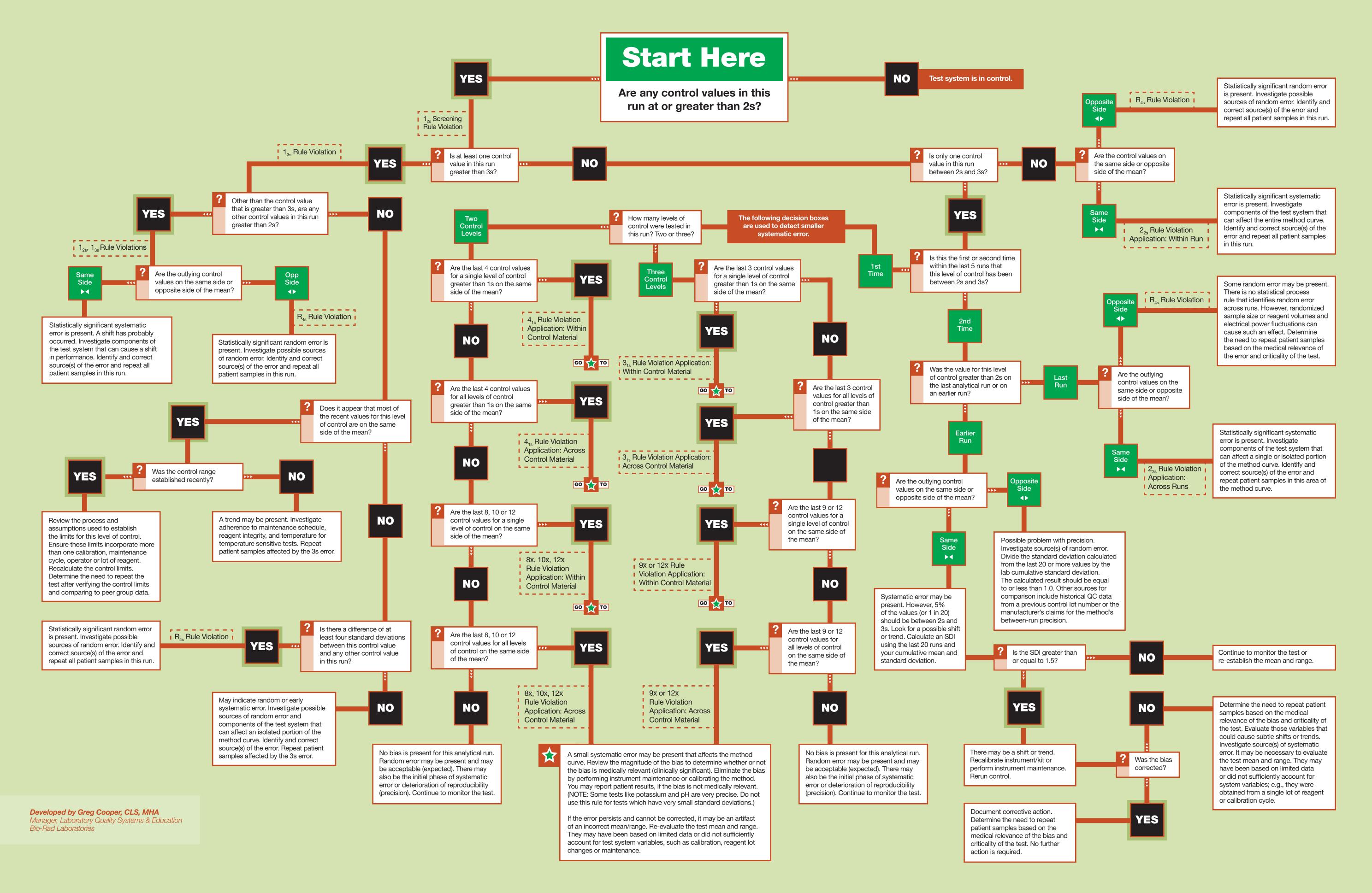


# Quality Control Troubleshooting

A Step-by-Step Guide to Identification and Resolution of Error in Clinical Test Systems





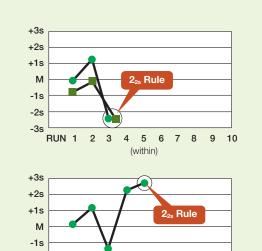


RUN 1 2 3 4 5 6 7 8 9 10

#### This is the "warning rule". If one control measurement exceeds the mean $\pm 2s$ , then the technologist must consider other controls in the run ("within-run") and in previous runs ("across-run") before accepting the run and reporting the results. This rule should not be used as a run rejection rule, except in the case where a test is

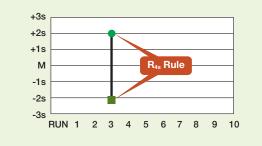
considered problematic (unstable), and tight control is required.

