

# CIRME



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Centre for Metrological  
Traceability in  
Laboratory Medicine  
(CIRME)

site: <http://users.unimi.it/cirme>

13<sup>th</sup> International Scientific Meeting

## THE INTERNAL QUALITY CONTROL IN THE TRACEABILITY ERA

MILANO, ITALY  
November 28<sup>th</sup>, 2019

# IQC component I or how to check the alignment of measuring systems

*Sara Pasqualetti*

Laboratory Medicine is *clinically effective* when the provided information can be interpreted in a reliable and consistent manner

## **LABORATORY RESULTS**

### **ACCURATE**

*Tolerable measurement error without jeopardizing patient safety*

### **EQUIVALENT**

*[For long term] No matter where they are performed*

## **TRACEABILITY IMPLEMENTATION**

*Results obtained by the calibrated commercial procedure expressed in terms of the values obtained at the highest available level of the calibration hierarchy*



# REGULATION (EU) 2017/746 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 5 April 2017 on *in vitro* diagnostic medical devices and repealing Directive 98/79/EC and Commission Decision 2010/227/EU

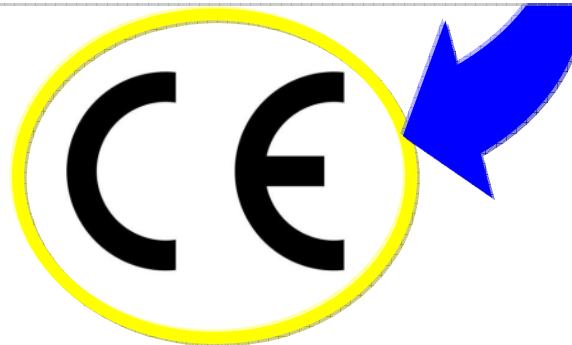


***Requires IVD manufacturers to ensure traceability of their measuring systems to recognized higher-order references***

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# Roles and responsibilities of IVD manufacturers

To fulfill the EU IVD Directive and  
**REGULATION (EU) 2017/746 Requirements**



- Identification of higher-order metrological **REFERENCES**
- Definition of a **CALIBRATION HIERARCHY** to assign traceable values to their system calibrators and bias correction during trueness transfer process
- Estimation of combined **MEASUREMENT UNCERTAINTY (MU)** of calibrators
- Fulfillment of **MU GOALS**, which represent a proportion of the uncertainty budget allowed for clinical laboratory results



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# Identification of higher-order REFERENCES and definition of a CALIBRATION HIERARCHY to assign traceable values to the system calibrators



Accurate results for patient care

Joint Committee for Traceability in Laboratory Medicine (JCTLM)

<https://www.bipm.org/jctlm/>



JCTLM database: Laboratory medicine and *in vitro* diagnostics

⌵ JCTLM Members and Stakeholders Meeting  
2 - 3 December 2019  
Workshop Programme  
Register now !

⌵ JCTLM Database  
Search Form  
List of reference materials no longer listed in the JCTLM Database.  
List of reference measurement methods no longer listed in the JCTLM database.

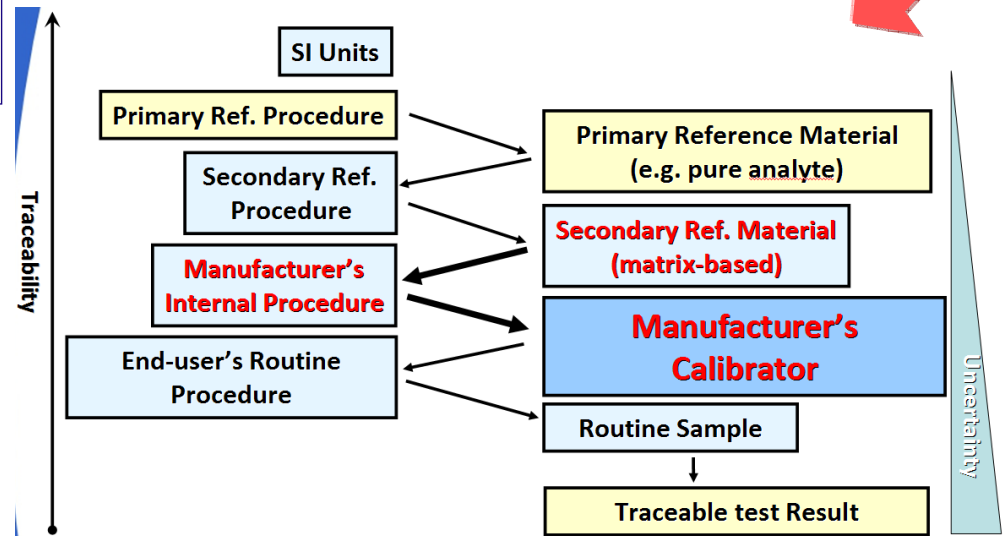
⌵ Analyte keyword search for reference materials, measurement methods/procedures and services

Type an analyte name in part or full, e.g. cholesterol

Refine search by analyte category:   
 Refine search by matrix category:

Please select your requirement :

Higher-order reference materials  
 Reference measurement methods/procedures  
 Reference measurement services

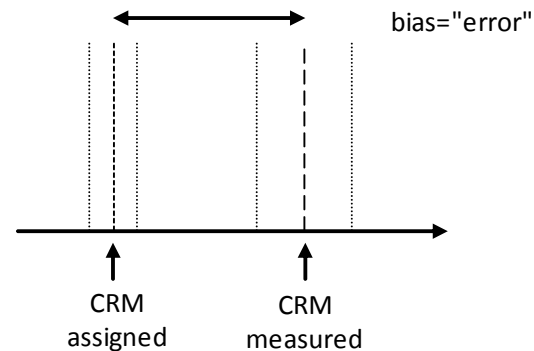


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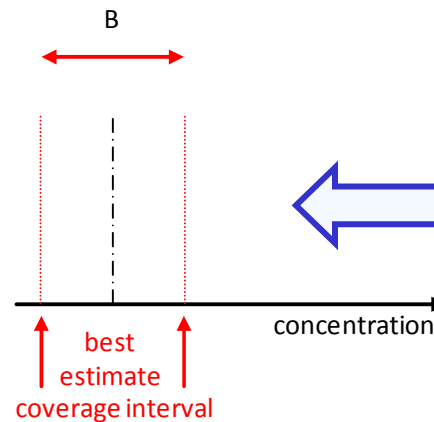


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# BIAS CORRECTION during trueness transfer process



**Bias**, systematic measurement error, due to e.g. inappropriate model for the calibration curve, incorrect values assigned to the calibrators, matrix related bias, etc.



