

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention Model Performance Evaluation Program

CD4⁺ T-Cell Determinations

Report of Results for the Performance Evaluation Survey Conducted in October 2004



CENTERS FOR DISEASE[™] CONTROL AND PREVENTION

Coordinating Center for Health Information and Service Division of Laboratory Systems Atlanta, Georgia

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Analysis of the Testing Results Submitted by Laboratories Participating in the Centers for Disease Control and Prevention (CDC) Model Performance Evaluation Program (MPEP) for CD4⁺ T-Cell Determinations Conducted in October 2004

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Overview of October 2004 CD4⁺ T-cell Determinations Performance Evaluation

Introduction	This report analyzes testing results reported by laboratories participating in the Centers for Disease Control and Prevention (CDC) Model Performance Evaluation Program (MPEP) for CD4 ⁺ T-cell determination (CD4 ⁺ T-cell) performance evaluation specimens sent on October 12 and October 19, 2004.
Laboratory Response	 Of the 259 laboratories receiving specimen panels, 247 (95.4%) reported testing results. Of the 12 nonreporting laboratories, one laboratory indicated they had mistakenly held the specimens for longer than 48 hours before processing and, therefore, did not consider their testing results reliable. Eleven laboratories provided no explanation for nonparticipation. The majority of the laboratories (78.1%) reported their testing results using the online data entry system.
Significant Findings	 The majority of the results (93.9%) returned by the laboratories participating in the October 2004 performance evaluation panel shipment were within the established 95% confidence limits. In particular, 92.4% of the absolute CD4⁺ and 92.0% of the CD8⁺ T-cell counts were within the established 95% confidence limits. As has been seen in previous surveys, the range of results reported for absolute CD4⁺ and CD8⁺ T-cell counts differed depending on the method used to obtain the result, i.e., single-platform or dual-platform. The ranges of dual-platform absolute CD4⁺ and CD8⁺ T-cell counts were significantly wider due to the large ranges of hematology instrument-derived absolute lymphocyte count results. According to the CDC guidelines for CD4⁺ T-cell testing (<i>MMWR</i>: 1997; 46, RR-2), specimens should be processed for hematologic testing and immunophenotyping within 30 hours after collection. A total of 60 laboratories reported specimen preparation delays (3 laboratories reported both late deliveries and delays in processing). These specimen preparation delays may have affected the testing results from these laboratories (see Discussion, page 27).

Materials and Methods

Specimen panels	Each laboratory received a total of five whole blood specimens collected in K_3 EDTA, three HIV-1 antibody-positive and two HIV-1 antibody-negative specimens. One of the HIV-1 antibody-positive whole blood specimens was sent to the participant laboratories in duplicate. Not all laboratories received the same panel of specimens.					
Specimen numbers and donor information	performan	Table 1 contains the specimen numbers and donor information for each performance evaluation specimen.				
	Table 1.	Donor Identific	cation for Octobe	r 2004 Shipment Specimens		
	Panel Letter	Participant Laboratory	CDC Donor Number	Donor Information (HIV-1* status)		
	А	A1 A2, A5 A3 A4	03 02 01 05	HIV-1 Antibody-Negative HIV-1 Antibody-Positive HIV-1 Antibody-Negative HIV-1 Antibody-Positive		
	В	B1 B2 B3, B4 B5	05 03 04 01	HIV-1 Antibody-Positive HIV-1 Antibody-Negative HIV-1 Antibody-Positive HIV-1 Antibody-Negative		
	С	C1 C2 C3, C5 C4	09 08 07 10	HIV-1 Antibody-Negative HIV-1 Antibody-Negative HIV-1 Antibody-Positive HIV-1 Antibody-Positive		
	D	D1, D3 D2 D4 D5	06 09 10 08	HIV-1 Antibody-Positive HIV-1 Antibody-Negative HIV-1 Antibody-Positive HIV-1 Antibody-Negative		

