

## **Non-Waived and Non-PPMP Testing (attach additional sheets if needed)**

**Use the following guidelines for counting tests:**

**Allergens:** count each individual allergen as one test.

**Chemistry profiles:** count each individual analyte separately.

**Complete blood counts:** count each measured individual analyte separately that is ordered and reported separately. Differentials are counted as one test. Manual differentials are counted as a separate test.

**Cytogenetics:** the number of tests is determined by the number of specimen types processed on each patient; e.g., a bone marrow and a venous blood specimen received on one patient is counted as two tests.

**Cytology:** count each slide (not case) as one test for both pap smears and nongynecologic cytology.

**Histocompatibility:** count each HLA typing (including disease associated antigens), HLA anti-body screen, or HLA crossmatch as one test.

**Histopathology:** count each block (not slide) as one test. Autopsy services are not included.

For those laboratories that perform special stains on histology slides, the test volume is determined by adding the number of special stains performed on slides to the total number of specimen blocks prepared by the laboratory.

**Immunohematology:** count each ABO, Rh, antibody screen, crossmatch, or antibody identification as separate tests.

**Microbiology:** count susceptibility testing as one test per group of antibiotics used to determine sensitivity for one organism. Count cultures as one per specimen regardless of the extent of identification, number of organisms isolated and number of tests/procedures required for identification.

**Urinalysis:** count microscopic and macroscopic examinations as separate tests. Count macroscopics (dipsticks) as one test regardless of the number of reagent pads on the strip.

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Place a checkmark by all the non-waived and non-PPMP tests that are performed at your medical test site. If the tests that you perform are not listed, add the tests under the appropriate specialty/subspecialty (bold headings). For volumes, provide an estimate of the annual number of tests to be performed. Do not include waived or PPMP tests when counting volumes. All analytes listed in bold print are regulated and must be covered by proficiency testing.

## Microbiology

### Microscopic Procedures

Total Volume: \_\_\_\_\_

NOTE: If the following microscopic tests are ONLY done by a licensed provider, DO NOT complete this section

- Wet Mounts
- Fecal Leukocytes
- KOH
- Pinworm
- Post Coital Vagina Mucous Exam
- Fern Tests
- Qualitative Semen Analysis (post vas)
- Quantitative Semen Analysis
- Urine Sediment
- Nasal Smear for Granulocytes

### Bacteriology

Total Volume: \_\_\_\_\_

- Affirm VP (TV, GV, YST)**
- Antibiotic Sensitivities**
- Bacterial Antigens**
  - Clostridium difficile**
  - Group A Strep ) rapid test - nonwaived kits)**
  - Group B Strep**

### Bacterial Toxin Detection

**Blood Culture**

**Chlamidia**

**CSF Culture**

**Gram Stain**

**GC**

**Throat Culture**

**Urine Culture**

Urine Colony Count

**Other Culture/ID:** \_\_\_\_\_

### Mycobacteriology

Total Volume: \_\_\_\_\_

- AFB Smear/Stain**
- AFB Antibiotic Sensitivities
- AFB Culture & ID**

### Mycology

Total Volume: \_\_\_\_\_

- DTM Only
- Direct fungal antigen detection**
- Fungus Culture**
  - Growth/No Growth**
  - Culture and ID**

### Yeast Culture

**Growth/No Growth**

**Culture and ID**

### Parasitology

Total Volume: \_\_\_\_\_

- Direct Smear**
- Concentrate/Stain**
- Parasitic Antigens**

### Virology

Total Volume: \_\_\_\_\_

- Herpes Antigen**
- Herpes Culture**
- Other Viral Culture**
- Viral Antigen Detection**
  - Human Papillomavirus (HPV)
  - Influenza (nonwaived kits)
  - RSV (nonwaived kits)
  - SARS-CoV-2 (nonwaived kits)
  - Other (list): \_\_\_\_\_

### Diagnostic Immunology

#### Syphilis Serology

Total Volume: \_\_\_\_\_

- RPR
- VDRL
- MHA-TP (TP-PA)
- FTA

#### General Immunology

Total Volume: \_\_\_\_\_

- Allergy Testing (count individual allergens tested)
- Alpha-1 Antitrypsin
- AFP/Tumor
- AFP/Other
- ANA
- ASO
- Anti-HCV
- HIV
- C3
- C4
- C-reactive protein
- C-reactive protein (high sensitivity)
- HBsAg
- Anti-HBc
- Anti-HBs
- HBeAg
- HCV
- IgA
- IgG
- IgE
- IgM
- Infectious Mononucleosis (nonwaived kit)
- Rheumatoid Factor
- H. pylori (nonwaived kits)
- COVID-19 Serology
- Rubella Antibody
- Other (list): \_\_\_\_\_

### Histocompatibility

#### Histocompatibility

Total Volume: \_\_\_\_\_

- Transplant
- Nontransplant (list specific tests): \_\_\_\_\_

### Pathology

#### Pathology

Total Volume: \_\_\_\_\_

- Histopathology \_\_\_\_\_/year
- Dermatopathology \_\_\_\_\_/year
- Oral Pathology \_\_\_\_\_/year
- Gyn Cytology \_\_\_\_\_/year
- Non-gyn Cytology \_\_\_\_\_/year

### Radiobioassay

#### Radiobioassay

Total Volume: \_\_\_\_\_

(list in vitro tests, i.e. blood volume by Cr 51, Schilling test, etc.)

