



Newborn Screening Quality Assurance Program

PROFICIENCY TESTING

Toxoplasma Quarterly Report

Volume 7, No. 2

May 2011

INTRODUCTION

This report is the quarterly summary of all data reported within the specified data-reporting period for Quarter 2, 2011. The attached tables provide the certification profiles for the distributed specimens, the verification of your reported data, the statistical analysis of the quantitative data, and the frequency distribution summaries for expected interpretations. We distribute this PT report to all participants, state laboratory directors, and program colleagues by request.

On April 4, 2011, a panel of five unknown dried-blood-spot (DBS) specimens prepared from human serum positive for exposure to *Toxoplasma gondii* was distributed to one laboratory in the United States and twelve laboratories in other countries. This panel was prepared from serum samples positive for Toxoplasma IgG and IgM purchased from SeraCare (Medford, Massachusetts) and from human serum positive for exposure to *Toxoplasma gondii* from a CDC specimen bank. All serum samples were mixed with washed red blood cells and the final hematocrit was adjusted to 50%.

PARTICIPANTS' RESULTS

We processed data from seven participants. Laboratories were asked to report IgM screening results in IU/mL blood or Absorbance (OD). In the statistical summary analysis, we did not include data that were outside the 99% confidence interval.

Seven laboratories reported using "other". Three of those used an enzyme immunoassay method; one used a fluorescent enzyme immunoassay method; and three used a multiplexed platform. The expected anti-*Toxoplasma* IgM values were based on CDC assayed values. Overall statistics from the enzyme immunoassay methods are summarized in Table 1.

The frequency distribution of participants' interpretations for screening results is shown in Table 2 and the frequency distribution of participants' interpretations for confirmatory results is shown in Table 3.

NOTE: The PerkinElmer Neonatal *Toxoplasma* IgM kit is no longer available.

Expected interpretations (qualitative assessments) may differ by participant because of specific assessment practices. When the reported clinical assessment differs from our expected clinical assessment, the grading algorithm is used to evaluate test performance. An explanation of the grading algorithm can be found on the NSQAP data-reporting Web site or in the annual summary report. Overall, participants reported two false-negative interpretations and no false-positive interpretations. Laboratory results were evaluated on the basis of the final answers provided (screening only or confirmatory results). The mean cutoff for the enzyme immunoassay methods was 0.400, with a range from 0.100 to 0.350 OD.

Participants were asked to confirm specimens that screened above their cutoff for sorting test results that were *Toxoplasma*-antibody reactive from those that were *Toxoplasma*-antibody non-reactive. Two laboratories provided confirmatory results using EIAs for IgG or IgM.

Results from this survey indicate that Toxo-IgM methods vary in the ability to detect antibody from DBS prepared with commercially certified, Toxo-positive sera and also with patient sera from a specimen bank. NSQAP strives to prepare DBS materials that challenge all methods and laboratories.

The Newborn Screening Quality Assurance Program will ship next quarter's Anti-*Toxoplasma* antibodies PT specimens on July 11, 2011. ❖

CDC/APHL

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NEWBORN SCREENING QUALITY ASSURANCE PROGRAM

ANTI-*TOXOPLASMA* ANTIBODIES

QUARTER 2 – MAY 2011

LAB XXX

SPECIMEN CERTIFICATION - IgM

CDC ASSAYED LEVELS

| Analyte | Specimen 21T1 | Specimen 21T2 | Specimen 21T3 | Specimen 21T4 | Specimen 21T5 |
|---|---------------|---------------|---------------|---------------|---------------|
| Anti- <i>Toxoplasma</i> Immunoglobulin M CDC Mean Assayed Value (IU/mL blood) | 122.8 ± 10.9 | 0.1 ± 0.4 | 0.5 ± 0.9 | 63.5 ± 8.6 | 164.0 ± 17.0 |

EXPECTED INTERPRETATIONS

| Interpretation | Specimen 21T1 | Specimen 21T2 | Specimen 21T3 | Specimen 21T4 | Specimen 21T5 |
|------------------------------|---------------|---------------|---------------|---------------|---------------|
| <i>Toxoplasma</i> Antibodies | 2 | 1 | 1 | 2 | 2 |

1 = *Toxoplasma* antibody non-reactive 2 = *Toxoplasma* antibody reactive NE = clinical assessment not evaluated

SCREENING RESULTS - IgM

DATA VERIFICATION

| Analyte | Specimen 21T1 | | Specimen 21T2 | | Specimen 21T3 | | Specimen 21T4 | | Specimen 21T5 | |
|---|---------------|------|---------------|------|---------------|------|---------------|------|---------------|------|
| | Result | Code |
| Anti- <i>Toxoplasma</i> antibodies (IU/mL blood) | | | | | | | | | | |

Reviewer's Comments

EVALUATION:

NEWBORN SCREENING QUALITY ASSURANCE PROGRAM

ANTI-TOXOPLASMA Antibodies

QUARTER 2 – MAY 2011

OVERALL STATISTICS – IgM

Table 1. Screening Results – Enzyme Immunoassay Methods

| Specimen | N | Outliers** | Mean (OD) | UL (95%) | LL (95%) |
|----------|---|------------|-----------|----------|----------|
| 21T1 | 4 | 1 | 0.790 | 1.203 | 0.378 |
| 21T2 | 4 | 1 | 0.203 | 0.534 | 0.000 |
| 21T3 | 4 | 1 | 0.175 | 0.451 | 0.000 |
| 21T4 | 4 | 1 | 0.707 | 1.568 | 0.000 |
| 21T5 | 4 | 1 | 0.957 | 1.603 | 0.311 |

** Outliers are not included in N.

UL = upper limit

LL = lower limit

Table 2. Frequency Distribution of Participants' Interpretations*
SCREENING RESULTS

| Specimen | <i>Toxoplasma</i> antibody non-reactive | <i>Toxoplasma</i> antibody reactive |
|----------|---|-------------------------------------|
| 21T1 | 1 | 6 |
| 21T2 | 7 | 0 |
| 21T3 | 7 | 0 |
| 21T4 | 1 | 6 |
| 21T5 | 3 | 4 |

*All Methods

Table 3. Frequency Distribution of Participants' Interpretations
CONFIRMATORY RESULTS

| Specimen | <i>Toxoplasma</i> antibody non-reactive | <i>Toxoplasma</i> antibody reactive |
|----------|---|-------------------------------------|
| 21T1 | 0 | 2 |
| 21T2 | 2 | 0 |
| 21T3 | 2 | 0 |
| 21T4 | 0 | 2 |
| 21T5 | 0 | 2 |

This **NEWBORN SCREENING QUALITY ASSURANCE PROGRAM** report is an internal publication distributed to program participants and selected program colleagues. The laboratory quality assurance program is a project cosponsored by the **Centers for Disease Control and Prevention (CDC)** and the **Association of Public Health Laboratories**.

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