



EQA FOR RARELY PERFORMED SPECIALISED HAEMOSTASIS ASSAYS -THE VIAPATH CHALLENGE

KRUTIKA MOHIT-HASMUKH, ELAINE S BROMIDGE,

Diagnostic Haemostasis & Thrombosis, Viapath Analytics, St. Thomas' Hospital, London. SE1 7EH. UK

INTRODUCTION

There are no External Quality Assurance (EQA) schemes for some of the rare, highly specialised assays performed in specialist centres linked to a Haemophilia Centres and / or trauma centres. In order to comply with the International ISO standard 15189:2012 for maintaining UKAS accreditation the Haemostasis laboratory at Viapath routinely coordinates a Laboratory Quality Assurance For Rare Specialist Assays (LQARSA) EQA scheme. The scheme involves the exchange of both fresh and previously tested samples, between Viapath and other specialist Centres across London and the South East.

THE CHALLENGES are many, but main considerations are; 1. Identifying suitable partner Centres, 2. Finding appropriate samples (abnormal and normal), 3. The limitations and restrictions on sample transport for assays which require processing within a certain time after blood draw, (such as Platelet Aggregation LTA, chronolog and PFA analysis), 4. Ideally comparing like with like for analysers, reagents and methodology and 5. Using a robust process of reporting to assess consensus agreement.

Table 1: LQARSA test & participant list

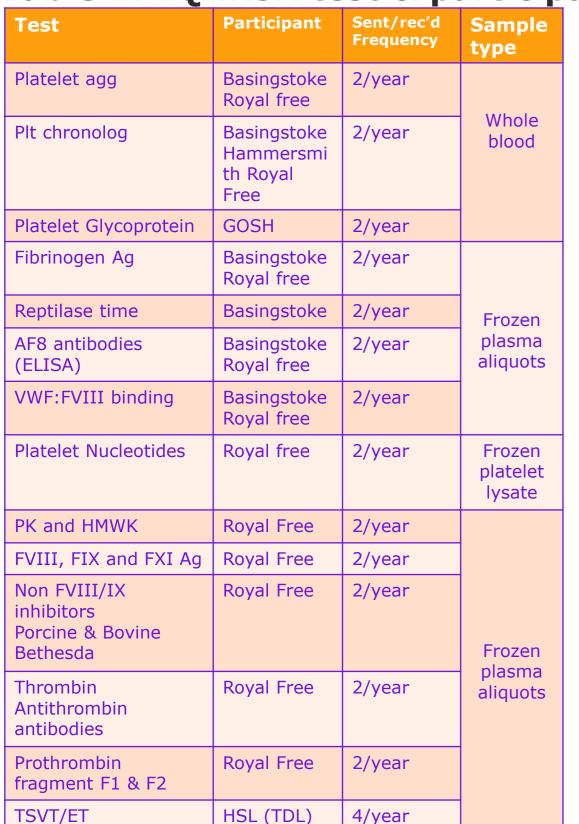
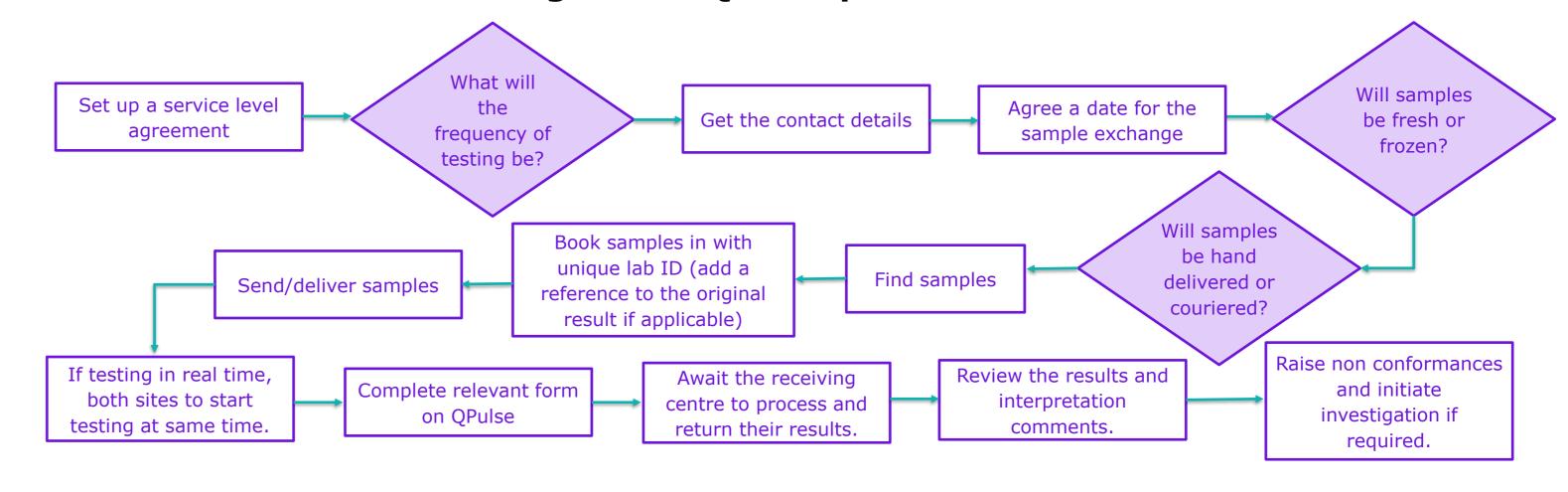


