

# Patient Based EQA



Birmingham Quality



We are, and always have been, part of the NHS

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*Birmingham*

**UK NEQAS**  
International Quality Expertise

**50** Years as World  
Leaders in EQA  
1969–2019



Birmingham Quality

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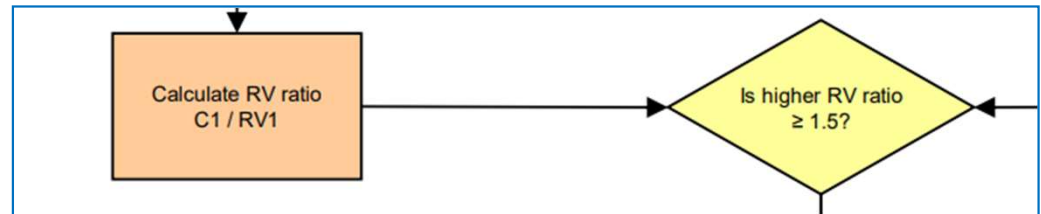
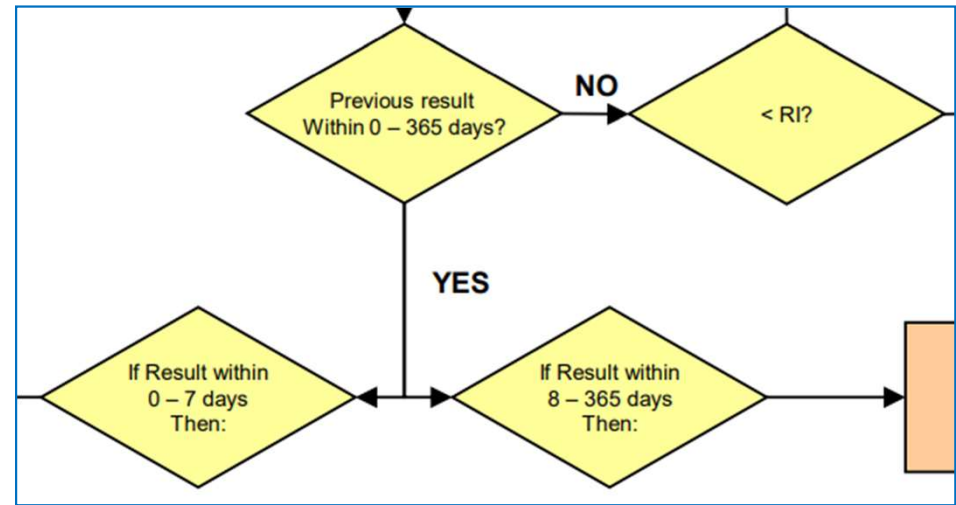
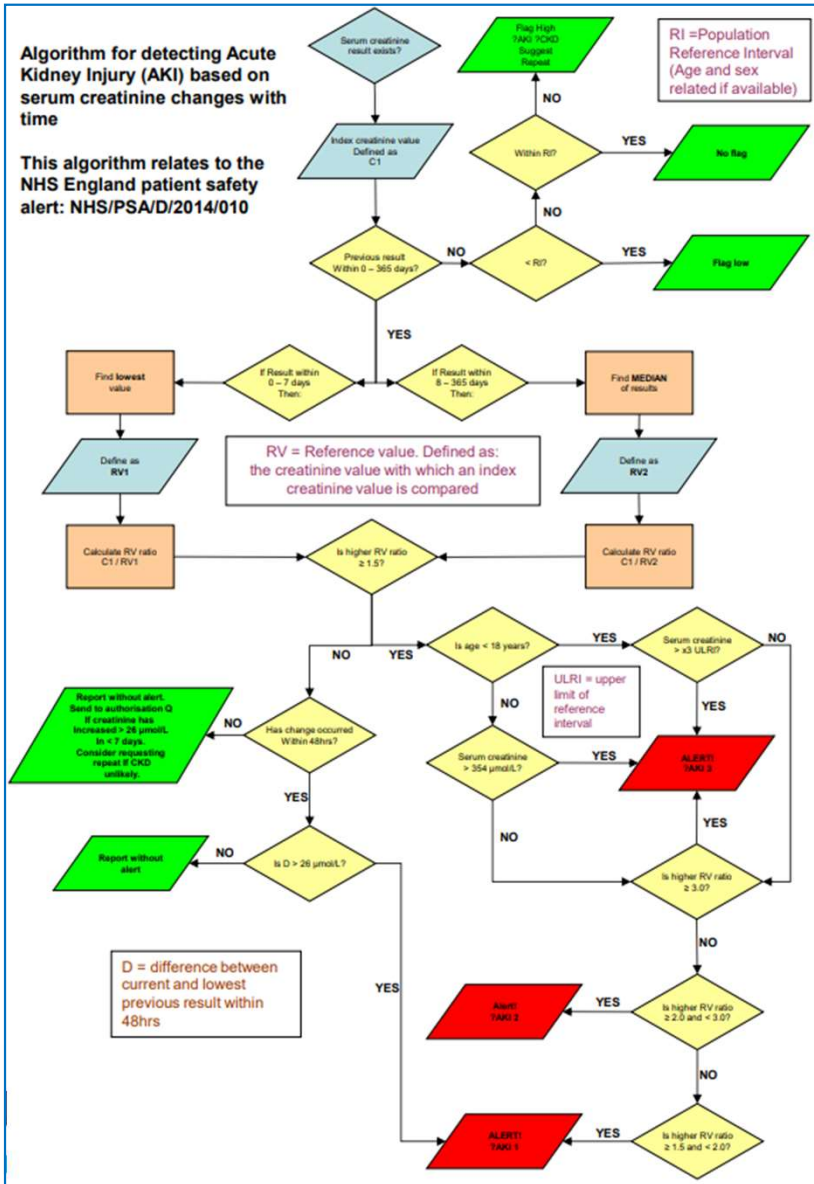
T-TLK-001E v1