^{*}Human immunodeficiency virus type 1

Materials and Methods, Continued

To facilitate and prevent delays in specimen receipt and processing, laboratories were notified a month in advance of the date of the shipment.
 An air-bill tracking number was included in these notifications, enabling the laboratories to locate the specimens in the event the shipment was not received by noon on the scheduled date of their receipt. Participant laboratories were instructed to process and test the MPEP CD4⁺ T-cell specimens as they would patient specimens routinely received by their laboratory.
Participant laboratories were encouraged to use the CDC guidelines for CD4 ⁺ T-cell testing (<u>MMWR</u> , vol. 46, no. RR-2, January 10, 1997) in performing CD4 ⁺ T-cell determinations on patient specimens.
 The result reporting booklet used for the October 2004 specimen shipment was designed to be consistent with these guidelines. According to these guidelines, specimens should be processed for hematologic testing and flow cytometric immunophenotyping within 30 hours of collection.
Methods used to derive the cell marker-specific absolute cell count were classified as either dual-platform or single-platform.
 Dual-platform methods are those which use the results from the flow cytometer (cell marker percentages) combined with the results from a hematology analyzer (white blood cell count, percent lymphocytes, and absolute lymphocyte count) to calculate the specific absolute cell count. Single-platform methods are those whereby the absolute cell count is derived using a single instrument (e.g., FACSCount, TruCount, or Flow-Count).

Materials and Methods, Continued

Grouping of test results for analysis	 Participant laboratories used various methods of determining cell marker percentage and absolute cell counts. For establishing 95% confidence limits, we combined the results from the various methods. All cell marker percentage results reported by the laboratories were grouped according to the cell marker of interest, regardless of the flow cytometer or monoclonal antibody combination used to derive the specific result, e.g., CD4⁺ results were grouped from laboratories using CD3/CD4, CD3/CD4/CD8, CD45/CD3/CD4, and CD45/CD3/CD4/CD8. Similarly, regardless of the method used to obtain the absolute cell count (single-platform or dual-platform), we also grouped all results for CD4⁺ and CD8⁺ absolute cell counts.
Calculations of 95% confidence limits	 Results submitted by participant laboratories were used to calculate 95% confidence limits for each donor and cell marker using the SAS procedure PROC GLM (general linear model). Before calculation, data were analyzed for possible outliers. If the absolute value of the jack-knife residual was greater than 3.0, then the data point was considered to be an outlier for calculating the 95% confidence limits. Only 191 (1.9%) of 9,914 results were considered to be outliers. These outlier results were removed before the 95% confidence limits shown in Table 3 were calculated. No data from any laboratory were removed from the aggregate results table comparing values obtained by the laboratories against the 95% confidence limits. Because of insufficient data, 95% confidence limits could not be calculated for CD3⁻/CD16⁺. Table 3 shows the entire range of laboratory results (maximum and minimum) reported for this cell marker.

Overall Summary of Results Submitted

Introduction	The majority of the results (93.9%) returned by the laboratories participating in the October 2004 performance evaluation panel shipment were within the established 95% confidence limits.
Summary of participant results	The percentages of participating laboratory results within the 95% confidence limits established for the cell-marker percentage results, the marker-specific absolute cell counts, white blood cell (WBC) count, lymphocyte percentage, and absolute lymphocyte count are shown in the table below.

Table 2. Total Percentage of Participant Laboratory Results Within or Outside the Established 95% Confidence Limits

	Cell-Marker Percentage		Absolute Cell Counts		Hematology Results		
Cell Marker	Within 95% Confidence Limits	Outside 95% Confidence Limits	Within 95% Confidence Limits	Outside 95% Confidence Limits		Within 95% Confidence Limits	Outside 95% Confidence Limits
CD3 ⁺	94.8%	5.2%			White Blood Cell Count	92.8%	7.2%
CD4 ⁺	94.8%	5.2%	92.4%	7.6%	Lymphocyte Percentage	92.2%	7.8%
CD8 ⁺	94.8%	5.2%	92.0%	8.0%	Absolute Lymphocyte Count	91.6%	8.4%
CD14 ⁺	96.8%	3.2%					
CD19 ⁺	96.2%	3.8%					
CD45 ⁺	96.9%	3.1%					
CD3 ⁻ /CD56 ⁺	96.1%	3.9%					
CD3 ⁻ / CD(56+16) ⁺	94.7%	5.3%					

Types ofThe primary classifications of laboratories participating in the October 2004**laboratories**CD4⁺ T-cell determinations shipment are shown in Figure 1.

