

Patient Percentile Monitoring Clinical Laboratory AZ Sint-Lucas

10/12/2014
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Overview

1. Introduction

Hospital AZ Sint-Lucas

Clinical Laboratory AZ Sint-Lucas

(I/E)QC Clinical Laboratory

2. Patient Percentile Monitoring data

(ALT; TP; ALP; Ca; LDH; CHOL; CRP; Na, Uric Acid)

3. Conclusions/Remarks



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1. AZ Sint-Lucas

- **General Hospital**

- Campus Sint-Lucas & Campus Volkskliniek (till 2018)

- **Medical activity (2012)**

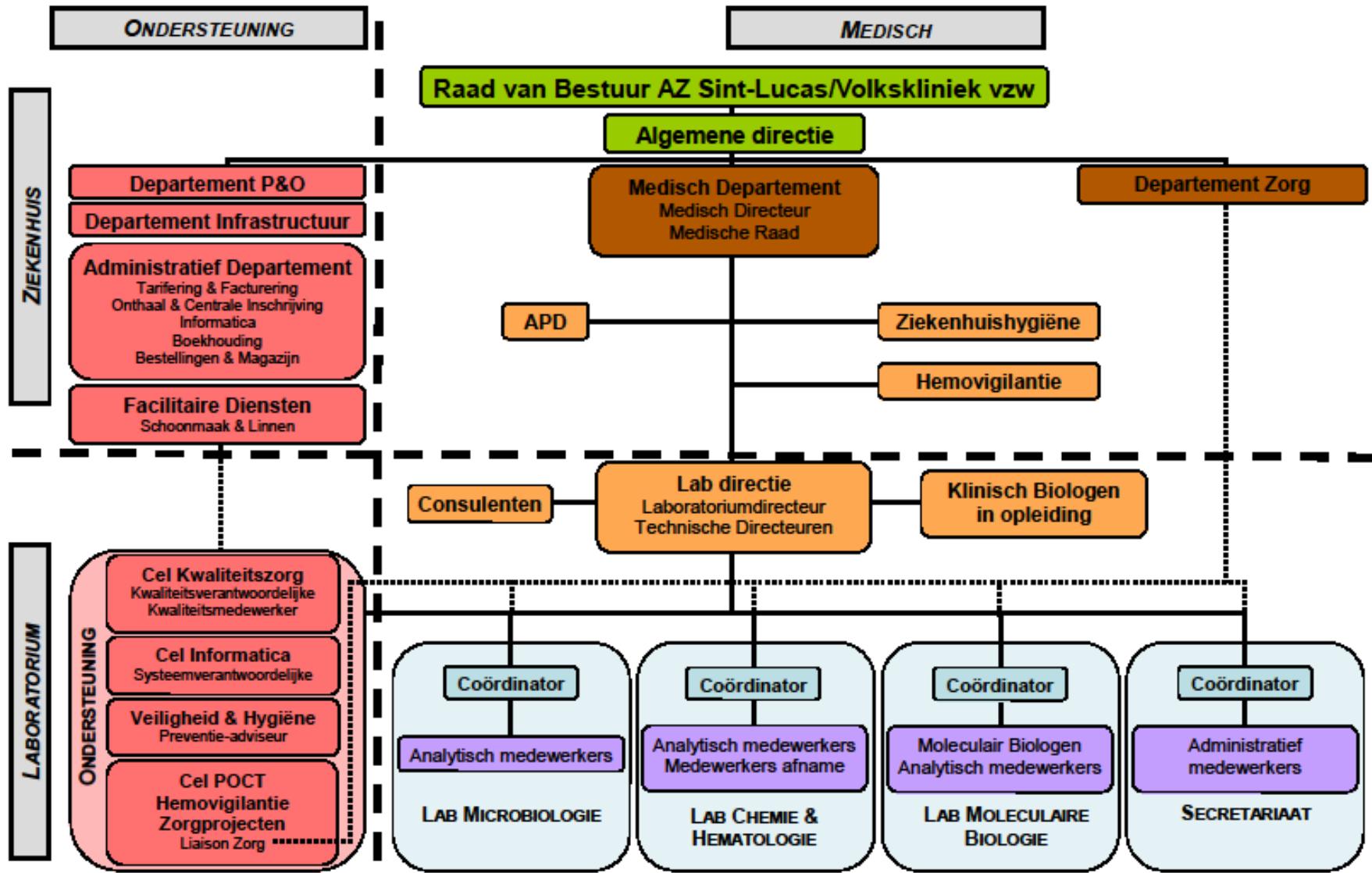
- 805 beds hospitalisation + 103 daycare hospital
 - +/- 70.000 admissions (40.303 daycare hospital)
 - Largest Emergency Department in East-Flanders
 - Large maternity department (>2500 deliveries/jr)
 - Oncology
 - Neurosurgery



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1. Clinical Laboratory AZ Sint-Lucas



1. Clinical Laboratory AZ Sint-Lucas

- **Clinical laboratory**

- 68 people (53.7 FTE)
 - Chemistry & Hematology (32.1 fte)
 - Microbiology (9.5 fte)
 - Administration (9.1 fte)
 - Molecular biology (3 fte)

- **Medical activity**

- +/- 22.000 lab requests/month
- +/- 142.000 blood withdrawels (>60% lab; >16000 outpatients)
- 6 clinical biologists (3micro/3chem)
 - 2 specialists in training