# Quality Management of Algorithmic Tests

- Adjusted / Corrected Calcium
  - *Adjusted Calcium = Measured Calcium + 0.02(40 – Albumin)*
- eGFR (estimated Glomerular Filtration Rate)
  - *4V MDRD or 2009 CKD-EPI or 2021 CKD-EPI equations*
- AKI (Acute Kidney Injury)
  - *NHS England Algorithm*

**Algorithm for detecting Acute Kidney Injury (AKI) based on serum creatinine changes with time**

This algorithm relates to the NHS England patient safety alert: NHS/PSA/D/2014/010



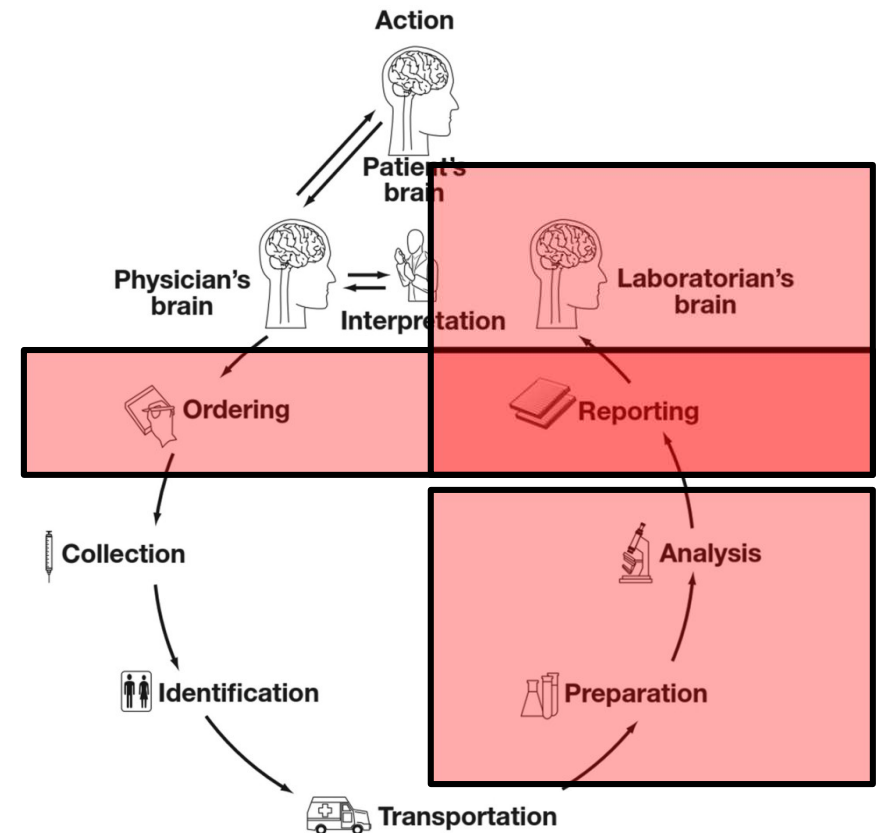
# EQA of AKI

EQA at the specimen level – Result

EQA with a clinical scenario – Result and Interpretation

EQA with patient demographics – Result based on demographics

