UK NEQAS
International Quality Expertise

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UK NEQAS Microbiology

DISTRIBUTION INFORMATION FOR UK NEQAS EQA

Scheme-specific instructions are on the enclosed safety sheet. Blank reply forms can be printed directly from the results entry screen on the secure area of the website. In addition, web images of reply forms, copies of this information sheet and the safety instructions are available on the website: www.ukneqasmicro.org.uk. Select the tab “Participant Info", then select from the left hand menu either "Current Reply Forms" and the relevant scheme or "Distribution Information Sheet".

Antibiotic panels for the antimicrobial susceptibility scheme are found on the web reply forms.

You have received one or more of the following EQA distributions for examination by your routine protocol.

Scheme Name	Dist/Specimen No	Clinical Details\Requests	Specimen Type	Closing Date
General bacteriology	**4901**			**03/05/2021**
	6402	Swelling and tenderness. Query cellulitis. Query significant pathogens	**Skin**	
	6403	Query necrotising fasciitis following pain, swelling and tenderness. Query significant pathogens	**Wound swab**	
	6404	Terminal ileitis and diarrhoea in a 5 year old child. Query intestinal pathogens	**Faeces**	
Antimicrobial susceptibility	**4902**			**03/05/2021**
	6405	Stenotrophomonas maltophilia from sputum. Report on antimicrobial susceptibility testing	**Susceptibility**	
	6406	Klebsiella pneumoniae from sputum. Report on antimicrobial susceptibility testing	**Susceptibility**	
Blood donor screen	**4903**			**26/04/2021**
	6407	Screen for HBsAg, anti-HBc, HCV Ag/Ab, HIV 1/2 Ag/Ab, anti-HTLV I/II and anti-Treponema pallidum	**Serum**	
	6408	Screen for HBsAg, anti-HBc, HCV Ag/Ab, HIV 1/2 Ag/Ab, anti-HTLV I/II and anti-Treponema pallidum	**Serum**	
	6409	Screen for HBsAg, anti-HBc, HCV Ag/Ab, HIV 1/2 Ag/Ab, anti-HTLV I/II and anti-Treponema pallidum	**Serum**	
Anti-HBs detection	**4904**			**03/05/2021**
	6410	Please report on the presence of anti-HBs	**Serum**	
	6411	Please report on the presence of anti-HBs	**Serum**	
	6412	Please report on the presence of anti-HBs	**Serum**	
	6413	Please report on the presence of anti-HBs	**Serum**	
	6414	Please report on the presence of anti-HBs	**Serum**	
	6415	Please report on the presence of anti-HBs	**Serum**	
Hepatitis C RNA detection	**4905**			**10/05/2021**
	6416	Please report on HCV qualitative, RNA viral load (log IU/mL or IU/mL) and genotype testing	**Plasma**	
	6417	Please report on HCV qualitative, RNA viral load (log IU/mL or IU/mL) and genotype testing	**Plasma**	
AAFB microscopy	**4906**			**03/05/2021**
	6418	Sputum smear. Examine for AAFB	**Sputum**	
	6419	Sputum smear. Examine for AAFB	**Sputum**	
	6420	Sputum smear. Examine for AAFB	**Sputum**	
	6421	Sputum smear. Examine for AAFB	**Sputum**	
Diagnostic serology hepatitis	**4907**			**03/05/2021**
	6422	Please report on presence of markers of acute infection due to HAV, CMV and EBV	**Serum**	
	6423	Please report on presence of markers of acute infection due to HAV, CMV and EBV	**Serum**	
	6424	Please report on presence of markers of acute infection due to HAV, CMV and EBV	**Serum**	
Mycobacteria (molecular)	**4908**			**07/06/2021**
	6425	Simulated purulent sputum. Using routine molecular detection methods for direct and/or post culture testing, report on (i) the presence / absence of mycobacteria (ii) species (iii) typing and (iv) resistance to rifampicin, if tested in lab	**Sputum**	
	6426	Simulated purulent sputum. Using routine molecular detection methods for direct and/or post culture testing, report on (i) the presence / absence of mycobacteria (ii) species (iii) typing and (iv) resistance to rifampicin, if tested in lab	**Sputum**	

