



ASVCP Guidelines:
Quality Assurance for Point-of-Care Testing in Veterinary Medicine
Version 1.0 (May 2013)

Compliance Checklist

Compliance with ASVCP Guidelines is voluntary. The purpose of this checklist is to facilitate practical application of the POCT QA Guideline.

Developed by the American Society for Veterinary Clinical Pathology (ASVCP) Quality Assurance and Laboratory Standards (QALS) Committee

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Section 2.0

General Recommendations and Chemistry Testing

Guideline Item	Compliant?	Additional Comment(s) by Auditor
2.2 Written quality plan or manual exists	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.2 Document control policy in place	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.2 POCT committee or working group formed and meets regularly (academic veterinary medical centers and large multi-specialty hospitals)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.4 POCT operators properly trained and training documented in written records	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.4 Periodic competency audits of POCT operators carried out by appropriate supervisor and documented in written records	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.5 Manufacturer's recommendations for POCT instrument/test kit use and maintenance followed by all operators; manufacturer's user manuals available to all operators	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.5, 2.7 Instrument performance study carried out after instrument purchase and installation; results documented	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.5 Annual (or as needed, following major service or software upgrade) instrument performance re-evaluations carried out; results documented	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.5 Instrument log maintained that documents QC, maintenance, upgrades, and troubleshooting/resolution of QC failures/problems	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.6.2.1 At least one level of assayed quality control materials used routinely with all POCT instruments	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.6.2.2.1-3 Document frequency of QC and method of control data interpretation (see Appendix; frequency recommendations summarized in full guideline ¹ and Figure 1 of Flatland, et al. ²)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.6.2.4 Limits for control data interpretation recalculated following control material lot changes or instrument recalibration (see full guideline ¹ or Figure 2 in Flatland, et al. ²)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.6.3 Participation in external quality assessment (EQA, or proficiency testing) program	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.7.2 Following instrument performance studies, observed total error (TE _{obs}) for each analyte compared to ASVCP-recommended TE _a for that analyte	<input type="checkbox"/> Yes <input type="checkbox"/> No	

2.8 For all testing, reference intervals used to interpret patient data established or transferred/validated per ASVCP recommendations (see ASVCP reference interval guideline for details ^{3,4})	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.9 For all testing, system to verify accuracy of reported patient results is in place	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.9 For all testing, any annotations to patient results are initialed and dated; corrected results are clearly identified as such	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.9 For all testing, patient medical records archived (and backed up, if electronic) as required by law	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 3.0

Additional Recommendations Specific to Hematology Testing

Guideline Item	Compliant?	Additional Comment(s) by Auditor
3.3.2 Blood smear review performed by qualified personnel for all CBCs (recommended)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.3.2 Blood smear review performed by qualified personnel for all CBCs from sick patients and for CBCs having unexpected or suspicious results (acceptable, although not preferred)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.3.2 Medical repeat and review criteria are in place and used routinely (see full guideline for details. ^{1,2})	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.4.1 Clotted samples are rejected	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.4.1 Blood smears made by qualified personnel ASAP following blood collection	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Appendix -- Method of Control Data Interpretation

POCT Instrument or method		Frequency of "running controls"	QC validation performed?	Method of control data interpretation for majority of analytes
<i>Make or Model</i>	<i>Manufacturer</i>			
		<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> QCM manufacturer limits <input type="checkbox"/> 1 _{3s} <input type="checkbox"/> Other control rule(s) (specify) _____ <input type="checkbox"/> Other method of monitoring instrument data quality (specify)* _____
		<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> QCM manufacturer limits <input type="checkbox"/> 1 _{3s} <input type="checkbox"/> Other control rule(s) (specify) _____ <input type="checkbox"/> Other method of monitoring instrument data quality (specify) _____
		<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> QCM manufacturer limits <input type="checkbox"/> 1 _{3s} <input type="checkbox"/> Other control rule(s) (specify) _____ <input type="checkbox"/> Other method of monitoring instrument data quality (specify) _____
		<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> QCM manufacturer limits <input type="checkbox"/> 1 _{3s} <input type="checkbox"/> Other control rule(s) (specify) _____ <input type="checkbox"/> Other method of monitoring instrument data quality (specify) _____

QCM = quality control material

*"Other" options include periodic comparability testing, external quality assessment (EQA, or proficiency testing) program participation, and/or non-statistical QC procedures. See full guideline for details.

References:

1. American Society for Veterinary Clinical Pathology (ASVCP), 2013. ASVCP guidelines: quality assurance for point-of-care testing in veterinary medicine. ASVCP, 2013. Available at www.asvcp.org. Accessed February 12, 2015.
2. Flatland B, Freeman KP, Vap LM, Harr KE. ASVCP guidelines: quality assurance for point-of-care testing in veterinary medicine. *Veterinary Clinical Pathology* 2013; 42(4):405-423.
3. American Society for Veterinary Clinical Pathology (ASVCP). Guidelines for the determination of reference intervals (RI) in veterinary species and other related topics. ASVCP, 2011. Available at www.asvcp.org. Accessed February 12, 2015.
4. Friedrichs KR, Harr KE, Freeman KP, Szladovits B, Walton RM, Barnhart KF, Blanco-Chavez J. ASVCP reference interval guidelines: determination of de novo reference intervals in veterinary species and other related topics. *Veterinary Clinical Pathology* 2012; 41(4):441-453.