

RIQAS

RANDOX INTERNATIONAL QUALITY ASSESSMENT SCHEME

Although not all parameters will appear in every sample, participants should complete method details, cut off values and cross-reactivity factors for every parameter analysed.



**ENROLMENT DOCUMENT
URINE TOXICOLOGY
PROGRAMME**

This document must be completed and returned to *RIQAS*

RIQAS

URINE TOXICOLOGY PROGRAMME

RQ9139

Lab. Reference Number _____

Please tick the correct option:

This is a new registration

This is an update to an existing registration

If you wish to register multiple instruments, please complete separate enrolment documents for each instrument

On each document please state an instrument identification name here _____

Official Order No. required for UK & Ireland only - Please ensure official purchase order number accompanies enrolment documents

Official Order No.

Date

Please indicate cycles required in boxes below

Cycle 2 January 2010 - December 2010

Cycle 3 January 2011 - December 2011

Routine report to be sent to: (**CAPITAL LETTERS ONLY**)

QA Officer

Laboratory / Hospital Name

Department

Postal Address

Postal / Zip Code

Country

Telephone Number

Fax Number

Randox Representative

RIQAS URINE TOXICOLOGY 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.

Inter-Laboratory Group Reports

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

FOR *RIQAS* USE ONLY

Login Sent:

Initial:

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

RIQAS Scheme Co-ordinator: Stephen Doherty

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Revised July 2010

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

RIQAS URINE TOXICOLOGY 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.

Although not all parameters will appear in every sample, participants should complete method details, cut off values and cross-reactivity factors for every parameter listed below.

ANALYTE	METHOD CODE	INSTRUMENT CODE	REAGENT SUPPLIER	SI UNITS	✓	OTHER UNITS		
CREATININE	<input type="text"/>	<input type="text"/>	<input type="text"/>	umol/l	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	
ANALYTE	METHOD CODE	INSTRUMENT CODE	REAGENT SUPPLIER	CUT OFF VALUE	SI UNITS	✓	OTHER UNITS	CROSS REACTIVITY
<u>AMPHETAMINES GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
d-AMPHETAMINE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
d-METHAMPHETAMINE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>BARBITURATES GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
PHENOBARBITAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
SECOBARBITAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>BENZODIAZEPINES GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
LORAZEPAM	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
OXAZEPAM	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>CANNABINOIDS GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
11-NOR-D-9-THC-9-COOH	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>COCAINE GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
BENZOYLEGONINE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>ETHANOL</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	mg/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>LSD</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>METHADONE</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
EDDP	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>OPIATES GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
BUPRENORPHINE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
FREE MORPHINE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>PHENCYCLINE</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>PROPOXYPHENE GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
NORPROPOXYPHENE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<u>TCA GROUP</u>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
NORTRYPTYLIN	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	ng/ml	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

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