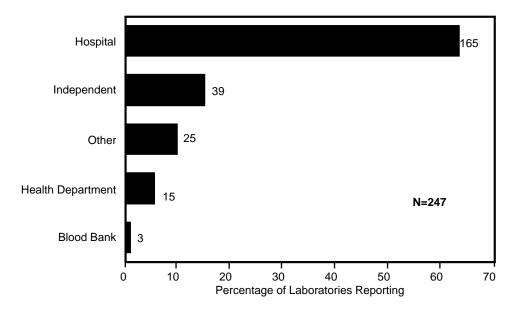


Figure 1. Types of Participant Laboratories

Continued

Specimen

methods

preparation

Figure 2 shows the methods used by the laboratories to prepare specimens for CD4⁺ T-cell determinations. All of the laboratories performing dual-platform methods reported using a method of whole blood lysis to prepare specimens for CD4⁺ T-cell (including 1 method described as "Other"). The frequency of preparation methods specific for single-platform methods is also reflected in Figure 2.

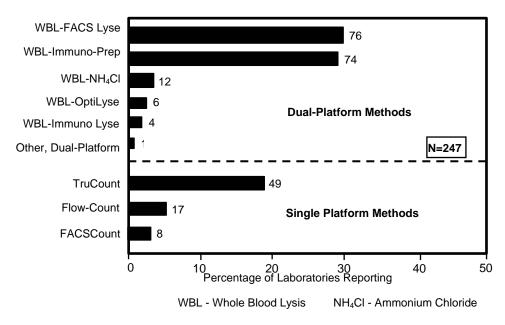


Figure 2. Specimen Preparation Methods Used

The "Other" dual-platform method was described as Cal-Lyse (CalTag).

Continued

Specimen	Figure 3 shows the methods used by the laboratories to fix their CD4 ⁺ T-cell
fixation	specimens before flow cytometric analysis.
methods	• Of laboratories reporting testing results, 31 (12.8%) of 243 specifically stated
	that they did not fix their CD4 ⁺ T-cell specimens before analyzing them, even

- though the panel sent to the laboratories contained known HIV antibodypositive specimens.
- This practice may be a potential biohazard for flow cytometry personnel.

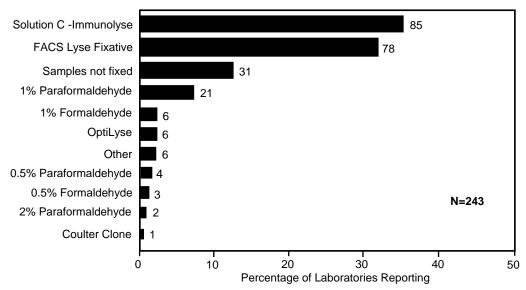
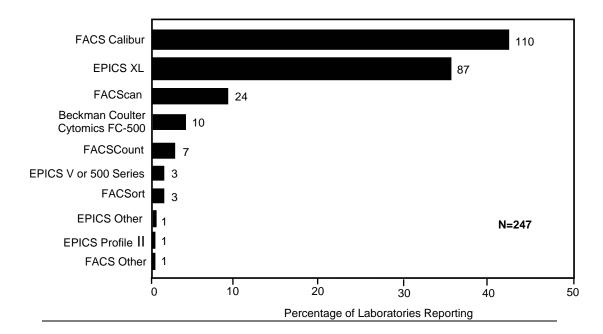


Figure 3. Methods of Specimen Fixation

"Other" types of fixative used were described as: 5% formaldehyde (3), 2.5% formaline (1), 0.5-2.0% formaldehyde in Cal-Lys (1), and 0.1% paraformaldehyde (1).

Continued

Types of flow Figure 4 shows the types of flow cytometers used by the participant laboratories. **cytometers used**





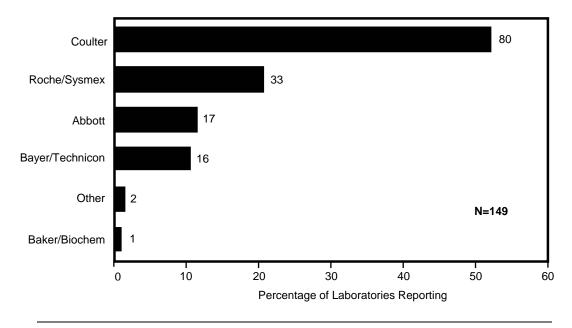
Number of laboratories using singlevs. dualplatform methods Among the 247 laboratories reporting results, 210 reported absolute cell counts.

- Of these, 136 (64.8%) of 210 used a dual-platform method to derive marker-specific absolute cell counts.
- Seventy-four (35.2%) of 210 laboratories used a single-platform method.

Continued on next page

Continued

HematologyOf the 247 participant laboratories, 149 (60.3%) identified the manufacturer ofinstrumentsthe hematology instrument being used in their laboratory. These manufacturersusedare shown in Figure 5.





