

Instructions: Instructor will supervise performance of skills by employee. All steps must be performed as indicated in order for competency to be determined adequate. Instructor will sign the form when all steps are performed correctly. The completed form is to be faxed to the Johns Hopkins Hospital Point-of-Care Testing Program Office, 410-502-1913. The original checklist is to be placed in the employee's personnel file.

	REQUIRED PERFORMANCE SKILLS
I.]	PRE-ANALYTICAL
A.	Specimen Requirements:
	1. States acceptable specimen type (throat swabs specimens only)
	Patient Assessment:
	1. Assesses patient for any recent antibiotic treatment or gargling with antiseptic mouthwash.
	Specimen Collection:
	1. Describes/demonstrates proper swab collection from tonsils / back of throat
	a. Assembles supplies/equipment
	b. Checks expiration dates of Rapid Strep A kit components/QC performed as required
	c. Greets patient professionally
	d. Identifies patient using two identifiers (name/date of birth)
	e. Washes hands; dons gloves.
	f. Explains procedure to patient and positions patient comfortably.
	g. Instructs patient to tilt head back and open mouth as wide as possible.
	h. Uses a two-swab sample collection process
	i. Depresses tongue with tongue blade
	j. Introduces first swab to back of throat/tonsil area without touching walls of buccal cavity
	k. Rubs swab back and forth over back of throat, around tonsils and over inflamed /pus discharging areas.
	1. Removes swab without touching tongue, cheeks, teeth or gums; places swab in sterile tube.
	m. Labels tube with two patient identifiers
	n. Repeats process using the second swab; places swab in a tube transport system (modified Stuart's medium).
	o. Labels tube with two patient identifiers; completes appropriate POE order/Pathology Requisition.
D.	Storage and Stability Requirements:
	1. States Rapid Strep A Kit storage and handling requirements
	a. Store at 2-30°C (35-86°F)
	b. Keep Test Device in original sealed pouch, out of direct sunlight until ready to use
	c. Do not freeze.
	d. Test Device and Extraction Reagents are stable through the expiration date printed on box
	e. Do not use beyond expiration date
	f. Date kit box and Reagent A and B bottles when opened.
	g. Date kit box when weekly external QC is performed
	h. Do not interchange materials from different product lots.
	2. States Control storage and handling requirements
	a. Store at 2-30°C (35-86°F)
	b. Date control bottles when opened.
	c. Do not use beyond expiration date.
II.	ANALYTICAL
A.	Quality Control Requirements:
	1. Must follow the manufacturer's instructions.
	2. States Internal Procedural Control performance frequency:
	a. Each QC test
	b. Each patient test
	3. States number and describes Internal Procedural Controls
	a. The reddish-purple Control Line must appear.
	b. The background must be clear



A. Quality Control Requirements (continued):
4. States number of External controls to be used.
a. Positive control
b. Negative control
5. States External QC performance frequency
a. When a new kit box is opened
b. Weekly
c. When a new lot number/shipment is received
d. When two consecutive "Invalid" results are obtained
B. Quality Control Procedure:
1. Dates test kit box, extraction reagent bottles, and controls when opened
2. Affixes a JHMI Quality Control Label to the newly opened test kit box
3. Checks expiration dates of test kit, extraction reagent bottles and controls.
4. Allows test kit components to reach room temperature if stored refrigerated
5. Properly records date, operator initials, lot numbers and expiration dates of test devices, extraction reagents and controls
6. Removes test device from sealed foil pouch and labels with level of control being tested.
7. From vertically held Reagent A bottle, dispenses 4 full drops into Extraction Well.
8. From vertically held Reagent B bottle, dispenses 4 full drops into Extraction Well.
9. Adds 1 full drop of <i>thoroughly mixed</i> control solution into Extraction Well, holding bottle vertically.
10. Places a new swab on the swab stand in the Extraction Well
11. While pressing down on the swab, spins the swab in one direction about 5 times to mix.
12. Leaves swab in the stand for 2 minutes.
13. While pressing down on the swab, spins the swab again in one direction about 5 times.
14. Removes and discards the swab into a JHMI-approved biohazard container.
15. Slowly raises the device until it's upright, keeping the other end of device in contact with flat surface.
16. Does not go past upright.
17. Lets stand 1-2 seconds.
18. Taps device on flat surface to ensure liquid in Extraction Well flows into hole.
19. Immediately after tapping, slowly lowers the device to original position.
20. Sets timer for 5 minutes
21. Reads result at 5minutes but not after 10 minutes.
22. Discards all disposables into a JHMI-approved biohazard container
23. Properly records results on the Rapid Strep A QC Log Sheet.
24. Repeats procedure on the other level of control solution.
25. Verifies quality control results are acceptable.
C. Quality Control Failures/ Corrective Action:
1. Verifies that all Quality Control results are within acceptable limits.
2. Repeats control when QC result falls outside of the acceptable range.
3. Records the repeated QC result on the Rapid Strep A QC Log Sheet.
4. Documents the corrective action(s) taken in the Comment Section on the Rapid Strep A QC Log Sheet.
5. Follows the troubleshooting guidelines in test procedure and documents all failed QC results and corrective actions on the
Rapid Strep A QC Log Sheet.
6. Suspends patient testing if Quality Control continues to fail.
7. Contacts the Point-of-Care Testing Program Office for assistance in resolving the failed quality control problems.
D. Patient Testing:
1. Checks the expiration dates of the test devices, extraction reagents and controls
2. Checks the JHMI QC Label affixed to the test kit box to verify that quality control has been performed on the box within the
previous week.
 If QC has not been performed, stops and performs QC on the test kit box. Records QC results on the Rapid Strep A QC Log Sheet.
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- 4. Allows test kit components to reach room temperature if stored refrigerated.
- 5. Removes test device from sealed foil pouch and labels device with $\frac{1}{2}$ patient identifiers.



