



National Health Laboratory Service D-Dimer Proficiency Testing Scheme

RESULT SHEET

PLEASE USE THIS RESULT SHEET UNTIL D-DIMER PTS WEB IMPLEMENTATION

Survey number		

Participant name and participant code number must be entered to be assessed			
Participant laboratory name:	Code number:		
Received: (DD/MM/YY)	Date of		
	analysis(DD/MM/YY)		

Methodology		
I		
Instrument		
Serial number		
Reagents		
Reference range		

Reporting of your laboratory's D-Dimer results (please tick relevant box)			
D-Dimer mg/L			
FEU mg/L			

Sample number	Result (D-Dimer mg/L or FEU mg/L)	Interpretation	Please tick
Sample 1		Above cut off	
		Below cut off	
Sample 2		Above cut off	
		Below cut off	

Comments

Date	Name(Please print)		Signature
Telephone numbe	r		e-mail address
	-		