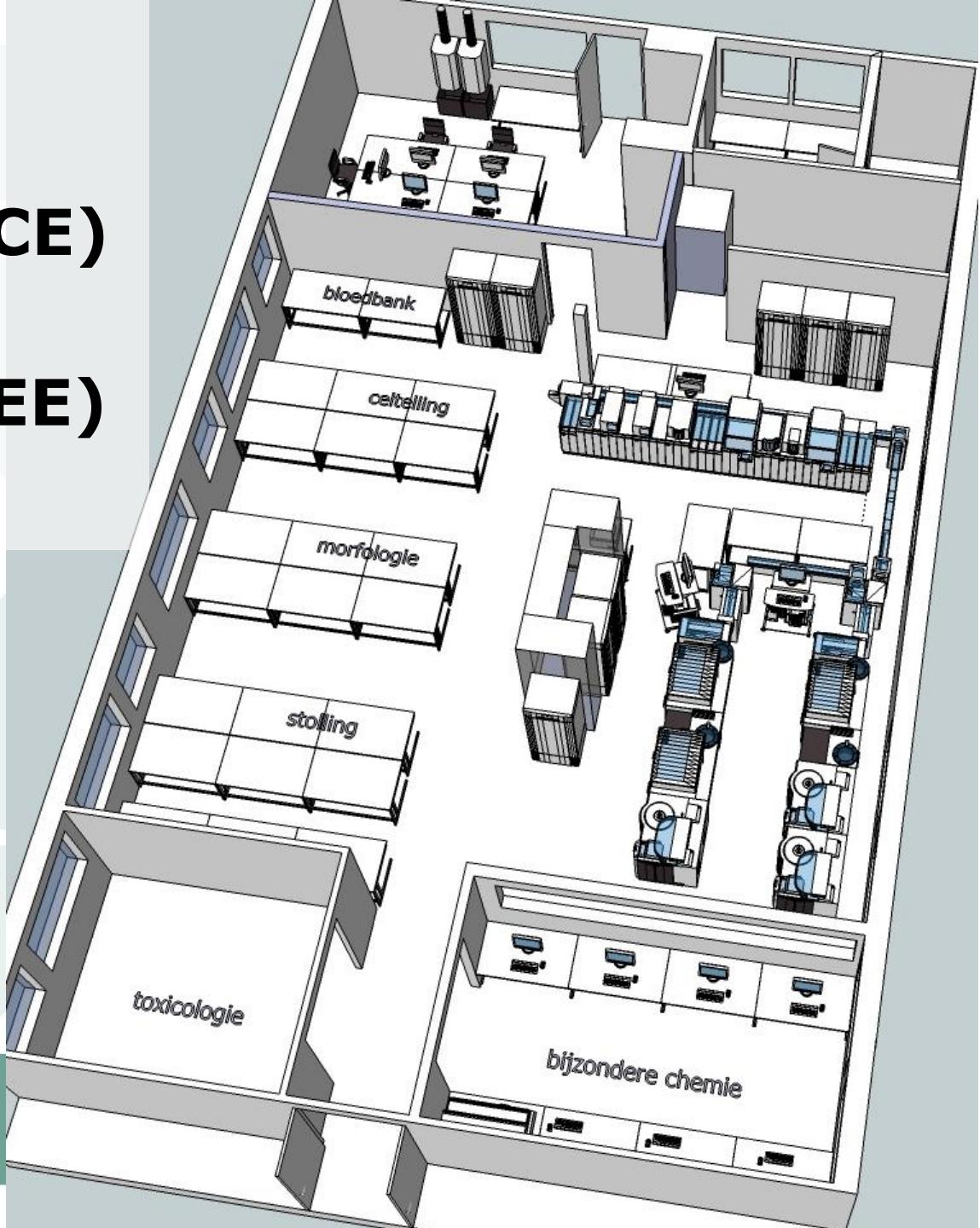


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Clinical chemistry

- MPA
- Cobas6000-1 (CCE)
C501₁C501₂E601₁
- Cobas6000-2 (CEE)
C501₃E601₂E601₃



1. IQC LAB AZ Sint-Lucas

- **Clinical chemistry**
 - **IQC Precision**
 - 10 values → mean (target) and SD

MEAN \pm xSD (x 2 or 3)



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1. IQC LAB AZ Sint-Lucas

- **Clinical chemistry**
 - **IQC BIAS**

- **PEER** = Cumulative mean peer group (large # labs)
(>cumulative mean methodgroup > target package insert, assayed qc > own mean)
- **TEA** = Total Error Allowable = bias +1.65 CV ($BV_{desirable}$)
(TEA $BV_{minimal}$ > d-value WIV-ISP (NHI) > CLIA > 3xpeerSD > package insert)

PEER ± TEA



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1. IQC LAB AZ Sint-Lucas

- **Statistical quality control**

- **IQC FU DAILY**

- **Technicians** 2SD; 3SD; TEA; trendspotting (_{glims})
- **QC-cel:** 2SD; 3SD; TEA; trendspotting (e-mail)
- **Clinical biologist:** TEA (e-mail)

- **IQC FU WEEKLY**

- **QC-cel and Instrument specialists:**
2SD; 3SD; TEA (e-mail)



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1. IQC LAB AZ Sint-Lucas

- Statistical quality control
 - IQC FU MONTHLY

- QC-cel: interinstrument data grid analysis (URT Bio-Rad)

* QC-cel: Patient Percentile Monitoring??

Lab : 829884, Lot : 16730

Data reference set: Data Set A

Data Set A: Your laboratory, Cumulative

Data Set B1: Your laboratory, Cumulative

Data Set B2: Your laboratory, All

Data Set B3: Your laboratory, Another Instrument Roche cobas 6000/Routine laboratorium 3[555099], Date range: From: 18/10/2014 To: 18/11/2014

Data Set B4: Consensus group: Peer, Cumulative

Data Set B5: Consensus group: Method, Cumulative

Alert thresholds: SDI: ± 1,00, CVR: 1,40,

| Data Set | Analyte | Instrument | Reagent | Level | Mean | SD | CV | Pts | # Labs | SDI | CVR | Bias% | TE p < 0,05 | TEB% | Sigma | TEa | TEa Selection |
|----------|----------------------|---------------------------|-------------------|-------|-------|------|-------|--------|--------|-------|------|-------|-------------|--------|-------|-------|------------------------------|
| A | Albumin | Roche cobas 6000 [829884] | Dedicated Reagent | 1 | 29,10 | 0,80 | 2,75 | | | | | | | | | 10,00 | CLIA |
| B1 | | | | 1 | | | | | | | | | | | | | |
| B2 | | Roche cobas 6000 [831729] | | 1 | 29,16 | 0,58 | 1,99 | 60 | 1 | | 0,73 | | | | | | |
| B3 | | Roche cobas 6000 [555099] | | 1 | 29,65 | 0,50 | 1,70 | 57 | 1 | | 0,62 | | | | | | |
| B4 | | | | 1 | 28,71 | 0,95 | 3,30 | 55463 | 237 | | 1,20 | | | | | | |
| B5 | | | | 1 | 28,26 | 1,06 | 3,74 | 130026 | 558 | | 1,36 | | | | | | |
| A | Albumin | Roche cobas 6000 [829884] | Dedicated Reagent | 2 | 44,00 | 1,01 | 2,30 | | | | | | | | | 10,00 | CLIA |
| B1 | | | | 2 | | | | | | | | | | | | | |
| B2 | | Roche cobas 6000 [831729] | | 2 | 45,07 | 0,56 | 1,24 | 61 | 1 | | 0,54 | | | | | | |
| B3 | | Roche cobas 6000 [555099] | | 2 | 44,88 | 0,51 | 1,13 | 57 | 1 | | 0,49 | | | | | | |
| B4 | | | | 2 | 44,10 | 1,07 | 2,43 | 51192 | 236 | | 1,06 | | | | | | |
| B5 | | | | 2 | 43,21 | 1,40 | 3,24 | 125401 | 554 | | 1,41 | | | | | | |
| A | Alkaline Phosphatase | Roche cobas 6000 [829884] | Dedicated Reagent | 1 | 87,50 | 2,50 | 2,86 | 252 | 1 | | | | | | | 12,00 | BV Des bias/ Des imprecision |
| B1 | | | | 1 | 86,53 | 1,11 | 1,29 | 58 | 1 | -0,39 | 0,45 | -1,11 | 3,23 | 26,96 | 8,46 | | |
| B2 | | Roche cobas 6000 | | 1 | | | | | | | | | | | | | |
| B3 | | Roche cobas 6000 [555099] | | 1 | 86,80 | 1,56 | 1,79 | 57 | 1 | -0,28 | 0,63 | -0,80 | 3,76 | 31,30 | 6,25 | | |
| B4 | | | | 1 | 87,69 | 3,80 | 4,34 | 38469 | 229 | 0,08 | 1,52 | 0,22 | 7,37 | 51,44 | 2,72 | | |
| B5 | | | | 1 | 94,14 | 9,65 | 10,25 | 222302 | 1094 | 2,66 | 3,59 | 7,59 | 24,49 | 204,10 | 0,43 | | |