**Bias correction**, realignment of measuring system by adjusting the value assigned to the calibrator

**Provide unbiased clinical results**

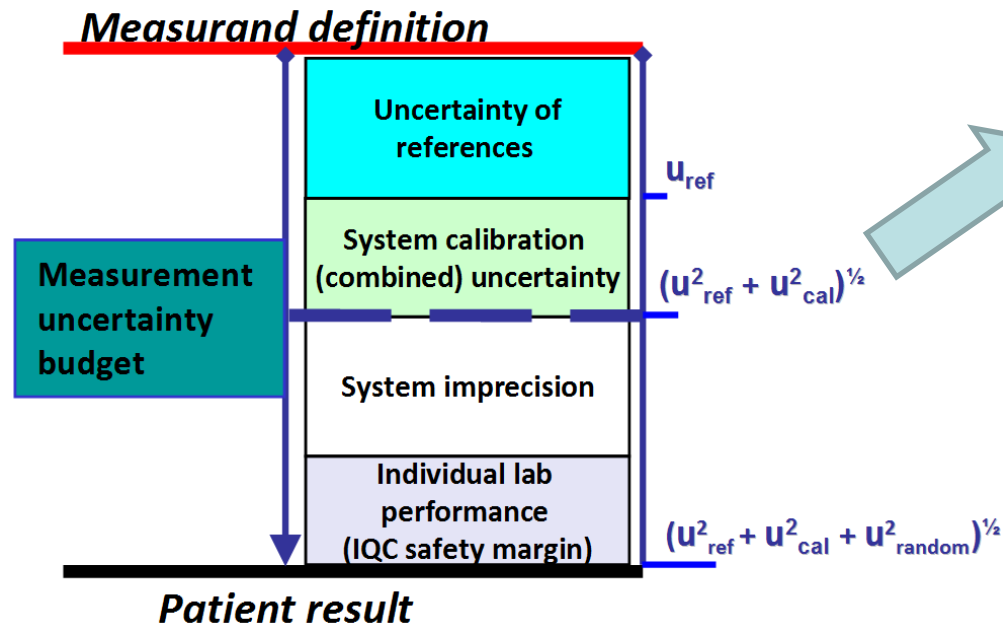
**Uncertainty of calibrator**

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Estimate combined **MEASUREMENT UNCERTAINTY (MU)** of calibrators and fulfill **MU GOALS**, which represent a proportion of the uncertainty budget allowed for clinical laboratory results



**Manufacturers**

- ✓ Combines the uncertainty derived from the previous steps of the metrological chain
- ✓ Leaving enough uncertainty budget usable by individual laboratories warranting the production of clinically suitable results

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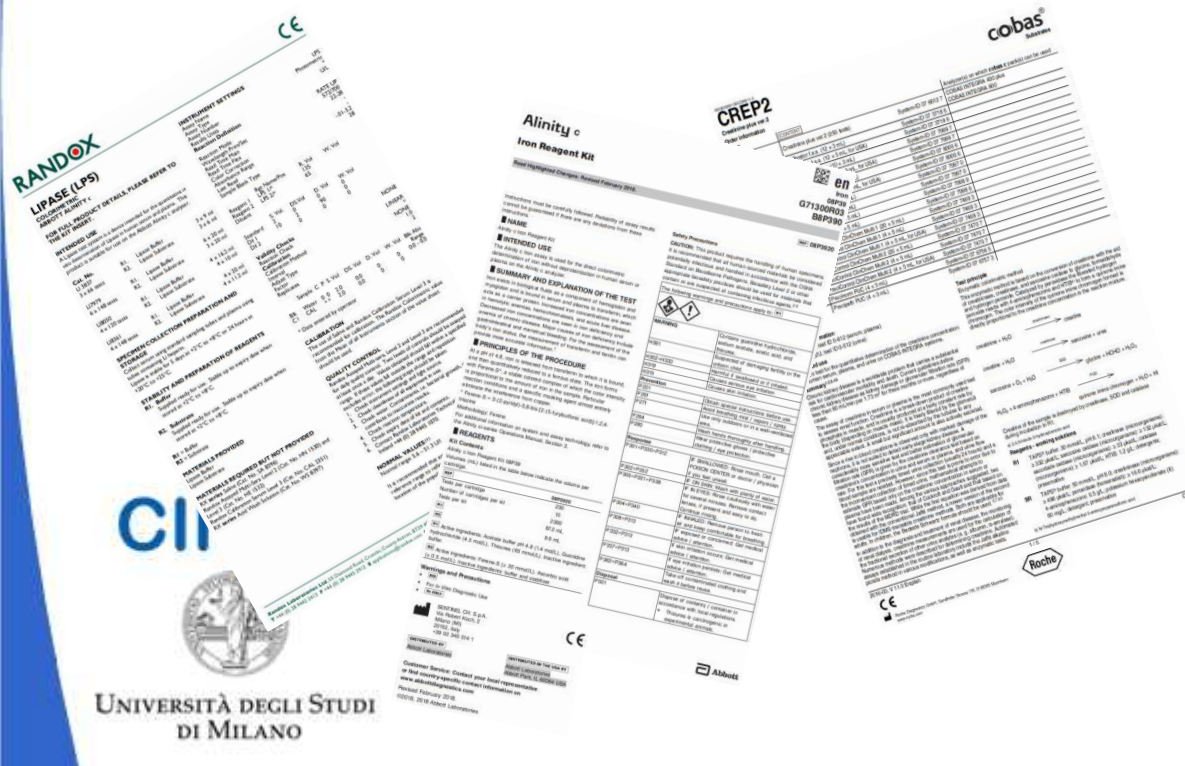


# Furthermore, IVD manufacturers should provide:

- Technical documentation
- Instructions for use
- Quality control suitable for post-market traceability surveillance (system alignment)



**Only working according to the manufacturer's instructions the declared performance of measuring system can be warranted**



