

One-Site Evaluation: Comprehensive Checklist for Evaluation of Peripheral level Laboratory (QA0SE-01)

I- General Information							
Name of Health Facility:							
District:							
In-charge laboratory:							
Name & qualification of current staff:							
Visiting Supervisor:							
II - Problem Identified and Action required as per the pervious Blinded Rechecking Round and OSE							
III - Diagnostic centre TB information from TB07 (same quarter as reviewed in lab)							
Patient registered				Pulmonary TB		Extra Pulmonary TB	Total
				Smear Postive	Smear Negative		
Without past history of TB (Cat-I)							
With past history of TB (Cat-II)							
Total							
IV - Laboratory smear microscopy Performance report: (Last quarter)							
	Patients			Smears		% positive smears	
	# Patient	# Postive Patients	% Postive Patient	# of smears examined	# of Postive smears reported		
Diagnosis(suspects)							
Follow up							
Total							

V - Analysis of Lab performance (last quarter)						
Examination	Total	Positive				
		Total	1-9	1+ve	2+ve	3+ve
Diagnostic smears						
Follow up smears						
VI - ON- SITE EVALUATION CHECKLIST- Current Visit particular						
ADMINISTRATION	Adequate /acceptable		Comments			
1 Workplace:	YES	NO				
1.1 • Separate area for laboratory						
1.2 • Running Water, Power & Gas supply service						
1.3 • Separate tables for specimen reception, smear making and smear microscop.						
1.4 • Efficient work flow						
1.5 • Cleanliness, tidines						
2 Staffing:						
2.1 • Any change in the staff since last supervisory visit						
2.2 • Appropriate training for all staff						
2.3 • Staff adequate for workload						
3.4 • Proper placement of trained staff						
3 Standard Operating Procedures:						
3.1 • Laboratory Manual available and accessible in Lab						
3.2 • Smearing and staining charts displayed						
3.3 • Grading chart displayed						
4 Laboratory Register						
4.1 • Register located in laboratory						
4.2 • Register neat and legible						
4.3 • Register up to date						
5 Data Collection						
5.1 • Quarterly workload and lab performance report prepared on NTP formats						
5.2 • Report is accurate						
6 Equipment						
• Maintenance record for equipment						
• Manual located with equipment						
7 Supplies						
7.1 • Adequate laboratory supplies for next quarter						
7.2 • Any recent shortage supply (last 3 months)						
7.3 Staining reagents						
• 0.3% Carbol fuchsin						
• 0.3% Methylene Blue						
• 25% Sulphuric acid						
7.4 Other Laboratory supplies (consumables)						
• Glass Slides						
• Disposable Plastic Sputum Containers						
• Marker						
• Filter paper						
• Xylene						
• Immersion oil						

	• Lens tissue/Soft tissue/gauze			
	• Lab register			
	• Lab performance report forms			
	• spirit for spirit lamp			
	• Disinfectants			
7.5	Lab supplies (non consumable)			
	• Wire loop with holder/Sticks			
	• Diamond pencils(or permanent marker			
	• Sand Alcohol bottle			
	• Proper reagent bottles for stains (Amber glass Bottles or opaque plastic bottles)			
	• Spirit lamp or Bunsen burner			
	• Glass Funnel			
	• Staining racks			
	• Drying Racks			
	• Red pen			
	• Slide boxes(storage of slides)			
	• Forcep			
	• Bacteriology Tray			
8	LABORATORY SAFETY AND WASTE DISPOSAL			
8.1	Safety			
	• Protective laboratory coat worn in the laboratory			
	• Room has effective ventilation /electric exhaust			
	• Fresh disinfectant readily available			
	• Staff has knowledge of TB symptoms			
	• Facility for Hand washing available and functioning			
	• Eating and drinking is prohibited in laboratory			
8.2	Waste Disposal			
	• Waste container with lid			
	• Disposal of sputum containers and other infected material by burning			
	• Disposal of Used Glass slides by Burying			
9	SPECIMEN SUBMISSION			
9.1	Collection			
	• Instructions given to patients			
	• Sputum Collection in open area outside lab			
	• Supervised specimen collection			
	• Appropriate containers in use			
	• Containers labeled before collection			
	• Sputum container labelled on side			
	• Sample received with completed request form			
	• Specimen quality checked on submission			
9.2	Handling in Laboratory			
	• Safety maintained at all times			
	• Specimen processed within one day			
	• Patient details matched with request form			
	• Samples always registered before process			
	• Non complying samples rejected			
	• Laboratory serial number written on side of the container			
	• Specimen quality assessed and recorded			

10	SMEAR EXAMINATION			
10.1	Smear Preparation (Ask technician to make smear and observe)			
	• Smear prepared on new slides			
	• Smears labeled before smear prepared			
	• Smears are labeled with diamond pencil			
	• Smears labeling includes lab serial .number and specimen Sequence. Number.			
	• Smear is prepared from purulent part of the sputum			
	• Smear approximately 2 x 1 cms centered			
	• Cross contamination controls in place			
	• Contaminated Wireloop disinfected in sand alcohol jar before sterilization over flame			
	• Smear are air dried completely before heat fixation			
	• Smear fixation is as per guidelines			
10.2	Staining (Observed technique by using control slide/Routine Slide , check)			
	• Carbol fuschin filtered before use			
	• Appropriate heating time for carbol fuschin			
	• Appropriate staining time with carbolfuchsin (Minimum 5 minutes)			
	• All reagent bottles are labeled			
	• Staining sink is level			
	• Positive & negative control done at least monthly to check the quality of stains			
	• Control results are recorded			
	• Stained slides are blue in colour			
10.3	Microscopic examination			
	• Microscope is binocular, electric			
	• Microscope performance is acceptable(bright oil field)			
	• Microscope manipulation is as per NTP guidelines (observe)			
	• Microscopic covered when not in use			
	• Objective wiped after positive smear			
	• Number of oil field examined as per NTP guidelines			
	• Positive slides are graded			
	• Grading complies with NTP guidelines			
	• Spare bulbs are available			
	• Positive control slide is reported positive after staining			
	• Results of 3 recently positive slides (Check & record)			
	• Results of 3 recently Negative slides (Check & record).			
10.4	Reporting			
	• All reports in standard format			
	• New positive marked with Red ink			
	• All results reported as soon as practicable			
	• All examined slides stored for rechecking			
	• Results are directly entered in the Lab Register (TB-04)			
	• All TB-05 not collected (completed and incomplete) are returned to the medical officer/DOTS Facilitator			
	• Feedback on EQA received and filed			
11	EQA- Blind Rechecking			
	• All slides stored in serial order			
	• All slides of last and current quarter available			
	• Smear Results are not marked on slides			
	• All slides marked in register, retrieved from slide boxes			

VII - ON SITE RECHECKING							
Examine at least three recent positive and negative smears							
	Slide No	Result PL	Result Supervisor	AFB staining	Background /Counterstaining	Sputum or Saliva	Quality of smear
	+						
	+						
	+						
	-						
	-						
	-						
Remarks:							

VIII - Summary On site evaluation : List major problems identified

A. Operational problems

B. Technical problems
