

National Health Laboratory Service
Academic Affairs Research and Quality Assurance
Private Bag X4,
Sandringham
2131

email: bactpts.nhls.ac.za
Fax number: 086 225 2460

NHLS Specific Treponemal Syphilis Serology Proficiency Testing Scheme
Please make sure all the following details are completed or your response will not be evaluated. If you are unsure, please request your laboratory code via bactpts@nhls.ac.za

Survey No:		Closing Date:	
Shipment Date:		Receipt Date of:	
Laboratory Code:		Telephone no:	
Processing Date:			

Sample	Results	Name of kit used (e.g. MacroVue)
Sample ST01		
Sample ST02		
Sample ST03		

Please email the completed form to bactpts@nhls.ac.za or fax it to +27 (0) 86 225 2460

Please provide contact telephone and email where all PT communication in connection to this scheme can be addressed.

Laboratory Contact Name: _____

Email: _____