

## Result Form for Survey Samples HEM5D12 \_\_\_\_\_

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>)

Program	Analyte	Method	Instrument	Unit	Result
HEM5D12	BAS % (Basophiles)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	BAS (Basophiles)			<input type="checkbox"/> 10 <sup>9</sup> /L <input type="checkbox"/> 10 <sup>6</sup> /mL <input type="checkbox"/> 10 <sup>3</sup> /μL	
HEM5D12	EOS % (Eosinophiles)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	EOS (Eosinophiles)			<input type="checkbox"/> 10 <sup>9</sup> /L <input type="checkbox"/> 10 <sup>6</sup> /mL <input type="checkbox"/> 10 <sup>3</sup> /μL	
HEM5D12	HCT (Hematocrit)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	HGB (Hemoglobin)			<input type="checkbox"/> g/L <input type="checkbox"/> g/dL <input type="checkbox"/> mmol/L	
HEM5D12	LYMPH % (Lymphocytes)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	LYMPH (Lymphocytes)			<input type="checkbox"/> 10 <sup>9</sup> /L <input type="checkbox"/> 10 <sup>6</sup> /mL <input type="checkbox"/> 10 <sup>3</sup> /μL	
HEM5D12	MCH (Mean Corpuscular Hemoglobin)			<input type="checkbox"/> pg	

Program	Analyte	Method	Instrument	Unit	Result
HEM5D12	MCHC (Mean Cellular Hemoglobin Concentration)			<input type="checkbox"/> g/L <input type="checkbox"/> g/dL <input type="checkbox"/> mmol/L	
HEM5D12	MCV (Mean Corpuscular Volume)			<input type="checkbox"/> $\mu\text{m}^3$ <input type="checkbox"/> fL	
HEM5D12	MONO % (Monocytes)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	MONO (Monocytes)			<input type="checkbox"/> $10^9/\text{L}$ <input type="checkbox"/> $10^6/\text{mL}$ <input type="checkbox"/> $10^3/\mu\text{L}$	
HEM5D12	MPV (Mean Platelet Volume)			<input type="checkbox"/> $\mu\text{m}^3$ <input type="checkbox"/> fL	
HEM5D12	NEUT % (Neutrophils)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	NEUT (Neutrophils)			<input type="checkbox"/> $10^9/\text{L}$ <input type="checkbox"/> $10^6/\text{mL}$ <input type="checkbox"/> $10^3/\mu\text{L}$	
HEM5D12	PDW % (Platelet Distribution Width)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	PDW fL (Platelet Distribution Width)			<input type="checkbox"/> fL	
HEM5D12	PLT (Platelets)			<input type="checkbox"/> $10^9/\text{L}$ <input type="checkbox"/> $10^6/\text{mL}$ <input type="checkbox"/> $10^6/\text{cm}^3$ <input type="checkbox"/> $10^3/\mu\text{L}$ <input type="checkbox"/> $10^3/\text{mm}^3$ <input type="checkbox"/> 1/nL	
HEM5D12	PCT (Plateletcrit)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	RBC (Red Blood Cells)			<input type="checkbox"/> $10^{12}/\text{L}$ <input type="checkbox"/> $10^9/\text{mL}$ <input type="checkbox"/> $10^9/\text{cm}^3$ <input type="checkbox"/> $10^6/\mu\text{L}$ <input type="checkbox"/> $10^3/\text{mm}^3$ <input type="checkbox"/> $10^3/\text{nL}$ <input type="checkbox"/> 1/pL	

Program	Analyte	Method	Instrument	Unit	Result
HEM5D12	RDW % (RBC Distribution Width)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	RDW fL (RBC Distribution Width)			<input type="checkbox"/> fL	
HEM5D12	RET (Reticulocytes)			<input type="checkbox"/> 10 <sup>3</sup> /μL <input type="checkbox"/> 10 <sup>9</sup> /L <input type="checkbox"/> 10 <sup>6</sup> /μL <input type="checkbox"/> 10 <sup>6</sup> /L	
HEM5D12	RET% (Reticulocytes)			<input type="checkbox"/> % <input type="checkbox"/> fraction	
HEM5D12	WBC (White Blood Cells)			<input type="checkbox"/> 10 <sup>9</sup> /L <input type="checkbox"/> 10 <sup>6</sup> /mL <input type="checkbox"/> 10 <sup>6</sup> /cm <sup>3</sup> <input type="checkbox"/> 10 <sup>3</sup> /μL <input type="checkbox"/> 10 <sup>3</sup> /mm <sup>3</sup> <input type="checkbox"/> 1/nL	

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 filled form to ESFEQA by Fax (+49 6221 4166-790) or by E-Mail (surveys@esfeqa.eu)**