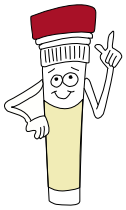
Verein für medizinische Qualitätskontrolle
Association pour le contrôle de Qualité médical
Associazione per il controllo di qualità medico

Instructions and patient details survey 2025-1



Important note for qualitative tests

Positive AND negative results must be documented, regardless of the method used to submit the results. An entry left blank will not be considered as negative, but as a “missing result”

General information
A list of all analyses with the corresponding samples can be found on www.MQZH.ch under «Offer».

Sample handling
Unless otherwise stated, our proficiency test samples can be used as patient material. Refrigerated samples must be removed from the refrigerator about 15-30 minutes (exception blood gas ampoules 5 hrs) before analysis to equilibrate them at room temperature. Ready-to-use samples only need to be mixed afterwards. Our samples are partly of human origin and are handled and disposed of with the same care as patient samples.

Sample analysis
- The samples must be analyzed using the same method that you use for the patient samples.
- Multiple determinations are only allowed if this is also done for patient samples.
- Samples must not be forwarded to other laboratories.

Results submission
- If the results are not submitted via the online system, the protocol sheet must be signed by the responsible laboratory manager/physician
- The results may only be discussed with colleagues from other laboratories once the proficiency test has been completed.

Administration
- Please do not forget to keep a copy of your results until you have received and checked the evaluation.
- We advise you to keep the samples until you have received the results. In the event of unsatisfactory results, you can re-analyse your samples.

Information about the specific samples

B1 Strep A Test

You will receive sample B1 as a liquid (it simulates the patient's nose, throat, etc.). Be sure to use the swab included in your rapid test pack and dip it into the sample B1. Then process the swab as if it were a patient sample.

B9 Bacteriology

Open the screw cap and disinfect the grey rubber. Reconstitute the samples with 0.5 ml 0.9% NaCl by injecting the liquid through the grey rubber using a sterile syringe.

B10 Gram stain

Material: Blood culture
Diagnose: Sepsis

B31 SARS CoV-2, NAT

Sample B31 can be diluted 1:2 with NaCl if the amount of sample material is insufficient.

B33 SARS CoV-2 Antigen Rapid Test

You will receive the B33 sample as a liquid (it simulates the patient's nose). Be sure to use the swab, which is included in your rapid test kit. You can find detailed instructions on www.MQZH.ch

G1, G3, G4, G18-G22, Coagulation

Pipette 1 ml distilled water into the vial, close and mix gently. Allow to stand for 30 minutes at room temperature. Mix again carefully by hand before measurement. Measure within 2 hours.

H4 Blood parasites

Possible codes:

100	No parasites found
101	Plasmodium
102	Plasmodium falciparum
103	Plasmodium malariae
104	Plasmodium vivax
105	Plasmodium ovale
106	Trypanosoma sp.
107	Mikrofilaria
199	Others:

H6, H7 Bloodcount 5-Part / Retikulocytes

These proficiency test samples are analysed in the same way as patient samples. Please measure the samples immediately after receipt**!**

H15, ESR miniiSED

Important: Store the sample at room temperature. Place the tubes on a mechanical rocker or rotator for approx. 30 minutes before use. The barcode must be scanned.

K1 Clinical chemistry

Estimated glomerular filtration rate (eGFR)

In order to assess a patient's renal function, plasma creatinine should be measured and the the eGFR should be calculated. In the protocol sheet, all participants who measure creatinine will find an additional entry for the eGFR. If you do not yet work with the eGFR, you will find further you will find further information and a calculator at www.mqzh.ch.
Patient details:20-year-old man, skin color white, (weight 70 kg)

K3 HbA1c

Participants with Afinion: Please perform the determination as soon as possible (fresh whole blood)

K29 Calprotectine, K51 Pancreatic elastase

Samples from these interlaboratory tests can be treated as liquid stool samples.
If it is not possible to measure the sample on the day of arrival, please store them at -20°C.

K38 Immunfixation

Specimen description: from different patients.

Codes for immunofixation interpretation: (Please specify the appropriate code.)

Codes	**Description** **In the immunofixation appears a:**
1	monoclonal component type IgA Kappa
2	monoclonal component type IgA Lambda
3	monoclonal component type IgG Kappa
4	monoclonal component type IgG Lambda
5	monoclonal component type IgM Kappa
6	monoclonal component type IgM Lambda
7	Oligoclonal immunoglobulin responses indicate limited heterogeneity of synthesized immunoglobulins
8	Inconspicuous findings, no further investigations
9	In the event of a suspected artifact or unclear findings, possibly further clarification. Please send us your image with the result

K39 Folate in Erythrocytes

The hematocrit of the sample is indicated on the label. Please process the sample immediately after receipt. If you cannot analyze the sample immediately, please store it at -20°.

K48 Creatinin and ketone WB

These proficiency test samples are measured like patient samples. Please measure the samples immediately after receipt**!**

S1 Fecal occult blood

The simulated stool sample is ready for use and used exactly like a patient sample.

