Checklist for ASVCP Quality Assurance Guideline Section 5, Hematology (v.3, 2019)

The purpose of these checklists is to facilitate guideline implementation/practical application and may be further detailed in laboratory-specific standard operating procedures (SOPs). The numbers in the first column correspond to the section numbers in the guideline. The N/A option (listed here only for applicable items) should only be employed for items not pertaining to the laboratory, with an explanation in the additional comment box.

Guideline Recommendation	Compliant?	Additional Comment(s) by Auditor
5.1.1 Blood tube additives are appropriate for the species of interest. Tubes are appropriately filled and mixed. Films are prepared in a timely fashion.	☐ Yes ☐ No ☐ N/A	
5.1.2 Films and tubes are labeled with 1-2 unique patient IDs and date of collection. Accession forms contain rDVM and clinic info, date of collection, signalment, and relevant history, including appropriate data (please also see checklist for section 3).	☐ Yes ☐ No ☐ N/A	
5.1.3 Transported whole blood and films are protected from physical damage and extreme temperatures. Films are additionally protected from formalin fumes and condensation. Shipment is expedited to avoid compromising sample integrity.	☐ Yes ☐ No ☐ N/A	
5.1.4 Whole blood and film integrity are inspected prior to testing, and the submitting entity is informed when the specimen is likely to produce erroneous results and/or when resampling is requested.	☐ Yes ☐ No ☐ N/A	

5.1.5 Whole blood samples are mixed to insure homogeneity prior to testing.	☐ Yes ☐ No ☐ N/A	
5.2.1 Quality control policies are established, followed and documented. Hematologic automated assays, calculated indices, and microscopic findings are included in the hematology quality control (QC) process.	☐ Yes ☐ No ☐ N/A	
5.2.1 Hemocytometer-obtained counts are performed in duplicate as a procedural control. Predefined goals for agreement are established, with documentation of deviations, and policies in place for mitigation.	☐ Yes ☐ No ☐ N/A	
5.2.1 Manual or instrument-obtained results are compared with film-derived estimates.	☐ Yes ☐ No ☐ N/A	
5.2.1 Films submitted for review are accompanied by available instrument-derived data.	☐ Yes ☐ No ☐ N/A	
5.2.2 Instruments are monitored for electronic safety, calibration, maintenance and performance, with appropriate documentation. Instrument manuals are readily available.	☐ Yes ☐ No ☐ N/A	
5.3 Specimens are stored under appropriate conditions for a pre-established period, as determined by specimen stability, laboratory policy, and certification/accreditation requirements.	☐ Yes ☐ No ☐ N/A	
5.3 Reports include statements documenting any deviations in sample integrity or testing procedures that may	☐ Yes ☐ No ☐ N/A	

affect the quality of results or interpretation thereof.		
5.4 Non-mammalian species: 5.4.1 Blood smears are made at the time of collection.	☐ Yes ☐ No ☐ N/A	
5.4.1 Blood sample transport times are appropriate for the species.	☐ Yes ☐ No ☐ N/A	
5.4.1 Anticoagulant additives and formulations are appropriate for the species.	☐ Yes ☐ No ☐ N/A	
5.4.2.1 Laboratory personnel are appropriately trained for the species, and training is documented.	☐ Yes ☐ No ☐ N/A	
5.4.2.1 Reagent preparation for cell-counting diluent includes monitoring quality of reagent grade water and new lot compared with that of previous lot.	☐ Yes ☐ No ☐ N/A	
5.4.2.1 Equipment (e.g., reusable hemocytometers, weighted hemocytometer cover slips, hand tallies, calibrated pipettes, and differential cell counters) used for hematology procedures are in good working order.	☐ Yes ☐ No ☐ N/A	
5.4.2.3 External QA/Proficiency testing of technical staff is performed and documented, and results are within acceptable limits.	☐ Yes ☐ No ☐ N/A	
5.4.2.5 Documented protocols for cell counts include methods where all cells to be counted are visible in the hemocytometer, e.g. RBCs, WBCs, and/or thrombocytes.	☐ Yes ☐ No ☐ N/A	