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**EMAIL TO: cdm@cap.org**

# 2018 Gynecologic Cytology Proficiency Testing Order Details

- Use this page to select your testing dates and register proctors.
- See the CAP 2018 Catalog, PAP pages and PAP Shipping and Pricing for details.

## Testing Dates

This page is not to be used by those ordering PAP Education.  
You must indicate three testing sessions for your 2018 cytology proficiency testing. New proctors should be added to this form.  
The CAP will attempt to schedule your preference; however, we may assign an alternative session to you.

First Choice Session (Fill one.)			Second Choice Session (Fill one.)			Third Choice Session (Fill one.)		
<input type="radio"/> Feb 5	<input type="radio"/> May 21	<input type="radio"/> Sep 10	<input type="radio"/> Feb 5	<input type="radio"/> May 21	<input type="radio"/> Sep 10	<input type="radio"/> Feb 5	<input type="radio"/> May 21	<input type="radio"/> Sep 10
<input type="radio"/> Feb 20	<input type="radio"/> Jun 4	<input type="radio"/> Sep 24	<input type="radio"/> Feb 20	<input type="radio"/> Jun 4	<input type="radio"/> Sep 24	<input type="radio"/> Feb 20	<input type="radio"/> Jun 4	<input type="radio"/> Sep 24
<input type="radio"/> Mar 5	<input type="radio"/> Jun 18	<input type="radio"/> Oct 9	<input type="radio"/> Mar 5	<input type="radio"/> Jun 18	<input type="radio"/> Oct 9	<input type="radio"/> Mar 5	<input type="radio"/> Jun 18	<input type="radio"/> Oct 9
<input type="radio"/> Mar 19	<input type="radio"/> Jul 9	<input type="radio"/> Oct 22	<input type="radio"/> Mar 19	<input type="radio"/> Jul 9	<input type="radio"/> Oct 22	<input type="radio"/> Mar 19	<input type="radio"/> Jul 9	<input type="radio"/> Oct 22
<input type="radio"/> Apr 2	<input type="radio"/> Jul 23	<input type="radio"/> Nov 5	<input type="radio"/> Apr 2	<input type="radio"/> Jul 23	<input type="radio"/> Nov 5	<input type="radio"/> Apr 2	<input type="radio"/> Jul 23	<input type="radio"/> Nov 5
<input type="radio"/> Apr 16	<input type="radio"/> Aug 6	<input type="radio"/> Nov 26	<input type="radio"/> Apr 16	<input type="radio"/> Aug 6	<input type="radio"/> Nov 26	<input type="radio"/> Apr 16	<input type="radio"/> Aug 6	<input type="radio"/> Nov 26
<input type="radio"/> May 7	<input type="radio"/> Aug 20		<input type="radio"/> May 7	<input type="radio"/> Aug 20		<input type="radio"/> May 7	<input type="radio"/> Aug 20	

## Proctors

All laboratories providing their own proctors must complete this form.

## Proctors Information

All proctors will read the proctor packet instructions, take the proctor examination annually, and perform the duties of the proficiency testing proctor.

1.  Mr.  Ms.  Mrs.  Dr. First/Given Name  Last/Family Name   CT  MD  MT  Other \_\_\_\_\_

Email

Signature \_\_\_\_\_

2.  Mr.  Ms.  Mrs.  Dr. First/Given Name  Last/Family Name   CT  MD  MT  Other \_\_\_\_\_

Email

Signature \_\_\_\_\_

3.  Mr.  Ms.  Mrs.  Dr. First/Given Name  Last/Family Name   CT  MD  MT  Other \_\_\_\_\_

Email

Signature \_\_\_\_\_

4.  Mr.  Ms.  Mrs.  Dr. First/Given Name  Last/Family Name   CT  MD  MT  Other \_\_\_\_\_

Email

Signature \_\_\_\_\_

I certify that the selected individuals meet the criteria specified and are capable of performing the duties and responsibilities of the proficiency testing proctor.

Signature of Lab Director or Designee

Date





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# 2018 Laboratory Improvement Programs Order Form