## INSTRUMENT SETTINGS

### CALIBRATION MATERIALS

- PREPARATION
- STABILITY
- FREQUENCY
- TRACEABILITY
- UNCERTAINTY

### QUALITY CONTROL MATERIALS

- PREPARATION
- STABILITY
- FREQUENCY
- ACCEPTABILITY RANGE

### SPECIMENT TYPES ACCORDING TO THE INTENDED USE

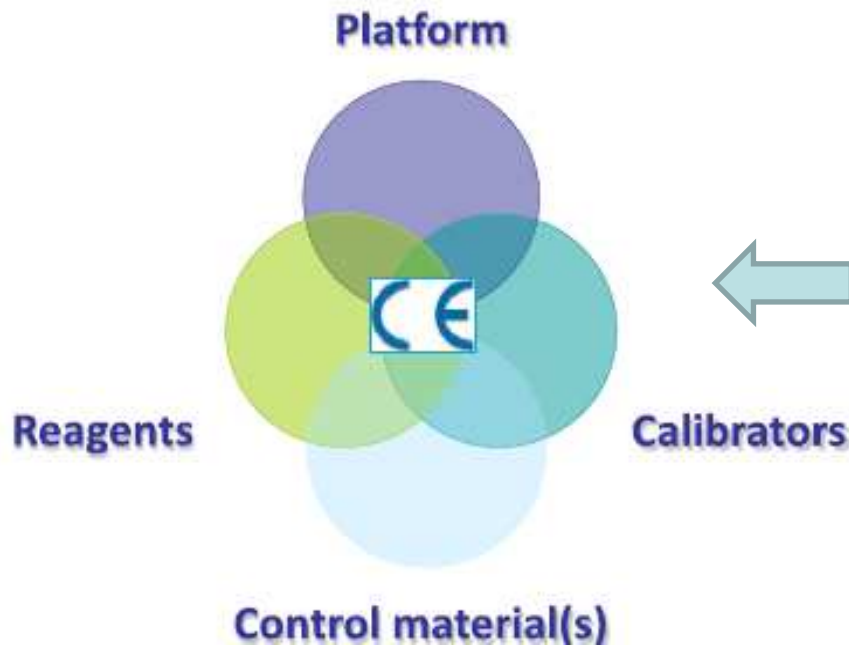
### REAGENT

- PREPARATION
- STORAGE
- STABILITY (unopen/onboard)



## Measuring System Components in the Traceability Era

### ***The Paradigm Shift***



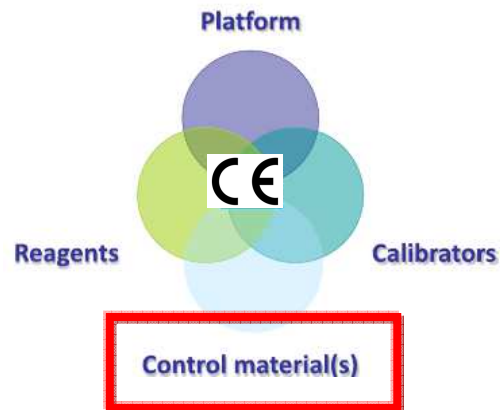
*F. Braga, M. Panteghini / Clinica Chimica Acta 432 (2014)*

If the manufacturer should assume total responsibility for supplying products of acceptable quality in terms of traceability and uncertainty of the system (“CE marked”), it is no longer possible to consider separately the components of each analytical system (i.e., platform, reagents, calibrators and control materials), which in terms of performance can only be guaranteed and certified by the manufacturer as a whole.

Changes introduced by users or third parties (e.g., the use of reagents, calibrators or control materials from other suppliers) may significantly alter the quality of the analytical system performance, removing any responsibility from the manufacturer and depriving the system (and, consequently, the produced results) of the certification originally provided through CE marking.

# Quality control suitable for post-market traceability surveillance (system alignment)

The verification of the consistency of declared performance in terms of measuring system alignment (i.e. system traceability) during daily operations must be performed in accordance with the instructions of manufacturer, which has total responsibilities about the declared performance of marketed measuring system.

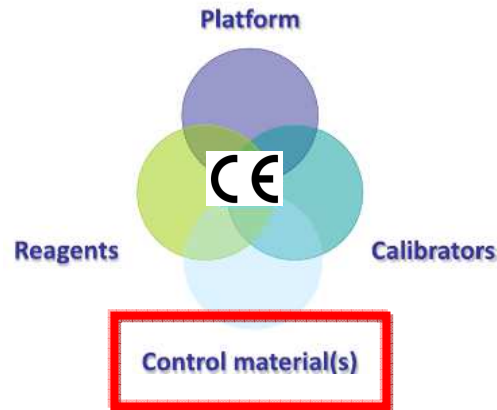


**Control materials from the IVD manufacturers as a part of the CE-marked measuring system (System alignment verification IQC component I)**

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**Control materials from the IVD manufacturers as a part of the CE-marked measuring system (System alignment verification IQC component I)**

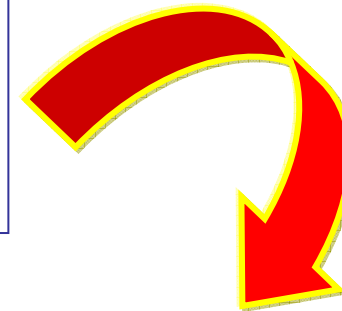
## **BASIC PREMISE**

If the traceability of the measuring system to higher-order references is granted, control materials from the IVD manufacturers have to be a good surrogate of the employed (and declared) reference to permit checking the correct system alignment to this reference

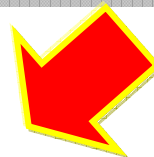
# Internal Quality Control CHARACTERISTICS

- Monitoring the reliability of analytical measurements according to defined rules for QC acceptability, with the identification of out-of-control conditions in real time
- Identifying situations when the measurement system may not be provide results suitable for use in medical decisions

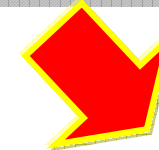
[Adapted from CLSI C24-A3]  
Statistical Quality Control  
for Quantitative Measurement  
Procedures: Principles and Definitions



Plan IQC strategies based on the performance needed to support the intended medical use of results



Select appropriate IQC material



Define appropriate interpretative criteria

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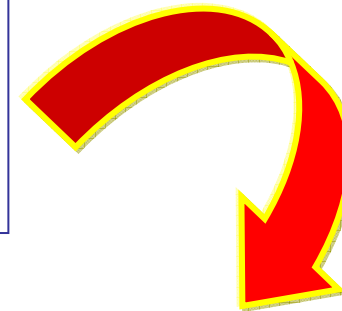


