

Sheffield Teaching Hospitals

NHS Foundation Trust

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ANTIPHOSPHOLIPID INVESTIGATION **EXERCISE LA 21**

August 2023

Closing date: 15th September 2023

This exercise comprises one sample for LA investigation. Instructions are given below. Results should be entered online (please note, for this survey we are utilising online-only data entry. Please make contact if you encounter any difficulties with this).

IMPORTANT INFORMATION ABOUT DATA FNTRY

To enter your data online, it is important that you enter an overall interpretation first, and click on "Update/next page" (please see below). You will then be able to enter results for specific tests by clicking on the relevant tab.

For this survey, please ONLY enter an interpretation of positive, negative or equivocal, please do NOT grade the positivity if obtaining a positive screen



Lupus Anticoagulant Investigation Supplementary Exercise Online Results Entry

Those data engry mages include syname for results for ARTT (unite (Jeagents) Milotte Ryssells Viner Venom Time and Miscellaneous (other) investigations, as well as an overall interpretation. Enter your 'Overall Interpretation' first, and then the pages relevant to your routine laboratory investigantiphospholipid syndrome, giving as much detail as possible.

LabNo: 30146 LabName: Roval Hallamshire Hospital
Sample LA 23::02

APTT DRVVT KCT TDT SCT Immunological Miscellaneous

You are logged in as the laboratory number/name shown above. If this is not you, please click 'Cancel'.

Overall Interpretation

Clinical Scenario:

Sample LA 23/02 is from a 27 year old man with recurrent VTE.

INSTRUCTIONS

Please find enclosed one plasma sample, LA23/02 for investigation

Please note the following:

 Please perform all tests you would routinely carry out for antiphospholipid syndrome investigation on a clinical sample. This includes both functional lupus anticoagulant tests and any immunological assays you may employ (such as assays for anticardiolipin or anti-β2 GP1 antibodies).

- 2. Please record all methodology, raw data (eg clotting times), and reference ranges, together with only the algorithms you <u>usually</u> employ for your assays.
- 3. Results must be entered online via our website, please use the following url: http://www.coageqa.org.uk/wfhresults/lupusresults.aspx or go to www.neqascoag.org, click on the login link, and then choose the "lupus anticoagulant" link to online data entry. You will need your password to login, which is the same password used for data entry in the laboratory (level 1 & 2) programme. Data can be added and saved at any point up until the closing date. Please enter your results by 15th September 2023.

Instructions: Sample **LA23/02** should be stored refrigerated. Reconstitute by carefully adding **0.5 ml** of distilled water to each vial, mix gently and leave standing at room temperature for 10 minutes before testing. There are online results pages for the following investigations:

- Overall interpretation
- APTT (up to 2 different reagents),
- Dilute Russells Viper Venom Time,
- Kaolin Clotting time
- Silica Clotting Time
- dilute Prothrombin Time (TDT)
- Immunological assays
- Other (miscellaneous tests)

Please complete all the details requested, including a full breakdown of results & raw data for each investigation.

Important note. Sample LA23/02 has been screened for hepatitis B surface antigen (HBsAg) and for antibodies to hepatitis C virus and human immunodeficiency virus types 1 & 2 (anti-HIV-1+2) which were not detected. Nevertheless, normal precautions should be taken in the handling and disposal of these samples.

Please also note the following requirements of laboratory participation in EQA under ISO15199: "The laboratory shall not communicate with other participants in the interlaboratory comparison programme about sample data until after the submission date", and "The laboratory shall not refer interlaboratory comparison samples for confirmatory examinations before submission of the data, even if this would be routinely done with patient samples". Where evidence of collusion is found, participant performance will be scored as a fail for that survey.

Please record your DRVVT raw data (clotting times in seconds) and also <u>ONLY</u> the ratio or algorithms you routinely report. The values expected in the respective fields shown on the result sheet are as follows:

- 1 Test results: eg DVV Test, LA-Screen, LAC Screen, DRVVT with dilute phospholipid
- 2 Normal pooled plasma result: DVV test, LA-Screen, LAC Screen, DRVVT with dilute phospholipid
- 3 DRVVT performed on 50:50 mix of test and normal plasma ("mixing studies")
- 4 Test results: *eg* DVV Confirm, LA-Confirm, DRVVT with concentrated phospholipid, DRVVT with washed platelets/platelet extract
- 5 Normal pooled plasma result : DVV Confirm, LA-Confirm, LAC-Confirm, DRVVT with concentrated phospholipid, DRVVT with washed platelets/platelet extract
- 6 Test result/normal plasma result (ie result $1 \div \text{result } 2$)
- 7 Confirm test result/confirm normal plasma result (ie result $4 \div \text{result } 5$)
- 8 Test result/confirm result (ie result $1 \div$ result 4)
- 9 Normalised test/confirm ratio (test/np) \div (confirm/np) (result 6 \div result 7)
- 10 % correction of ratio: $(test/np) (confirm/np) \times 100$ ie $test/np) \times 100$ ie $test/np) \times 100$ result 6
- 11 As indicated in the Manchester DRVVT kit method.
- * If any other algorithm or calculation method is used to determine LA positivity, please indicate.

For Silica Clotting Time (SCT) results, please enter the raw data (clotting times in seconds) for this test, and ONLY those ratios you routinely report. If an algorithm is employed that is not shown in the tables, please record these in the comments section of the "other/miscellaneous" page.