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## Point of Care Testing (POCT) Inspection Checklist-Final

| Name of the Facility: |   |   |  |
|-----------------------|---|---|--|
| Date of Inspection:   | / | / |  |

| Ref.   | Description   | Yes | No | N/A | Remarks |
|--------|---|-----|----|-----|---------|
| 5      | STANDARD ONE: GENERAL REQUIREMENTS                          |     |    |     |         |
|        | Licensed health facilities shall list the POCTs offered and |     |    |     |         |
| 5.2    | have them visibly placed for patient access and have a      |     |    |     |         |
|        | documented quality control program.                         |     |    |     |         |
| 6      | STANDARD TWO: HEALTH FACILITY REQUIREMENTS                  |     |    |     |         |
| 6.6    | The basic POCT list includes the following, but not         |     |    |     |         |
| 0.0    | limited to:   |     |    |     |         |
| 6.6.1  | Blood glucose glucometer                                    |     |    |     |         |
| 6.6.2  | HbA1c measurement   |     |    |     |         |
| 6.6.3  | Urine pregnancy tests                                       |     |    |     |         |
| 6.6.4  | Haemoglobin and Haematocrit (by finger prick)               |     |    |     |         |
| 6.6.5  | Urine dip stick for urine analysis                          |     |    |     |         |
|        | Cardiac Troponin (FDA and/CE marked analysers) for          |     |    |     |         |
| 6.6.6  | myocardial infarction detection, Myoglobin and Fatty        |     |    |     |         |
|        | Acid Binding Protein (FABP)                                 |     |    |     |         |
| 6.6.7  | Full Blood count/ Complete Blood count                      |     |    |     |         |
| 6.6.8  | D-dimer test  |     |    |     |         |
| 6.6.9  | Bilirubinometer   |     |    |     |         |
| 6.6.10 | Blood gas analyser with electrolytes                        |     |    |     |         |
| 6.6.11 | Prothrombin Time (PT) and International Normalized          |     |    |     |         |
| 0.0.11 | Ratio (INR) for coagulation study                           |     |    |     |         |
| 6.6.12 | Molecular POCT testing (NEAR Technology) CLIA               |     |    |     |         |
| 0.0.12 | Waived (FDA approved)                                       |     |    |     |         |

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| 6.6.13 | COVID-19   |          |    |  |
|--------|--|----------|----|--|
| 6.6.14 | Flu A/B  |          |    |  |
| 6.6.15 | Streptococcal A  |          |    |  |
| 6.6.16 | RSV  |          |    |  |
| 6.6.17 | Rapid test kits for infectious disease limited to:         |          |    |  |
| а      | Influenza virus- nasal swabs                               |          |    |  |
| b      | Rapid Strep A- nasal swabs                                 |          |    |  |
| С      | Respiratory Syncytial Virus (RSV)- nasal swabs/ nasal wash |          |    |  |
| d      | Adeno virus- nasal swab                                    |          |    |  |
| е      | Rota Virus- in stool                                       |          |    |  |
| f      | Adenovirus- in stool                                       |          |    |  |
| g      | Malarial antigen- in blood                                 |          |    |  |
| h      | Dengue Rapid Detection Test                                |          |    |  |
| i      | Giardia- in stool  |          |    |  |
| j      | Cryptosporidium- in stool.                                 |          |    |  |
| k      | COVID-19 Antigen (Nasal/Nasopharyngeal)                    |          |    |  |
| I      | H pylori - Stool   |          |    |  |
| m      | Faecal Occult Blood – Stool                                |          |    |  |
| n      | Norovirus – Stool  |          |    |  |
| 6.6.18 | Molecular (PCR/NAT) genetic test for the following:        |          |    |  |
| а      | HBC/HCV PCR (for virus detection)                          |          |    |  |
| Ь      | HIV PCR (for virus detection)                              |          |    |  |
| 9      | STANDARD FIVE: EQUIPMENT SELECTION AND IMPL                | EMENTATI | ON |  |
| 9.5    | The SOPs shall include:                                    |          |    |  |
| 9.5.1  | Principle of normal operation techniques                   |          |    |  |
| 9.5.2  | Health and safety requirements                             |          |    |  |
| 9.5.3  | Specimens required, patient sample and request form        |          |    |  |

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| 9.5.4  | Hazard warning and safety information                      |  |  |
|--------|--|--|--|
| 9.5.5  | Contra-indications and limitations of the instrument and   |  |  |
| 9.5.5  | technique  |  |  |
| 9.5.6  | Perform of routine operations such as maintenance and      |  |  |
| 3.3.0  | routine internal and external decontamination              |  |  |
| 9.5.7  | Basic troubleshooting if an instrument malfunction is      |  |  |
|        | recognised   |  |  |
| 9.5.8  | Preparation of reagents and other materials                |  |  |
| 9.5.9  | Calibration  |  |  |
| 9.5.10 | Quality control procedures                                 |  |  |
| 9.5.11 | Sample analysis procedures                                 |  |  |
| 9.5.12 | Reporting of results, including abnormal results           |  |  |
| 9.5.13 | Documentation/transmission of results                      |  |  |
| 9.5.14 | Criteria for referral of samples                           |  |  |
| 9.5.15 | Criteria for Critical Values and/or unusual values and     |  |  |
| 9.5.15 | reporting  |  |  |
| 9.5.16 | Limitations of the procedure                               |  |  |
| 9.5.17 | Reference values   |  |  |
| 9.5.18 | Specimen storage, stability and transfer to a clinical     |  |  |
| 9.5.18 | laboratory   |  |  |
| 9.5.19 | Safe disposal of reagents and biological material          |  |  |
| 9.5.20 | Safe handling of all specimens and spillages               |  |  |
| 9.5.21 | Sample collection  |  |  |
| 9.5.22 | Clinical utility and limitations                           |  |  |
| 9.5.23 | Reagent storage  |  |  |
| 9.5.24 | Technical limitations of the device                        |  |  |
| 9.5.25 | Response to results that fall outside of predefined limits |  |  |
| 9.5.26 | Infection control practices/policy with special reference  |  |  |
| 3.3.20 | to hand held devices                                       |  |  |

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|  | 1                 |                             | <u> </u> |  |  |  |  |  |  |
| 9.5.27   | Correct documenta | tion and maintenance of res | sults.   |  |  |  |  |  |  |

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