DIAGNOSTIC ACCREDITATION PROGRAM

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F 604-733-3503 Canada

SPIROMETRY QUALITY CONTROL PROGRAM

Data submission requirements for each six-month cycle

T 604-733-7758

TF 1-800-461-3008

Due dates: January 15 and July 15

Biological QC
 Spirograms for each monthly BioQC test: Minimum of three acceptable and repeatable trials Numeric data plus graphs (flow volume and volume time) for each trial
□ Calibration report for each monthly BioQC result
 □ Completed spirometry worksheet for BioQC1 and/or BioQC2 (only one BioQC subject required per month) • use largest FVC, FEV₁ and PEF from acceptable trials
Linearity
 □ Monthly linearity results: • less than 2 L/second • 4 to 6 L/second • include numerical and graphical data
☐ Calibration report for each monthly linearity result
☐ Completed linearity worksheet
□ Evidence of 3-L syringe revalidation
Interpreted Patient Reports
 For each interpreting physician, five random patient spirograms submitted with physician interpretation: signed and dated minimum of three acceptable and repeatable trials numeric data plus graphs (flow volume and volume time) for each trial the above also applies to pre- and post-dilator trials, if performed calibration report for date of testing
Remove patient identifiers (names, PHNs, chart numbers, admission information, phone numbers, other identifiers)
☐ For each interpreting physician, number patients from 1 to 5 for your reference