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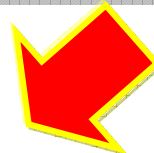
# Internal Quality Control CHARACTERISTICS

[Adapted from CLSI C24-A3]

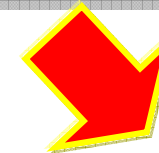
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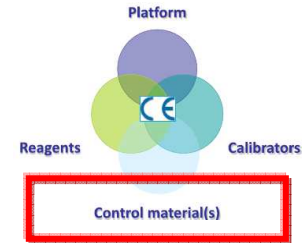
Define appropriate interpretative criteria

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## MAIN CHARACTERISTICS OF QUALITY CONTROL MATERIAL FOR SYSTEM ALIGNMENT VERIFICATION



- ✓ Concentration levels in line with clinically relevant thresholds
- ✓ Unbiased target value (e.g. possibility of correction of bias due to matrix-related effect resulting from the interaction of reagents and "matrix-modified" material) – Commutable materials not needed
- ✓ Acceptability range according to the suitable application of test results in clinical setting
- ✓ Enough stability to monitor the performance of the measuring system under the influence of components potentially deteriorating it



# Concentration levels in line with clinically relevant thresholds

**EXAMPLE**

Accurate calibration of hs-cTn assays in the low range of concentrations is of the utmost importance for this application that relies on a single troponin measurement @ patient admission.

Even relatively small analytical variations in practice may misclassify patients with suspected acute coronary syndrome.

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## Tools that labs would need to use to check the performance at the low end of measuring range of hs-cTn assays

- A control material with an hs-cTn concentration near the LoD to monitor baseline drifts (IQC component I)
- A low-level QC material with cTn concentration close to 99<sup>th</sup> percentile limit to monitor assay performance at cut-off (IQC component II)
- Calibration frequency to be determined based on the imprecision performance and drift characteristics of the assay

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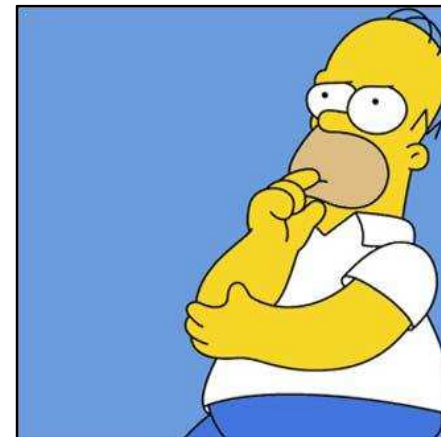
[Adapted from Panteghini M. Clin Chim Acta 2009;402:88;  
Panteghini M. Clin Chem 2018;64:621]

However, commercial IQC materials available as part of the hs-cTn measuring systems do not cover such low concentrations, leaving the assay vulnerable to potential drifts that could remain unnoticed.

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## Letter to the Editor

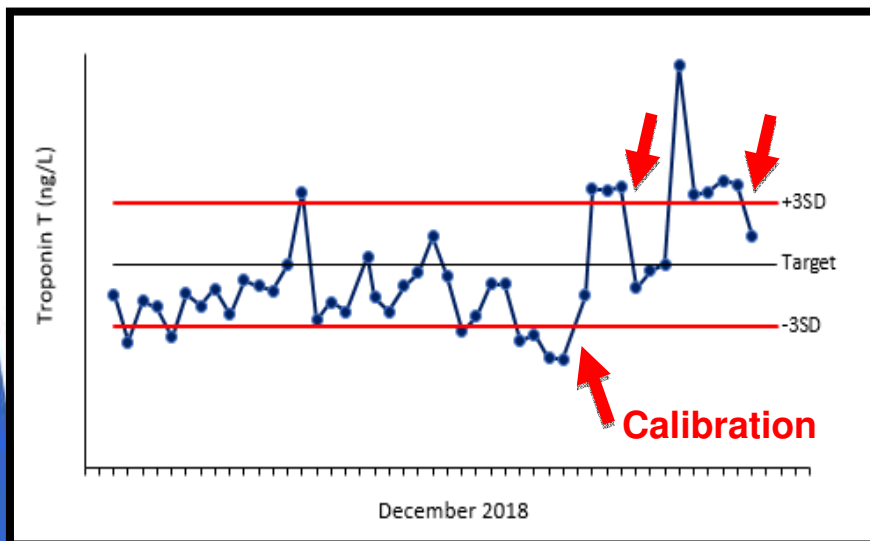
Elena Aloisio\*, Sara Pasqualetti, Alberto Dolci and Mauro Panteghini

## Daily monitoring of a control material with a concentration near the limit of detection improves the measurement accuracy of highly sensitive troponin assays



Use of an in-house made serum pool with hs-TnT ~5 ng/L (LoD) as a third material, besides commercial Roche materials, to check calibration of the measuring system

- **Target value:** mean of 10 preliminary measurements, performed in optimal conditions.
- **Acceptability range:**  $\pm 30\%$  of target value.



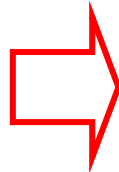
If QC results are “out of control”, immediate corrective actions are undertaken before further reports related to the patient samples are issued and measurements repeated.



# Unbiased target value

The values provided in the data sheet were derived from replicate analyses and are specific for a particular lot of product. These values have been generated using third party manufacturers' instrument systems and are specific to one measurement procedure. Technopath make no accuracy claims regarding these values. Tests were performed by the control manufacturer and/or by independent laboratories, for various methods and instrument systems. As a tool to assist in establishing their own mean, laboratories can import the values into their Alinity c system. For more details and to register for access to this file please visit [www.technopathcd.com](http://www.technopathcd.com).

Values are provided only as guidelines, each laboratory should establish its own statistical limits. Laboratory means may vary from the values listed during the shelf life of the control. Technopath monitors the values over the shelf life of the control and provides update(s) at [www.technopathcd.com](http://www.technopathcd.com) or contact your local Abbott customer service representative.