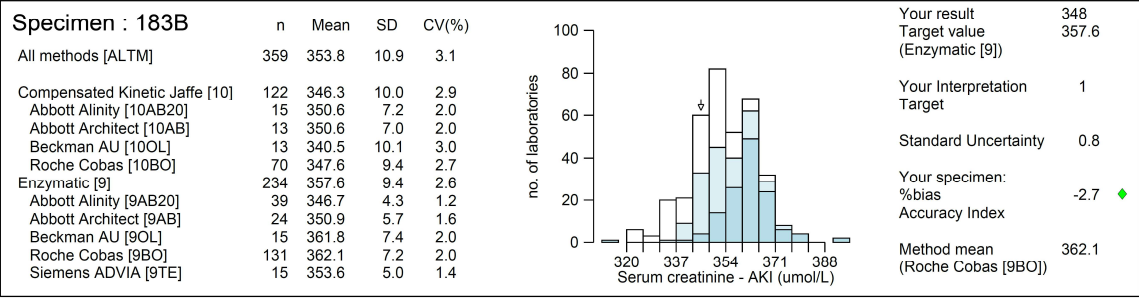
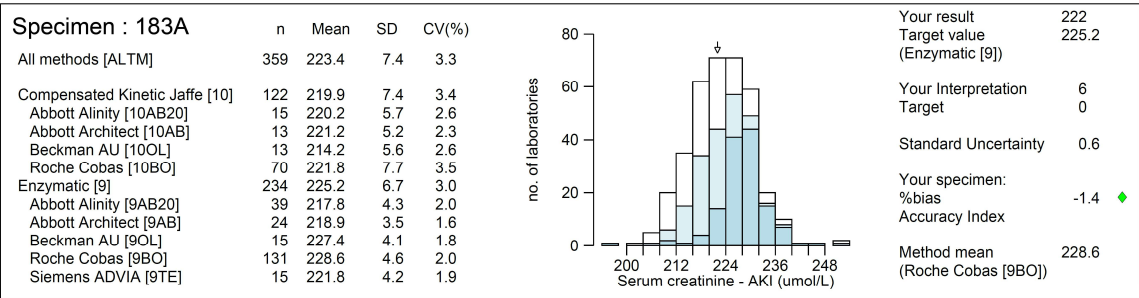
EQA with patient demographics over time – Result based on demographics over time



# AKI Analyte

- Participants receive three specimens for Creatinine analysis
- The participant needs to set up the AKI patient in the laboratory LIMS
- Patient demographics and specimen collection details are provided
- Participant reports the Creatinine and the AKI stage

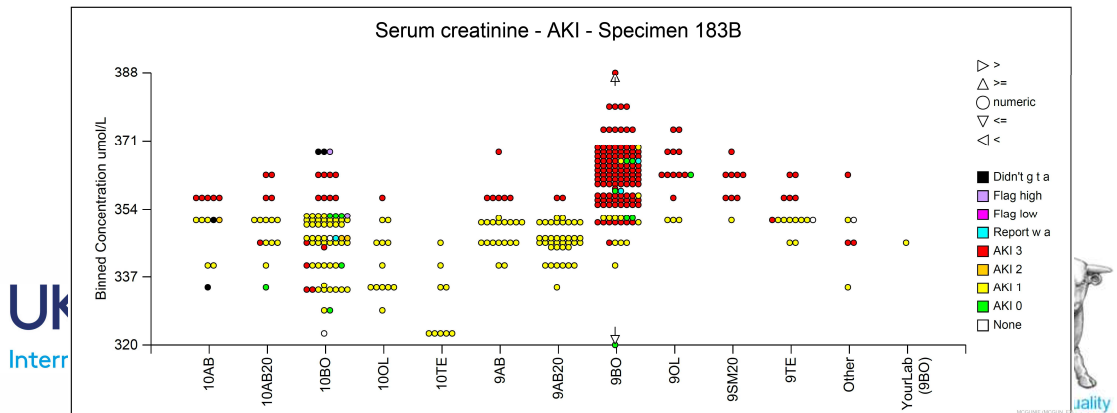
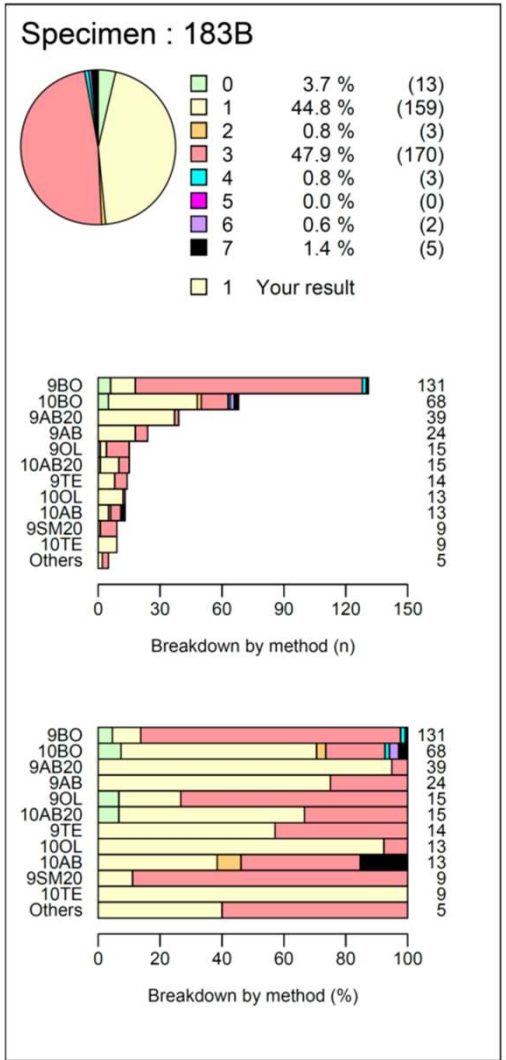
Spec.	Pool	Pool description / Treatments / Additions
183A	290	FATIMA AKIEQA Episode 1 Day -6
183B	293	FATIMA AKIEQA Episode 1 Day -3
183C	294	FATIMA AKIEQA Episode 1 Day 0



