#### § 493.937

TABLE 2 TO PARAGRAPH (c)(2)—CRITERIA FOR ACCEPTABLE PERFORMANCE

The criteria for acceptable performance are— Analyte or test	Criteria for acceptable per- formance
Cancer antigen (CA) 125	Target value ±20%.
Carcinoembryonic antigen (CEA).	Target value ±15% or ±1 ng. mL (greater).
Cortisol	Target value ±20%.
Estradiol	Target value ±30%.
Folate, serum	Target value ±30% or ±1 ng. mL (greater).
Follicle stimulating hormone	Target value ±18% or ±2 IU/ (greater).
Free thyroxine	Target value or ±15% or ±0. ng/dL (greater).
Human chorionic	Target value ±18% or ±3
gonadotropin (excluding urine pregnancy tests done by visual color comparison categorized as waived tests).	mIU/mL (greater) or positive or negative.
Luteinizing hormone	Target value ±20%.
Parathyroid hormone	Target value ±30%.
Progesterone	Target value ±25%.
Prolactin	Target value ±20%.
Testosterone	Target value ±30% or ±20 ng/dL (greater).
T3 uptake	Target value ±18%.
Triiodothyronine	Target value ±30%.
Thyroid-stimulating hormone	Target value ±20% or ±0.2 mlU/L (greater).
Thyroxine	Target value ±20% or ±1.0 mcg/dL (greater).
Vitamin B12	Target value ±25% or ±30 pg/mL (greater).

## § 493.937 Toxicology.

(a) Program content and frequency of challenge. To be approved for proficiency testing for toxicology, the annual program must provide a minimum of five samples per testing event. There must be at least three testing events at approximately equal intervals per year. The annual program must provide samples that cover the clinically relevant range of values that would be expected in specimens of patients on drug therapy and that cover the level of clinical significance for the particular drug. The samples may be provided through mailed shipments or, at HHS' option, may be provided to HHS or its designee for on-site testing.

(b) Challenges per testing event. The minimum number of challenges per testing event a program must provide for each analyte or test procedure is five serum, plasma, or blood samples.

Analyte or Test Procedure

Alcohol (blood)	Phenytoin
Blood lead	Primidone
Carbamazepine	Procainamide
Digoxin	(and metabolite)
Ethosuximide	Quinidine
Gentamicin	Theophylline
Lithium	Tobramycin
Phenobarbital	Valproic Acid

- (c) Evaluation of a laboratory's analyte or test performance. HHS approves only those programs that assess the accuracy of a laboratory's responses in accordance with paragraphs (c)(1) through (4) of this section.
- (1) To determine the accuracy of a laboratory's responses for quantitative toxicology tests or analytes, the program must compare the laboratory's response for each analyte with the response that reflects agreement of either 80 percent of ten or more referee laboratories or 80 percent or more of all participating laboratories. The score for a sample in toxicology is the score determined under paragraph (c)(2) of this section.
- (2) For quantitative toxicology tests or analytes, the program must determine the correct response for each analyte by the distance of the response from the target value. After the target value has been established for each response, the appropriateness of the response must be determined by using fixed criteria based on the percentage difference from the target value

Criteria for Acceptable Performance

The criteria for acceptable performance are:

Analyte or test	Criteria for acceptable per- formance
Alcohol, blood	Target Value ±25%.
Blood lead	Target Value ±10% or 4 mcg/
0.1	dL (greater).
Carbamazepine	Target Value ±25%.
Digoxin	Target Value ±20% or ±0.2 ng/mL (greater).
Ethosuximide	Target Value ±20%.
Gentamicin	Target Value ±25%.
Lithium	Target Value ±0.3 mmol/L or
	±20% (greater).
Phenobarbital	Target Value ±20%
Phenytoin	Target Value ±25%.
Primidone	Target Value ±25%.
Procainamide (and metabo- lite).	Target Value ±25%.
Quinidine	Target Value ±25%.
Tobramycin	Target Value ±25%.
Theophylline	Target Value ±25%.
Valproic Acid	Target Value ±25%.

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(3) To determine the analyte testing event score, the number of acceptable

analyte responses must be averaged using the following formula:

 $\frac{\text{Number of acceptable responses for the analyte}}{\text{Total number of challenges for the analyte}} \times 100 = \frac{\text{Analyte score for the testing event}}{\text{the testing event}}$ 

event score, the number of correct re-

(4) To determine the overall testing sponses for all analytes must be averaged using the following formula:

# Number of acceptable responses for all challenges $\times 100 = \text{Testing event score}$ Total number of all challenges

[57 FR 7151, Feb. 28, 1992, as amended at 58 FR 5229, Jan. 19, 1993; 68 FR 3702, Jan. 24,

EFFECTIVE DATE NOTE: At 87 FR 41240, July 11. 2022. §493.937 was amended by revising paragraphs (a), (b), and (c)(1) and (2), effective July 11, 2024. For the convenience of the user, the revised text is set forth as follows:

# § 493.937 Toxicology.

(a) Program content and frequency of challenge. To be approved for proficiency testing for toxicology, the annual program must provide a minimum of five samples per testing event. There must be at least three testing events at approximately equal intervals per year. The annual program must provide samples that cover the full range of values that could occur in patient specimens and that cover the level of clinical significance for the particular drug. The samples may be provided through mailed shipments.