1. EQC LAB AZ Sint-Lucas

- **Clinical laboratory**
 - 78 EQC schedules

| | |
|---|--|
| UK NEQAS - Urinary Antigens: Legionella | QCMD - MRSA |
| UK NEQAS - Viruses in CSF (molecular) | QCMD - MTB |
| WIV - Alcohol | QCMD - NG |
| WIV - Allergie | QCMD - Parasitic gastroenteritis |
| WIV - Beenmergonderzoek | QCMD - VZV |
| WIV - Cardiale Merkers | Ringtest Beenmerg |
| WIV - CD34 + stem cell enumeration | Ringtest BILULU |
| WIV - Chemie/Immunoassays/TDM | Ringtest BILULU Molecular |
| WIV - Flowcytometrie | Ringtest Helicobacter pylori |
| WIV - HbA1c | Ringtest Master Comparisons |
| WIV - HbA1c volbloed | SKML - Antifungal drugs |
| WIV - Hemato | SKML - PNH |
| WIV - Hemoglobinopathieën | UK NEQAS - Anaerobe survey |
| WIV - Immuno/coagulation/D-dimeren/AT | UK NEQAS - Antimicrobial susceptibility |
| WIV - Microbiologie/serologie/parasitologie | UK NEQAS - BCR-ABL |
| WIV - Niet-infectieuze serologie | UK NEQAS - Blood parasitology |
| WIV - POCT glucose | UK NEQAS - C. trachomatis & N. gonorrhoeae |
| WIV - Sperma | UK NEQAS - Clostridium difficile |
| | UK NEQAS - Faecal parasitology |
| | UK NEQAS - General bacteriology |
| | UK NEQAS - JAK2 |
| | UK NEQAS - Malaria rapid |
| | UK NEQAS - Molecular detection of HPV |
| | UK NEQAS - Molecular Pathology |
| | UK NEQAS - Monoclonal Protein Identification |
| | UK NEQAS - MRSA screening |
| | UK NEQAS - MSS First Trimester |
| | UK NEQAS - MSS Second Trimester |
| | UK NEQAS - Mycobacterium culture |
| | UK NEQAS - Mycology |

| |
|----------------------------------|
| CAP - ISH |
| CAP - KRAS |
| ECAT - D-Dimer |
| ECAT - FII/FV Leiden/MTHFR |
| ECAT - HIT |
| ECAT - HLA B27 |
| ECAT - Thrombophilia |
| EliA Autoimmunity |
| ESP Colon EQA |
| EUROIMMUN - ANA |
| EUROIMMUN - ANCA |
| EUROIMMUN - CCP |
| EUROIMMUN - Coeliac disease |
| EUROIMMUN - Liver |
| EUROIMMUN - Phospholipids |
| EUROIMMUN - Thyroid gland |
| INSTAND - Bordetella pertussis |
| INSTAND - Chlamydia pneumoniae |
| INSTAND - Legionella pneumophila |
| INSTAND - MRSA |
| INSTAND - Norovirus |
| NordiQC HER-2 ISH |
| QCMD - Coronavirus RNA |
| QCMD - CT |
| QCMD - EV |
| QCMD - HBV |
| QCMD - HCV |
| QCMD - HCV gt |
| QCMD - HPV |
| QCMD - HSV |



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3. Conclusions/Remarks



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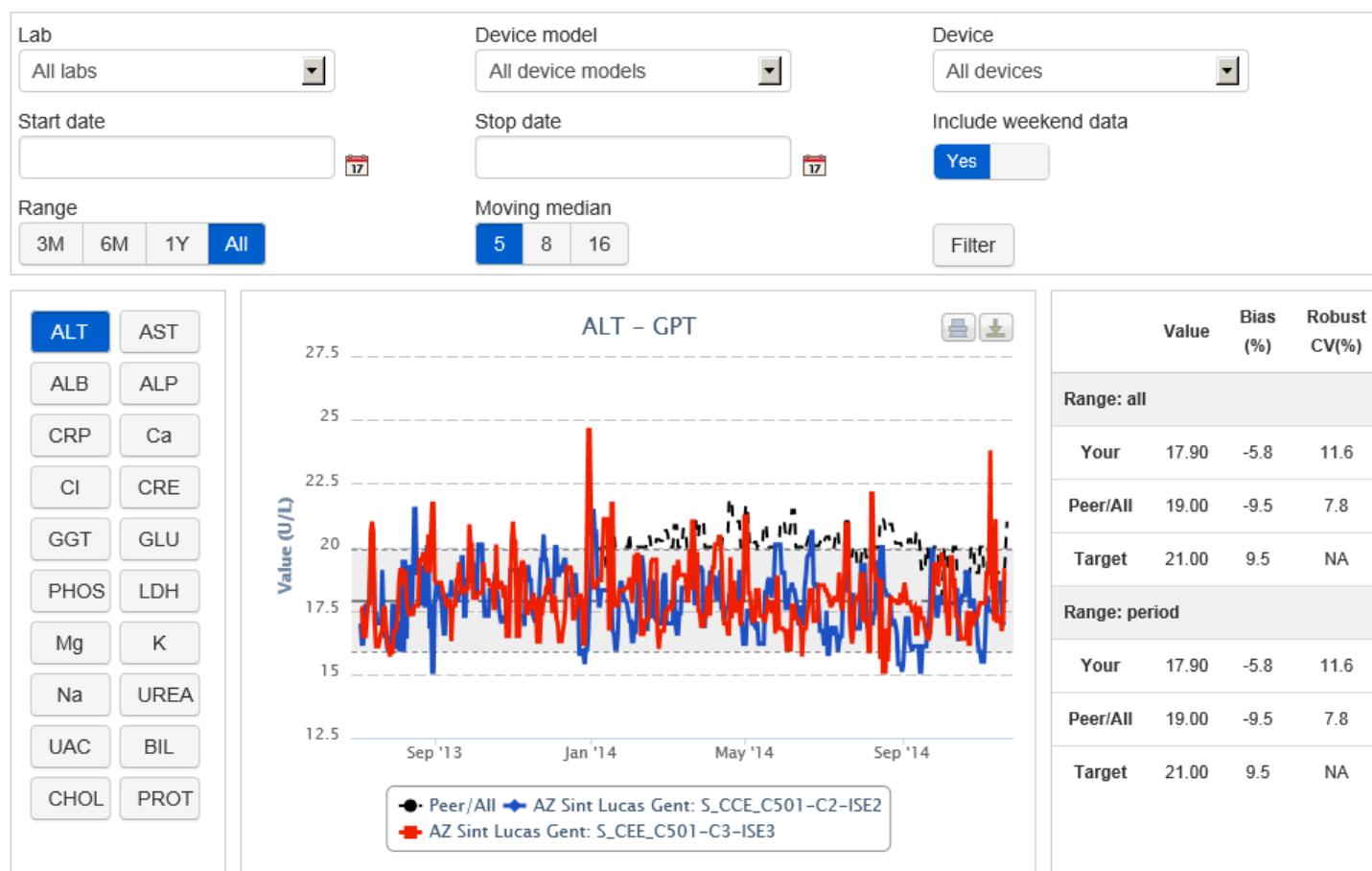
2. Patient Percentile Monitoring

The Percentiler

Quality

Samples

• ALT



ALT
regulated good
over different
systems



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2. Patient Percentile Monitoring

The Percentiles

Quality

Samples

- TP



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TP
regulated good

!be ware for
patient mix!

