Logging on

Go to <u>http://www.ukneqasbtlp.org</u> and click on the main orange section of the page as shown in figure 1. A list of exercise types will be shown, click on the appropriate exercise to be taken to the correct login screen.





Enter the PRN (Lab Code), Identity and Password and click on the 'Log in' button as shown in figure 2. It is also possible to login with an email address and password if an account has been set up.

Figure 2 - Logging in

UK NEQAS Haematology and Transfusion						
Lab Code						
Identity						
Password						
Please be ad now case se	vised that the password field is nsitive.					
If you are having trouble logging in, please enter your Lab Code and Identity, then click Forgotten Password						
Log in						
Forgotten Password						

Please note that the Reset your password link will send an email to the registered contact. If that person is unavailable to reset the password, contact UK NEQAS for assistance.

Navigating the web page

Select 'Blood Transfusion Laboratory Practice' from the drop-down list of Schemes as shown in figure 3, and then click on the distribution required (e.g. 19Res) from the list displayed. If there is a questionnaire associated with the exercise, this will be indicated in with a tick in the 'questionnaire' column as below.

UK NEQA Haematology a	AS nd Transfus	ion	UK NEQAS BI	ood Transf	usion Labo	ratory Pra	ctice
Select Distributi	ons for Date	Pre-Transfus Select a pi Feto Matern:	sion Testing rogramme al Haemorrhage	Click he Completed	re for HELP Re	egistration De Report	Logout
18E4 22R22 18E3 18R2	23/04, 17/04, 26/03, 19/02,	/2018 /2018 /2018 /2018 /2018	03/05/2018 30/04/2018 05/04/2018 05/03/2018	~	* *	* *	Ø

Figure 3 – Accessing the Exercise

Questionnaires can be accessed by clicking on the orange box (see figure 4, blue circle). The exercise instructions will indicate which groups of participants are requested to complete a questionnaire if it is not intended for all, e.g. laboratories in the UK only. The other buttons at the top of the page can be used to access the blank data entry form and this document (red circle), to send us an email using Outlook (green circle), or to access the exercise instructions on line (purple circle). Paper copies of exercise instructions will be phased out in 2018.

Figure 4 – Accessing the questionnaire and other links

UK NEQAS Haematology and Transfusion		UK NEQAS Bloo	d Transfusion La	boratory Pra	ictice	version: 3.14
Exercise Questionnaire	Back to List	Summary Save S	ubmit	Data entry form and instructions	Email	Exercise Instructions
		Pre-Transfus	sion Testing			
Distribution Number: 22R22 Partici	pant: 26000 Issued: 17/0	04/2018 Closing: 30/04/2018	Received Date (dd/mm/y	yyy): 13/02/2018	Analysed Date (dd/mm/yyyy)	i): 16/02/2018
Sample Quality Techn	plogies Patient 1	Patient 2 Pat	tient 3 Phenotyp	ing 18/04/2018		

The date received and date processed should be completed using the following format: dd/mm/yyyy.

Testing results are split by Patient and are accessed by clicking on the appropriate tab apart from phenotyping which is the last tab.

Mandatory results

The data which is used for scoring is mandatory. This only applies to laboratories which are registered for each test.

- Interpretation of ABO group for each patient (R exercises only)
- Interpretation of D type for each patient (R exercises only)
- Interpretation of antibody screen for each patient
- Method of crossmatching for each donor vs each patient (R exercises only)
- Interpretation of crossmatching for each donor vs each patient (R exercises only)
- Phenotyping results for each antigen for each patient (R exercises only)
- Completion of all tick boxes in the UI portal if UI is selected at antibody identification (see page 5)

The antibody identification section is NOT mandatory on the web site, but **is assessed**. Please ensure that all information is inputted.

An option of 'Unable to test' is available to enable submission of results where samples cannot be tested due to unsatisfactory sample quality.

Data Entry

Sample Quality

The default response for sample quality is 'Satisfactory'. If the samples are not satisfactory, select 'Unsatisfactory' from the drop down list, and then the reason. If the reason is not listed, select Other and then type the reason in the last box as shown in figure 5.