This rule detects random error. It may also point to systematic error. The run is considered out of control when one control value exceeds the mean  $\pm 3s$ . This rule is applied within the

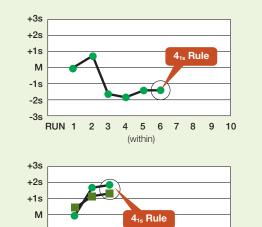


RUN 1 2 3 4 5 6 7 8 9 10

Rule: 2<sub>2s</sub> This rule detects systematic error. It should be applied within and across runs. This rule is violated within the run when two consecutive control values (or 2 of 3 control values when 3 levels are being run) exceed the "same" (mean +2s) or (mean -2s) limit. The rule is violated across runs when the previous value for a particular control level exceeds the "same" (mean +2s) or (mean –2s) limit.



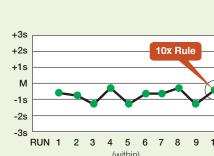
Rule: R<sub>4s</sub> This is a "range" rule and it detects random error. This rule is applied within the run only. This rule is violated when the difference in standard deviation between two consecutive control values (or 2 of 3 control values when 3 levels are being run) exceeds 4s.

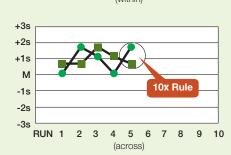


RUN 1 2 3 4 5 6 7 8 9 10

Rule: 4<sub>1s</sub> This rule detects non-critical systematic error and is applied both within and across control materials. This rule is violated within the control material when the last four values of the same control level exceed the "same" (mean +1s) or (mean -1s) limit. The rule is violated across control materials when the last four consecutive values for different control levels exceed the "same" (mean +1s) limit or (mean -1s) limit. This rule does not require rejection of the run. Rather, it can be an indicator to perform instrument

maintenance or instrument/kit calibration.





This rule detects systematic error and is applied both within and across control materials. The rule is violated across control materials when the last 10 consecutive values, regardless of control level, are on the same side of the mean. The rule is violated within the control material when the last 10 values for the same control level are all on the same side of the mean. This rule may be modified to 9 replicates when running three control levels, or 8 replicates when running 4 control levels. This rule may not require rejection of the run. Rather, it can be an indicator to perform instrument maintenance or instrument/kit calibration.

Rule: 10<sub>x</sub>

# How to Calculate Statistical Parameters for a Levey-Jennings Chart

# Step One

Collect a minimum of 20 data points for each level of control. Data points must be obtained from 20 separate analytical runs that reflect variables such as calibration frequency, change of reagent or reagent lot, operator technique, temperature/ humidity of testing location, daily/weekly maintenance, etc. All new control products should be compared to previously validated controls (parallel testing).

Note: 90 data points are recommended before finalizing mean and standard deviation.

more timely and relevant.

Calculate the mean and standard deviation from the data points collected. Use a statistical test for outliers before eliminating any questionable data points. Calculate the statistical control limits from  $X \pm 2s$  and  $X \pm 3s$ .

Note: Use control package insert ranges only as guidelines. Ranges are based on reagent lots and materials available at the time of value assignment. During the life of the control lot, manufacturers may reformulate tests or begin using a new source of raw materials for kit/reagent production. Published ranges cannot account for variables, such as calibration or reagent lot changes. Laboratories should use peer group statistics when such data are available, because these data are

# **Sources of Random Error**

- Power supply
- 2. Double pipetting of control sample 3. Misplacement of control sample within the run 4. Air bubbles in water supply
- 5. Random air bubbles in reagent or sample pipette system
- 6. Incorrect reconstitution of the control product 7. Inappropriate storage of control in
- frost-free freezers 8. Use of non-reagent grade water in
- the test system 9. Operator technique

# Sources of Systematic Error (Shifts & Trends)

- 1. Improper alignment of sample or reagent pipettes
- 2. Drift or shift in incubator chamber temperature 3. Inappropriate temperature/humidity levels in the testing area
- 5. Deterioration of reagent while in use, storage or shipment 6. Deterioration of calibrator while in use, storage or shipment
- 7. Deterioration of control product while in use, storage or shipment 8. Incorrect handling of control product (e.g., freezing when
- not recommended) 9. Inappropriate storage of control products in frost-free freezers 10. Failing light source
- 11. Use of non-reagent grade water in the test system 12. Recent calibration

4. Change of reagent or calibrator lot

13. Change in test operator 14. Specimen carry-over 15. Obstruction of tubing

# **Definitions**

#### **Medically Relevant Error** A degree of analytical error that can adversely affect or

change the patient diagnosis, prognosis, or treatment plan.

### Random Error Any random deviation from the laboratory mean. There is

"expected" or "acceptable" random error, which generally lies anywhere between ±3s of the mean. It follows that any deviation greater than ±3s is considered "unacceptable" random error. Because of its random nature, this type of error is unpredictable and difficult to detect.

#### Systematic Error A trend or shift away from the laboratory's established mean.

Small amounts of systematic error are tolerable. Systematic error will remain until corrective action is taken.

A gradual, often subtle, increase or decrease in control values and possibly patient values.

A sudden and eventually stable change in control values and

possibly patient values.

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**Technical Service** 

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**Outside the United States** Contact your local Bio-Rad office

**Bio-Rad Product Information** 1-800-2-BIORAD www.bio-rad.com/qualitycontrol



**Laboratory QC Portal** 

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