2. Patient Percentile Monitoring

The Percentiler

Quality Samples

• ALP



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ALP Targets



Can any method hit the Alkaline Phosphatase (ALP) target?

ALP

Hard to handle

!be ware for
patient mix
&
number of results!

!Systematically
Under the PEER!
Bio-Rad PEER±TEA
65 – 83 U/L



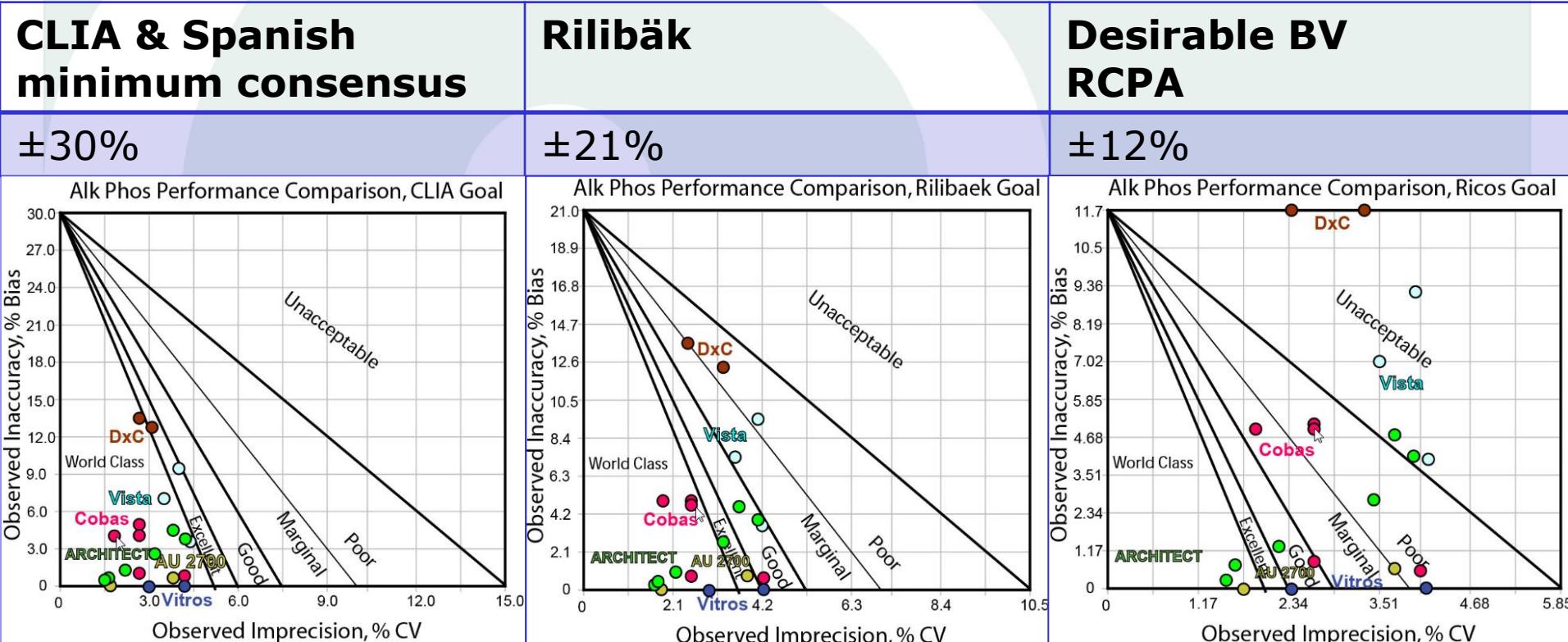
2. Patient Percentile Monitoring

ALP Targets



Can any method hit the Alkaline Phosphatase (ALP) target?

- ALP (criteria?)



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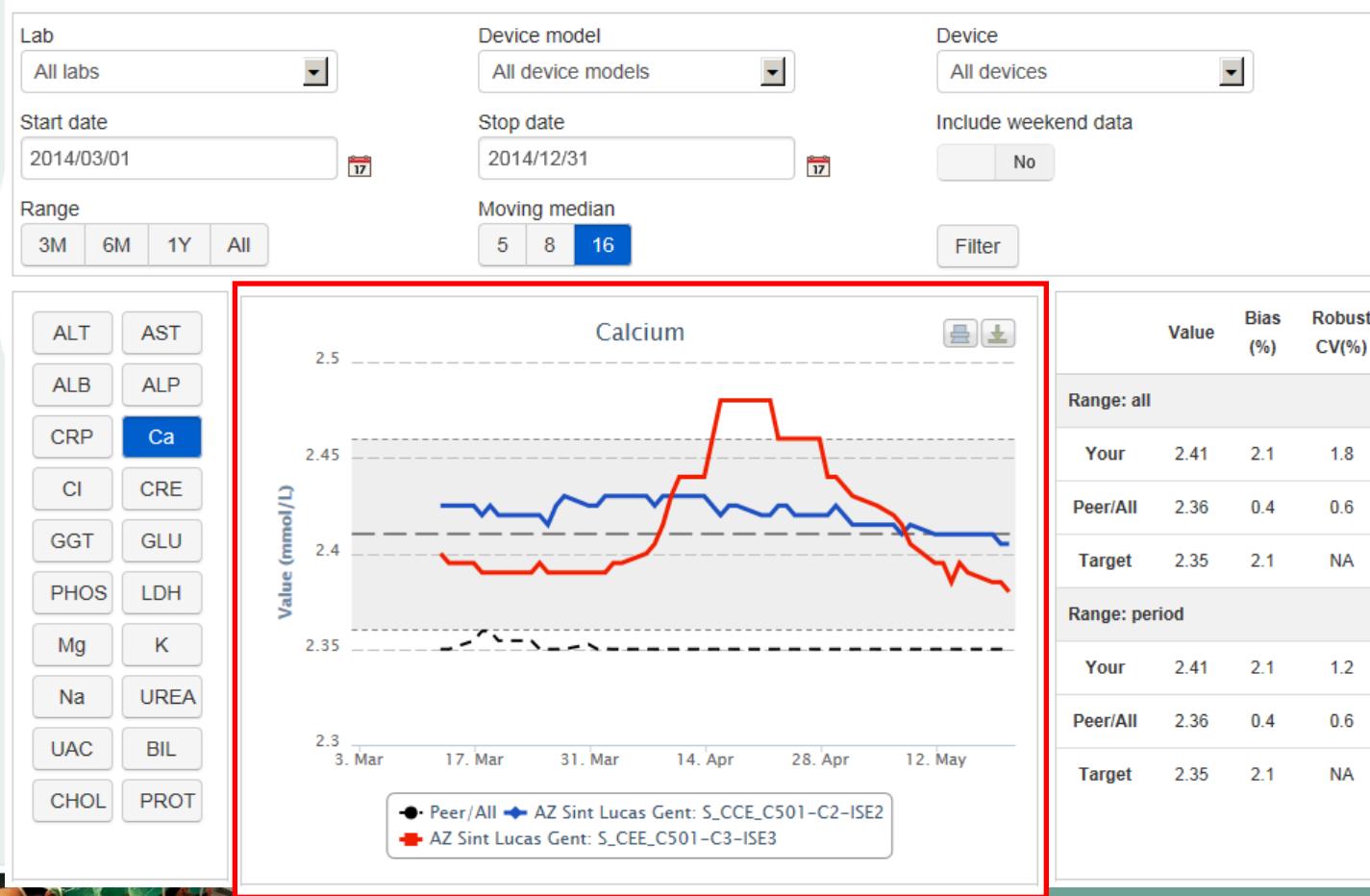
2. Patient Percentile Monitoring

The Percentiler

Quality

Samples

• Ca



Ca
regulated good
over different
systems

April 2014
Contamination
water tank C3

PEER?



