| EQA CAPA Summary (PRN)  |  |
|---|--|
| Details of Error  |  |
| Exercise Code:  |  |
| Sample(s):  |  |
| Test:   |  |
| Correct result:   |  |
| Result Reported:  |  |
| Penalty Score:  |  |
| Details of laboratory investigation   |  |
|   |  |
| Participant's assessment of the cause of error  |  |
|   |  |
| Potential for impact in clinical situation  |  |
|   |  |
| Details of CAPA   |  |
|   |  |
| Was any specific 'good practice' identified as a result of this error? If so, please provide details. |  |
|   |  |
| Signature (as appropriate) / Date   |  |
| Laboratory Manager  |  |
| Consultant Haematologist  |  |
| Quality Manager   |  |