- ... Mean value derived from replicate performed by independent laboratory*
- ... Data from interlaboratory program are included in the determination of some ranges*
- ... Values/Range provided only as guides*
- ... Values listed are approximate targets and are provided only for convenience*
- ... No accuracy claims regarding mean value*
- ... Values update during the shelf life of the material available @website*
- ... Each laboratory should establish its own statistical limits*

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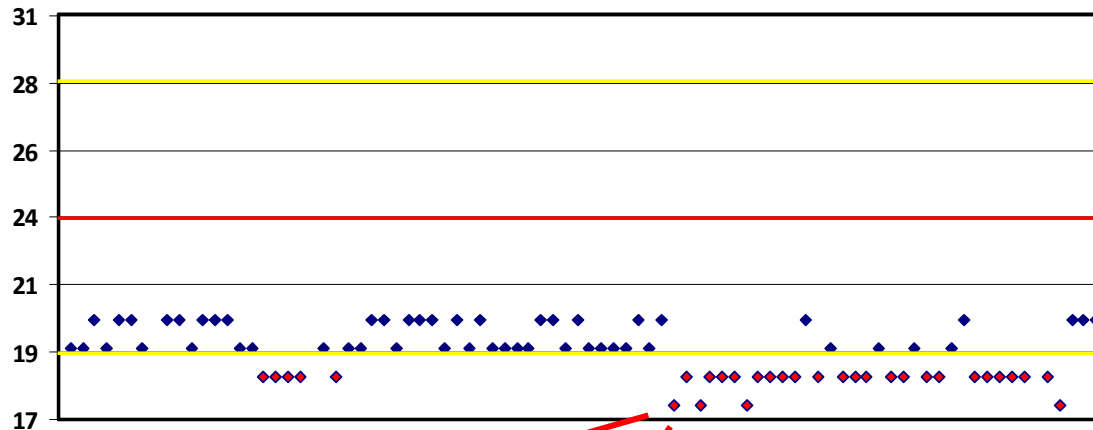
Who's taking care of the metrological quality of the assigned value?



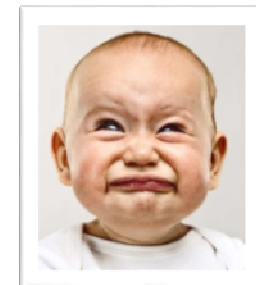
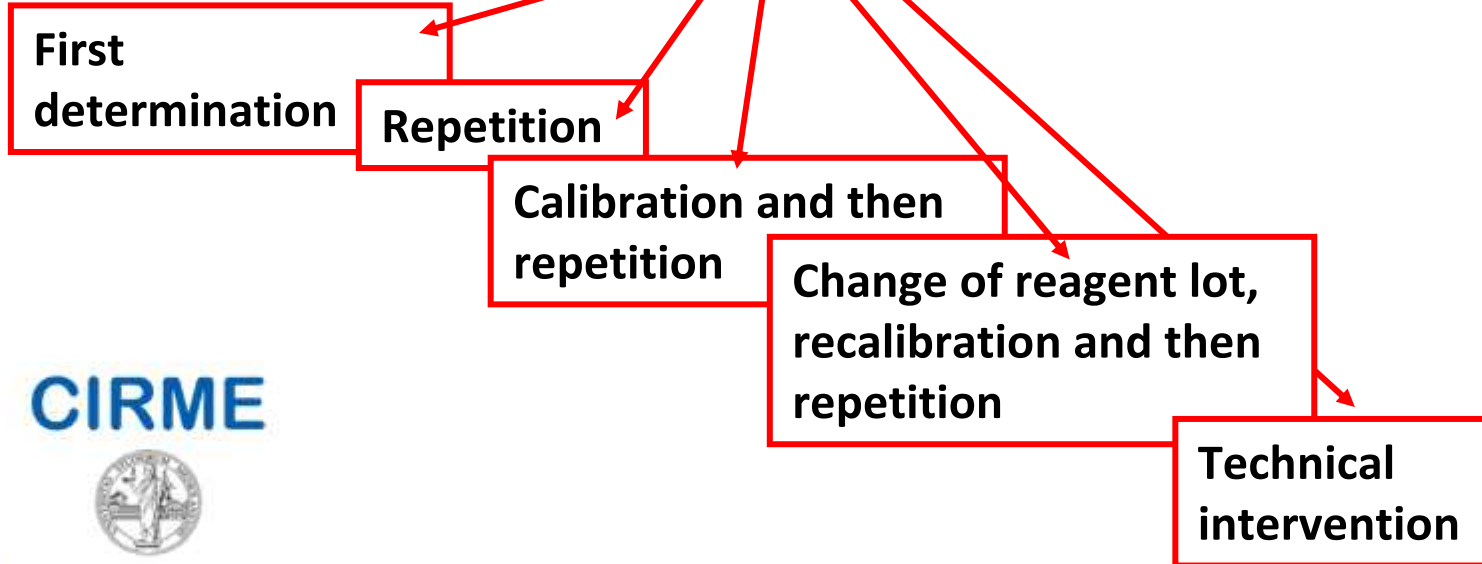


### ALINITY c ALT, System alignment verification

**Level 1**



Liquid Frozen Multiparametric IQC  
Target mean= 23.3 U/L  
Acceptability= 18.7-28.0 U/L ( $\pm 20\%$ )  
Reagent= Activated ALT, P5P  
IFCC traceable calibration factor= 7658

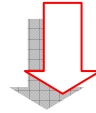


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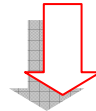
Are the repeated out-of-control results in ALT measuring system due to a real system misalignment from the declared IFCC reference?



BIAS ESTIMATION

*Note that:*

- *Bias estimation is not a part of IQC*
- *Need of a dedicated experimental protocol (e.g. CLSI EP09)*



To investigate the persistent systematic misalignment of ALT Alinity measuring system → Correlation between Alinity and IFCC reference procedure