Cell Marker Results and Distributions

Introduction	 This section describes the aggregate cell marker percentage and absolute counts results submitted by the participant laboratories. Table 3 on the following pages shows the frequency of participant laboratory lymphocyte immunophenotyping percentage results by donor and cell marker, within, above, or below the 95% confidence limits established using results from all laboratories, regardless of the monoclonal antibody combination or manufacturer of flow cytometry instrument used to obtain these percentage results. Table 3 also shows the frequency of participant laboratory hematology results (white blood cell count, percentage of lymphocytes and absolute lymphocyte count) and absolute cell count results for CD4⁺ and CD8⁺, within, above, or below the statistically established 95% confidence limits. Distributions of the CD4⁺ T-cell absolute counts obtained by single-platform methods are compared with those same results obtained by dual-platform methods in Figure 6. The significance of difference in the mean values of these CD4⁺ T-cell distributions is shown in Table 4. The effect of hematology values (absolute lymphocyte count) on the
	distribution of dual-platform results is shown in Figure 7.

Donor Number		tus. m	-antibou	y nega	
	Percentage	•	Absolute		
Cell	Results		Counts		
Marker	Range	No.	Rang	е	No.
	> 10	0 0			
CD45	96 - 10	0 14			
	< 96	6 2			
	> 1	1			
CD14	0 - 1	14			
	< 0	0			
	> 53		>	1,266	6
CD4	47 - 53		812 -	1,266	95
	< 47		<	812	1
	> 32		>	705	4
CD8	25 - 32		467 -	705	94
	< 25		<	467	3
	> 1:				
CD19	9 - 1:				
	< 9	2			
	> 9	0			
CD56	4 - 9				
	< 4	1			
	> 10				
CD56+16	6 - 10				
	< 6	2			
	> 84				
CD3 Average	77 - 84				
	< 7				
CD16	7 - 7	2			

Donor Number 1 - Donor Status: HIV-antibody Negative

Hematology Results

Hematology Parameter	Range	No.
WBC	> 4,901 4,197 - 4,901 < 4,197	1 60 3
% Lymphs	> 54 40 - 54 < 40	5 58 1
Absolute Lymphs	> 2,486 1,760 - 2,486 < 1,760	5 59 0

Legend:

95% Confidence limits highlighted
"No." represents number of laboratories reporting in these ranges.
No confidence limits established for CD16 - maximum and minimum values reported

Donor Number 2 - Donor Status: HIV-antibody Positive

Donor Number	z - Donor Stat	us. 111v	-antibouy	r USitive
	Percentage		Absolute	Ð
Cell	Results		Counts	
Marker	Range	No.	Range	No.
	> 100	0		
CD45	95 - 100	12		
	< 95	0		
	> 1	1		
CD14	0 - 1	11		
	< 0	0		
	> 24	4	>	834 2
CD4	19 - 24	111	376 -	834 98
	< 19	3		376 6
	> 66	7	> 2	2,242 2
CD8	59 - 66	109		2,242 95
	< 59	2	< 1	,256 9
	> 12	0		
CD19	7 - 12	92		
	< 7	4		
	> 2	0		
CD56	0 - 2	30		
	< 0	0		
	> 6	0		
CD56+16	1 - 6	62		
	< 1	0		
	> 89	3		
CD3 Average	82 - 89	88		
	< 82	3		
CD16	0 - 0	0		15

Hematology			
Parameter	Rang	je	No.
	>	6,914	0
WBC	4,418 -	6,914	60
	<	4,418	6
	>	56	5
% Lymphs	45 -	56	59
	<	45	2
	>	3,480	0
Absolute Lymphs	2,205 -	3,480	61
	<	2,205	5

		Jaiu				
		Percentage			olute	
Cell	Resu	lts		Counts		
Marker	Range		No.	Ran	ge	No.
	>	100	0			
CD45	95 -	100	15			
	<	95	1			
	>	3	0			
CD14	0 -	3	15			
	<	0	0			
	>	57	5	2	> 2,029	6
CD4	50 -	57	110	1,329	- 2,029	95
	<	50	3		< 1,329	2
	>	18	2	>	> 650	4
CD8	14 -	18	113	364	- 650	97
020	<	14	3		< 364	1
	>	23	1			
CD19	17 -	23	95			
ODIS	<	<u>7</u> 0 17	4			
	>	7	0			
CD56	3 -	7	29			
0000		3	29 0			
		9	3			
0050.40	>			:		
CD56+16	5 -	9 5	62 2			
	<					
	>	76	3			
CD3 Average	67 -	76	90			
	<	67	3			
CD16	5 -	6	2			
		3		1		

