

11/7/2022

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

PAGE : 1 (18)
DATE : 11/7/2022
TIME : 08:17:36

LLLENVIOE
LLLENVIOA

SP: 20 HEMATOLOGY

Lic. No.:

CLIA #:

SUB: 070 GENERAL

Lab:

Shipping Date: 11-07-2022

Report Date: 11-25-2022

Receiving Date: _____ ,

072 HEMATOLOGY CELL IDENTIFICATION

Locate your identification in the Master List for GENERAL Transparencies and enter in the appropriate boxes the code. The list includes all identification that will be required. There is no provision to enter "Other, specify".

TRANSPARENCIES NO.

MASTER LIST TRANSPARENCIES
CODE

2022-891

2022-892

2022-893

2022-894

2022-895

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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372 Non Routine: HEMATOLOGY CELL IDENTIFICATION

SAMPLE No.

R E S U L T C O D E

2022-896

2022-897

2022-898

2022-899

2022-900

DATE: _____

SIGNATURES: _____

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172 DIFF-AT.5

PRO	WBC	S/I	2022911X	2022912X	2022913X	2022914X	2022915X
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

DATE: _____

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185 Diff 6 Parameter Instruments Test

SAMPLE No.

R E S U L T C O D E

2022911Y

2022912Y

2022913Y

2022914Y

2022915Y

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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186 DIFF 3 PARAMETER INSTRUMENT TEST

SAMPLE No.

R E S U L T C O D E

2022911Z

2022912Z

2022913Z

2022914Z

2022915Z

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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Lic. No.:

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Report Date: 11-25-2022

Receiving Date: _____ ,

546 NR DIFF 3 PARAMETER INSTRUMENT

SAMPLE No.

R E S U L T C O D E

2022916Z

%

2022917Z

%

2022918Z

%

2022919Z

%

2022920Z

%

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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LLENVIOA

SP: 20 HEMATOLOGY

Lic. No.:

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SUB: 070 GENERAL

Lab:

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TEST	PRO	M/S	2022-911	2022-912	2022-913	2022-914	2022-915	
549 RBC	___	___	_____	_____	_____	_____	_____	MILLION/ UL
550 HCT	___	___	_____	_____	_____	_____	_____	
551 HEMOGLOBIN	___	___	_____	_____	_____	_____	_____	G/DL
552 WBC	___	___	_____	_____	_____	_____	_____	THOUSAND /UL

DATE: _____

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TEST	PRO	M/S	2022-911	2022-912	2022-913	2022-914	2022-915
553 PLATELET	_____	_____	_____	_____	_____	_____	_____

THOUSAND
/UL

DATE: _____

SIGNATURES: _____

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Receiving Date: _____ ,

TEST	M/S	2022-921	2022-922	2022-923	2022-924	2022-925
149 RETICULOC.	_____	_____	_____	_____	_____	_____

%

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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Report Date: 11-25-2022

Receiving Date: _____ ,

TEST	M/S	2022-931	2022-932	2022-933	2022-934	2022-935
153 SED. RATE	_____	_____	_____	_____	_____	_____

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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CLIA #:

SUB: 070 GENERAL

Lab:

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Report Date: 11-25-2022

Receiving Date: _____ ,

TEST	M/S	REA	2022-941	2022-942	2022-943	2022-944	2022-945	
080 FIBRINOGEN	___	___	___	___	___	___	___	MG/DL
081 PTT	___	___	___	___	___	___	___	secs
082 PT	___	___	___	___	___	___	___	

DATE: _____

SIGNATURES: _____

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Lic. No.:

CLIA #:

SUB: 070 GENERAL

Lab:

Shipping Date: 11-07-2022

Report Date: 11-25-2022

Receiving Date: _____ ,

TEST	M/S	REA	2022-946	2022-947	2022-948	2022-949	2022-950	
380 NR FIBRINO	___	___	___	___	___	___	___	MG/DL
381 NR PTT	___	___	___	___	___	___	___	secs
382 Non Rou PT	___	___	___	___	___	___	___	

DATE: _____

SIGNATURES: _____

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SP: 20 HEMATOLOGY

Lic. No.:

CLIA #:

SUB: 070 GENERAL

Lab:

Shipping Date: 11-07-2022

Report Date: 11-25-2022

Receiving Date: _____ ,

TEST	PRO	M/S	2022-916	2022-917	2022-918	2022-919	2022-920	
556 NR RBC NEW	___	___	___	___	___	___	___	MILLION/ UL
557 NR HCT-NEW	___	___	___	___	___	___	___	MILLION/ UL
558 NR WBC	___	___	___	___	___	___	___	THOUSAND /UL
560 NR HEMOGLO	___	___	___	___	___	___	___	G/DL

DATE: _____

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LLLENVIOE
LLLENVIOA

SP: 30 IMMUNOHEMATOLOGY Lic. No.: CLIA #:

SUB: 080 ABO-RH Lab:

Shipping Date: 11-07-2022

Report Date: 11-25-2022

Receiving Date: _____ ,

150 ABO GROUP AND RH (D) TYPE

BLOOD TYPING: Performed ABO grouping and Rh typing, in case of a negative Rh please performe Du. Centrifuge the sample to obtain plasma for the reverse grouping.