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2. Patient Percentile Monitoring

The Percentiler

Quality

Samples

• LDH



LDH
regulated
good over
different
systems

PEER?
pre-analytics?
drop?



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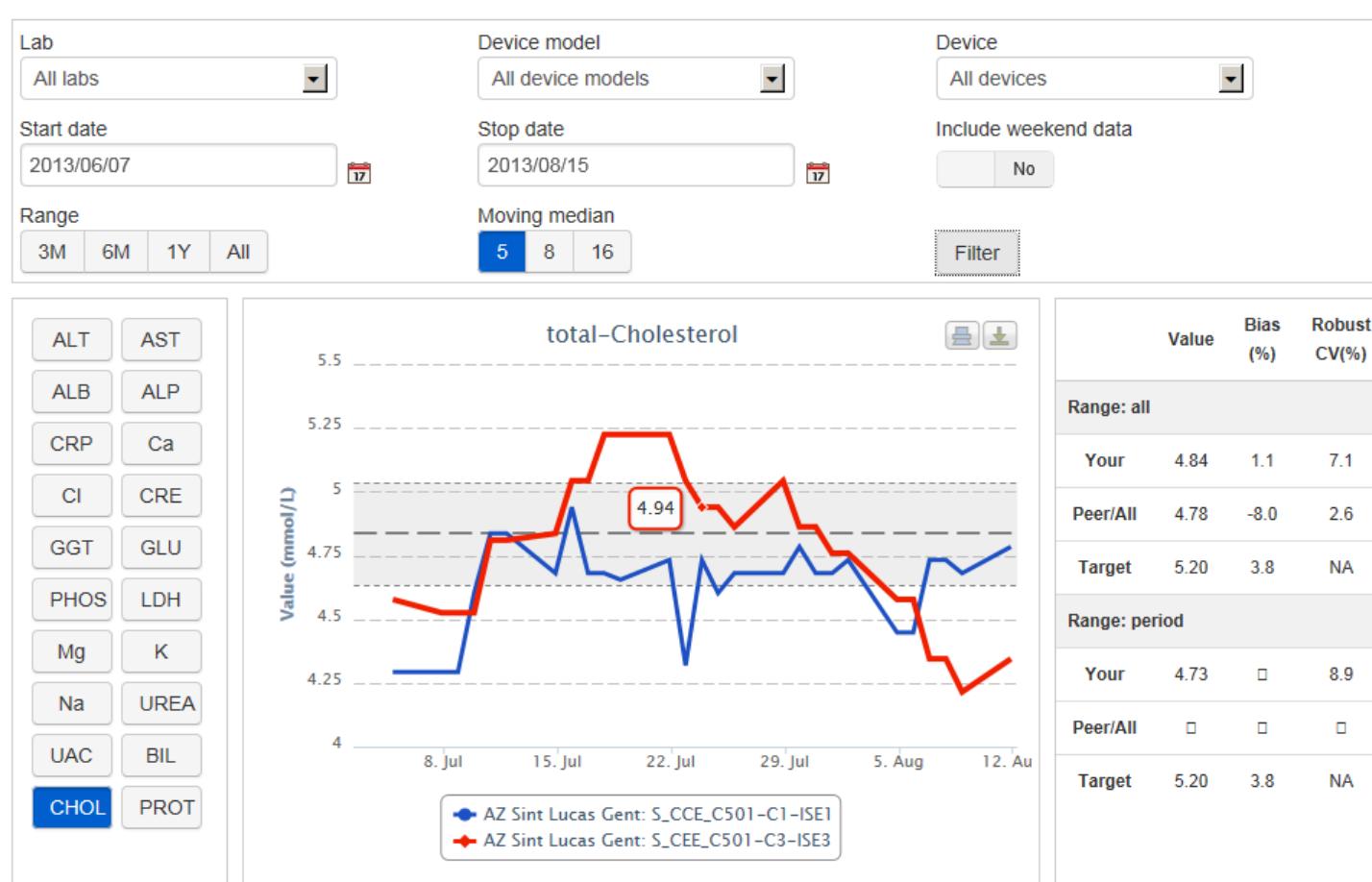
2. Patient Percentile Monitoring

