


<b>Policy</b>		
 <b>LABORATORY ACCREDITATION BUREAU</b>	Subject: Proficiency Testing	Policy 002
Written by: Ryan Fischer	Revision No: 8 Date: 10/31/06	Page 1 of 4

## **PURPOSE**

The purpose of the policy is to define the requirements for proficiency testing (PT) in order to obtain accreditation and to maintain accreditation by Laboratory Accreditation Bureau, LLC (L-A-B).

## **SCOPE**


Laboratories that wish to become accredited and maintain their accreditation are responsible for participating in a proficiency testing, interlaboratory comparison or a round robin testing program that will meet the requirements of L-A-B and the International Laboratory Accreditation Cooperation (ILAC).

L-A-B maintains a listing of acceptable PT program providers on the L-A-B website. This listing should be reviewed by the laboratory to determine when changes are made and on a periodic basis.


L-A-B strongly encourages the use of an “Accredited” PT provider over another, albeit acceptable PT provider, simply because Accreditation of the program provides additional confidence to the user of the PT program. It is always permissible however, for any of the PT providers on the L-A-B list to be used where they have a program that is operated in conformance with Guide 43-1 for the parameter in question.

## **POLICY**

- A. Applicant laboratories must have performed satisfactorily in one approved PT / ILC under their proposed scope of accreditation before accreditation can be granted.
- B. Accredited laboratories must complete one proficiency test per Major Field Parameter with the Related Discipline of Testing and / or Calibration every four years in order to maintain their accredited status. (It is recommended that each laboratory participate in at least 25% of their scope per year.) The Major Fields with their Related Disciplines for both testing and calibration are defined in the Policy 002.1 L-A-B Major Field Parameter with Related Discipline.

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- C. Accredited laboratories with more than four Major Fields with Related Disciplines per Policy 002.1 on their accredited scope are required to participate in a minimum of two approved PT / ILC's in each year of their accreditation. Accredited laboratories with four or less major fields with related discipline per Policy 002.1 on their accredited scopes are required to participate in a minimum of one approved PT / ILC's per year.
- D. **Testing Laboratories Only:** If the laboratory has determined there are no Accredited PT / ILC programs available for a particular test listed on their scope of accreditation as defined by the Policy 002.1 L-A-B Major Field Parameter or Related Disciplines. The laboratory **MUST** have a program that meets the requirements of section 5.9 of ISO / IEC 17025:2005. This may consist of comparisons with other laboratories, internal performance-based checks, which include but are not limited to, types of activities such as: regular use of certified reference materials and / or internal quality control using secondary reference materials; replicate tests using the same or different methods; re testing of retained items; and correlation of results for different characteristics of an item.
- E. Any proficiency test, interlaboratory comparison or round robin PT / ILC that does NOT utilize one of these approved PT providers must have the "Proficiency Scheme" approved by L-A-B prior to starting the proficiency test. The scheme shall be provided to L-A-B Operations on L-A-B Form 28.14 – PT / ILC Application for Non PT Provider Schemes. The application and supporting documents will be judged against the requirements of ILAC G13, ISO/IEC Guide 43-1 and section 5.9 of ISO / IEC 17025:2005. Any application that does not meet the requirements will not be approved. Laboratory must show evidence that no accredited PT services are available.
- F. The laboratory is required to complete and maintain an up to date L-A-B Form 28.12 – PT / ILC Tracking Form when participating in an approved PT / ILC program. This schedule must be provided to L-A-B and will be reviewed by the L-A-B PT / ILC Manager or designee and be approved by L-A-B. L-A-B will track the schedules of their accredited labs ensuring all accredited laboratories comply with their proposed schedule. Laboratories that fail to comply with their schedule will have a non-conformance issued to them.
- G. Laboratories are required to investigate as per section 4.9 of ISO 17025 unsuccessful results of PT / ILC parameters, and if necessary take corrective action. These investigations and corrective actions of unsatisfactory results shall be submitted to LAB along with the PT / ILC results.

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### **ASSESSOR EVALUATION OF PT RESULTS**

- 1) The laboratory shall have all of their current and past PT / ILC results available for the assessor to review. The current years PT / ILC results shall be provided to the assessor for submission as part of the assessment package. In addition, laboratory must provide evidence that an approved PT provider was utilized for the test or an approved (by L-A-B) PT / ILC Application Form 28.14 was utilized to perform the test. This approval must occur prior to the onset of the PT / ILC. If proof is not available a non-compliance shall be written.
- 2) The assessor shall evaluate the current year results of the PT / ILC to verify that the laboratory has successfully completed the PT / ILC and submit those results with the technical package to L-A-B Operations.
- 3) If any unsatisfactory results are evident a review must assure the laboratory investigated as per section 4.9 of ISO 17025 unsuccessful results of PT / ILC parameters and if necessary, take corrective action.

### **SUBMISSION OF RESULTS**


The laboratory is required to submit current results to L-A-B for all proficiency tests, interlaboratory comparisons and round robins after participating. All results must be submitted to L-A-B within thirty days of receiving performance results. Laboratories are required to fully document their analysis of all results and have available for the assessor to review during the assessment.

Hard copy results may be mailed to:

Laboratory Accreditation Bureau  
11627 Coldwater Road  
Fort Wayne, IN 46846 Ste 101  
Attn: PT-ILC Results

Electronic Results may be e-mailed to:

[www.pt-ilc@l-a-b.com](mailto:www.pt-ilc@l-a-b.com)

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## REVISION HISTORY

Revision Level	Rev. Date	Revised By	Brief Description of Revision
Original Issue	2/6/01	Lynne Neumann	Original Issue
1	9/5/01	Chuck Ellis	Revised to reflect current international practices, and assign responsibilities.
2	01/07/03	Lynne Neumann	Added necessity of submitting CAR for unsuccessful parameters. Removed reference to SOP 109 which is obsolete.
3	03/15/04	Ryan Fischer	Clarified encouragement for use of Accredited PT providers over non-accredited
4	12/05/04	TAG Exec Committee	Modified Responsibilities and Fields with Major disciplines.
5	10/25/05	Ryan Fischer	Minor Field additions per TAG recommendations
6	03/03/06	Jason Stine	Reformatted Major Fields for Mechanical Testing
7	07/18/06	Doug Leonard	Added Microbiological under testing Major Field
8	10/31/06	Jason Stine	Added to the Scope section first paragraph "meet the requirements of L-A-B and the International Laboratory Accreditation Cooperation (ILAC)." Complete revision of section "D" and "E" Added to the Assessor Evaluation of PT Results section paragraph 1 "Current PT / ILC results shall be provided to the assessor for submission as part of the assessment package." Deleted the responsibilities of the PT/ILC Manager and made the submission of results a stand alone paragraph Added "Submission of Results" section

**APPROVED:**



**DATE: 10/31/06**