SAMPLE No.	DIRECT GROUP			REVERSE GROUP				TYPE - Rh		RESULT CODE	
	ANTI A	ANTI B	ANTI AB	CEL A1	CEL A2	CEL B	CEL O	ANTI D	Du Du	ABO	Rh
2022-961	+	+	+	+	+	+	+	+	+	_____	_____
	0	0	0	0	0	0	0	0	0		
2022-962	+	+	+	+	+	+	+	+	+	_____	_____
	0	0	0	0	0	0	0	0	0		
2022-963	+	+	+	+	+	+	+	+	+	_____	_____
	0	0	0	0	0	0	0	0	0		
2022-964	+	+	+	+	+	+	+	+	+	_____	_____
	0	0	0	0	0	0	0	0	0		
2022-965	+	+	+	+	+	+	+	+	+	_____	_____
	0	0	0	0	0	0	0	0	0		

RESULTS CODE:

ABO: 01. A 02. A1 03. A2 04. B 05. AB 06. A1B 07. A2B 08. O 999. NOT P.

Rh: 01. Rh+ 02. Rh+ Du variant 03. Rh- Du not performed 04 Rh- 999. NOT P.

DATE: _____

SIGNATURES: _____

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LLLENVIOE
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SP: 30 IMMUNOHEMATOLOGY Lic. No.: CLIA #:

SUB: 090 COOMBS Lab:

Shipping Date: 11-07-2022

Report Date: 11-25-2022

Receiving Date: _____ ,

084 UNEXPECTED ANTIBODY DETECTION-IND.COOMBS

INDIRECT COOMBS: Please report in the appropriate site, using the strength of reaction from 0 - 4+

SAMPLE No.	TEMPERATURE	SALINE	ALBUMIN	COOMBS	OTHER	RESULTS CODE
2022-971	1. 4 GRADE C	_____	_____	_____	_____	_____
	2. 20 GRADE C	_____	_____	_____	_____	_____
	3. 37 GRADE C	_____	_____	_____	_____	_____
2022-972	1. 4 GRADE C	_____	_____	_____	_____	_____
	2. 20 GRADE C	_____	_____	_____	_____	_____
	3. 37 GRADE C	_____	_____	_____	_____	_____
2022-973	1. 4 GRADE C	_____	_____	_____	_____	_____
	2. 20 GRADE C	_____	_____	_____	_____	_____
	3. 37 GRADE C	_____	_____	_____	_____	_____
2022-974	1. 4 GRADE C	_____	_____	_____	_____	_____
	2. 20 GRADE C	_____	_____	_____	_____	_____
	3. 37 GRADE C	_____	_____	_____	_____	_____
2022-975	1. 4 GRADE C	_____	_____	_____	_____	_____
	2. 20 GRADE C	_____	_____	_____	_____	_____
	3. 37 GRADE C	_____	_____	_____	_____	_____

B - RESULTS CODE: 01 - NEGATIVE 02 - POSITIVE

C - PLEASE SPECIFY REAGENTS USED: _____

DATE: _____

SIGNATURES: _____

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SP: 30 IMMUNOHEMATOLOGY

Lic. No.:

CLIA #:

SUB: 090 COOMBS

Lab:

Shipping Date: 11-07-2022

Report Date: 11-25-2022

Receiving Date: _____ ,

179 DIRECT ANTIGLOBULIN (COOMBS)

SAMPLE No.

R E S U L T C O D E

2022-651

2022-652

2022-653

2022-654

2022-655

DATE: _____

SIGNATURES: _____

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 SP: 30 IMMUNOHEMATOLOGY Lic. No.: CLIA #:
 SUB: 100 COMPATIBILITY TESTING Lab:
 Shipping Date: 11-07-2022
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085 COMPATIBILITY TESTING

Please performed antibodies screening, auto control and Mayor Side Cross-matching. If your lab. performs antibodies indentification, pelase identify it or them.

CROSSMATCHING (Major side)	SALINE 20-25C	ALBUMIN 20-25C	ALBUMIN 37C	COOMBS	OTHER	INTERPRETATION Result Code
-------------------------------	------------------	-------------------	----------------	--------	-------	-------------------------------

CROSSMATCHING # 2022-981 PATIENT PLASMA A-DONOR CELLS	_____	_____	_____	_____	_____	_____
---	-------	-------	-------	-------	-------	-------

CROSSMATCHING # 2022-982 PATIENT PLASMA A-DONOR CELLS	_____	_____	_____	_____	_____	_____
---	-------	-------	-------	-------	-------	-------

CROSSMATCHING # 2022-983 PATIENT PLASMA A-DONOR CELLS	_____	_____	_____	_____	_____	_____
---	-------	-------	-------	-------	-------	-------

CROSSMATCHING # 2022-984 PATIENT PLASMA A-DONOR CELLS	_____	_____	_____	_____	_____	_____
---	-------	-------	-------	-------	-------	-------

CROSSMATCHING # 2022-985 PATIENT PLASMA A-DONOR CELLS	_____	_____	_____	_____	_____	_____
---	-------	-------	-------	-------	-------	-------

CROSSMATCHING INTERPRETATION CODE:
01 - COMPATIBLE 02 - INCOMPATIBLE 99 - TEST NOT PERFORMED

DATE: _____ SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____

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SP: 30 IMMUNOHEMATOLOGY Lic. No.: CLIA #:
SUB: 110 ANTIBODY IDENTIFICATION Lab:
Shipping Date: 11-07-2022
Report Date: 11-25-2022
Receiving Date: _____ ,

ANTIBODY IDENTIFICATION TESTING

PATIENT PLASMA No.	CODE	DESCRIPTION
2022-981		
2022-982		
2022-983		
2022-984		
2022-985		

DATE: _____

SIGNATURES: _____

DIRECTOR'S SIGNATURE: _____