**Do NOT include routine RIA tests**



## Chemistry (continued)

### Urinalysis

Total Volume: \_\_\_\_\_

\_\_\_ Strip by nonwaived instrument

### Endocrinology

Total Volume: \_\_\_\_\_

\_\_\_ **Cortisol**

\_\_\_ **Estradiol**

\_\_\_ **Folate, serum**

\_\_\_ **FSH**

\_\_\_ FT3 (Free Triiodothyronine)

\_\_\_ **FT4 (Free Thyroxine)**

\_\_\_ **HCG (Serum Pregnancy or nonwaived urine HCG)**

\_\_\_ **Luteinizing hormone (LH)**

\_\_\_ **Parathyroid hormone (PTH)**

\_\_\_ **Progesterone**

\_\_\_ **Prolactin**

\_\_\_ **Testosterone**

\_\_\_ **T3 Uptake**

\_\_\_ **T3 (Triiodothyronine)**

\_\_\_ **TSH**

\_\_\_ **T4 (Thyroxine)**

\_\_\_ **Vitamin B12**

\_\_\_ ACTH (Adrenocorticotrophic hormone)

\_\_\_ DHEA-S

\_\_\_ Insulin

\_\_\_ Procalcitonin

\_\_\_ Other (list): \_\_\_\_\_

### Toxicology

Total Volume: \_\_\_\_\_

\_\_\_ **Acetaminophen, serum**

\_\_\_ **Alcohol, Blood**

\_\_\_ **Carbamazepine**

\_\_\_ **Digoxin**

\_\_\_ Ethosuximide

\_\_\_ **Gentamicin**

\_\_\_ **Lead, Blood**

\_\_\_ **Lithium**

\_\_\_ **Phenobarbital**

\_\_\_ **Phenytoin**

\_\_\_ Primidone

\_\_\_ Procainamide/metabolites

\_\_\_ Quinidine

\_\_\_ **Salicylate**

\_\_\_ **Theophylline**

\_\_\_ **Tobramycin**

\_\_\_ **Valproic Acid**

\_\_\_ **Vancomycin**

\_\_\_ Drugs of Abuse (urine):

\_\_\_ # of Panels X \_\_\_ # of Analytes = \_\_\_ Total

\_\_\_ Fentanyl

\_\_\_ Tacrolimus

\_\_\_ Other (list): \_\_\_\_\_

## Hematology

### Hematology

Total Volume: \_\_\_\_\_

\_\_\_ Cell Identification/Manual Differential

#### CBC (Complete Blood Count):

\_\_\_ Auto WBC Differential

\_\_\_ RBC

\_\_\_ Hematocrit

\_\_\_ Hemoglobin

\_\_\_ WBC

\_\_\_ Platelet Count

Note: Each measured parameter (automated differential, RBC, hematocrit(or MCV), hemoglobin, WBC, platelets) must be counted as a separate test.

\_\_\_ Reticulocyte Count

\_\_\_ Hemoglobin Electrophoresis

\_\_\_ Flow Cytometry

\_\_\_ ESR (Erythrocyte Sedimentation Rate)

\_\_\_ Other (list): \_\_\_\_\_

### Coagulation

Total Volume: \_\_\_\_\_

\_\_\_ Fibrinogen

\_\_\_ PTT

\_\_\_ Prothrombin Time

\_\_\_ Thrombin Time

\_\_\_ Factor Assays

\_\_\_ Activated Clotting Time

\_\_\_ D-dimer

\_\_\_ Other (list): \_\_\_\_\_

## Immunoematology

### Immunoematology

Total Volume: \_\_\_\_\_

\_\_\_ ABO Group \_\_\_\_\_/year

\_\_\_ D (Rh) Typing \_\_\_\_\_/year

\_\_\_ Antibody Detection (Screen) \_\_\_\_\_/year

\_\_\_ Antibody Identification \_\_\_\_\_/year

\_\_\_ Compatibility Test (Crossmatch) \_\_\_\_\_/year

\_\_\_ Other (list): \_\_\_\_\_

## Genetics

### Genetic Testing

Total Volume: \_\_\_\_\_

\_\_\_ Biochemical Genetic Tests (list tests):  
\_\_\_\_\_

\_\_\_ Cytogenetic Tests (list tests):  
\_\_\_\_\_

\_\_\_ Molecular Genetic Tests (list tests):  
\_\_\_\_\_

NOTE: add HPV testing under Virology, add Chlamydia and/or GC testing under Bacteriology