

HSC.22150 Alternative Control Procedures**Phase II**

If the laboratory performs test procedures for which control materials are not commercially available, the laboratory performs and records alternative control procedures to detect immediate errors and monitor test system performance over time.

NOTE: "Performance" includes elements of accuracy, precision, and clinical discriminating power. The following are examples of alternative procedures: split sample testing with another method or with another laboratory, the testing of previously tested patient specimens in duplicate, testing of patient specimens in duplicate, or other defined processes approved by the laboratory director.

Evidence of Compliance:

- ✓ Records of alternative control procedures

REFERENCES

- 1) Department of Health and Human Services, Centers for Medicare and Medicaid Services. Clinical laboratory improvement amendments of 1988; final rule. *Fed Register*. 2003(Jan 24): [42CFR493.1256(h)].

HSC.22160 QC Confirmation of Acceptability**Phase II**

Personnel review control results for acceptability before reporting patient/client results.

NOTE: If the positive and negative controls do not give the expected outcome, the results are not reportable. The negative control serum is one that historically has been negative with all tested cells.

The negative control may also originate from a non-sensitized male whose serum has been shown to be totally negative for cell death in cytotoxicity systems.

Evidence of Compliance:

- ✓ Records of control result approval

REFERENCES

- 1) Department of Health and Human Services, Centers for Medicare and Medicaid Services. Clinical laboratory improvement amendments of 1988; final rule. *Fed Register*. 2003(Jan 24):7166 [42CFR493. 1256(f)]

HSC.22170 QC Corrective Action**Phase II**

The laboratory performs and records corrective action when control results exceed defined acceptability limits.

NOTE: The actions taken must be consistent with the laboratory's quality control program (GEN.30000). Patient/client test results obtained in an analytically unacceptable test run or since the last acceptable test run must be re-evaluated to determine if there is a significant clinical difference in patient/client results. Re-evaluation may or may not include re-testing patient samples, depending on the circumstances.

Even if patient samples are no longer available, test results can be re-evaluated to search for evidence of an out-of-control condition that might have affected patient results. For example, evaluation could include comparison of patient means for the run in question to historical patient means, and/or review of selected patient results against previous results to see if there are consistent biases (all results higher or lower currently than previously) for the test(s) in question.

Evidence of Compliance:

- ✓ Records of corrective action for unacceptable control results

REFERENCES

- 1) Department of Health and Human Services, Centers for Medicare and Medicaid Services. Clinical laboratory improvement amendments of 1988; final rule. *Fed Register*. 2023(Dec 28):[42CFR493.1445(e)]
- 2) Department of Health and Human Services, Centers for Medicare and Medicaid Services. Clinical laboratory improvement amendments of 1988; final rule. *Fed Register*. 2003(Oct 1): [42CFR493.1282(b)].