Please note that if results are submitted, they will be scored even if 'Unsatisfactory' has been selected. Please make decisions on whether to submit results as per the local testing protocol.

Sample Quality Technolog	Sample Quality Technologies Patient 1 Patient 2 Patient 3 Phenotyping 09/04/2018								
Sample Quality									
Sample	Quality	Reason	Other Reason						
19Test1P1 - Plasma/Serum	Satisfactory 🔻	Select 🔻							
19Test1P1 - Whole Blood / Red Cells	Satisfactory 🔹	Select 🔻							
19Test1P2 - Plasma/Serum	Satisfactory 🔻	Select 🔻							
19Test1P2 - Whole Blood / Red Cells	Satisfactory 🔻	Select 🔻							
19Test1P3 - Plasma/Serum	Satisfactory 🔻	Select 🔻							
19Test1P3 - Whole Blood / Red Cells	Satisfactory 🔻	Select 🔻							
19Test1DW	Satisfactory	Select V							
19Test1DY	Unsatisfactory 🔹	Insufficient v							
19Test1DZ	Unsatisfactory 🔻	Other 🔻	Type other reason here						

Technologies (previously Techniques)

The drop down fields in the Technologies tab are yellow when nothing has been selected, and green once an option has been chosen, see figure 6. If the same technology and automation method has been used for all 3 patients, it is possible to carry over the responses for Group and Screen only. Click Save to activate this function. If multiple technologies are used, indicate this using the right hand side of the page.

Figure	6 -	Technologies
--------	-----	--------------

Sample Quality	Technologies P	atient 1	Patient 2	Patient 3	Phenotyping				
The ABO/D and IAT antibody screening responses selected for Patient 1 will be used to automatically populate Patients 2 and 3; however, it is possible to edit these responses before submission. Click Save to activate this function. Responses for IAT antibody identification and IAT crossmatching should be entered for each patient.									
			Technolog	jies - Patie	nt 1				
Test		Primary Te	esting		Additional -	Testing (if required	to make an inte	rpretation)	
	lechnolo	gy	Automated	i / Manual	lec	hnology	Automated	/ Manual	
ABO/D	DiaMed	▼	Manual	•	Select	•	Select	•	
IAT Antibody Screen	Biovue	▼	Semi-Automated	I ▼	Select	•	Select	•	
IAT Antibody ID	Select	۰	Select	۲	Select	▼	Select	۲	
IAT Crossmatch	Select	¥	Select	•	Select	▼	Select	•	
	Technologies - Patient 2								
Test	Technolog	Primary Te gy	esting Automated / Manual		Additional Testing (if required Technology		to make an interpretation) Automated / Manual		
ABO/D	Select	v	Select	•	Select	T	Select	•	
IAT Antibody Screen	Select	v	Select	٣	Select	۰	Select	•	
IAT Antibody ID	Select	▼	Select	۲	Select	۰	Select	۲	
IAT Crossmatch	Select	▼	Select	•	Select	۰	Select	•	
			Technolog	jies - Patie	nt 3				
Test		Primary Te	esting		Additional	Testing (if required	to make an inte	rpretation)	
	Technolog	ду	Automated	l / Manual	Tec	hnology	Automated	/ Manual	
ABO/D	Select	▼	Select	•	Select	▼	Select	•	
IAT Antibody Screen	Select	▼	Select	۲	Select	۰	Select	۲	
IAT Antibody ID	Select	▼	Select	۲	Select	v	Select	۲	
IAT Crossmatch	Select	▼	Select	۲	Select	▼	Select	۲	

B35 v12 Feb 22

Page 3 of 10

If you have any comments about the exercise please email the scheme on <u>BTLP@UKNEQAS.ORG.UK</u> Do not forget to add your PRN to any correspondence.

Instrument details

A section has been added at the bottom of the Technologies tab allowing details of instrument/user used can be added. Any details entered will be shown at the bottom of the submission summary, this information is entirely optional and for laboratory use only; this information will not be assessed or used by UK NEQAS.



ABO/D typing

ABO and D reaction grades and interpretations can be selected using drop-down, as shown in figure 7. 'UI' should be selected when a result would not be issued on a clinical sample. The reaction grade options now have numbered grades instead of 'weak' or 'strong'.

