Syphilis investigation report (IR)

PRESENTED BY

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Outline

- Introduction
- Challenge(s)
- □ Root Cause Analysis
- □ Corrective Action
- Conclusion

Introduction

- Lab offers syphilis testing for following protocols: MTN-020, MTN-015 and HPTN 052.
- Training and Competence
- Internal control
 - Kit controls
 - Lot to lot testing
 - Expired reagents not used
 - Equipment serviced bi-annually
- EQA
 - College of American Pathologists (CAP)

Challenge(s)

- Lab had a challenge on Survey received and tested in April 2013. (CAP survey G-A panel)
- Score lower than expected result obtained.
- □ Investigation report(IR) required (SMILE) < 100%.
- Root cause analysis was explored

Root Cause Analysis

- Pre-analytical errors- No issues
- Analytical errors
 - instrument did not attain the required speed
 - Lack of adherence to SOP
- Post analytical errors- No issues
- Repeat testing on failed EQA material was done and intended results were obtained and reported.

Corrective Action

- Use of instrument immediately discontinued.
- A proper rotator with SOP specified speeds was obtained and put to use
- Refresher training on SOP adherence was conducted
- 233 negative samples repeated- all were negative
- No participant results were affected.
- Data sent to Network lab for assessment and IR was closed

Conclusion

Lessons learnt:

- We are ISO certified and participation in EQAs has helped us identify these challenges and successfully resolve them.
- There is always room for continual improvement especially when you are periodically monitored by external bodies like SMILE.

Thank you.(Siyabonga)