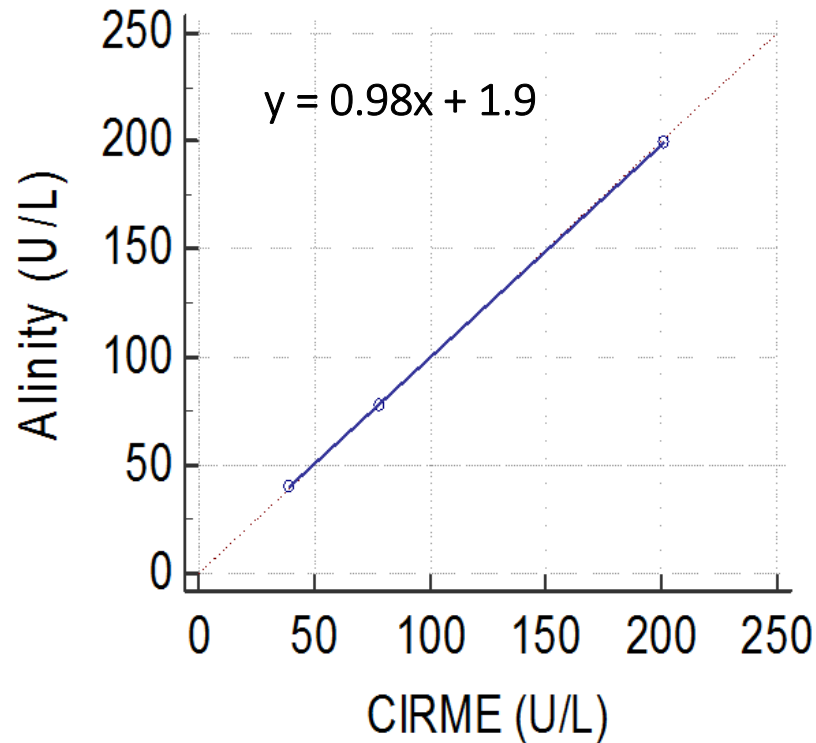
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	Alinity				CIRME	Bias	Bias %
	rep 1	rep 2	rep 3	media			
Pool 40	40	40	40	40.00	38.87	1.13	2.9
Pool 80	78	77	78	77.67	78.13	-0.46	-0.6
Pool 200	199	199	200	199.33	201.28	-1.95	-1.0

**Optimal Bias**



Traceability to the declared reference  
**CONFIRMED !!**



Technopath make no accuracy claims regarding these values. Tests were performed by the control manufacturer and/or by independent laboratories, for various methods and instrument systems.

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**Abbott**

you have a problem  
with control material!







# Serum Albumin DiAgam IQC Component I

**QUALITY CONTROL**

reproducibility: analytical performances can be checked with the internal quality control serum of the laboratory or with the Liquichek™ (BIO-RAD) Control sera

Calibration: calibration curve and stability of calibration curve can be validated with the DiAgam calibration control (MPCON-002, MPCOS-002 and MPCOX-002). In case of analytical performances modification, calibrate the method again and contact the manufacturer if modifications are subsisting.

Proteins:	CONTROL	
	g/l	
	Target	Range
Albumin	25,0	20,00 - 30,00
Alpha1-Antitrypsin	0,81	0,65 - 0,97
Alpha1-Acid Glycoprotein	0,51	0,41 - 0,61
Alpha2-Macroglobulin	1,21	0,97 - 1,45
Antithrombin III*	0,17 ***	0,14 - 0,20 ***
Complement C3	0,94	0,75 - 1,13
Complement C4	0,16	0,13 - 0,19
Ceruloplasmin*	0,30 **	0,24 - 0,36 **
Haptoglobin	0,80	0,64 - 0,96
IgA	1,35	1,08 - 1,62
IgG	6,09	4,87 - 7,31
IgM	0,57	0,46 - 0,68
Prealbumin	0,16	0,13 - 0,19
Transferrin	1,58	1,26 - 1,90

**Multiparametric Control**

✓ REFERENCE

Multiparametric Low Control	MPCOS-002	1 x 2 ml	2-8°C
Human multiparametric biological fluid standardized from the reference ERM-DA470k/IFCC, sodium azide (< 1g/l)			
Lot #	16E29		
Expiry date	05/2020		
Control date	31/07/2018		
Quality control report #	DGM-QAC-REP-18065		
Document prepared and signed by	L. Ginneberge		



Values assigned from the reference ERM-DA470k/IFCC.

\*AT-III and Ceruloplasmin are referenced to external controls.

\*\* Values compatible with the new Ceruloplasmin reagent (since 17H24) and the calibrant MPREK (since 17H28). In case of doubt,

\*\*\* Values compatible with calibrant MPREK (since Lot17H28). In case of doubt, contact the manufacturer.



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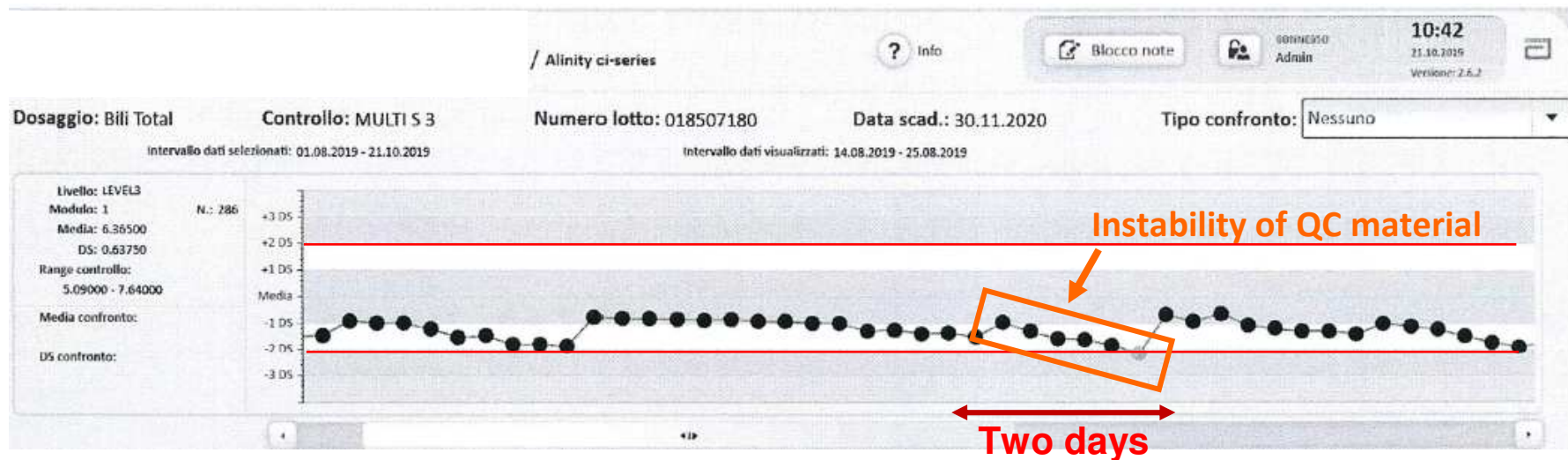
**DiAgam** Avenue Louis Lepoutre 70 – 1050 BRUSSELS Belgium

mail@diagam.com

Tel: +32 (0) 68 4 11 11 11

# Enough stability to monitor the performance of the measuring system

**EXAMPLE**



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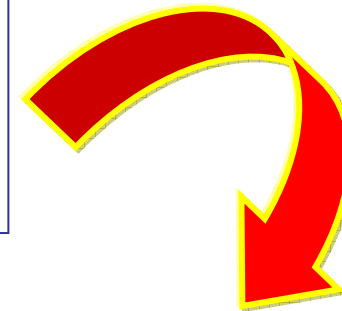
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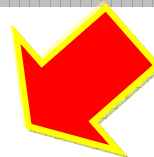
# Internal Quality Control CHARACTERISTICS