(b) Challenges per testing event. The minimum number of challenges per testing event a program must provide for each analyte or test procedure is five serum, plasma, or blood samples.

TABLE 1 TO PARAGRAPH (b)—ANALYTE OR TEST **PROCEDURE** 

Acetaminophen, serum. Alcohol (blood). Blood lead. Carbamazepine, total. Digoxin, total. Gentamicin. Lithium. Phenobarbital. Phenytoin, total. Salicylate. Theophylline.

TABLE 1 TO PARAGRAPH (b)—ANALYTE OR TEST PROCEDURE—Continued

Tobramycin. Valproic Acid, total. Vancomycin.

(1) To determine the accuracy of a laboratory's responses for quantitative toxicology tests or analytes, the program must compare the laboratory's response for each analyte with the response that reflects agreement of either 80 percent or more of 10 or more referee laboratories or 80 percent or more of all participating laboratories. Both methods must be attempted before the program can choose to not grade a PT sample.

(2) For quantitative toxicology tests or analytes, the program must determine the correct response for each analyte by the distance of the response from the target value. After the target value has been established for each response, the appropriateness of the response must be determined by using fixed criteria based on the percentage difference from the target value.

TABLE 2 TO PARAGRAPH (c)(2)—CRITERIA FOR ACCEPTABLE PERFORMANCE

The criteria for acceptable performance are— Analyte or test	Criteria for acceptable per- formance
Acetaminophen	Target value ±15% or ±3 mcg/mL (greater).
Alcohol, blood	Target Value ±20%.
Blood lead	Target Value ±10% or ±2 mcg/dL (greater).
Carbamazepine, total	Target Value ±20% or ±1.0 mcg/mL (greater).
Digoxin, total	Target Value ±15% or ± 0.2 ng/mL (greater).
Gentamicin	Target Value ±25%.

#### § 493.941

TABLE 2 TO PARAGRAPH (c)(2)—CRITERIA FOR ACCEPTABLE PERFORMANCE—Continued

The criteria for acceptable performance are— Analyte or test	Criteria for acceptable per- formance
Lithium	Target Value ±15% or ±0.3 mmol/L (greater).
Phenobarbital	Target Value ±15% or ±2 mcg/mL (greater).
Phenytoin total	Target Value ±15% or ± 2 mcg/mL (greater).
Salicylate	Target Value ±15% or ±2 mcg/mL (greater).
Theophylline	Target Value ±20%.
Tobramycin	Target Value ±20%.
Valproic Acid, total	Target Value ±20%.
Vancomycin	Target Value ±15% or ±2
	mcg/mL (greater).

# § 493.941 Hematology (including routine hematology and coagulation).

(a) Program content and frequency of challenge. To be approved for proficiency testing for hematology, a program must provide a minimum of five samples per testing event. There must be at least three testing events at approximately equal intervals per year. The annual program must provide samples that cover the full range of values that would be expected in patient specimens. The samples may be provided through mailed shipments or, at HHS' option, may be provided to HHS and or its designee for on-site testing.

(b) Challenges per testing event. The minimum number of challenges per testing event a program must provide for each analyte or test procedure is five.

#### Analyte or Test Procedure

Cell identification or white blood cell differential
Erythrocyte count
Hematocrit (excluding spun microhematocrit)
Hemoglobin
Leukocyte count
Platelet count
Fibrinogen
Partial thromboplastin time
Prothrombin time

(1) An approved program for cell identification may vary over time. The types of cells that might be included in an approved program over time are—

Neutrophilic granulocytes Eosinophilic granulocytes Basophilic granulocytes Lymphocytes Monocytes

Major red and white blood cell abnormalities Immature red and white blood cells

- (2) White blood cell differentials should be limited to the percentage distribution of cellular elements listed above.
- (c) Evaluation of a laboratory's analyte or test performance. HHS approves only those programs that assess the accuracy of a laboratory's responses in accordance with paragraphs (c) (1) through (5) of this section.
- (1) To determine the accuracy of a laboratory's responses for qualitative and quantitative hematology tests or analytes, the program must compare the laboratory's response for each analyte with the response that reflects agreement of either 80 percent of ten or more referee laboratories or 80 percent or more of all participating laboratories. The score for a sample in hematology is either the score determined under paragraph (c) (2) or (3) of this section.
- (2) For quantitative hematology tests or analytes, the program must determine the correct response for each analyte by the distance of the response from the target value. After the target value has been established for each response, the appropriateness of the response is determined using either fixed criteria based on the percentage difference from the target value or the number of standard deviations (SDs) the response differs from the target value.

Criteria for Acceptable Performance

The criteria for acceptable performance are:

Analyte or test	Criteria for acceptable per- formance
Cell identification	90% or greater consensus on identification.
White blood cell differential	Target ±3SD based on the percentage of different types of white blood cells in the samples.
Erythrocyte count	Target ±6%.
Hematocrit (Excluding spun hematocrits).	Target ±6%.
Hemoglobin	Target ±7%.
Leukocyte count	Target ±15%.
Platelet count	Target ±25%.
Fibrinogen	Target ±20%.
Partial thromboplastin time	Target +15%