The Percentiler

Quality

Samples

- CHOL



CHOL
Lot 6809770,
04/06/2013
C1 L1↓

2013
No peer yet
(PPM)



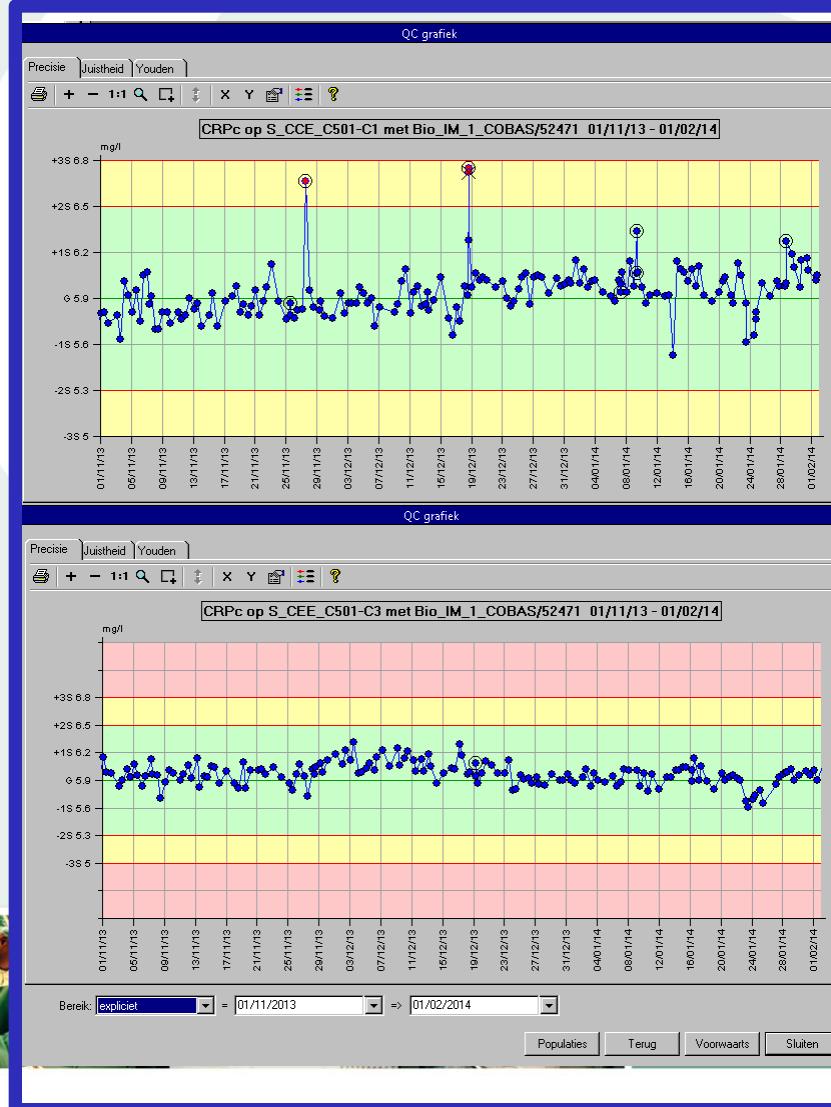
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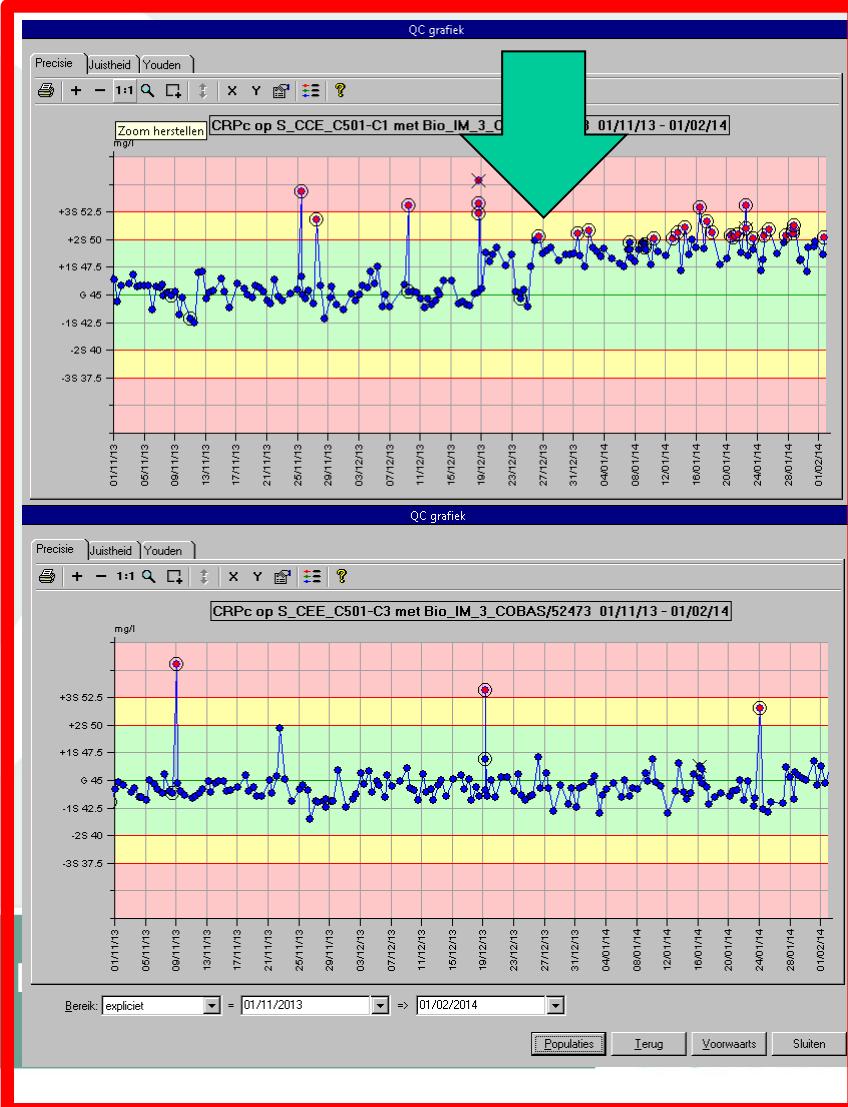
2. Patient Percentile Monitoring

• CRP

L1



L3



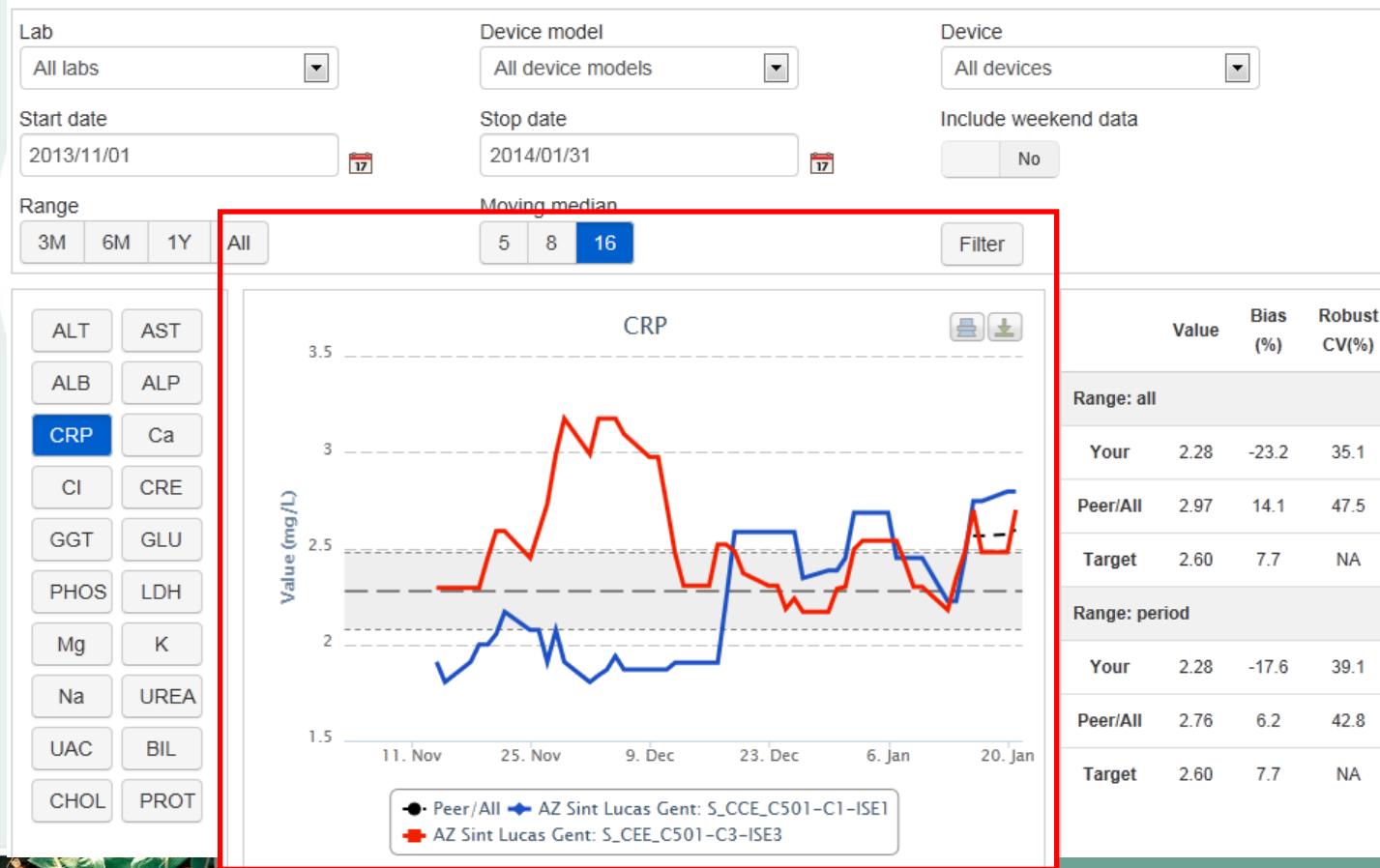
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2. Patient Percentile Monitoring

The Percentiler

Quality Samples

• CRP



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CRP
IQC C1 L3↑
PPM C3↑

VS C3 (PPM)

!be aware
concentration
PPM!!