Patient 2 - ABO/D Typing										
	Reaction grade vs.									
anti-A	anti-B	anti-D1		anti-D2	Ctrl		A Cells		B Cells	
Not Stated 🛛 👻	Not Stated 🛛 👻	Not Stated	-	Not Stated 🛛 👻	Not Stated		Not Stated	-	Not Stated	-
Not Stated	ABO Interpretation	в	-	D Interpretation	Neg	-				
0		Not Stated			Not Stated					
weak		0			Pos					
1		A			Neg					
2		В			Dvariant					
3		AB			UI					
4		UI			Unable to	Test				
mixed field		Unable to T	"est							

Figure 7 – ABO and D results

Direct Antiglobulin Test (DAT)

The DAT in this context is for noting whether a DAT would be performed on a clinical sample based on results obtained. See figure 8 below. Results for the DAT pilot scheme are entered on a different system.

Figure 8	- DAT
----------	-------

Patient 2 - Direct Antiglobulin Test (DAT)							
DAT with a polyspecific AHG reagent	Not Stated O Positive Negative						
	If you participate in the UK NEQAS DAT Pilot scheme, <u>do not</u> enter results for DAT Pilot samples in this section. Separate data entry is detailed in the instructions.						

Antibody screening

It is possible to enter results for up to three tests for antibody screening, IAT, enzyme, and another. If Other is used, add details in the Technologies tab. When entering a reaction grade for IAT testing, the interpretation will be autocompleted, see figure 9. This can then be modified if required. The 'Enzyme' and 'Other' drop down boxes will not automatically affect the interpretation. The reaction grade options now have numbered grades instead of 'weak' or 'strong'.



Patient 2 - Antibody Screening								
	Reaction Grades		Antibody Screening Interpretation	Notes				
IAT Enzyme Other Select the strong	1 ▼ Select IAT not performed 0 weak 1 2	≱d.	 Not stated No specific antibody detected Antibody present Unable to test ¹ 	¹ Unable to test is only to be used where the sample is unsuitable for testing and a repeat sample cannot be obtained before the closing date, or where reagents are not available				
	3		Patient 2 - Antibody Identification					
	4			Course				

B35 v12 Feb 22

Page 4 of 10 If you have any comments about the exercise please email the scheme on BTLP@UKNEQAS.ORG.UK Do not forget to add your PRN to any correspondence.

Antibody identification

If the antibody screen is positive, laboratories registered for antibody identification should report their findings in this section. The section on the left is for antibodies which have been positively identified. Once ticked, these appear in the middle of the screen as shown in figure 10. A maximum of 2 antibodies will be in a sample, so if 2 antibodies have been positively identified it is not necessary to exclude others.

If it is not possible to complete the antibody investigation with a definitive result i.e. unable to positively identify, and/or unable to exclude clinically significant antibodies unless 2 have been positively identified already, the UI box should be ticked. This will open up a new section of the page where comments and scans of panel sheets can be uploaded (see figure 11). Details of the UI section can be found at the link below. <u>http://www.ukneqash.org/downloads/ptt%20ui%20instructions.pdf</u> There is a link to this document in the UI section of the web page, and a link in the UI portal.

Since there is no requirement to exclude anti-E in the presence of anti-c (or anti-C in the presence of anti-e) in routine pre-transfusion testing, options are provided for anti- $c\pm E$ and anti- $e\pm C$, and these are counted as a single specificity for the purposes of EQA and it is not necessary to enter the second antibody in the 'cannot be excluded' section which would result in a UI submission being required.

UK NEQAS BTLP uses BSH guidelines on compatibility testing for scoring antibody identification.



Figure 10 – Antibody identification (UI not ticked)

Figure 11 – Antibody identification (UI ticked)

Patient 2 - Anti	body Ide	entification	
Antibody specificities positively identified (currently a maximum of 2 in any sample)	Positively identified	Specificities that cannot be excluded	Cannot exclude
D K C C K C+/E Kp ^a E Le ^a e+/-C Le ^b C ^w Fy ^a M Fy ^b N Jk ^a S Jk ^b S Jk ^b S UI 1 Plase note that if you have positively identified 2 specificities there is no need to make a UI submission as UK NEQAS samples currently do not contain more than two. Anti-c+/E is counted as a single specificity for the purposes of EQA, as is anti-e+/-C.	M	□ D s □ C K □ c+/-E Fy ^a □ E Fy ^b □ e+/-C Jk ^a □ M Jk ^b □ S	
UI Su	ubmission	UI Instruct	ions
Upload Document Explain briefly why identification could not be complexity of the second	onfirmed in-ho	use, including reasons why specificities could not be positively identified or exc	luded.