Figure 1: LQARSA process flow chart



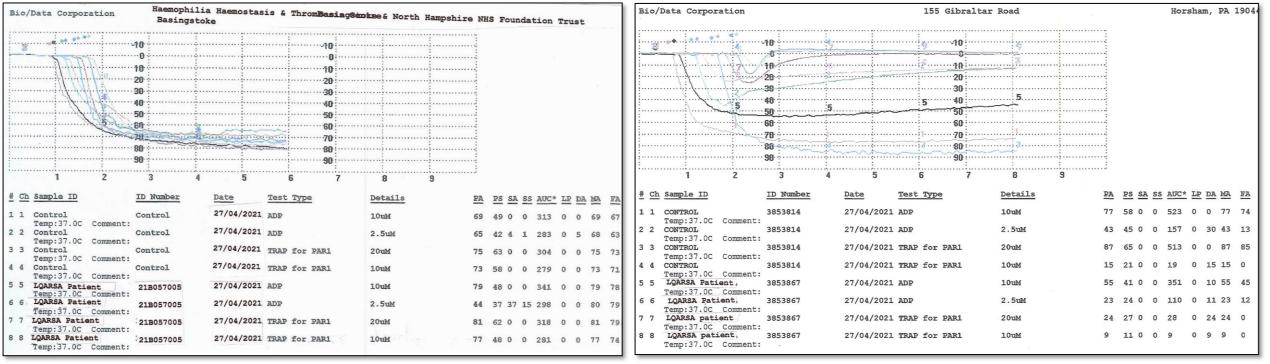
HOW REPORTS ARE GENERATED AND ASSESSED.

Reports are generated by issuing an interpretation comment, compared, and performance rated as Good, Acceptable (taking in to account the reference ranges and methodology), or poor. As there are only two results for comparison no application of statistical analysis is performed. Examples of LTA traces shown in fig 2 and 3, showed poor agreement and initiated an investigation lead under the guidance of the Principal BMS, see actions taken in figure 4. See example of disagreement in figure 5 and an example of good agreement in figure 6, with actions taken.