[Adapted from CLSI C24-A3]

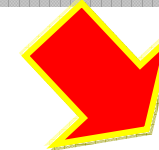
- Monitoring the reliability of analytical measurements according to defined rules for QC acceptability, with the identification of out-of-control conditions in real time
- Identifying situations when the measurement system may not be provide results suitable for use in medical decisions



Plan IQC strategies based on the performance needed to support the intended medical use of results



Select appropriate IQC material



Define appropriate interpretative criteria

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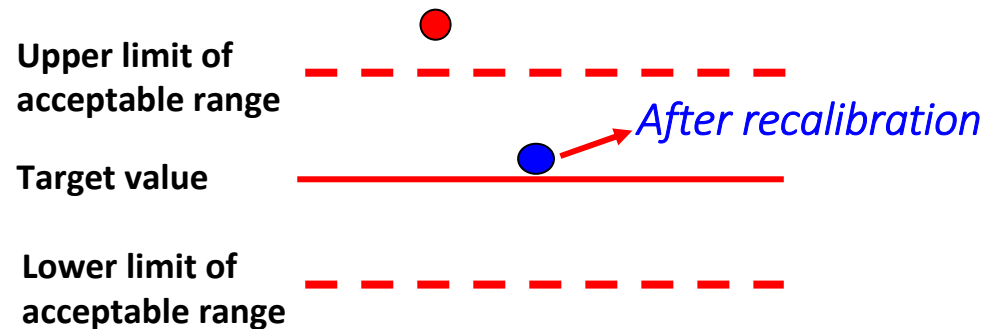
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# 1) MACROEVALUATION



THIS IS A ROLE OF END-USERS

Checking that the **single control value** is in the **ACCEPTABLE RANGE**.



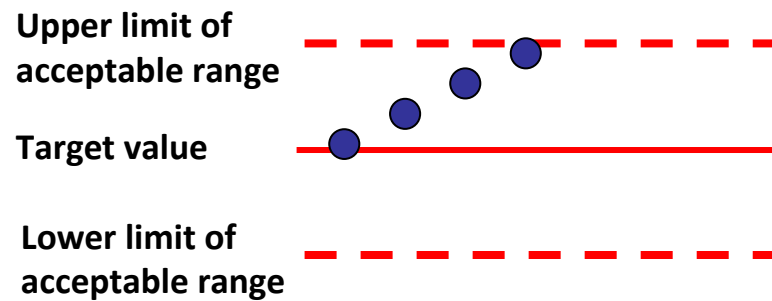
- ✓ Acceptance/rejection of the analytical run in 'real time'.
- ✓ Any "out of control" signal must promote immediate corrective actions to bring again the situation under control (i.e. within the acceptance range) and before results related to the samples analyzed in the affected analytical run are released.

## 2) LONGITUDINAL EVALUATION



**THIS IS A ROLE  
OF END-USERS**

Checking the **temporal trend of control values.**



**Frequency of control measurements:**

If measurements are performed in batches



Before and at the end of each analytical run

If measurements are performed continuously  
h24



Every 8 hours

## 2) LONGITUDINAL EVALUATION

### JUDGING CRITERIA



- a. Check for significant trend
- b. Evaluate the influence on random source of measurement uncertainty

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## 2) LONGITUDINAL EVALUATION

### JUDGING CRITERIA



- a. Check for significant trend**
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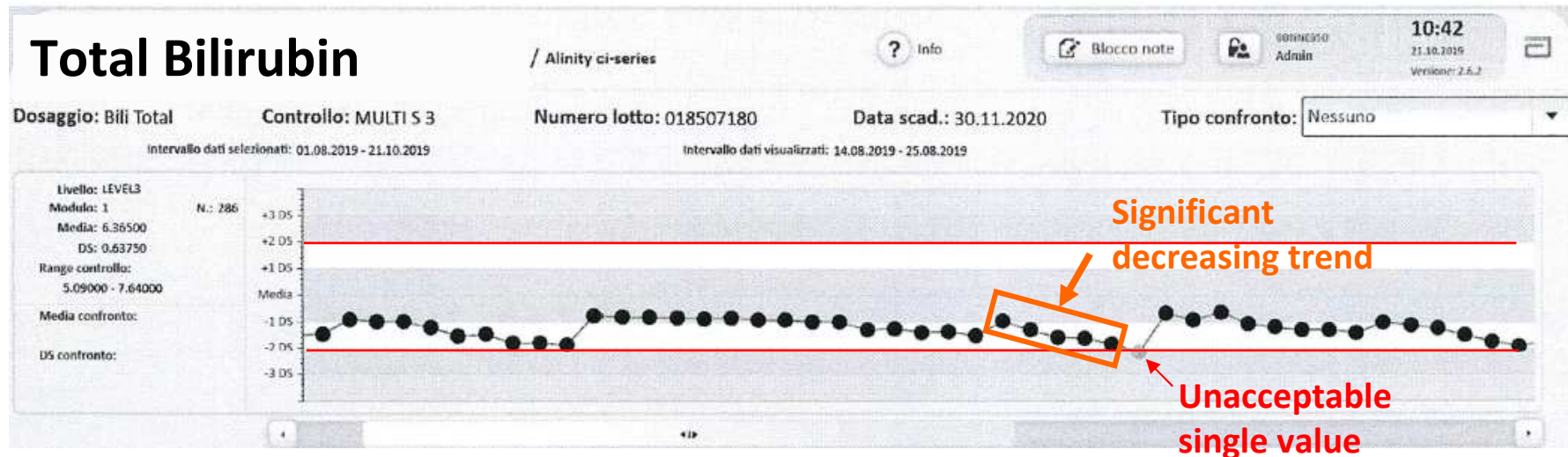


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**EXAMPLE**

# Check for significant trend



**MACRO EVALUATION:** Single control values are acceptable



**LONGITUDINAL EVALUATION:** The decreasing trend of two days data indicates an ongoing problem that becomes definitively evident at the macroevaluation only at the sixth measurement of the control material