Scheme Name	Dist/Specimen No	Clinical Details\Requests	Specimen Type	Closing Date
Immunity screen	**4909**			**03/05/2021**
	6427	Please report on the presence of HAV, CMV and VZV IgG (or total antibody)	**Serum**	
	6428	Please report on the presence of HAV, CMV and VZV IgG (or total antibody)	**Serum**	
	6429	Please report on the presence of HAV, CMV and VZV IgG (or total antibody)	**Serum**	
	6430	Please report on the presence of HAV, CMV and VZV IgG (or total antibody)	**Serum**	
	6431	Please report on the presence of HAV, CMV and VZV IgG (or total antibody)	**Serum**	
	6432	Please report on the presence of HAV, CMV and VZV IgG (or total antibody)	**Serum**	
Toxoplasma serology	**4910**			**03/05/2021**
	6433	Multi- organ donor screen	**Serum**	
	6434	Potential live kidney donor	**Serum**	
	6435	Cardiomyopathy, to be listed for transplant	**Serum**	
Parasite serology	**4911**			**03/05/2021**
	6436	Examine for Schistosoma antibodies	**Serum**	
	6437	Examine for Amoeba anitbodies	**Serum**	
	6438	Examine for Hydatid antibodies	**Serum**	
	6439	Examine for Toxocara antibodies	**Serum**	
	6440	Examine for Strongyloides antibodies	**Serum**	
	6441	Examine for Trypanosoma cruzi antibodies	**Serum**	
Bacterial identification	**4912**			**26/04/2021**
	6442	For isolation and identification	**Blood**	
Molecular detection of SARS-CoV-2	**4913**			**26/04/2021**
	6443	Please report on the presence or absence of SARS-CoV-2	**Nasopharyngeal swab**	
	6444	Please report on the presence or absence of SARS-CoV-2	**Nasopharyngeal swab**	
Mycobacterium culture	**4914**			**07/06/2021**
	6447	Culture and report presence / absence of mycobacteria	**Sputum**	
	6448	Culture and report presence / absence of mycobacteria	**Sputum**	
	6449	Culture and report presence / absence of mycobacteria	**Sputum**	
	6450	Culture and report presence / absence of mycobacteria	**Sputum**	

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Microbiology

These simulated specimens may contain virulent pathogenic organisms of any category other than hazard group 4

Safety Notes

- All EQA samples may contain fully virulent organisms other than those of hazard group 4
- These samples must be handled with the same degree of care as equivalent clinical samples and by the same appropriately qualified and supervised staff
- Safeguards should be included to protect at-risk members of staff
- Local and national safety guidelines and regulations must be followed
- Containment facilities used must be those appropriate to similar clinical samples. As with clinical samples it may be necessary to transfer organisms from containment level 2 to 3 during processing once preliminary tests suggest the presence of derogated category 3 organisms
- Inspect packages for evidence of breakage and leakage and discard by autoclaving if this is evident
- Follow the instructions below for opening carefully
- In the event of an accident involving exposure of staff contact UK NEQAS (+ 44 (0) 20 8905 9890) in normal working hours or the Colindale Duty Safety Officer (+ 44 (0) 870 084 2000) out of hours and the identity of the pathogens will be revealed

Notice for UK participants
Microorganisms distributed as part of this EQA service are included in the Schedule 5 list of controlled substances. Please be aware that storage of any organisms included in the Schedule 5 list following identification requires registration of your facility with the Home Office.
For further information see: http://www.legislation.gov.uk/ukpga/2001/24/schedule/5

ALL SPECIMENS SHOULD BE HANDLED AS IF CAPABLE OF TRANSMITTING INFECTION

Some distributions will have extra safety information on the outer specimen packaging about handling which must be complied with.

Glass vials with crimp caps:
The vials contain freeze-dried material and should be opened in an exhaust protective cabinet. With the arrow on the plastic flip top pointing away from you, carefully but deliberately pull the flip top up and away from you. When it reaches the far edge, pull downwards and to the right or to the left (depending on whether you are right or left-handed) until the seal separates; then still holding onto the plastic top, gently remove altogether and dispose into a sharps container. Remove the bung carefully and discard. Reconstitute immediately before testing following the scheme specific instructions on the next page.

Glass vials with screw caps:
The vials contain freeze-dried material and should be opened in an exhaust protective cabinet. Remove the outer seal using the serrated tear-off strip. Unscrew the plastic cap and reserve. Remove the bung carefully and discard. Reconstitute immediately before testing following the scheme specific instructions on the next page.

Plastic vials:
Specimens of serum/plasma or liquid specimens.

Glass slides:
Slides prepared from clinically treated material have been fixed for safety reasons.

Additional safety information can be found on the website:
http://www.ukneqasmicro.org.uk/images/pdf/DOC.0433.pdf

Storage: Although a delay in testing of EQA samples is not recommended, if this is necessary refer to the document in the link: http://www.ukneqasmicro.org.uk/images/pdf/DOC.0433.pdf

General information for processing EQA:

- Laboratories will achieve the maximum educational benefit from these specimens if they are treated as nearly as possible as normal patient specimens without non-routine procedures or media being used.
- Record only organisms or findings that you would normally include in your final report.
- If you are unable to examine a specimen state your reasons in the free text box on the web reply form; do not return the specimen.