U2, urine test strips

Please record your result as for patient samples.. (Submission in numbers or +++ is possible))

H3 Differential Blood Smear

Patient data

	Age	Gender	Hb	Hk	Lc	Tc	Ec
2025-1 H3A	30	m	157 g/l	0.437 l/l	41.59 G/l	651 G/l	4.68 T/l
2025-1 H3B	50	m	114 g/l	0.35 l/l	4.37 G/l	210 G/l	3.8 T/l

Instructions for filling out the H3 Protokoll
If your smear is defective or bad, we will gladly send you another one.

Leukocyte differentiation
For the differentiation of rod and segment nucleated neutrophil granulocytes you have to work according to the thread rule.

Neutrophils (rod + seg), lymphocytes/plasma cells and white precursors (promyelocytes + myelocytes + metamyelocytes) are automatically added together for QUALAB assessment.

For example, if you cannot distinguish the white precursors, it is possible to sum them up with a curly bracket.
IMPORTANT: Make sure that the sum adds up to 100%, otherwise you will get a "not fulfilled".

Morphological data
After you have assessed the morphology of the leukocytes, platelets and erythrocytes, you must select the most important features of this blood count for the report. (max. 5 codes)
To do this, enter the codes below under "Findings":

General Codes

29 Normal findings (do not add any other codes)
30 Pathologic findings, refer to expert
31 Pathologic findings, not refered to expert
(Note: Even if you write code 30 on a blood count, the leukocyte differentiation must be done in any case).

Leukocyte assessment
01 Hypersegmentation
02 Left shift
03 Pelger-Hüet Abnormaly
04 Toxic signs of neutrophils (toxic granulation, basophilic strippling or vacuoles)
05 Atypical lymphocytes presumably reactive
06 Atypical lymphocytes probably neoplastic
07 Auer rods
08 other:

Thrombocyte assessment
09 Giant platelet
10 Platelet aggregates
11 other:

Erythrocyte assessment
12 Microcyten
13 Macrocytes
14 Hypochromasia
15 Polychromasia
16 Poikilocytosis
17 Elliptocytes/Ovalocytes
18 Stomatocyosis
19 Targetcells
20 Fragmentocytes
21 Spherocytes/Microspherocytes
22 Rouleaux
23 Erythrocyte agglutination
24 Howell-Jolly bodies
25 Basophilic strippling
26 Tear drops
27 other:
28 Parasites (please specifiy)

To meet the requirements, you must specify at least one code for both preparations, and differentiate the leucocytes.

U4 Urine sediment

Procedure
Enclosed you will receive 5 photos with images of urine sediment components. The following types of images we will use: PK=phase contrast, HF=bright field.
Your task is to identify the objects marked with an arrow using the two-digit codes below. On the protocol sheet, you will find five entries ("Image 1" to "Image 5") in the "Urine Sediment" section where you can enter the codes.

Sample description: 52-year-old patient, female.

Urin-Teststrip

Test	Resultat	Unit	Reference
Glucose, ql	**neg**		**neg**
Protein, ql	**neg**		**neg**
Bilirubin	**neg**		**neg**
Urobilinogen	**neg**		**norm**
pH	**5.5**		**5.0-7.5**
Specific gravity	**1.015**	g/ml	**1.020-1.030**
Erythrozyten, ql	**neg**		**neg**
Ketone	**neg**		**neg**
Nitrite	**neg**		**neg**
Leukocytes	**+++**		**neg**

The images are all from the same sample and were taken with a 40x objective.
IMPORTANT: Note the scale at the bottom right to estimate the size of the elements.
More images of this sample can be found on the web at www.mqzh.ch in the photo album.

Codes

10 Erythrocytes normal	**40** Spermatozoa	**60** Bacteria
11 dysmorphic Erythrocytes		**61** Yeast/Fungi
12 Acanthocytes	**50** Hyaline Casts	**62** Trichomonas
	51 Granular Casts	
20 Leucocytes	**52** Waxy Casts	**70** Crystals and Salts
	53 Erythorocyte Casts	
30 Squamous Epithelia	**54** Leucocyte Casts	**80** Hair
31 Epithelia (other than squamous-)	**55** Epithelia Casts	**81** Mucus
32 Caudate Epithelia	**56 Pseudocasts**	**82** Impurity
33 Round Epithelia	**57** Lipids	**83** Air bubble
34 Transitional Epithelia		**99** Unknown
35 Renal Tubular Epithelial Cells		
36 Decoy Cells		

Several terms are possible for epithelia. Use the term that is common in your laboratory.

The following device-specific instructions can be found at www.MQZH.ch under "Instructions"»:

Afias
Afinion
ABL90 Flex+
ABL800 Flex Serie
ABL80 Flex CO-OX
AQT90
Uricult (B2)
Covid Test rapid (B33)
Microbiology NAT (B11-B36)
Helicobater-Urease-Test
Cholestec LDX
Coagu Chek XS/Pro II
Cobas b101
Differential blood smear
EPOC
Eurolyser Cube
Immunfixation
Fuji Dri-chem
Hemorchron jr
LumiraDX
Hemoscreen
Hematology blood gases
Erythrocyte sedimentation
ImmunoCap rapid
StatSensor
Piston pipette
MicroINR/MicroINR Expert
Microsemi
Mythic
Xprecia
Zybio Z3 CRP
Triage
Virus genome detection (V2-V6)