RV = 357.6  
225.2

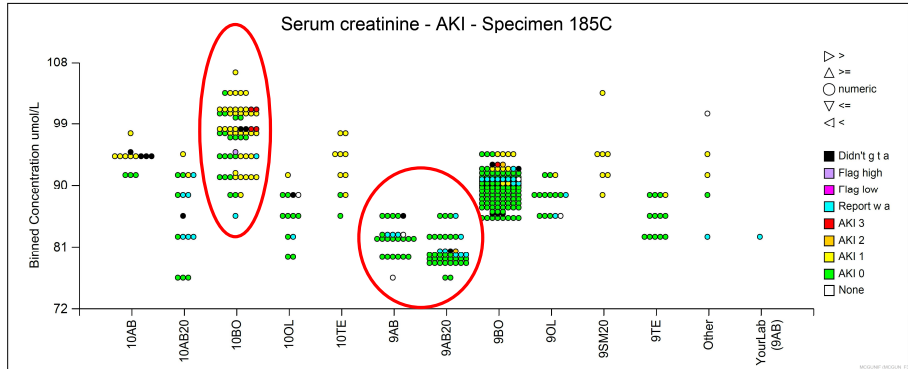
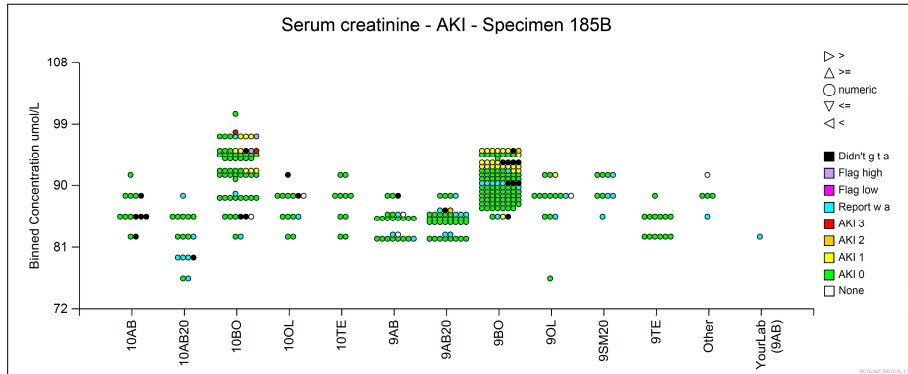
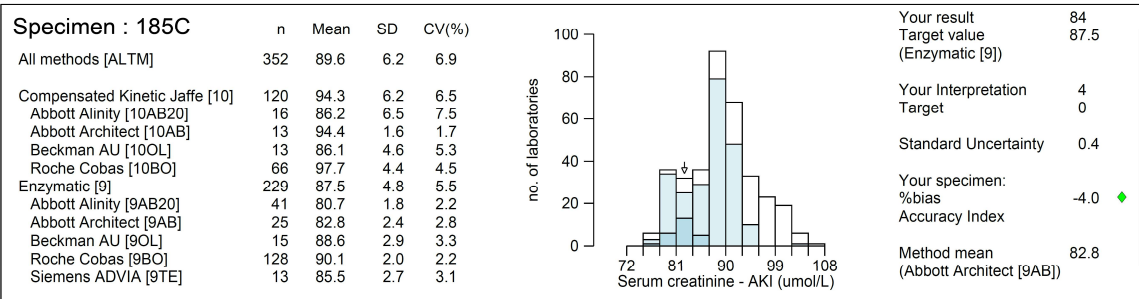
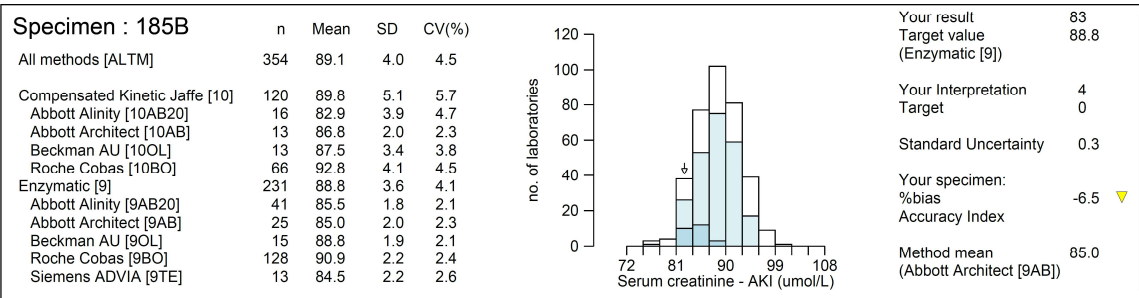
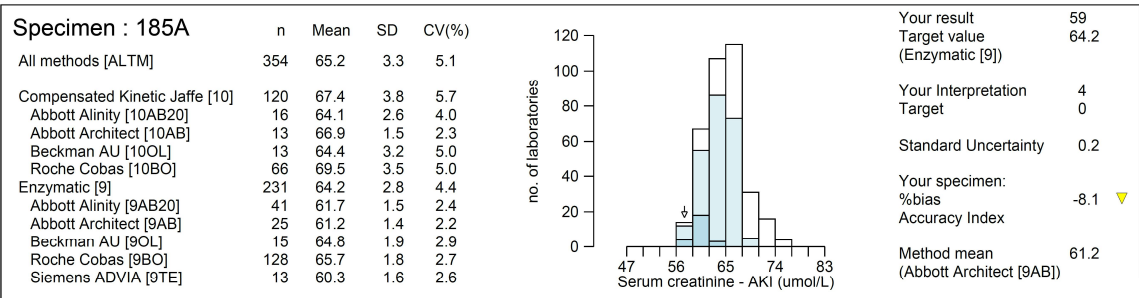
RV = 1.59

