

Result Form for Survey Sample ASF_2022_02

Laboratory Name: _____

Lab Client Code: _____

Country: _____

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

Deadline for Data Submission: 21/11/2022

Qualitative Results:

Program	Method-Key	Reagent-Key	Instrument-Key	Analyte	ASF_2022_02_a			ASF_2022_02_b		
					Positive	Border-line	Negative	Positive	Border-line	Negative
ASF				IgA						
ASF				IgG						
ASF				IgM						
ASF				total (CFT)						

Quantitative Results:

Program	Analyte	Method-Key	Reagent-Key	Instrument-Key	Unit *	ASF_2022_02_a Result	ASF_2022_02_b Result
ASF	IgA				AU/ml		
ASF	IgG				AU/ml		
ASF	IgM				AU/ml		

*AU=Arbitrary Units

Program	Analyte	Method- Key	Reagent- Key	Instrument- Key	Unit *	ASF_2022_02_a Result	ASF_2022_02_b Result
ASF	total				Titer	<input type="checkbox"/> <1:10 <input type="checkbox"/> 1:10 <input type="checkbox"/> 1:20 <input type="checkbox"/> 1:40 <input type="checkbox"/> 1:80 <input type="checkbox"/> 1:160 <input type="checkbox"/> 1:320 <input type="checkbox"/> 1:640 <input type="checkbox"/> 1:1280 <input type="checkbox"/> >1:1280	<input type="checkbox"/> <1:10 <input type="checkbox"/> 1:10 <input type="checkbox"/> 1:20 <input type="checkbox"/> 1:40 <input type="checkbox"/> 1:80 <input type="checkbox"/> 1:160 <input type="checkbox"/> 1:320 <input type="checkbox"/> 1:640 <input type="checkbox"/> 1:1280 <input type="checkbox"/> >1:1280

*AU=Arbitrary Units

Stamp/Signature

Date

By signing this form, you confirm that the results you have indicated have been obtained in your organization (e.g. laboratory, hospital etc.).

Please send the completed form to ESFEQA by Fax (+49 6221 4166-790) or by E-Mail (surveys@esfeqa.eu).