Proficiency Testing Corrective Action Checklist:

PT PROVIDER: _____

PT EVENT: _____

TEST: _____

PT Process		Comments
Package Received		Date:
Who received it?		
Handling – Upon arrival		
Was the kit cold?	Y / N	
Was the kit damaged?	Y / N	
Was the kit complete?	Y / N	
Were storage requirements followed?	Y / N	
Refrigerator or room temperature		
Specimen numbers: # # # # #		
Preparation		Date:
Who prepared it?		
Were reconstitution instructions followed?	Y / N	
Was volumetric Class A pipette used?	Y / N	
Was reagent grade water or diluent used?	Y / N	
Was allotted time after reconstitution followed prior to specimen testing?	Y / N	

Processing	Tech:		Date:
Were samples tested within allowable time?		Y / N	
Were the samples incorporated into the normal laboratory workload and tested as routine patient specimens?		Y / N	
Examination	Tech:		Date:
Were the samples tested according to written laboratory procedure and policy? (e.g. following repeat testing protocol) ***PT samples must be tested only once. Repeat testing may not be done unless there is a reason to repeat the patient specimens.***		Y / N	
Was there any communication with another laboratory regarding the results of the PT specimens?		Y / N	
Was the testing performed on-site? ***PT specimens may never be sent to another lab for testing. Even if patient samples are normally referred to another lab for further testing, PT samples are NOT sent. This can be documented on the PT result sheet.***		Y / N	
Are all individuals who normally perform patient testing included in a rotation of testing PT specimens?		Y / N	
Result Reporting	Tech:		Date:
Were the instruments and testing methods accurately selected from the master list and documented on the test result form?		Y / N	
Were all test results documented on the test result form?		Y / N	
Did all individuals participating in the testing process and the laboratory director or designee sign the attestation statement?		Y / N	
Was a copy of the test result form, including the attestation statement retained prior to mailing, faxing, or submitting the results online to the PT?		Y / N	
Are all the instrument tapes or worksheets showing the results for each PT specimen retained with the test result form?		Y / N	
Result report mailed, faxed, or submitted online to PT provider:		Y / N	Date:

Were all PT specimens properly stored for retention until evaluation is received?		Y / N	
Evaluation Report	Received:		Date:
Reviewed by testing personnel		Y / N	Date:
Reviewed by technical supervisor / consultant		Y / N	Date:
Reviewed by laboratory director		Y / N	Date:
Were there any unacceptable results? If yes, complete Proficiency Testing Survey Exception Report Form		Y / N	

Proficiency Testing Survey Exception Report

Survey Event	PT Provider	Date Performed	Date Evaluation Received
Failed Analyte/Specimen #	**Result Reported**	**Acceptable Range**	**Result of Retest**

Investigative Actions: Place a check mark next to each item investigated.

O Clerical review	O Review reconstitution of PT specimen
O QC review	O Calibration
O Reagent check	O Review of participant summary
O Pipettor volume check	O Manufacturer contacted
O Instrument function check	O Repeat analysis: acceptable / unacceptable
O Other	

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Analysis of Unacceptable Results: Place a check mark next to problem identified that contributed to the failure.		
Method problem	**Technical Problem**	
O Instrument problem	O Misinterpretation or misidentification	O Controls in range but demonstrate bias
O Faulty standard or other reagent	O Time delay between reconstitution and analysis	O Dilution error or incorrect pipetting
O Wrong peer group selected	O Run accepted in non-linear range	O Calculation error
O Instrument repaired or replaced	O Calibration problem	O Specimen mix up
O Other method problem	O Run accepted with unacceptable quality control	O Other technical problem

Clerical Errors	**Procedural Problems**	**Problems with PT Specimens**
O Transcription error	O Procedure not followed	O Hemolyzed specimen
O Failed to submit result	O Incorrect volume of reagent added	O Poor growth in culture
O Incorrect units of measure	O Incorrect volume of sample added	O Matrix effect with method
O Decimal point error	O Incorrect reagent added	O Late shipment
O Transposition error	O Most current manufacturer's guidelines not followed	O Bacterial contamination
O Result submission deadline missed	O Other procedural problem	O Unstable specimens
O Other clerical error		O No comparable peer group
		O Other PT specimen problem

No Explanation After Investigation
O Mark this box only when a thorough investigation has yielded no satisfactory conclusion
Comments / Explanations

Corrective Actions Taken:	
Problem Resolved (Explain):	
Next Event Results:	
Was there any impact on patient results during the time of the unacceptable PT results?	
Explain:	
Re-Training of Testing Staff:	
Testing Staff Review:	**Date:**
Technical Supervisor / Consultant Review:	**Date:**
Comments:	
Laboratory Director Review:	**Date:**
Comments:	