

Result Form for Survey Sample CC12 _____

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-Key	Instrument-Key	Reagent-Key	Unit	Result
CC12	Acid Phosphatase				☐ U/l ☐ μ kat/l	
CC12	Albumin				☐ g/l ☐ g/dl ☐ mg/dl	
CC12	ALP				☐ U/l ☐ μ kat/l	
CC12	ALT/GPT				☐ U/l ☐ μ kat/l	
CC12	Amylase				☐ U/l ☐ μ kat/l	
CC12	AST/GOT				☐ U/l ☐ μ kat/l	
CC12	Bilirubin-direct				☐ g/l ☐ mg/dl ☐ mmol/l ☐ μ mol/l	
CC12	Bilirubin-total				☐ g/l ☐ mg/dl ☐ mmol/l ☐ μ mol/l	
CC12	Calcium, total				☐ g/l ☐ mg/dl ☐ mg/l ☐ mmol/l	

Program	Analyte	Method-Key	Instrument-Key	Reagent-Key	Unit	Result
CC12	Calcium, ionized				☐ g/l ☐ mg/dl ☐ mmol/l	
CC12	CHE				☐ mU/ml ☐ kU/l ☐ U/l ☐ μ kat/l	
CC12	Chloride				☐ g/l ☐ mg/dl ☐ mg/l ☐ mmol/l	
CC12	Cholesterol				☐ g/l ☐ mg/dl ☐ mmol/l	
CC12	CK				☐ U/l ☐ μ kat/l	
CC12	Creatinine				☐ g/l ☐ mg/l ☐ mg/dl ☐ μ mol/l	
CC12	γ -GT				☐ U/l ☐ μ kat/l	
CC12	Glucose				☐ g/l ☐ mg/dl ☐ mmol/l	
CC12	HDL Cholesterol				☐ g/l ☐ mg/dl ☐ mmol/l	
CC12	Iron				☐ μ g/dl ☐ μ mol/l ☐ mg/dl	
CC12	Lactate				☐ mg/dl ☐ mmol/l	
CC12	LDH				☐ U/l ☐ μ kat/l	
CC12	LDL Cholesterol				☐ g/l ☐ mg/dl ☐ mmol/l	

Program	Analyte	Method-Key	Instrument-Key	Reagent-Key	Unit	Result
CC12	Lipase				☐ U/l ☐ μ kat/l	
CC12	Lithium				☐ mg/dl ☐ mmol/l	
CC12	Magnesium				☐ g/l ☐ mg/dl ☐ mg/l ☐ mmol/l	
CC12	pancr. Amylase				☐ U/l ☐ μ kat/l	
CC12	Phosphate				☐ g/l ☐ mg/dl ☐ mg/l ☐ mmol/l	
CC12	Potassium				☐ g/l ☐ mg/dl ☐ mg/l ☐ mmol/l	
CC12	Sodium				☐ g/l ☐ mg/dl ☐ mg/l ☐ mmol/l	
CC12	TIBC				☐ μ mol/l ☐ μ g/dl ☐ mg/dl	
CC12	Total Protein				☐ g/l ☐ g/dl ☐ mg/dl	
CC12	Triglycerides				☐ g/l ☐ mmol/l ☐ mg/dl	
CC12	UIBC				☐ μ g/dl ☐ μ mol/l	

Program	Analyte	Method-Key	Instrument-Key	Reagent-Key	Unit	Result
CC12	Urea				☐ g/l ☐ g/l Urea N ☐ mg/dl ☐ mg/dl Urea N ☐ mmol/l	
CC12	Uric Acid				☐ g/l ☐ mg/dl ☐ mg/l ☐ mmol/l ☐ µmol/l	
CC12	Zinc				☐ µg/dl ☐ µmol/l	
CC12	Copper				☐ µg/dl ☐ µmol/l	

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)