Result Form for Survey Samples TM4 _____

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	Instrument-Key	Method-Key	Reagent-Key	Unit	a Result	b Result
TM4	AFP				○ kIU/l ○ ng/ml ○ IU/ml ○ µg/l		
TM4	CA 125				○ kU/l ○ U/ml		
TM4	CA 15-3				○ kU/l ○ U/ml		
TM4	CA 19-9				○ kU/l ○ U/ml		
TM4	CEA				○ µg/l ○ ng/ml		
TM4	Ferritin				○ µg/l ○ U/ml ○ ng/ml		
TM4	PSA free				○ µg/l ○ ng/ml		
TM4	PSA total				○ µg/l ○ ng/ml		

_____ _____

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)