Donor Number 3 - Donor Status: HIV-antibody Negative

Hematology Results

Hematology Parameter	Range	No.
WBC	> 11,893 9,575 - 11,893 < 9,575	1 61 3
% Lymphs	> 36 24 - 36 < 24	5 60 0
Absolute Lymphs	> 4,120 2,445 - 4,120 < 2,445	6 59 0

Legend:

95% Confidence limits highlighted
"No." represents number of laboratories reporting in these ranges.
No confidence limits established for CD16 - maximum and minimum values reported

Donor Number 4 - Donor Status: HIV-antibody Positive

			-		
	Percent			Absolute	
Cell	Resul	ts		Counts	
Marker	Range		No.	Range	No.
	>	100	0		
CD45	94 -	100	20		
	<	94	0		
	>	2	0		
CD14	0 -	2	18		
	<	0	0		
	>	43	6	> 1,350	4
CD4	36 -	43	108	883 - 1,350	93
	<	36	4	< 883	3
	>	52	5	> 1,561	2
CD8	41 -	52	113	1,020 - 1,561	93
	<	41	0	< 1,020	3
	>	15	2	,	
CD19	6 -	15	98		
	<	6	4		
	>	3	0		
CD56	1 -	3	28		
	<	1	0		
	>	5	4		
CD56+16	1 -	5	68		
	<	1	0		
	>	91	3		
CD3 Average	82 -	91	93		
g•	<	82	1		
0016					
CD16	2 -	2	4		

Hematology Parameter	Range	No.
WBC	> 8,509 5,674 - 8,509 < 5,674	0 60 4
% Lymphs	> 51 31 - 51 < 31	3 61 0
Absolute Lymphs	> 3,353 2,371 - 3,353 < 2,371	4 59 1

		otutu	<u>.</u>	-antibou	, 1 001	
	Percen	tage		Absolu	ute	
Cell	Resu	lts		Counts		
Marker	Range		No.	Range	е	No.
	>	100	0			
CD45	92 -	100	15			
	<	92	1			
	>	2	1			
CD14	0 -	2	14			
	<	0	0			
	>	8	5	>	172	6
CD4	4 -	8	113	49 -	172	97
	<	4	0	<	49	0
	>	70	1	>	1,732	6
CD8	61 -	70	114	692 -	1,732	94
	<	61	3	<	692	2
	>	17	1			
CD19	9 -	17	95			
	<	9	4			
	>	8	1			
CD56	1 -	8	28			
	<	1	0			
	>	11	4			
CD56+16	4 -	11	62			
	<	4	1			
	>	84	2			
CD3 Average	74 -	84	92			
	<	74	2			
CD16	5 -	5	2			
		5	2	1		

Donor Number 5 - Donor Status: HIV-antibody Positive

Hematology Results

Hematology Parameter	Range	No.
WBC	> 10,492 7,891 - 10,492 < 7,891	0 62 3
% Lymphs	> 32 12 - 32 < 12	6 59 0
Absolute Lymphs	> 3,020 1,042 - 3,020 < 1,042	5 60 0

Legend:

95% Confidence limits highlighted
"No." represents number of laboratories reporting in these ranges.
No confidence limits established for CD16 - maximum and minimum values reported

Donor Number 6 - Donor Status: HIV-antibody Positive

		otatu		antibody i 03	
	Percent	tage		Absolute	
Cell	Resu	ts		Counts	
Marker	Range		No.	Range	No.
	>	100	0		
CD45	91 -	100	24		
	<	91	0		
	>	1	0		
CD14	0 -	1	24		
ODIT	<	0	0		
	>	36	3	> 900	6
CD4	28 -	36	115	338 - 900	96
004	40 <	28	4	< 338	3
	>	75	2	> 1,570	
CD8	49 -	75	113	763 - 1,570	
CDo	45 -	73 49	7	< 763 < 763	90 6
	>	49 7	0	< 703	0
0040		-	-		
CD19	1 -	7	102		
	<	1	0		
0050	>	6	2		
CD56	1 -	6	30		
	<	1	0		
	>	11	3		
CD56+16	2 -	11	55		
	<	2	0		
	>	94	2		
CD3 Average	82 -	94	107		
	<	82	3		
CD16	5 -	6	2		
	" ~	~		17	,