AKI Stage 1



AKI Warning Stage Test Result Confirm <u>or</u> refute automated AKI Test Result by comparing patient's current creatinine against patient's baseline creatinine	Clinical Context Within Which Blood Test Taken	
	LOW Pre-test Probability of AKI Stable Clinical Context	HIGH Pre-test Probability of AKI Context of Acute Illness
<b>AKI Warning Stage 1</b> Current creatinine > 1.5 x baseline level (or creatinine rise >26 µmol/L ≤ 48 hrs)	Consider clinical review ≤ 72 hours of e-alert If AKI confirmed → manage as per table 2	Consider clinical review ≤ 24 hours of e-alert Likely Stage 1 AKI → manage as per table 2
<b>AKI Warning Stage 2</b> Current creatinine > 2 x baseline level	Consider clinical review ≤ 24 hours of e-alert If AKI confirmed → manage as per table 2	Consider clinical review ≤ 6 hours of e-alert Likely Stage 2 AKI → manage as per table 2
<b>AKI Warning Stage 3</b> Current creatinine > 3 x baseline level (or creatinine > 1.5 x baseline and > 354 µmol/L)	Consider clinical review ≤ 6 hours of e-alert If AKI confirmed → consider admission	Consider Immediate Admission Likely Stage 3 AKI

Spec.	Pool	Pool description / Treatments / Additions
185A	285	Fatima AKIEQA Episode 3 Day -1 at 09:00
185B	286	Fatima AKIEQA Episode 3 Day 0 at 05:00
185C	287	Fatima AKIEQA Episode 3 Day 0 at 11:00





# Conclusion

- Technically challenging for laboratory to process the EQA and also for us, the EQA provider
- Well received and makes EQA a bit more fun!