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## 2) LONGITUDINAL EVALUATION

### JUDGING CRITERIA



**a. Check for significant trend**

**b. Evaluate the influence on random source  
of measurement uncertainty**

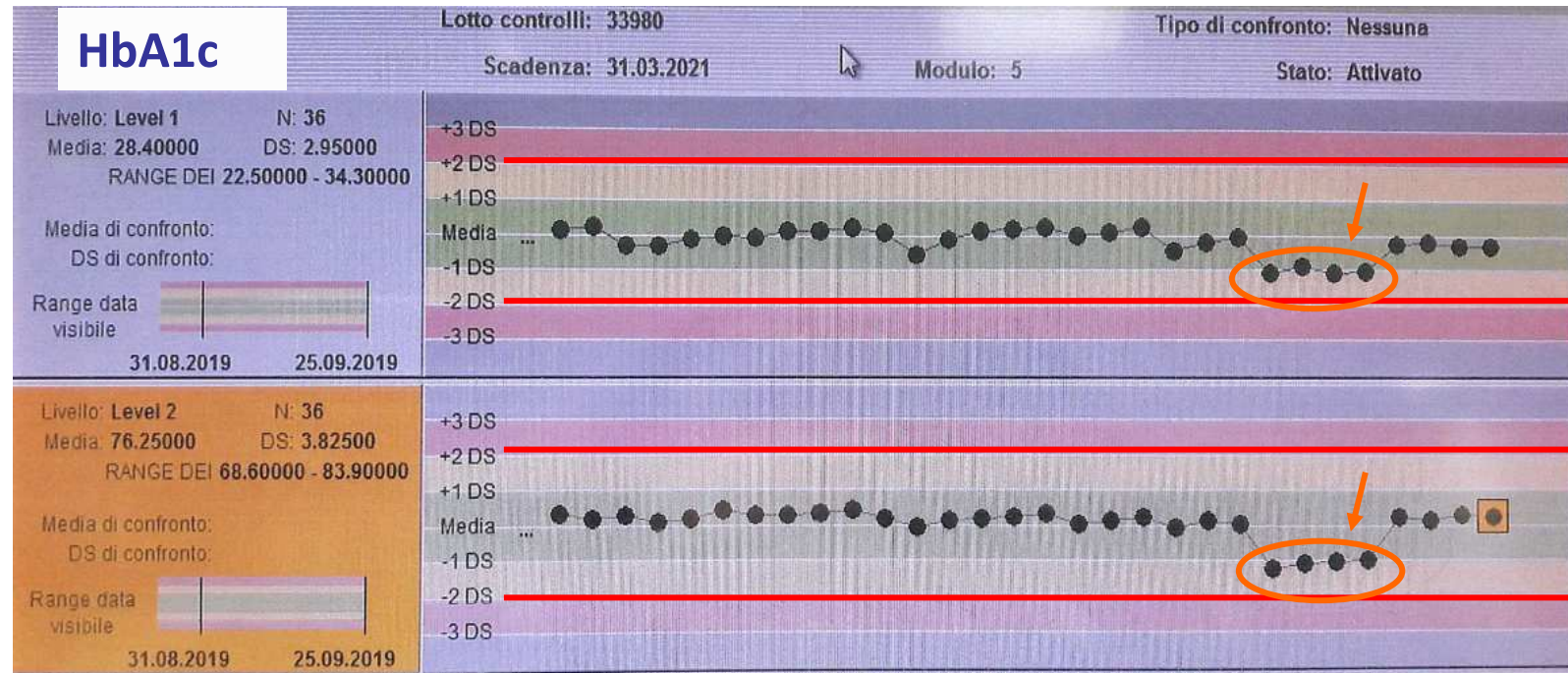
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**EXAMPLE**

# Impact of the influence of poor measuring system alignment on measurement uncertainty



**MACRO EVALUATION:** Single control values are always acceptable



**LONGITUDINAL EVALUATION:** The control shift has caused an unacceptable random MU

→ Monthly CV: 1.4% (vs 1.3% desirable goal)

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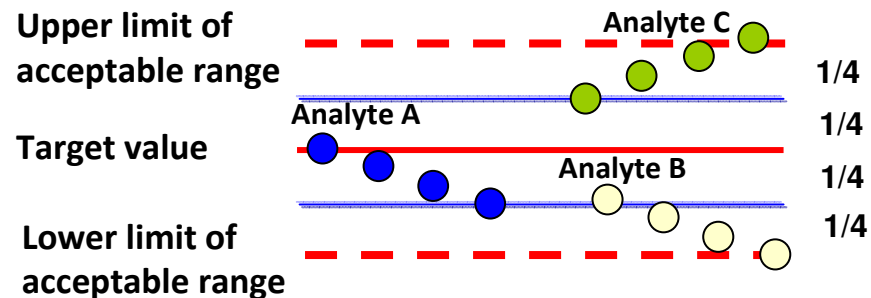


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# Proposed criteria (I)

## LONGITUDINAL EVALUATION

IQC TEMPORAL TREND: Considering at least 3 determination for reducing the influence of random error, it could be appropriate to consider an intervention when, after 4 measurements (e.g. 2 days), the IQC drift exceed  $1/4$  of the acceptability range.



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# Proposed criteria (II)

## LONGITUDINAL EVALUATION

SHIFT: Consider an intervention when after any change in the measuring system (e.g. reagent lot, calibration, technical intervention, etc.), a difference between two consecutive IQC results exceeds half of the performance specification for measurement uncertainty.

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# Conclusions



According to the European Regulation, the CE marking should ensure the availability for end-users of measuring systems correctly aligned to higher-order references

IVD manufacturers therefore assume total responsibility in terms of traceability of commercial measuring systems, including the responsibility in providing a QC material suitable for traceability verification and alignment surveillance

On the other hand, end-users should improve IQC interpretative criteria to apply prompt corrective actions if the performance of measuring system is worsening and may jeopardize the fulfilment of performance specifications for measurement uncertainty.





**GENERAL INFORMATION**

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**13<sup>th</sup> International Scientific Meeting  
 THE INTERNAL  
 QUALITY CONTROL IN  
 THE TRACEABILITY ERA**

MILANO, ITALY  
 November 28<sup>th</sup>, 2019

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**Thank you  
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**Sara Pasqualetti**