B35 v12 Feb 22

Page 5 of 10

If you have any comments about the exercise please email the scheme on BTLP@UKNEQAS.ORG.UK Do not forget to add your PRN to any correspondence.

The three questions in the additional information section shown in figure 12 need only be completed for samples that have undergone antibody identification. N.B. the number of reagent cells used is the total number on the screening and identification panel(s) used by IAT (e.g. one x 3-cell screen, a first line panel of 11 cells panel and a second line panel of 10 cells = 3+11+10=24 cells, regardless of whether enzyme treated cells were used at any stage).

Figure 12 – Antibody	y identification	additional	questions
----------------------	------------------	------------	-----------

Additional Information								
Number of reagent red cells used - by IAT (including screening cells)			En	nzyme panel used?		Would	refer for confirma	tion?
Not Stated		O Not Stated	• Yes	⊖ No	O Not Stated	O Yes	No	

Crossmatching

There are three crossmatching methods available from the drop down list. Theoretical Compatibility was previously called "Electronic Issue" but has been renamed as UK NEQAS exercises do not assess LIMS and therefore do not assess Electronic Issue. Selecting Theoretical Compatibility will automatically complete the Interpretation as Compatible and will auto-complete 'Would you transfuse?' as Yes, see donor W in figure 13.

Theoretical Deselection should be used when a unit would not be considered for issue due to the blood group (e.g. the patient is group O and the donor is group A). Selecting Theoretical Deselection will autocomplete the Interpretation as Incompatible, and 'Would you transfuse?' as No, see Donor Y in figure 13.

The last option is Serological Crossmatch, selecting this option will not auto-complete the interpretation until a reaction grade is entered for IAT testing. Selecting '0' as a reaction grade for IAT will automatically change the Interpretation to compatible and 'Would you transfuse?' to Yes. Selecting a positive reaction grade for IAT will auto-complete the Interpretation as Incompatible and the 'Would vou transfuse?' as No. See Donor Z in figure 13.

The question "If compatible, would you transfuse?" can be modified at any time and allows laboratories to record that the unit would not be issued under local policy, e.g. as there is only one sample, if a samples would be referred for antibody confirmation prior to issue of blood etc...



³ Unable to test is only to be used where a sample is unsuitable for testing and a repeat cannot be obtained before the closing date

4 Allows you to tell us that a unit, although found serologically compatible, would not be issued according to local policy – this is not taken into account for scoring

Phenotyping

For each donor and each phenotype there are list of possible options. It is now possible to report that testing was not performed as no reagent was available, see Figure 14.

An Rh Interpretation field is available, this is not mandatory and is not scored.

		Phene	otyping			Rh Interp	pretation (where applicable)
Patient	с	c	Antigens E	е	к	Patient	Interpretation (optional)
Patient 1	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	Patient 1	rr V
Patient 2	Not Stated Positive Negative Unable to test	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test No Reagent 	Patient 2	R1r V
Patient 3	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not Stated Positive Negative Unable to test 	 Not stated Positive Negative Unable to test 	Patient 3	R1R2

Figure 14 - Phenotyping

Saving, Submitting, and producing a Summary

Saving

At any point, the data entered can be saved by clicking on the Save button, see figure 15. Clicking the Save button will also carry over any Technology data for Grouping and Screening in Patient 1 to the other patients if the data fields for the other patients are they are not yet complete. If the data is subsequently changed for Patient 1 and Save is clicked again, the data for Patients 2+ will not be changed. It is possible to manually alter the technology data at any time prior to submitting.

