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**LB.32 The laboratory has a comprehensive system for Proficiency Testing (PT) sufficient for the extent and complexity of the laboratory scope of services.**

LB.32.1 The laboratory implements policies, processes and procedures on Proficiency Testing to ensure the following:

- LB.32.1.1 All laboratory analyses are covered with Proficiency Testing.
  - LB.32.1.2 Alternative Proficiency Testing is performed when appropriate.
  - LB.32.1.3 Clear instruction for the receipt, processing and reporting of Proficiency Testing results.
  - LB.32.1.4 Proficiency Testing samples are tested by the same personnel handling patient/donor samples.
  - LB.32.1.5 Proficiency Testing sample are tested by the same method used for testing patient/donor samples.
  - LB.32.1.6 Proficiency Testing samples are not referred to other laboratory for testing.
  - LB.32.1.7 Proficiency Testing results are not shared with other laboratories.
  - LB.32.1.8 Proficiency Testing results are evaluated and compared to the acceptable performance.
  - LB.32.1.9 Whenever appropriate, unacceptable performance is investigated and appropriate corrective actions are taken.
  - LB.32.1.10 Proficiency Testing records are reviewed and approved by laboratory management.
  - LB.32.1.11 Corrective actions are implemented and monitored (if applicable).
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**Standard Intent:**

Assessments are systematic examinations to determine whether actual activities comply with planned activities, are implemented effectively, and achieve objectives.

Assessments can be internal or external and can include quality assessments, peer reviews, self-assessments, and proficiency testing.

The laboratory must establish and maintain a process for proficiency testing (external quality assessment). Results of assessments must be reviewed by the medical director and the organization's executive management to determine the appropriateness and effectiveness of corrective/ preventive actions (if taken).