Result Form for Survey Sample LPAb_____

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).

Qualitative Results:

Program	Method	Reagent	Instrument	Analyte	LPAb result sample a			LPAb result sample b		
					Positive	Border-line	Negative	Positive	Border-line	Negative
LPAb				anti-Legionella pneumophila IgG	○	○	○	○	○	○
LPAb				anti-Legionella pneumophila IgM	○	○	○	○	○	○
LPAb				anti-Legionella pneumophila total	○	○	○	○	○	○

Quantitative Results:

Program	Analyte	Method	Reagent	Instrument	Unit *	LPAb sample a Result	LPAb sample b Result
LPAb	IgG				○ AU/mL ○ Ratio		
LPAb	IgM				○ AU/mL		
LPAb	total				○ AU/mL		

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