

## RANDOX INTERNATIONAL QUALITY ASSESSMENT SCHEME



This document must be completed and returned to RIQAS

# RIQAS BNP PROGRAMME

# RQ9165

	Lab. Reference Number				
Please tick the correct option:	This is a new registration for	BNP			
	This is an update to an existing	g BNP registration			
If you wish to register multiple instruments, please of	complete separate enrolment d	ocuments for each instrument			
On each document please state an instrument identi	fication name here				
Instrument Group Reports Instrument group reports can be provided on request. Please contact RIQ	AS or your local Randox office or distribute	r for more details.			
Inter-Laboratory Group Reports To receive inter-laboratory group reports, please contact RIQAS directly.					
Please indicate cycles required in boxes below					
Cycle 11 January 2024 - December 2024 Cycle 12 January 2025 - December 2025					
Primary Contact Details: (CAPITAL LETTERS ONLY) QA Officer					
Laboratory / Hospital Name					
Department					
Postal Address					
City	State				
Postal / Zip Code Country					
Telephone Number					
Randox Office / Distributor					

RIQAS BN	IP PRO	GRAMME
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## **RIQASNet - ELECTRONIC CORRESPONDENCE**

Participation on RIQAS requires access to RIQASNet, a web-based online method for result entry, viewing of released reports and addition or change of assay details. In addition, PDF reports can be e-mailed to up to 3 e-mail addresses, Internet access and login details are required for RIQASNet. A login will be supplied by RIQAS based on "e-mail address 1" below. It is also possible to receive a csv file containing the information found on the summary page of the routine report.

I	wish to	receive a	su	mmary	csv	file	
,							

(csv files must be sent to the same email addresses as the PDF reports)

FOR RIQAS USE ONLY
RIQASNet Nc
Date added:
By:
PDF copies set to
csv copies set to

#### Primary Contact email for RIQASNet/PDF reports/summary csv files (Please write in capital letters only) E-mail address 1:

E-mail addresses for additional PDF reports/summary csv files

E-mail address 2:	
E-mail address 3:	

Customer Declaration: By submitting this enrolment document to RIQAS, either directly or via my local Randox representative, I, (the customer of RIQAS) confirm that:

1) I have read and understood the RIQAS policies stated in the most recent Method Questionnaire associated with this programme. 2) I understand that the submission of this enrolment document to RIQAS marks the beginning of an on-going agreement, and I will be automatically enrolled in subsequent cycles of this programme until RIQAS receives written confirmation of my cancellation. This should be received by RIQAS 12 weeks prior to the month in which the cycle starts.

3) I understand that I must inform RIQAS of any changes to my contact details, assay details or contract status

4) I authorise Randox Laboratories Ltd. to send communication related to the products and service provided to the e-mail or postal addresses stated on this document

5) I understand that I am permitted to request disclosure of, change or erase personal details held by Randox Laboratories Ltd. at any

# **REGISTRATION OF ASSAY DETAILS**

It is possible to inform RIQAS of your chosen parameters and assay details by

- 1) Completing the 'REGISTRATION OF ASSAY DETAILS' on the following pages OR
- 2) Adding your own assay details using RIQASNet

#### Please select one of the following options



#### I wish to add my own assay details via RIQASNet once I have received my username, password and Lab Reference Number from RIQAS

(You do not need to complete the 'REGISTRATION OF ASSAY DETAILS' section of this document)

#### I wish to inform RIQAS of my assay details using this enrolment document

(please complete all remaining pages of the 'REGISTRATION OF ASSAY DETAILS' section)

For any further queries, please contact your local Randox office, Sales Representative or RIQAS directly.

Please contact RIQAS at +44 (0) 28 9445 4399 Tel: F-Mail mail@rigas.com

THIS PROGRAMME IS NOT ACCREDITED TO ISO/IEC 17043:2010

**RIQAS Scheme Co-ordinator: Sally Picton** 

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# RIQAS BNP PROGRAMME

### **REGISTRATION OF ASSAY DETAILS**

## ONLY COMPLETE THIS SECTION IF YOU DO NOT INTEND TO REGISTER YOUR METHODS VIA RIQASNET

Please indicate your requirements by  $\checkmark$  or by writing in the boxes below. Current participants should complete the document only for method changes.

ANALYTE	METHOD CODE	INSTRUMENT	REAGENT	SI UNITS 🗸	OTHER UNITS
BNP				pmol/l	

#### Please use this space to describe "other" methods, instruments and reagents.