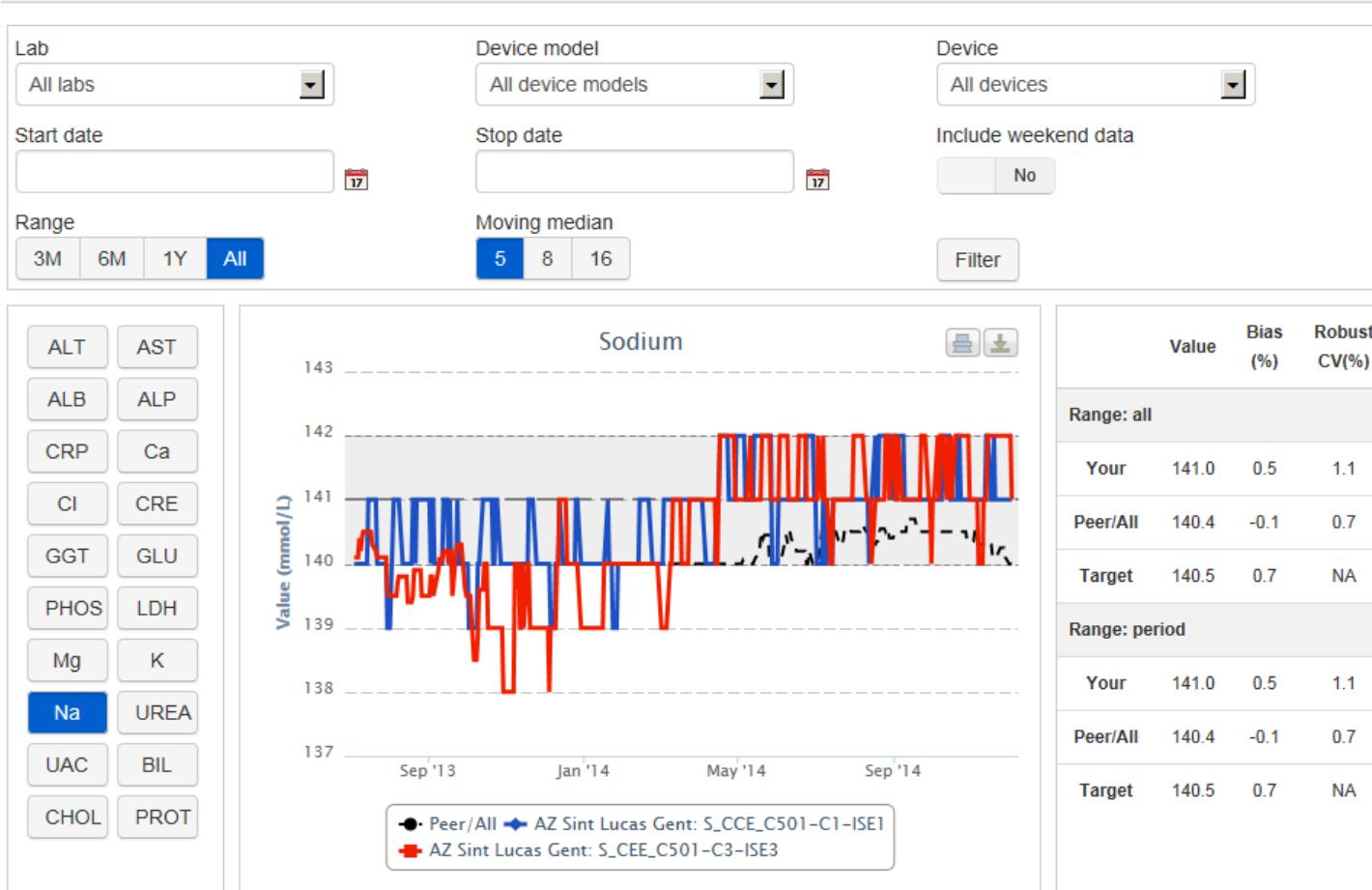
2. Patient Percentile Monitoring

The Percentiler

Quality

Samples

- Na



Na
regulated good
over different
systems

Calibrated
every 12h

1-2 meq/L above
PEER

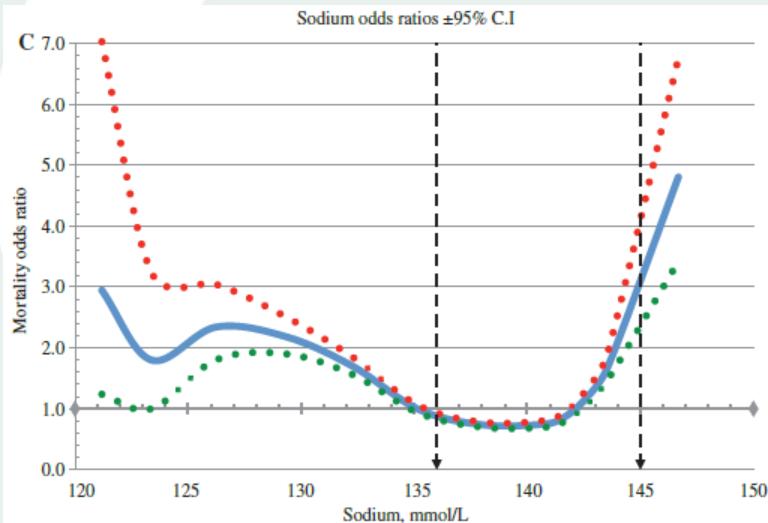


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Alan B. Solinger and Steven I. Rothman*

Risks of mortality associated with common laboratory tests: a novel, simple and meaningful way to set decision limits from data available in the Electronic Medical Record



We note that our upper DL for sodium at 142 mmol/L is lower than the usual RI upper limit of 145 mmol/L, where the OR has risen to 4.1 (95% CI).

