

Result Form for Survey Samples BACUC-C_2026_03

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 (required)	Instrument (optional)	Reagent (optional)	a Result	
					Genus	Species
BACUC-C	Identification: primary Pathogen					
BACUC-C	Identification: additional Pathogen					
BACUC-C	Identification: additional Pathogen					

Program	Analyte	Method (required)	Instrument (optional)	Reagent (optional)
BACUC-C	Antimicrobial Susceptibility (AST)			
b Result	Antibiotic	S	I or SDD	R
	Amikacin			
	Amoxicillin-clavulanate			
	Ampicillin			
	Cefazolin			
	Cefepime			
	Ceftazidime			
	Ceftriaxone			
	Ciprofloxacin			
	Ertapenem			
	Gentamicin			
	Imipenem			
	Meropenem			
	Nitrofurantoin			
	Piperacillin-tazobactam			
	Tobramycin			
Trimethoprim-sulfamethoxazole				

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)