**To order these new programs, specify the quantity.**

New Program Description	Quantity	Unit Price (USD)	Extended Amount	New Program Description	Quantity	Unit Price (USD)	Extended Amount
<b>Quality Management Tools</b>				<b>Immunology and Flow Cytometry</b>			
Physician Satisfaction w/ Clin Lab Services (QP181)	□□			Alpha-2-Macroglobulin (A2MG)	□□		
Laboratory Staff Turnover (QP182)	□□			B-ALL Minimal Residual Disease (BALL)	□□		
Tech Competency Assess of Body Fluid (QP183)	□□			Flow Cytometry, Plasma Cell Neoplasms (PCNEO)	□□		
Lab Result TAT for ER Specimens (QP184)	□□			<b>Genetics and Molecular Pathology</b>			
<b>Quality Cross Check</b>				Cell Free DNA (CFDNA)	□□		
Quality Cross Check—Reticulocyte (RTQ)	□□			IGHV Mutation Analysis (IGHV)	□□		
Quality Cross Check—Reticulocyte (RT2Q)	□□			NGS Undiagnosed Disorders-Exome (NGSE)	□□		
Quality Cross Check—Reticulocyte (RT3Q)	□□			NGS Bioinformatics Somatic Validated Material (NGSBV)	□□		
Quality Cross Check—Reticulocyte (RT4Q)	□□			RNA Sequencing (RNA)	□□		
<b>Endocrinology</b>				Variant Interpretation Only (VIP)	□□		
Noninvasive Prenatal Testing (NIPT)	□□			VIP, Addl Participant (VIP1)	□□		
<b>Toxicology</b>				<b>Anatomic Pathology</b>			
Trace Metals, Whole Blood (TMWB)	□□			Autopsy Pathology, Addl Pathologist (AUP1)	□□		
<b>Coagulation</b>				CAP/NSH Gynecologic Biopsy (HQBx4)	□□		
Apixaban Anticoagulation Monitoring (APXBN)	□□			CAP/NSH HistoQIP Mismatch Repair IHC (HQMMR)	□□		
<b>Microbiology</b>				HQIP Non-small Cell Lung Carcinoma IHC (HQNSC)	□□		
MRSA Screen, Molecular, 2 Challenge (MRS2M)	□□						
MRSA Screen, Molecular, 5 Challenge (MRS5M)	□□						
Expanded Parasitology (PEX)	□□						
Vector-Borne Disease-Molecular (VBDM)	□□						

**Please allow 5 business days to process your renewal order.**

Page Total (USD) \$ \_\_\_\_\_





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# 2018 Laboratory Improvement Programs Order Form

To order these new programs, specify the quantity.

New Program Description	Quantity	Unit Price (USD)	Extended Amount	New Program Description	Quantity	Unit Price (USD)	Extended Amount
<b>Benchtop Reference Guides</b>				<b>CAP QMED Online Education (One-year license)</b>			
Arthropod Benchtop Reference Guide (ABRG)	<input type="text"/>		_____	15189 Walkthrough (ISOEDWT)	<input type="text"/>		_____
Body Fluids Benchtop Reference Guide (BFBRG)	<input type="text"/>		_____	QMS Implementation Roadmap (ISOEDRM)	<input type="text"/>		_____
Gram Stain Benchtop Reference Guide (GSBRG)	<input type="text"/>		_____	Root Cause Analysis (ISOEDRC)	<input type="text"/>		_____
Hematology Benchtop Reference Guide (HBRG)	<input type="text"/>		_____	Internal Auditing (ISOEDIA)	<input type="text"/>		_____
Mycology Benchtop Reference Guide (MBRG)	<input type="text"/>		_____	Document Control (ISOEDDC)	<input type="text"/>		_____
Parasitology Benchtop Reference Guide (PBRG)	<input type="text"/>		_____	Quality Manual Development (ISOEDQM)	<input type="text"/>		_____
Urinalysis Benchtop Reference Guide (UABRG)	<input type="text"/>		_____	Management Review (ISOEDMR)	<input type="text"/>		_____
<b>Competency Assessment Program with Safety &amp; Compliance Courses</b>				Mistake Proofing (ISOEDMP)	<input type="text"/>		_____
Competency Assessment Program (CA0050)	<input type="text"/>		_____	Quality Culture (ISOEDCL)	<input type="text"/>		_____
Competency Assessment Program (CA0250)	<input type="text"/>		_____	All 9 QMED Courses, 25% discount (ISOEDAL)	<input type="text"/>		_____
Competency Assessment Program (CA0050) with Safety & Compliance courses (XCA0050)	<input type="text"/>		_____				
Competency Assessment Program (CA0250) with Safety & Compliance courses (XCA0250)	<input type="text"/>		_____				

Please allow 5 business days to process your renewal order.

Page Total (USD) \$ \_\_\_\_\_



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## 2018 Laboratory Improvement Programs Order Form

**Enter the appropriate program code and quantity to order. (Note: The CAP will apply appropriate S/H charges.)**

Program Code	Description	Quantity	Unit Price	Extended Amount
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		
<input type="text"/>		<input type="text"/>		

Please allow 5 business days to process your renewal order.

Thank You!

Page Total \_\_\_\_\_

Subtotal from  
Prior Page(s) \_\_\_\_\_

Estimated Sales  
Tax\* \_\_\_\_\_

Fuel Surcharge \_\_\_\_\_

Order Total \_\_\_\_\_

\*Actual sales tax will be calculated based upon your ship-to address and the taxability of the items purchased. Duties, taxes and other fees are the responsibility of the customer at the time of delivery.