Milan 2014 quality consensus

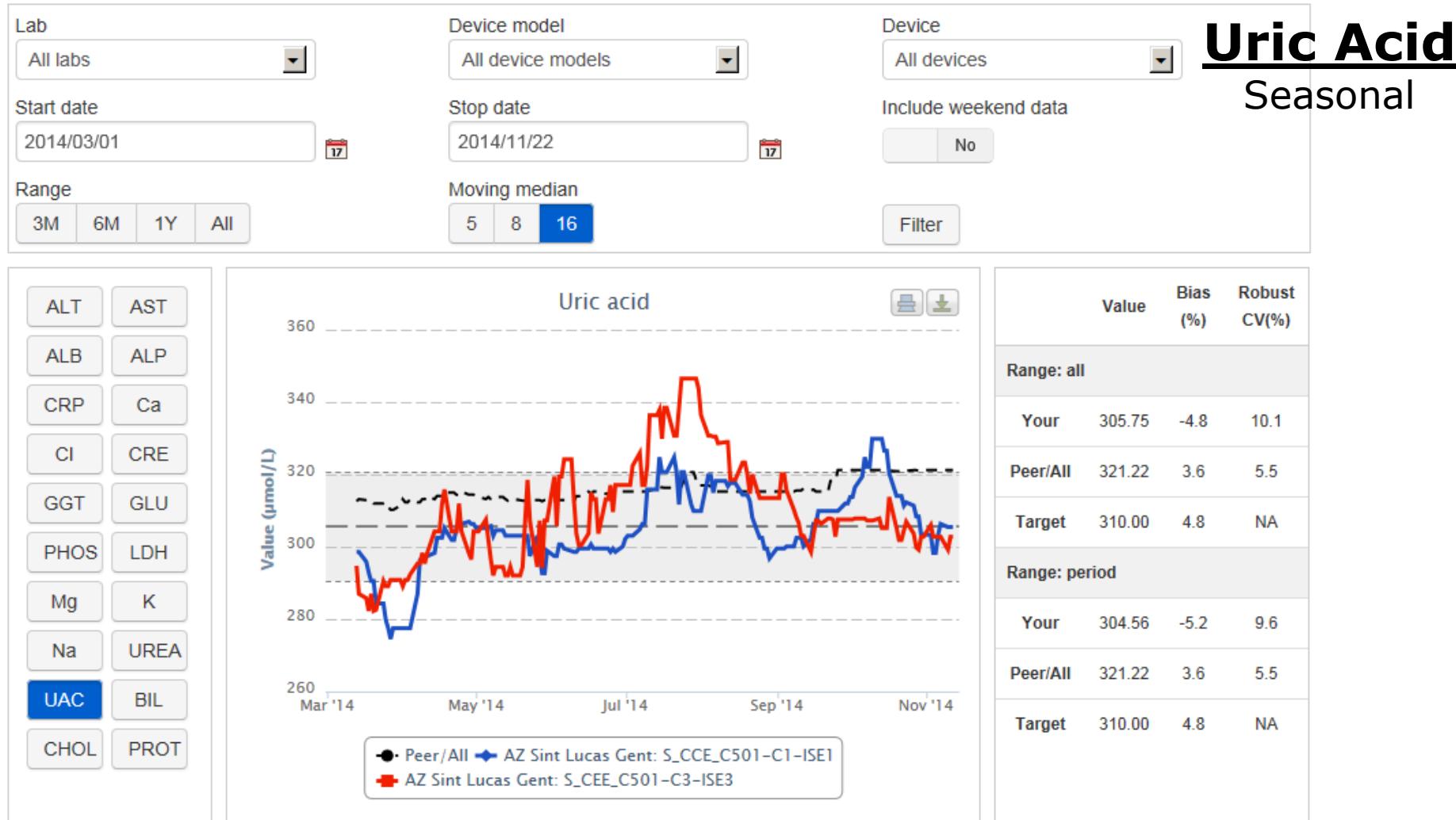
Model 1:
performance goals should be defined
regarding to the **effect** they have on
clinical outcomes



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2. Patient Percentile Monitoring

- **Uric Acid** (spring & summertime!)



Gallerani et al. Seasonal variation in the onset of microcrystalline arthritis. *Rheumatology* 1999;38:1003-6

Schlesinger et al. Acute gouty arthritis is seasonal. *J Rheumatol* 1998;25:342-4

Williamson CS. Gout: a clinical study of 116 cases. *J Am Med Assoc* 1920;74:1625-9

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3. Conclusions/Remarks



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3. Conclusions/Remarks (+)

- + includes pre- and post-analytics
- + matrix & stability
- + shifts
- + cost
- + motivated communication manufacturers

BUT

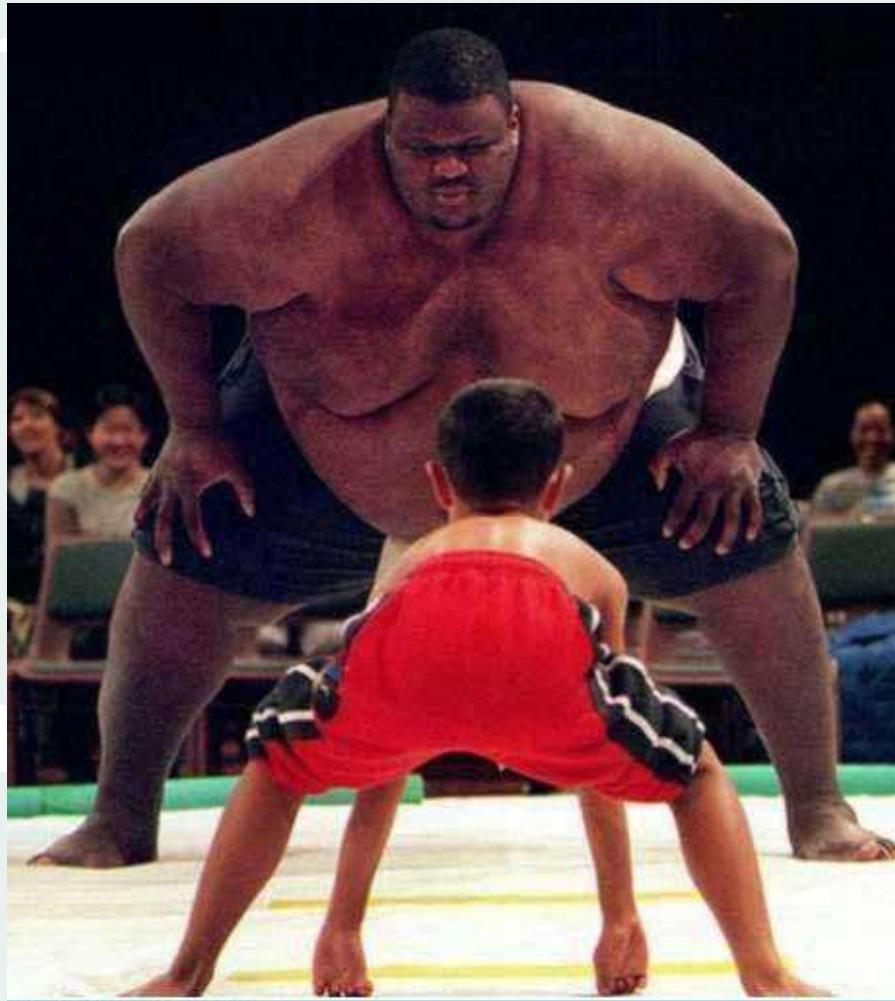
- **Need good PEER GROUPS**

- Groups? (C501 Cobas6000 ± C7/501 Cobas8000)
 - Participants (number?), Limits (calculation)?



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3. Conclusions/Remarks (-)



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3. Conclusions/Remarks (-)

- **Size matters** (n)



- **Concentrations** (CRP; clinical importance)

- **Mid to long term control** (Bias > Precision)

- **Patient mix** (weekends, dialysis, oncology)



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Thank you for your attention!

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