Figure 15 – S	Summary, Sav	e, Submit buttons
---------------	--------------	-------------------

UK NEQAS Haematology and Transfusion	UK NEQAS Blood Transfusion Laboratory Practice					
Sample Entry Details	Back to List Summary Save Submit Data entry form Email scheme	Exercise Instructions				
	BLOOD TRANSFUSION LABORATORY PRACTICE					

Submitting

Clicking Submit will lock the data and it cannot be edited, however it is possible for UK NEQAS to unlock the website to allow amendments to be made. If this is required, call the phone number on page 1 of this document, and ask for a "web reset". It is not possible to edit the website after the exercise has closed.

After the exercise is closed, data which has been saved but not submitted on the website is collected and processed as per submitted data.

If mandatory fields have not been completed when Submit is clicked, a message will appear with a list of fields which require completion, see figure 16. It is not possible to submit until these fields have been completed.

Figure 16 – Error message when submitting without completing all mandatory fields



Summary

After submitting, a pop up box should appear containing a summary of all results submitted. It is highly recommended that this is printed or saved, as this can be used for investigating discrepancies. It is possible to create a summary of results which have been saved, prior to submitting by clicking on the Summary button. See Figure 17 for an example of a summary

Figure 17 – Summary report

	iple Results Summary	Print Close
	26000 - UK NEQAS (BTLP)	
UK NE	QAS National External Quality Sche	eme
You have successfully subm	itted the following results for BTLP exercise 21R10 on 11 f	November 2021 at 15:37
21R10 Patient 1		
ABO/D Type	AB D Positive	
Antibody Screen	No specific antibody detected	
Antibodies Identified		
Crossmatch - Donor W	Compatible / Suitable	
Crossmatch - Donor Y	Compatible / Suitable	
Crossmatch - Donor Z	Compatible / Suitable	
DAT	Negative	
21R10 Patient 2		
ABO/D Type	O D Positive	
Antibody Screen	Antibody present	
Antibodies Identified	М	
Crossmatch - Donor W	Incompatible / Deselected	
Crossmatch - Donor Y	Compatible / Suitable	
Crossmatch - Donor Z	Incompatible / Deselected	
DAT	Negative	
21R10 Patient 3		
ABO/D Type	AB D Negative	
Antibody Screen	No specific antibody detected	
Antibodies Identified		
Crossmatch - Donor W	Compatible / Suitable	
Crossmatch - Donor Y	Compatible / Suitable	
Crossmatch - Donor Y Crossmatch - Donor Z	Compatible / Suitable Compatible / Suitable	
Crossmatch - Donor Y Crossmatch - Donor Z DAT	Compatible / Suitable Compatible / Suitable Negative	
Crossmatch - Donor Y Crossmatch - Donor Z DAT	Compatible / Suitable Compatible / Suitable Negative	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1	Compatible / Suitable Compatible / Suitable Negative	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C	Compatible / Suitable Compatible / Suitable Negative Positive	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C C C C C C C C C C C C C C C C C	Compatible / Suitable Compatible / Suitable Negative Positive Negative	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C c c	Compatible / Suitable Compatible / Suitable Negative Positive Negative Negative	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E e e C C C C C C C C C C C C C	Compatible / Suitable Compatible / Suitable Negative Positive Negative Negative Positive Positive	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E E E E E C C C C C C C C C C	Compatible / Suitable Compatible / Suitable Negative Positive Negative Negative Positive Positive Negative	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E K Rh Interpretation	Compatible / Suitable Compatible / Suitable Negative Positive Negative Negative Positive Negative Negative R1R1	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C C C C C C C C C C C C C C C C C	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Positive Negative R1R1	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C Rh Interpretation 21R10 Patient 2 C	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Positive R1R1 Positive	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E K Rh Interpretation 21R10 Patient 2 C C C C	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Positive R1R1 Positive Positive Positive	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E K Rh Interpretation 21R10 Patient 2 C C E E E E E E E E E E E E E E E E E	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Negative Negative R1R1 Positive Positive Positive Positive Positive	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E E E E E C C C C C C C C E	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Negative R1R1 Positive Positive Positive Positive Positive Positive Positive Positive	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E E E E E E E E E E E E E E E	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Positive R1R1 Positive Positive Positive Positive Positive Positive Positive Positive Positive Positive Positive Positive	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C C R Interpretation 21R10 Patient 2 C C C R Interpretation K Rh Interpretation	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Positive R1R1 Positive Positive Positive Positive Positive Positive Positive Positive Positive R1R2	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E E E E E E E E E E E E E E E	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Negative R1R1 Positive Positive Positive Positive Positive Positive Positive Positive R1R2	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C C R Interpretation 21R10 Patient 2 C C C C E E E E K Rh Interpretation 21R10 Patient 3 C	Compatible / Suitable Compatible / Suitable Negative Positive Positive Positive R1R1 Positive Positive Positive Positive Positive Positive Positive R1R1 Negative R1R2	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C C R Interpretation 21R10 Patient 2 C C C C C C C C C C C C C C C C C C C	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive R1R1 Positive Positive Positive Positive Positive R1R2 Negative R1R2 Negative Positive Positiv	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E E K K Rh Interpretation 21R10 Patient 2 C C C Rh Interpretation 21R10 Patient 3 C C C E E E E E E E E E E E E E E E E	Compatible / Suitable Compatible / Suitable Negative Positive Positive Positive R1R1 Positive Positive Positive Positive Rative Positive Negative R1R2 Negative R1R2	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E E E E E E E E E E E E E E E	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive Positive R1R1 Positive Positive Positive Positive R1R2 Negative R1R2 Negative Positive Positiv	
Crossmatch - Donor Y Crossmatch - Donor Z DAT 21R10 Patient 1 C C C E E E E E E E E E E E E E E E E	Compatible / Suitable Compatible / Suitable Negative Positive Negative Positive R1R1 Positive Negative R1R2 Negative Positive Positive Positive Positive Negative Positive Pos	

