



Control materials are run concurrently with patient specimens to ensure appropriate functionality of the digital image system.

NOTE: Controls are samples that act as surrogates for patient/client specimens. They are periodically processed like a patient/client sample to monitor the ongoing performance of the analytic process. Controls should check test performance at relevant decision points for the digital image analysis system.

For qualitative tests, a positive and a negative control may be sufficient. For quantitative or semiquantitative tests, controls at more than one level should be used.

Evidence of Compliance:

- ✓ Records of QC results

REFERENCES

- 1) Department of Health and Human Services, Centers for Medicare and Medicaid Services. Medicare, Medicaid and CLIA programs; CLIA fee collection; correction and final rule. *Fed Register*. 2003(Jan 24):5232 [42CFR493.1256(d)(3)(i)]
- 2) Clinical and Laboratory Standards Institute (CLSI). *Statistical Quality Control for Quantitative Measurement Procedures: Principles and Definitions*. 4th ed. CLSI guideline C24. Clinical and Laboratory Standards Institute, Wayne, PA, 2016.

BAP.05425 QC Handling

Phase II



The biorepository tests control specimens in the same manner and by the same personnel as patient/client samples.

NOTE: Personnel who routinely perform patient/client testing must analyze QC specimens; however, this does not imply that each operator must perform QC daily. Personnel must participate in QC on a regular basis. To the extent possible, all steps of the testing process must be controlled.

Evidence of Compliance:

- ✓ Records reflecting that QC is run by the same personnel performing patient testing

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(d)(8)]; 2) *ibid*, 2003(Jan 24):3708[42CFR493.1256(d)(7-8)]

BAP.05430 QC Confirmation of Acceptability

Phase II

Personnel review control results for acceptability before reporting results.

NOTE: Control results must be reviewed before reporting patient/client results.

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)]
- 2) 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):3708 [42CFR493.1256(d)(6)]

BAP.05435 Monthly QC Review

Phase II

The biorepository director or designee reviews and assesses quality control data at least monthly.

NOTE: The reviewer must record follow-up for outliers, trends, or omissions that were not previously addressed.

The QC data for tests performed less frequently than once per month may be reviewed when the tests are performed.

Evidence of Compliance:

- ✓ Records of QC review **AND**
- ✓ Records of corrective action taken when acceptability criteria are not met

SPECIMEN ANALYSIS

Inspector Instructions:

	<ul style="list-style-type: none"> • Sampling of specimen analysis policies and procedures
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BAP.05440 Area of Analysis**Phase II**

A qualified pathologist selects or confirms the appropriate areas for analysis prior to reporting the results, as applicable.

NOTE: Specimens that do not represent "in situ" samples embedded in paraffin may not require pathologist review. Examples include cultured preparations and direct preparations of liquid specimens including blood, urine, pleural fluid, etc.

BAP.05445 Analysis Guidelines**Phase II**

There are written guidelines for identification of appropriate areas and cells for analysis.

NOTE: Evaluation of heterogeneous cell populations requires use of specific guidelines and procedures to ensure analysis of the appropriate areas and/or cells, particularly if there is background or nonspecific staining, or if there is cell debris, endogenous pigment, and/or artifacts of aging, sectioning or preparation.

Test results may be affected by fixation parameters, including time of fixation, type of fixative used, hemorrhage, necrosis, and autolysis of tissue.

PERSONNEL

Inspector Instructions:

	<ul style="list-style-type: none"> • Records of personnel education and experience
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BAP.05450 Testing Personnel Qualifications**Phase II**

Personnel who are responsible for evaluating the imaging system data are qualified as high-complexity testing personnel.

NOTE: Refer to the Laboratory General Checklist for high complexity testing personnel (GEN.54750) and general supervisor (GEN.53600) qualifications. Detailed information on