- (2) Each day of use (unless otherwise specified in this subpart), test staining materials for intended reactivity to ensure predictable staining characteristics. Control materials for both positive and negative reactivity must be included, as appropriate.
- (3) Check fluorescent and immunohistochemical stains for positive and negative reactivity each time of use.
- (4) Before, or concurrent with the initial use—
- (i) Check each batch of media for sterility if sterility is required for testing;
- (ii) Check each batch of media for its ability to support growth and, as appropriate, select or inhibit specific organisms or produce a biochemical response; and
- (iii) Document the physical characteristics of the media when compromised and report any deterioration in the media to the manufacturer.
- (5) Follow the manufacturer's specifications for using reagents, media, and supplies and be responsible for results.
- (f) Results of control materials must meet the laboratory's and, as applicable, the manufacturer's test system criteria for acceptability before reporting patient test results.
- (g) The laboratory must document all control procedures performed.
- (h) If control materials are not available, the laboratory must have an alternative mechanism to detect immediate errors and monitor test system performance over time. The performance of alternative control procedures must be documented.

 $[68~{\rm FR}~3703,~{\rm Jan.}~24,~2003;~68~{\rm FR}~50724,~{\rm Aug.}~22,~2003]$ 

#### §493.1261 Standard: Bacteriology.

- (a) The laboratory must check the following for positive and negative reactivity using control organisms:
- (1) Each day of use for beta-lactamase methods other than Cefinase $^{TM}$ .
  - (2) Each week of use for Gram stains.
- (3) When each batch (prepared inhouse), lot number (commercially prepared), and shipment of antisera is prepared or opened, and once every 6 months thereafter.
- (b) For antimicrobial susceptibility tests, the laboratory must check each

- batch of media and each lot number and shipment of antimicrobial agent(s) before, or concurrent with, initial use, using approved control organisms.
- (1) Each day tests are performed, the laboratory must use the appropriate control organism(s) to check the procedure.
- (2) The laboratory's zone sizes or minimum inhibitory concentration for control organisms must be within established limits before reporting patient results.
- (c) The laboratory must document all control procedures performed, as specified in this section.

#### § 493.1262 Standard: Mycobacteriology.

- (a) Each day of use, the laboratory must check all reagents or test procedures used for mycobacteria identification with at least one acid-fast organism that produces a positive reaction and an acid-fast organism that produces a negative reaction.
- (b) For antimycobacterial susceptibility tests, the laboratory must check each batch of media and each lot number and shipment of antimycobacterial agent(s) before, or concurrent with, initial use, using an appropriate control organism(s).
- (1) The laboratory must establish limits for acceptable control results.
- (2) Each week tests are performed, the laboratory must use the appropriate control organism(s) to check the procedure.
- (3) The results for the control organism(s) must be within established limits before reporting patient results.
- (c) The laboratory must document all control procedures performed, as specified in this section.

## § 493.1263 Standard: Mycology.

- (a) The laboratory must check each batch (prepared in-house), lot number (commercially prepared), and shipment of lactophenol cotton blue when prepared or opened for intended reactivity with a control organism(s).
- (b) For antifungal susceptibility tests, the laboratory must check each batch of media and each lot number and shipment of antifungal agent(s) before, or concurrent with, initial use, using an appropriate control organism(s).

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- (1) The laboratory must establish limits for acceptable control results.
- (2) Each day tests are performed, the laboratory must use the appropriate control organism(s) to check the procedure.
- (3) The results for the control organism(s) must be within established limits before reporting patient results.
- (c) The laboratory must document all control procedures performed, as specified in this section.

### §493.1264 Standard: Parasitology.

- (a) The laboratory must have available a reference collection of slides or photographs and, if available, gross specimens for identification of parasites and use these references in the laboratory for appropriate comparison with diagnostic specimens.
- (b) The laboratory must calibrate and use the calibrated ocular micrometer for determining the size of ova and parasites, if size is a critical parameter.
- (c) Each month of use, the laboratory must check permanent stains using a fecal sample control material that will demonstrate staining characteristics.
- (d) The laboratory must document all control procedures performed, as specified in this section.

## § 493.1265 Standard: Virology.

- (a) When using cell culture to isolate or identify viruses, the laboratory must simultaneously incubate a cell substrate control or uninoculated cells as a negative control material.
- (b) The laboratory must document all control procedures performed, as specified in this section.

# §493.1267 Standard: Routine chemistry.

For blood gas analyses, the laboratory must perform the following:

- (a) Calibrate or verify calibration according to the manufacturer's specifications and with at least the frequency recommended by the manufacturer.
- (b) Test one sample of control material each 8 hours of testing using a combination of control materials that include both low and high values on each day of testing.

- (c) Test one sample of control material each time specimens are tested unless automated instrumentation internally verifies calibration at least every 30 minutes.
- (d) Document all control procedures performed, as specified in this section.

#### § 493.1269 Standard: Hematology.

- (a) For manual cell counts performed using a hemocytometer—
- (1) One control material must be tested each 8 hours of operation; and
- (2) Patient specimens and control materials must be tested in duplicate.
- (b) For all nonmanual coagulation test systems, the laboratory must include two levels of control material each 8 hours of operation and each time a reagent is changed.
  - (c) For manual coagulation tests—
- (1) Each individual performing tests must test two levels of control materials before testing patient samples and each time a reagent is changed; and
- (2) Patient specimens and control materials must be tested in duplicate.
- (d) The laboratory must document all control procedures performed, as specified in this section.

# § 493.1271 Standard: Immunohematology.

- (a) Patient testing. (1) The laboratory must perform ABO grouping, D(Rho) typing, unexpected antibody detection, antibody identification, and compatibility testing by following the manufacturer's instructions, if provided, and as applicable, 21 CFR 606.151(a) through
- (2) The laboratory must determine ABO group by concurrently testing unknown red cells with, at a minimum, anti-A and anti-B grouping reagents. For confirmation of ABO group, the unknown serum must be tested with known A1 and B red cells.
- (3) The laboratory must determine the D(Rho) type by testing unknown red cells with anti-D (anti-Rho) blood typing reagent.
- (b) Immunohematological testing and distribution of blood and blood products. Blood and blood product testing and distribution must comply with 21 CFR 606.100(b)(12); 606.160(b)(3)(ii) and (b)(3)(v); 610.40; 640.5(a), (b), (c), and (e); and 640.11(b).