

# ***RIQAS***

**RANDOX INTERNATIONAL QUALITY ASSESSMENT SCHEME**



**ENROLMENT DOCUMENT  
COAGULATION PROGRAMME**

**This document must be completed and returned to *RIQAS***



# ***RIQAS* COAGULATION PROGRAMME**

Please tick if you intend to register for *RIQAS* Net

***RIQAS* Net:** Web-based online method for result entry/method changes/viewing of released reports. PDF reports will also be sent to up to 3 email addresses. Internet access and login details are required for *RIQAS* Net. Your login will be supplied by *RIQAS* based on "e-mail address 1" below.

FOR *RIQAS* USE ONLY

*RIQAS* Net  
 RIQASNet No  
 Added:  
 Initial:  
 ET No:  
 Removed:  
 Initial:

Email address 1: \_\_\_\_\_

**Email addresses for additional PDF reports**

Email address 2: \_\_\_\_\_

Email address 3: \_\_\_\_\_

If you do not want to use *RIQAS* Net but wish to receive PDF reports please fill in the following section

Please tick if you intend to register for PDF reporting

**PDF Reporting:** Receive your *RIQAS* reports as pdf files to a maximum of 3 email addresses. This option is to be used as an alternative to post.

FOR *RIQAS* USE ONLY

PDF only  
 PDF copies set to  
 Added  
 Initial:

Email address 1: \_\_\_\_\_

Email address 2: \_\_\_\_\_

Email address 3: \_\_\_\_\_

***Instrument Group Reports***

Instrument group reports can be provided on request. Please contact *RIQAS* or your local Randox office or distributor for more details.

FOR *RIQAS* USE ONLY

Login Sent:  
 Initial:

***Inter-Laboratory Group Reports***

To receive inter-laboratory group reports, please contact *RIQAS* directly.

**Declaration:** I authorise *RIQAS* to send reports to the e-mail addresses stated on this form

Signed by participant \_\_\_\_\_ Date \_\_\_\_\_

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

Please contact *RIQAS* at  
 Tel: +44 (0) 28 9445 4399  
 Fax: +44 (0) 28 9445 4398  
 E-Mail: mail@riqas.com

THIS PROGRAMME HAS NOT YET BEEN ACCREDITED TO ILAC G13:08/2007

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# RIQAS COAGULATION PROGRAMME

## REGISTRATION OF METHODS

Please indicate your requirements by ✓ 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
FACTOR II ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FACTOR V ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FACTOR VII ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FACTOR VIII ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FACTOR IX ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FACTOR X ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FACTOR XI ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FACTOR XII ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
FIBRINOGEN	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	g/l <input type="checkbox"/>	<input type="text"/>
PLASMINOGEN ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
ANTITHROMBIN III ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
PROTEIN C ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
PROTEIN S ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
aPTT AS A RATIO	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	Ratio <input type="checkbox"/>	<input type="text" value="N/A"/>
aPTT IN SECONDS	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	s <input type="checkbox"/>	<input type="text" value="N/A"/>
PT AS AN INR	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	INR <input type="checkbox"/>	<input type="text" value="N/A"/>
PT ACTIVITY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	% <input type="checkbox"/>	<input type="text" value="N/A"/>
PT AS A RATIO	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	Ratio <input type="checkbox"/>	<input type="text" value="N/A"/>
PT IN SECONDS	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	s <input type="checkbox"/>	<input type="text" value="N/A"/>
THROMBIN TIME	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	s <input type="checkbox"/>	<input type="text" value="N/A"/>

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

**PLEASE NOTE:** PT may be registered as seconds, % activity, ratio or INR. Registration of all of these will count as one analyte. aPTT may be registered as seconds or ratio. Registration of both will count as one analyte