

Result Form for Survey Sample MYPL _____

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 Antibody	Result sample a			Result sample b		
					Positive	Border-line	Negative	Positive	Border-line	Negative
MYPL				IgA						
MYPL				IgG						
MYPL				IgM						
MYPL				Antibody total						

Quantitative Results:

Program	Analyte Antibody	Method	Reagent	Instrument	Unit *	Result Sample a	Result Sample b
MYPL	IgA				☐ AU/ml ☐ Index ☐ NTU ☐ Ratio ☐ RU/ml ☐ VE		
MYPL	IgG				☐ AU/ml ☐ Index ☐ NTU ☐ RU/ml ☐ VE		

Program	Analyte Antibody	Method	Reagent	Instrument	Unit *	Result Sample a	Result Sample b
MYPL	IgG (Ratio)				☐ Ratio		
MYPL	IgM				☐ AU/ml ☐ Index ☐ NTU ☐ Ratio ☐ RU/ml ☐ VE		
MYPL	Antibody total				☐ AU/ml ☐ Index ☐ Ratio ☐ Titer 1:		

*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)