D. Patient Testing (continued):									
6. From vertically held Reagent A bottle, dispenses 4 full drops into Extraction Well.									
7. From vertically held Reagent B bottle, dispenses 4 full drops into Extraction Well.									
8. Places specimen swab on the swab stand in the Extraction Well									
9. While pressing down on the swab, spins the swab in one direction about 5 times to mix.									
10. Leaves swab in the stand for 2 minutes.									
11. While pressing down on the swab, spins the swab again in one direction about 5 times.									
12. Removes and discards the swab into a JHMI-approved biohazard container.									
13. Slowly raises the device until it's upright, keeping the other end of device in contact with flat surface.									
14. Does not go past upright.									
15. Lets stand 1-2 seconds.									
16. Taps device on flat surface to ensure liquid in Extraction Well flows into hole.									
17. Immediately after tapping, slowly lowers the device to original position.									
18. Sets timer for 5 minutes									
19. Reads result at 5minutes but not after 10 minutes.									
20. Correctly interprets test result.									
21. Discards all disposables into a JHMI-approved biohazard container									
22. Sends the second swab for culture when the Rapid Strep A test result is negative.									
E. Interpretation of Results:									
1. Reads and clinically interprets the test results as follows:									
a. Positive: Control Line- present Test Line- present	Positive for Strep A								
b. Negative: Control Line- present Test Line- absent	Negative for Strep A or below detection								
	level of assay; Send culture to lab								
c. Invalid: Control Line- absent Test Line- present/absent	-								
Invalid: Background does not clear, making it difficult to read the result	Cannot be interpreted; Repeat test with new								
	swab; Send culture to lab if still invalid								
III. POST-ANALYTICAL									
A. Documentation of Patient Results:									
1. Records patient results on the Beckman Coulter ICON® SC Strep A Patient Results Log.									
2. Documents the performance results of the Internal Procedural Control with each patient's result.									
3. Records the test results in the patient's permanent record with the date, time and operator's initials and a checkmark ($$) or									
statement stating "QC okay" to note that the Internal Procedural Control performed appropriately and that acceptable									
external quality control was performed on that test kit box within the previous week.									
4. Results are to be recorded as Positive, POS, Negative, NEG or Invalid; symbols are not to be used.									
5. Notes results as a Point-of-Care test in order to differentiate these results from the	central laboratory results.								
B. Results Follow-up									
1. A negative ICON® SC Step A test result should be confirmed by a throat culture s									
2. If clinical signs and symptoms are not consistent with the Rapid Strep A test result,	, a follow-up throat culture and grouping								
procedure should be performed. C. Limitations of Test:									
1. Proper throat swabs must be obtained for good quality test results.									
 The ICON® SC Strep A test can detect non-viable as well as viable Group A Strep 	ntococcus bacteria. The test may therefore								
detect organisms which cannot be demonstrated in culture.	proceeds bacteria. The lest may dicterore								
3. A negative result may be obtained due to poor sample collection, or at the onset of	the disease due to a low antigen level below								
the sensitivity limit of the test.	and anscape due to a form antigen fever, below								
4. Test specimens heavily colonized with Staphylococcus aureus ($> 10^{10}$ CFU/mL)	can vield false positive results								
5. Excess blood, saliva, or mucus on the swab specimen may interfere with test result									
teeth, and any bleeding areas of the mouth with the swab when collecting specime									
6. The ICON® SC Strep A is for <i>in vitro</i> diagnostic use. The test should be used for									
swab specimens only. Neither the quantitative value nor the rate of increase in St									
determined by this qualitative test.									
7 Swah transported in liquid media prior to testing may result in reduced sensitivity due to dilution of organisms									

7. Swab transported in liquid media prior to testing may result in reduced sensitivity due to dilution of organisms.



C. Limita	ations of Test (continued):
	ryngitis can be caused by organisms other than Group A Streptococcus. This test does not provide any further information
abo	ut pharyngitis other than the possibility of Strep A infection.
9. Thi	s test does not differentiate between a carrier and an infected individual.
10. As y	with all diagnostic tests, all results must be interpreted together with other clinical information available to the physician.
D. Traini	ng
1. Init	tial training will include:
a.	Educator or Unit-base Training
	Passing a written test
с.	QC performance observed by Educator or Unit-based Trainer
d.	Documentation on Rapid Strep A Skills Checklist
E. Compe	etency Assessment
1. On	going competency will include:
	QC performed and passed once a year
b.	QC documented on single page competency sheet and filed in developmental resume
с.	Written test once a year
F. Profici	iency Testing
1. Pro	ficiency testing samples, supplied by an outside organization, will be performed 3 times a year using the ICON® SC
Stre	ep A test kit.
2. The	e performance of proficiency testing is to be rotated among trained operators
3. Pro	ficiency testing assesses the accuracy and reliability of test results.
4. A so	core of $\geq 80\%$ is considered acceptable performance.
5. Una	acceptable performance requires documented remedial action.



Name:			Employee ID#:					
Date:	Site:							
Written Test Score:		O Pass	O Fail	QC Practical:	O Pass	O Fail		

Test Kit		Positive Control (Acceptable Result: Positive/POS			Negative Control (Acceptable Result: Negative/NEG)			QC			
Lot #	Exp.Date	Lot #	Exp. Date	Result	Internal QC okay?	Lot #	Exp. Date	Result	Internal QC okay?	Pass (√)	Fail (v

All of my questions have been addressed and I feel confident in performing the test.								
Employee Signature:	Title:	Date:						
The employee has performed the test satisfactorily according to the standard operating procedure>								
Instructor Signature:	_ Title:	_ Date:						

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Reviewed: