

Intended Result	Your Report	Your Score
Specimen 8323 <i>Plasmodium</i> sp. other than <i>P. falciparum</i>	<i>Plasmodium</i> sp. other than <i>P. falciparum</i>	2
Specimen 8324 Negative for malaria	Negative for malaria	2

Cumulative score information

Total number of specimens sent to you for **UK NEQAS for Malaria rapid** over the last 2 distributions is 4
For these distributions specimen numbers 8036 8037 8323 8324 have been analysed and scored.

Number of reports analysed 4
Number of specimens reported as not examined (not scored) 0
Number of specimens received too late for analysis (not scored) 0
Number of specimens for which no report was received (scored as 0) 0
Your cumulative score for these specimens was 8 out of a possible total of 8

The mean score calculated from the reports returned by **UK** laboratories was 7.18 with a standard error of 1.75

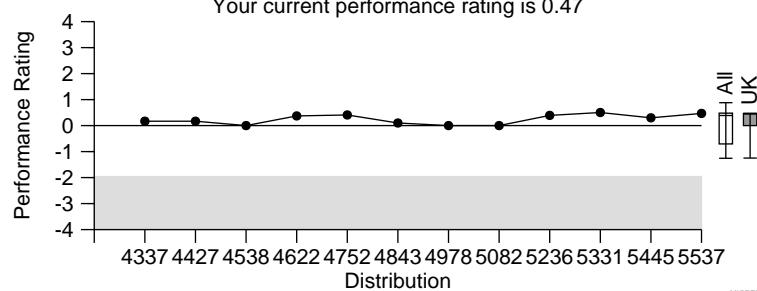
Performance rating

Your performance rating for **UK NEQAS for Malaria rapid** (i.e. the number of standard errors by which your cumulative score lies above or below the mean for **UK** laboratories) is 0.47.

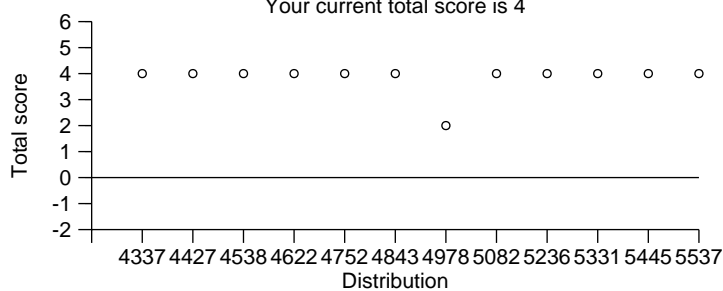
A performance rating of more than 1.96 standard errors below the mean indicates possible poor performance.
Your performance rating may change if other participants' results are amended.

No score penalty is incurred for non-return of reports. However non- return of results may be used as a measure of poor performance.

Your performance rating over the past 12 distributions
Your current performance rating is 0.47



Total score you achieved for the last 12 distributions
Your current total score is 4



Turnaround time: The time taken to report your results was 16 day(s). This information is provided for your own use and does not form part of your performance assessment.

Comments

The overall performance for specimen 8323 was disappointing with only 62.8% of participants reporting fully correct results. The specimen contained *Plasmodium vivax*. This emphasises the importance of continuing to examine blood films to diagnose malaria. If the RDT and blood film results disagree, referral to a Malaria Reference Laboratory is recommended. The overall performance for specimen 8324 was excellent with 99.1% of participants reporting fully correct results.

The figures in the histograms and those in the overall results tables may differ (1) due to exclusion of kits displayed in the histograms resulting in apparently lower numbers of data sets in the histograms or (2) due to participants using more than one kit resulting in higher numbers of data sets in the histograms.

It was noted that many participants did not specify their kit details. Participants are advised to indicate which kit they use so that reports display accurate information. If the kit you use is not specified in the kit list displayed on the web reply form, please email organiser@ukneqas.org.uk with details of your kit.

NB A note of caution *Plasmodium falciparum* strains with HRP2/3 deletions are well established, such that HRP2 based RDTs cannot be relied upon to detect all cases of falciparum malaria. This has major implications for health care and threatens efforts to control and eliminate this condition. Please read the following open access manuscript: Watson OJ, Tran TN, Zupko RJ, Symons T, Thomson R, Visser T, Rumisha S, Dzianach PA, Hathaway N, Kim I, Juliano JJ, Bailey JA, Slater H, Okell L, Gething P, Ghani A, Boni MF, Parr JB, Cunningham J. Global risk of selection and spread of *Plasmodium falciparum* histidine-rich protein 2 and 3 gene deletions. medRxiv [Preprint]. 2023 Oct 31:2023.10.21.23297352. doi: 10.1101/2023.10.21.23297352. PMID: 37905102; PMCID: PMC10615018.

Implications for UK practice Practitioners should follow the British Society for Haematology guidelines for the laboratory diagnosis of malaria (open access at <https://onlinelibrary.wiley.com/doi/full/10.1111/bjh.18092>) which state: **Rapid diagnostic tests (RDTs) for malarial antigen cannot replace microscopy but can be useful as a supplementary test when malaria diagnosis is performed by relatively inexperienced staff. They should not be used instead of a film at any time, including out of hours (1B).**

Pre-distribution results are available should you experience a technical failure and wish to discuss the results.

Repeat specimens

Repeat specimens can be supplied on request from organiser@ukneqasmicro.org.uk and participants are asked to request these, quoting their laboratory number, as soon as the intended results are displayed on the web or on receipt of their report.

Enquiries

Telephone and written enquiries can be made to Mrs Agatha Christie Saez: ++44 (0)20 39081371

Email address: organiser@ukneqasmicro.org.uk

This report was authorized by Professor P L Chiodini (Parasitology Scheme Organizer) and Mrs Agatha Christie Saez (Healthcare Scientist Team Manager and Quality Lead).

Participants are reminded that their Laboratory ID number should be quoted in all correspondence.



After the examination of 6 specimens taken at random, the following results were obtained at the UK NEQAS Parasitology lab using the following kits:

Specimen 8323:
Binax NOW: *Plasmodium ovale*, *Plasmodium vivax* and *Plasmodium malariae*

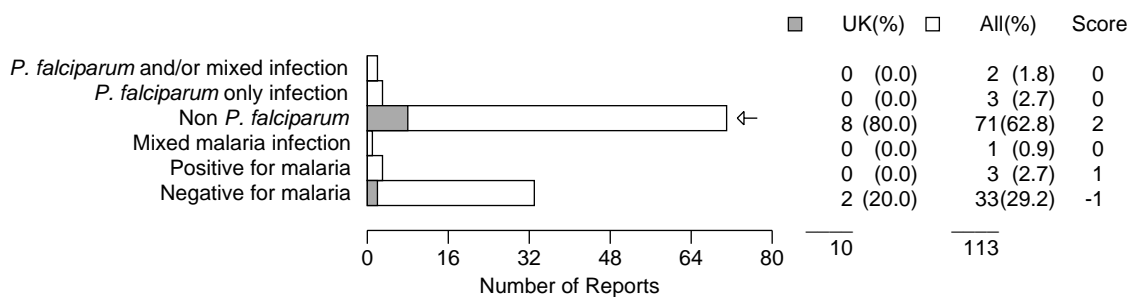
CareUs: *Plasmodium ovale*, *Plasmodium vivax* and *Plasmodium malariae*

Specimen 8324:
Binax NOW: Negative for malaria antigen

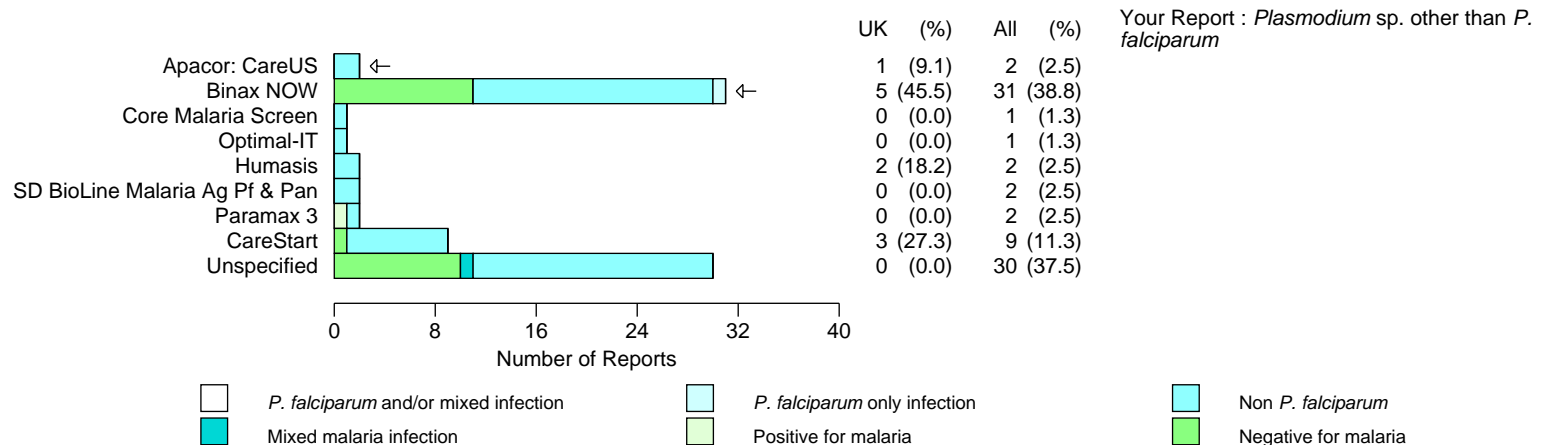
CareUs: Negative for malaria antigen

The results of both specimens were also confirmed by the polymerase chain reaction method.

Specimen : 8323 *Plasmodium* (non- falciparum): *Plasmodium vivax*



Specimen : 8323 *Plasmodium* (non- falciparum): *Plasmodium vivax*



Specimen : 8324 No malaria antigens present

