET	2026-341	2026-342	2026-343	2026-344	2026-345
089 ANA-QUALI.	_____	_____	_____	_____	_____	_____
090 ANA-PATTER	_____	_____	_____	_____	_____	_____
124 ANA-QUANT.	_____	_____	_____	_____	_____	_____

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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Receiving Date: \_\_\_\_\_ ,

TEST	MET	2026-351	2026-352	2026-353	2026-354	2026-355
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: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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TEST	MET	2026-356	2026-357	2026-358	2026-359	2026-360	
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: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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Lab:

Shipping Date: 04-06-2026

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Receiving Date: \_\_\_\_\_ ,

TEST	MET	2026-381	2026-382	2026-383	2026-384	2026-385
155 H. PYLORI	_____	_____	_____	_____	_____	_____

RESULT CODES DESCRIPTION:

01 - NEGATIVE OR NON REACTIVE

02 - POSITIVE OR REACTIVE

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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Lab:

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TEST	MET	2026-211	2026-212	2026-213	2026-214	2026-215
093 HIV	_____	_____	_____	_____	_____	_____
096 HBsAG	_____	_____	_____	_____	_____	_____
097 antiHBC	_____	_____	_____	_____	_____	_____
171 HCV Hep C	_____	_____	_____	_____	_____	_____
181 HAV Total	_____	_____	_____	_____	_____	_____
182 HBsAb	_____	_____	_____	_____	_____	_____
183 HAV IgM	_____	_____	_____	_____	_____	_____

RESULT CODES DESCRIPTION:

01 - NEGATIVE OR NON REACTIVE

02 - POSITIVE OR REACTIVE

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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Lic. No.:

CLIA #:

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Lab:

Shipping Date: 04-06-2026

Report Date: 04-24-2026

Receiving Date: \_\_\_\_\_ ,

TEST

MET

2026-331

2026-332

2026-333

2026-334

2026-335

107 RUBELLA-QL \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_  
\_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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SUB: 120 GENERAL                      Lab:  
Shipping Date: 04-06-2026  
Report Date: 04-24-2026  
Receiving Date: \_\_\_\_\_ ,  
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TEST	MET	UNI	2026-331	2026-332	2026-333	2026-334	2026-335
108 RUBELLA-QT	___	___	_____	_____	_____	_____	_____

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_  
\_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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SP: 40 IMMUNOLOGY

Lic. No.:

CLIA #:

SUB: 120 GENERAL

Lab:

Shipping Date: 04-06-2026

Report Date: 04-24-2026

Receiving Date: \_\_\_\_\_ ,

TEST	MET	2026-121	2026-122	2026-123	2026-124	2026-125
548 MYCOPLASMA	_____	_____	_____	_____	_____	_____

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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PROFICIENCY TESTING SERVICE  
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SP: 40 IMMUNOLOGY                      Lic. No.:                      CLIA #:  
SUB: 130 SYPHILIS SEROLOGY          Lab:  
Shipping Date: 04-06-2026  
Report Date: 04-24-2026  
Receiving Date: \_\_\_\_\_ ,  
-----

TEST	MET	REA	2026-321	2026-322	2026-323	2026-324	2026-325
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  
DIL.

10- R- > 64 DILS.

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: 04-06-2026

Report Date: 04-24-2026

Receiving Date: \_\_\_\_\_ ,

111 BACTERIOLOGY GRAM STAIN

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

2026-221	_____
2026-222	_____
2026-223	_____
2026-224	_____
2026-225	_____

RESULTS CODE:

01 - GRAM NEGATIVE

02 - GRAM POSITIVE

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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

SUB: 140 BACTERIOLOGY                      Lab:

Shipping Date: 04-06-2026

Report Date: 04-24-2026

Receiving Date: \_\_\_\_\_ ,

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TEST	2026-231	2026-232	2026-233	2026-234	2026-235
147 STREP DIRE	_____	_____	_____	_____	_____

RESULT CODES DESCRIPTION:

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

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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 SP: 50 MICROBIOLOGY Lic. No.: CLIA #:  
 SUB: 140 BACTERIOLOGY Lab:  
 Shipping Date: 04-06-2026  
 Report Date: 04-24-2026  
 Receiving Date: \_\_\_\_\_ ,  
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112 BACTERIOLOGY - IDENTIFICATION

SAMPLE No.	CULTURE TYPE	ID./METHOD CODE	BACTERIA ID. CODE	DESCRIPTION
2026-241	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-242	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-243	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-244	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-245	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

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

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_





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SP: 50 MICROBIOLOGY Lic. No.: CLIA #:  
SUB: 170 PARASITOLOGY Lab:  
Shipping Date: 04-06-2026  
Report Date: 04-24-2026  
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120 IDENTIFICATION OF PARASITES

SAMPLE No.	PARASITE CODE	DESCRIPTION	STAGE	FREQUENCY
2026-311	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-312	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-313	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-314	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
2026-315	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

DATE: \_\_\_\_\_ SIGNATURES: \_\_\_\_\_  
\_\_\_\_\_  
DIRECTOR'S SIGNATURE: \_\_\_\_\_

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SUB: 170 PARASITOLOGY Lab:

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420 Non Routine: PARASITOLOGY-CONCENTRATIONS PREPARATIONS

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

2026-316	_____
2026-317	_____
2026-318	_____
2026-319	_____
2026-320	_____

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_

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SUB: 170 PARASITOLOGY Lab:

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121 PRESENCE OR ABSENCE OF PARASITES

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

2026-311	_____
2026-312	_____
2026-313	_____
2026-314	_____
2026-315	_____

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_



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

SUB: 180 Virology                              Lab:

Shipping Date: 04-06-2026

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TEST	REA	2026-251	2026-252	2026-253	2026-254	2026-255
555 RSV Virus	_____	_____	_____	_____	_____	_____

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

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

SUB: 180 Virology                      Lab:

Shipping Date: 04-06-2026

Report Date: 04-24-2026

Receiving Date: \_\_\_\_\_ ,

TEST	MET	2026-251	2026-252	2026-253	2026-254	2026-255
561 COV19ANT	_____	_____	_____	_____	_____	_____

DATE: \_\_\_\_\_

SIGNATURES: \_\_\_\_\_

DIRECTOR'S SIGNATURE: \_\_\_\_\_