

Fax Form for Survey Sample HBV_2019_02

Participant Name: _____

Lab Client Code: _____

Country: _____

Please use this fax form for data submission only if you cannot submit the data online (<https://teqa.esfeqa.eu>).

Deadline for Data Submission: 06/05/2019

Qualitative Results:

Program	Method-Key	Reagent-Key	Instrument-Key	Analyte	HBV_2019_02_a			HBV_2019_02_b		
					Positive	Border-line	Negative	Positive	Border-line	Negative
HBV				anti-HBc IgG						
HBV				anti-HBc IgM						
HBV				anti-HBe						
HBV				anti-HBs						
HBV				HBeAg						
HBV				HBsAg						

Quantitative Results:

Program	Analyte	Method-Key	Reagent-Key	Instrument-Key	Units*	HBV_2019_02_a Result	HBV_2019_02_b Result
ADE	anti-HBs				<input type="checkbox"/> IU/ml		
ADE	HBsAg				<input type="checkbox"/> IU/ml <input type="checkbox"/> mIU/ml		

Stamp/Signature _____

Date _____

Please send the filled form to ESfEQA by Fax (+49 6221 894669-90) or by E-Mail (info@esfeqa.eu)