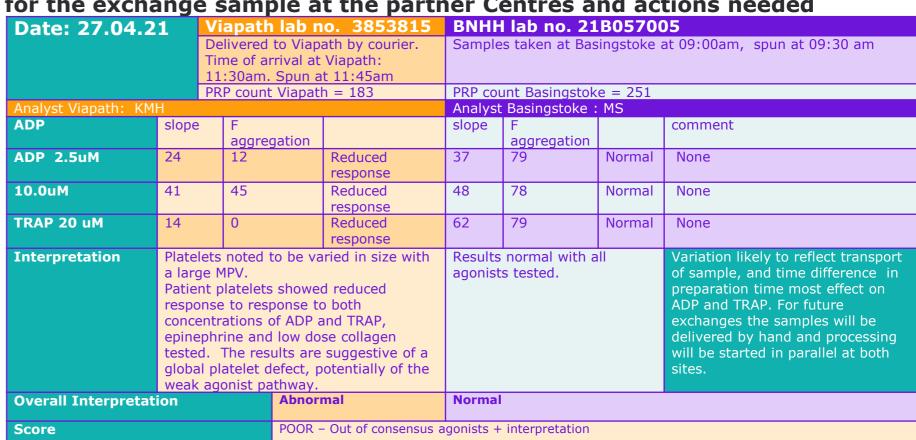
A disclaimer comment "Not clinically significant" may be appropriate even if >10% deviation of numerical results.

Examples of LTA traces from a sample exchange - survey 0221.

Figure 2. Partner centre sending the sample. Figure 3. Partner Centre receiving the sample.



Figures 4: LAQRSA survey report 0221 - Detailing the differences observed for the exchange sample at the partner Centres and actions needed



Action: The decision was made to deliver exchange samples by hand to minimum activation of platelets and also to start processing samples in parallel as soon as samples have reached their destination. Sample exchange to be repeated within 6 months.

Figure 5: Example with disagreement – LAQRSA for TSVT/ET analysis sample 23.10.20

Six samples were transported from HSL to Viapath Laboratory on 23.10.20 for TSVT/ET analysis. Samples were frozen and transported on dry ice by courier.

HSL/Viapath lab no.	TSVT(R) Viapath	ET (R) Viapath	TSVT(R) HSL	ET (R) HSL	Viapath interpretation	HSL interpretation	
1.3745865	1.76	1.05	1.64	1.18	POS	POS	
2.3745867	1.04		0.91		NEG	NEG	
3.3745868	1.37	1.17(14% correction)	1.21	1.10	POS	Equivocal	
4.3745871	1.22	1.16 (4.9% correction)	1.10		Insignificant correction. LA not detected	NEG	
5.3745872	1.41	1.06	1.49	1.13	POS	POS	
6.3745873	1.77	1.03	1.85	1.54	POS	POS	

Action: Conclusion is a adequate agreement (taking into account method and interpretation). Difference in interpretation is due to different reference range. Viapath are "in house" ranges and HSL are clinician based ranges. Difference in ET ratios are noted, and the protocols will be streamlined on the CS analysers used at each site.

Figure 6: Example with good agreement – LAQRSA for Anti FVIII antibodies (ELISA) sample 27.04.21

Site		BNH	Н	Viapath WM		
Performed by		NH				
	Result	Lab no.	Interpretation	Result	Lab No.	Interpretation
	2.52	21B057007	POSITIVE	2.265	3853853	POSITIVE
Reference Range g/L (Negative cut off)	OD <0.80			OD <0.775		
Survey 0121 Score	GOOD					

Action: No action needed as results and interpretation in good agreement

CONCLUSION AND FUTURE IMPROVEMENTS

Communication is key between the Partner Centres, EQA lead and principal BMSs to resolve any poor performances. In 2020 the EQA lead generated a questionnaire requesting the Partner Centres to share experiences on how to resolve and close non agreements. Several useful feedback comments included 1. Developing a streamlined process for recording error logs and corrective actions, 2. using the "Anytest" NEQAS EQA samples to perform the specialised tests, so that a statistical analysis is generated and 3. Exchange complicated and interesting samples which require multiple assays to generate an interpretation authorisation comment which can be compared. The LQARSA EQA scheme is still evolving and all improvements will aid future planning and challenges experienced. **Acknowledgements**

The authors would like to acknowledge all the partner Centres who participate in the LQARSA EQA scheme. References

United Kingdom Accreditation service (UKAS) website www.ukas.com