Logging Off

To Log off, click on the 'Back to List' button (see figure 4) and then click on the 'Logout' button (see figure 3) or exit the browser.

Accessing Reports

Log onto the system as shown on Pages 1 and 2. Exercises for which the report is ready have a tick in the 'Report' column, see figure 18. The Save and Submit buttons are not available after submission of results, the Reports button is only available after reports have been made available.

Select Di strib u	tions for Blood Transfus	ion Laboratory Practice	<u>Click here</u>	e for HELPRe	gistration Det	ails Logout
Dist. No	Date Issued	Closing Date	Completed	Dist. Closed	Report	Questionnaire
					0	
15E2	17/02/2015	02/03/2015		* .		
14E10	17/11/2014	01/12/2014		4	4	
14R9	13/10/2014	27/10/2014	4	4	4	
14E8	15/09/2014	29/09/2014	~	4	4	
14R7	14/07/2014	28/07/2014	×	4	4	4
14E6	16/06/2014	30/06/2014	4	4	4	

Click on the reports button as shown in figure 19.

Figure 19 – Accessing reports

UK NEQAS Haematology and Transfusion	UK NEQAS Blood Transfusion Laboratory Practice					
Sample Entry Details	Back to List Summary Reports Data entry form Email scheme	Exercise Instructions				
	BLOOD TRANSFUSION LABORATORY PRACTICE					

A pop up window will open showing all available reports and other documents as shown on figure 2. Click on the links to open the required document.

Figure 20 –	Variety of	reports	available
-------------	------------	---------	-----------

UK NEQAS Blood Transfusion Laboratory Practice - Google Chrome		x
Secure https://www.ukneqash.org/SampleEntry/scripts/ReportListTimer.asp?ID	=1654	Ð
Reports Available	С	lose
Your Report 10/04/2018 11:44 Your Report 11/04/2018 12:16		
BBTS UK wide quiz nights - week beginning 2nd July 2018		
<u>Copy of UK report - for information only</u>		
Summary Sinces - OK uata		

Where an amended report has been issued, there will be two links starting with "Your report...". The link with the latest date and time will be the latest version of the report.

Summary slides are usually included with each report, and other documents for distribution will also be included, e.g. flyers, supplementary reports...

Documents can be printed or saved as required.

PDF copies of reports will remain on the website for at least six months, after which time they may be archived to off-line storage

Logging Off

To Log off, click on the 'Back to List' button (see figure 4) and then click on the 'Logout' button (see figure 3) or exit the browser.