



Hong Kong Institute of Medical Laboratory Sciences
Quality Assurance Programme

Haematology & Serology

August Survey (2026)

Dispatch date: 4 August 2026

Date of Return: on or before 18 August 2026

HONG KONG INSTITUTE OF MEDICAL LABORATORY SCIENCES QUALITY ASSURANCE PROGRAMME

Haematology and Serology

INSTRUCTIONS

1. In the package there are two samples for complete blood count (CBC), two lyophilized plasmas for coagulation study, two smears for blood cell morphology, and two red cell suspensions and plasma samples for blood group serology.
2. Upon receipt of the package, put blood and plasma samples immediately into a refrigerator at 2-8°C until analysis.
3. Consider the survey materials as potentially infectious and take standard biosafety measures when handling and disposing the materials.
4. Blood samples for CBC and blood group serology, when removed from the refrigerator, should be allowed to stand and equilibrate to 23±5°C for 15 minutes. Do not shake or mix cold blood samples on a mechanical mixer. Swirl tubes between hand palms to thoroughly re-suspend the blood samples and gently invert tubes 8 to 10 times immediately before analysis.
5. Lyophilized plasma samples should be reconstituted with 1 mL deionized / distilled water. Replace the stopper and swirl gently to make sure complete reconstitution of product. Keep the reconstituted samples at 23±5°C for 30 minutes. Invert to mix before analysis. Do not shake to avoid foam formation. The reconstituted product is stable for 24 hours when stored in its original vial at 2-8°C.
6. Process and test survey samples as patient specimens using currently practised analytical procedures in your laboratory.
7. Survey results should be submitted on line at <http://www.hkimlsqap.org/index.asp> using your login name and password.
8. Do not forward any particulars of your laboratory except the assigned confidential Laboratory Code.
9. Return survey results to HKIMLSQAP on or before the **due date 18 August 2026** Late or no return of survey data will be documented in your report.
10. For further enquiry, please contact HKIMLSQAP Ltd.
Phone: (852) 2499 0015 Fax: (852) 2124 2798 E-mail: info@hkimlsqap.org

CONFIDENTIALITY

HKIMLSQAP is committed to keep all details of participants confidential. Please refer to <http://www.hkimlsqap.org>



HONG KONG INSTITUTE OF MEDICAL LABORATORY SCIENCES
QUALITY ASSURANCE PROGRAMME

Fax: 21242798

Haematology and Serology Return Form

Laboratory code:

Date of Return: on or before 18 August 2026

Complete Blood Count

Tests	HS2631	HS2632	Method Code
WBC (x 10 ⁹ /L)			
RBC (x 10 ¹² /L)			
Hb (g/dL)			
Hct (L/L)			
MCV (fL)			
Plt (x 10 ⁹ /L)			

Coagulation (data in exact figures are mandatory)

Tests	HS2633	HS2634	Method Code	Reagent Code
APTT (sec.)				
Clinical assessment (N/B/P)				
Your Ref. range (sec.)				
	(low)	(high)		

Tests	HS2633	HS2634	Method Code	Reagent Code
INR				

ABO and Rh(D) Grouping

Tests	HS2637	HS2638	Method Code	Reagent Code
	(Reaction Score 0-12)	(Reaction Score 0-12)	A,B,C,D	E,F
Anti - A				
Anti - A,B				
Anti - B				
Reagent A Cells				
Reagent B Cells				
Reagent O Cells				
ABO Grouping				

Tests	HS2637	HS2638	Method Code	Reagent Code
	(Reaction Score 0-12)	(Reaction Score 0-12)	A,B,C,D	E,F
Anti - D				
Rh/hr control				
IAT (where applicable)				
Rh (D) Grouping				

Remark (if any):

N.B.: N = Normal; B = Borderline prolonged; P = Prolonged.

NA = Not Applicable. Please put down NA where the test is not performed. IC = Inconclusive



**HONG KONG INSTITUTE OF MEDICAL LABORATORY SCIENCES
QUALITY ASSURANCE PROGRAMME**

Fax: 21242798

Haematology and Serology Return Form

Laboratory code:

Date of Return: on or before 18 August 2026

Blood Film

Sample Code: HS2635

HS2635 was prepared from a 67-year-old man complaining of headache. The automated blood counts were as follows:

WBC $218.2 \times 10^9/L$, RBC $2.61 \times 10^{12}/L$, Hb 7.6 g/dL, Hct 0.269 L/L, MCV 103.1 fL, Plt $218 \times 10^9/L$.

The blood film was stained with May Grunwald-Giemsa method.

Differential Count	%
Neutrophil Band	
Neutrophil Segmented	
Lymphocyte	
Monocyte	
Eosinophil	
Basophil	
Blast	
Promyelocyte	
Myelocyte	
Metamyelocyte	
Atypical lymphocyte	
Others: (specify in Remark)	

NRBC / 100 WBC	
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RBC Morphology	
Normal (N)	
Abnormal	1/2/3 +
Hypochromasia	
Polychromasia	
Anisocytosis	
Microcytosis	
Macrocytosis	
Poikilocytosis	
Spherocytosis	
Elliptocytosis	
Target cell	
Schistocytosis	
Basophilic stippling	
Rouleaux	

WBC Morphology	
Toxic granulation	
N = Not seen; P = Present	

Platelet Morphology	
Giant form: easily found?	
N = No; Y = Yes	
Clumping	
N = Not seen; P = Present	

Malarial Parasite	
N = Not Found; S = P. species;	
F = P. falciparum;	
M = P. malariae;	
O = P. ovale; V = P. vivax	

Remark of HS2635 (if any):

N.B.: RBC Morphology - N= Normal; 1 = Mild or slight degree; 2 = Moderate degree; 3 = Severe or marked degree.

For problems related to the quality of the QAP Survey materials, please contact the HKIMLSQAP Chairman for replacement.



HONG KONG INSTITUTE OF MEDICAL LABORATORY SCIENCES
QUALITY ASSURANCE PROGRAMME

Fax: 21242798

Haematology and Serology Return Form

Laboratory code: 2

Date of Return: on or before 18 August 2026

Complete Blood Count

Tests	HS2631	HS2632	Method Code														
WBC (x 10 ⁹ /L)	<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				
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RBC (x 10 ¹² /L)	<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				
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Hb (g/dL)	<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				
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Hct (L/L)	<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				
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MCV (fL)	<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				
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Plt (x 10 ⁹ /L)	<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				<table><tr><td></td><td></td><td></td><td>●</td><td></td><td></td><td></td></tr></table>				●				
			●														
			●														

Coagulation (data in exact figures are mandatory)

Tests	HS2633	HS2634	Method Code	Reagent Code
APTT (sec.)	●	●		
Clinical assessment (N/B/P)				
Your Ref. range (sec.)	●	●		
	(low)	(high)		

Tests	HS2633							HS2634							Method Code	Reagent Code
INR				•							•					

FOR THE SECOND INSTRUMENT ONLY

Remark (if any):

N.B.: N = Normal; B = Borderline prolonged; P = Prolonged.

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