Please return your results as soon as possible and at the latest by the return date shown on the electronic reply form or enclosed information sheet. Return results via the website: www.ukneqasmicro.org.uk

Scheme specific instructions and safety information

Scheme(s)/types	Instructions
Bacteriology isolation, identification and antimicrobial susceptibility schemes	Add 1mL of broth such as nutrient broth, mix gently and allow five minutes for reconstitution. Use a drop from a Pasteur pipette or dipped swab as the inoculum before plating out onto the appropriate media ***Clostridioides difficile* assays**: Reconstitute as above then follow the manufacturer's instructions for liquid faecal sample **MRSA screening:** Molecular users should use 1 mL of water or their kit's sample buffer to reconstitute the specimens. Then take a 100µL sample volume (which represents the swab), and add to your standard specimen lysis medium, then test by your routine molecular methods. Unused reconstituted sample may be frozen in case further investigation is required; alternatively a repeat sample can be requested.
Bacterial Identification scheme	On receipt, the screw capped universal tube containing liquid bacterial suspension should be mixed well to ensure homogeneity. Use a drop from a Pasteur pipette or dipped swab as the inoculum before plating out onto the appropriate media. Laboratories will achieve the maximum educational benefit from these specimens if they are treated as nearly as possible as routine procedures or media being used. Organisms isolated should be identified only to the level normally attempted in your laboratory.
Mycobacterium culture, Molecular detection of Mycobacteria **MUST BE HANDLED AT CONTAINMENT LEVEL 3**	The specimens have been prepared to provide a finished product that has some of the physical characteristics of purulent sputum. The materials used to make the samples provide, on reconstitution, a viscous product. However, the nature of the medium is such that on reconstitution the pellet does not dissolve rapidly or easily. **It is important therefore that these instructions for reconstitution and dilution are followed precisely**. Reconstitute the contents of the vial with **1 mL** of nutrient broth, and leave for **five** minutes. The nature of the material means that it may not be possible to fully dissolve the pellet. Transfer all of the contents of the vial into the next diluent which may be either a digestive or decontamination agent, depending on your individual laboratory method.
Mycology and antifungal susceptibility	On receipt, the screw capped micro tubes containing liquid spore suspension should be mixed well (do not vortex), to ensure homogeneity. Use two drops (equivalent to 80 µL) from a Pasteur pipette to inoculate each of the four quadrants on a plate, or on a slope of media routinely used for cultivation. All mycology specimens contain a fungus. Therefore, if there is no growth after your laboratory's standard incubation period, use the remaining contents of the micro tube to inoculate fresh media. Spore suspensions to be stored at room temperature.
Serological schemes	It is recommended that users of automated systems centrifuge specimens prior to analysis.
Urinary antigens, Fungal biomarkers and Cryptococcal antigen detection	Follow manufacturer's instructions for the type of specimen being tested.
Virus identification	Simulated specimens for virus identification. These are in either of the following formats: 1. Liquid transport medium: these specimens do not contain cells suitable for direct examination by IF. 2. Gelatin-containing transport medium: these specimens contain cells which may be infected with viruses. The cells may be extracted for direct examination by immunofluorescence and/or for identification by PCR and/or by cell culture by melting the gelatin at 37°C, adding phosphate buffered saline or other suitable buffer and centrifuging (or your normal procedure for nasopharyngeal aspirates).
HIV1 RNA quantification, HBV DNA quantification, Hepatitis C RNA detection, HEV RNA detection, Molecular detection of respiratory viruses	Pipette **1.2mL** RNase-free water into the vial and replace the screw cap. Mix gently and allow five minutes for reconstitution. Vortex specimen. Withdraw your normal sample volume and test by your routine method(s).
CMV DNA quantification, Molecular detection of viruses in CSF EBV DNA quantification Molecular detection of faecal parasites Molecular detection of SARS-CoV-2 Molecular and rapid diagnosis of Malaria	Pipette **0.5mL** RNase-free water into the vial and replace the screw cap. Mix gently and allow five minutes for reconstitution. Vortex specimen. Withdraw your normal sample volume and test by your routine method(s). **Molecular and rapid diagnosis of Malaria and Molecular detection of faecal parasites:** Pipette **0.5mL** RNase free water for molecular or 0.5mL sterile water for malaria rapid into the vial, mix gently and allow five minutes for reconstitution. Withdraw your normal sample volume and test by your routine method(s).
Molecular detection of *Chlamydia trachomatis* and *Neisseria gonorrhoeae*	Simulated specimens can either be one of the following formats: 1. Freeze-dried swab: pipette **0.5mL** molecular grade water into the vial and replace the screw cap. Mix gently and allow five minutes for reconstitution. Vortex specimen. Withdraw a **100µL** sample (which represents the swab) volume, add to your routine specimen/lysis medium, extract and test by your routine method(s) for the markers. 2. Liquid urine: withdraw your normal sample volume and test by your routine method(s).
Viral gastroenteritis	Pipette **1.0mL** RNase-free water into the vial and replace the screw cap. Mix gently and allow five minutes for reconstitution. Vortex specimen. Withdraw your normal sample volume and test by your routine method(s).