

**UK NEQAS Haematology**  
**SURVEY 2311NH: Newborn Sickle Screening**  
**DISTRIBUTION DATE: 14th November 2023**  
**CLOSING DATE: 23:59 (GMT); 1st December 2023**

## 1.0 Distribution Package

This package contains survey 2311NH

The package comprises of a white postal bag containing documentation and a sealed clear plastic bag holding three newborn screening blood test cards. If you do not receive the expected combination of specimens, notify us immediately so that appropriate action can be taken.

Repeat specimens may be requested by Email: [haem@ukneqas.org.uk](mailto:haem@ukneqas.org.uk) or Tel: +44 (0)1923 587111

## 2.0 Information required for Control of Substances Hazardous to Health (COSHH)

The specimens have been prepared from umbilical cord blood. Handle the specimens according to the protocol in force in your laboratory for the safe handling of patient samples.

This information is printed on a separate information sheet and should be reviewed by your COSHH assessor for consideration of any changes necessary to your local work practices.

## 3.0 Use of packaged material

This material is for use in External Quality Assessment Surveys to assess laboratory performance.

## 4.0 Newborn Sickle Cell Screening Survey 2311NH

Your laboratory will have been notified by email of the survey distribution. You are provided with three specimens, 2311NH1 and 2311NH2 and 2311NH3, as newborn screening dried blood spot test cards, each containing one drop of umbilical cord blood. The 'patient' details for each specimen are provided on the card. The specimens are suitable for testing by high performance liquid chromatography (HPLC), iso-electric focusing (IEF), capillary electrophoresis (CE) and mass spectroscopy (MS).

### Specimen Handling and Disposal

- On receipt, store cards at 2 - 8 °C until tested.
- Test the specimens by your standard protocol for newborn sickle screening.
- **Keep the cards at 2 - 8 °C until you have received the report of the survey.** In case of query or out of consensus results, we may ask you to retest your specimen or to return it to us.
- The material should be handled and discarded as patient material

## 5.0 Return of Results

- Return your results online at [www.ukneqash.org/sampleentry](http://www.ukneqash.org/sampleentry)
- Enter your login details
- Select Newborn Sickle Screening.
- Select the current distribution.
- A new page will open showing three tabs, one for each specimen. The active tab is shown by orange text in the tab.
- Enter your primary screening results.  
If you have ticked the 'Other' box enter a comment by clicking on the 'OTHER' button next to the tick box; this will open a new window for you to enter a short comment. Enter your method used by selecting from the dropdown list.
- Repeat for any Secondary Screening results.
- Enter the fractions that would be reported in the 'Fraction Reported' box.
- Enter your interpretation codes and any comments.
- Repeat for the other two specimens.
- Results may be saved at any time by clicking on the 'Save' button at the top of the page. When you are happy with your results, click on the 'Submit' button. Clicking on the 'Submit' button will save your results and make them read only.

## 6.0 Date of next survey: 5th of December 2023 you will be notified by e-mail on the day of despatch.

**UK National External Quality Assessment Scheme for Haematology  
CODING LIST FOR NEWBORN SICKLE SCREENING COMMENTS**

Code	Comment
700	No common haemoglobin variant detected: beta-thalassaemia trait cannot be excluded
710	Results consistent with sickle cell carrier
711	Results consistent with Hb C carrier
712	Results consistent with Hb D carrier
713	Results consistent with Hb E carrier
714	Results consistent with Hb O <sup>Arab</sup> carrier
715	Results consistent with haemoglobin variant present (but not Hb S, C, D, E or O <sup>Arab</sup> )
716	Results suggestive of Hb H disease (>25% Hb Bart's)
720	Results consistent with sickle cell disease (Homozygous HbS or HbS/beta thalassaemia)
721	Results consistent with Hb SC Disease
722	Results consistent with Hb SD Disease
723	Results consistent with Hb SE Disease
724	Results consistent with Hb SO <sup>Arab</sup> Disease
725	Results consistent with Hb S and another variant (but not Hb C, D, E or O <sup>Arab</sup> )
730	Results consistent with homozygous Hb C or Hb C/ beta thalassaemia
731	Results consistent with homozygous Hb D or Hb D/ beta thalassaemia
732	Results consistent with homozygous Hb E or Hb E/ beta thalassaemia
733	Results consistent with homozygous Hb O <sup>Arab</sup> or Hb O <sup>Arab</sup> / beta thalassaemia
734	Results consistent with homozygous Hb Variant (but not S, C, D, E or O <sup>Arab</sup> ) or Hb variant/ beta thalassaemia
735	Results consistent with beta thalassaemia major or prematurity (Hb F only or HbA<1.5%)
740	Results consistent with recent transfusion or specimen contamination
745	Follow up referral required
750	Other comment (please specify in comment box)