Hematology Parameter	Range	No.
WBC	> 7,049 3,035 - 7,049 < 3,035	3 65 3
% Lymphs	> 52 28 - 52 < 28	4 66 1
Absolute Lymphs	> 2,749 1,273 - 2,749 < 1,273	3 66 2

Donor Number		วเลเน	5. HIV	-antibou	y FU3I	live
	Percenta	age		Absolu	ite	
Cell	Results		Counts			
Marker	Range		No.	Range	e	No.
	>	100	0			
CD45	96 -	100	22			
	<	96	0			
	>	1	0			
CD14	0 -	1	22			
	<	0	0			
	>	37	2	>	1,113	6
CD4	32 -	37	112	513 -	1,113	102
	<	32	2	<	513	4
	>	54	4	>	1,604	7
CD8	47 -	54	111	782 -	1,604	101
	<	47	1	<	782	4
	>	9	0			
CD19	4 -	9	92			
	<	4	1			
	>	6	0			
CD56	0 -	6	22			
	<	0	0			
	>	7	0			
CD56+16	4 -	7	67			
	<	4	3			
	>	90	2			
CD3 Average	84 -	90	94			
	<	84	0			
CD16	0 -	0	0			
		0		l		

Donor Number 7 - Donor Status: HIV-antibody Positive

Hematology Results

Hematology Parameter	Range	No.
WBC	> 7,521 5,040 - 7,521	1 73
% Lymphs	 < 5,040 > 48 29 - 48 < 29 	6 6 74 0
Absolute Lymphs	> 3,270 1,556 - 3,270 < 1,556	7 70 3

Legend:

95% Confidence limits highlighted
"No." represents number of laboratories reporting in these ranges.
No confidence limits established for CD16 - maximum and minimum values reported

Donor Number 8 - Donor Status: HIV-antibody Negative

Donor Number		otatu	<u> </u>	-antibody Neg	
	Percent	age		Absolute	
Cell	Resul	ts		Counts	
Marker	Range		No.	Range	No.
	>	100	0		
CD45	95 -	100	23		
	<	95	0		
	>	1	1		
CD14	0 -	1	22		
	<	0	0		
	>	62	5	> 1,826	5
CD4	52 -	62	112	1,156 - 1,826	
• - ·	<	52	2	< 1,156	
	>	23	5	> 712	7
CD8	19 -	23	113	420 - 712	101
	<	19	1	< 420	1
	>	16	1		
CD19	10 -	16	92		
	<	10	4		
	>	8	0		
CD56	2 -	8	25		
	<	2	2		
	>	9	2		
CD56+16	5 -	9	58		
	<	5	4		
	>	85	5		
CD3 Average	74 -	85	97		
g.	<	74	2		
CD16	9 -	9	1	10	

Hematology Parameter	Rang	е	No.
WBC	>	9,558	1
	7,265 -	9,558	68
	<	7,265	7
% Lymphs	>	39	5
	24 -	39	70
	<	24	1
Absolute Lymphs	>	3,354	5
	1,943 -	3,354	69
	<	1,943	2

	3 - D01101			-antibou	<u>,</u>	
	Percen	tage		Absolu	ute	
Cell	Results			Counts		
Marker	Range		No.	Rang	е	No.
	>	100	0			
CD45	96 -	100	22			
	<	96	1			
	>	1	2			
CD14	0 -	1	21			
	<	0	0			
	>	52	3	>	2,022	7
CD4	46 -	52	115	1,363 -	2,022	100
	<	46	2	<	1,363	2
	>	31	6	>	1,233	7
CD8	27 -	31	113	806 -	1,233	99
	<	27	1	<	806	3
	>	17	2			
CD19	13 -	17	95			
	<	13	1			
	>	5	0			
CD56	2 -	5	25			
	<	2	2			
	>	5	0			
CD56+16	3 -	5	62			
	<	3	3			
	>	83	3			
CD3 Average	77 -	83	99			
	<	77	3			
CD16	6 -	6	1			
				1		

Donor Number 9 - Donor Status: HIV-antibody Negative

Hematology Results

Hematology Parameter	Range	No.
WBC	> 10,359 8,361 - 10,359 < 8,361	1 73 2
% Lymphs	> 44 31 - 44 < 31	6 70 0
Absolute Lymphs	> 4,168 2,849 - 4,168 < 2,849	5 70 1

Legend:

95% Confidence limits highlighted
"No." represents number of laboratories reporting in these ranges.
No confidence limits established for CD16 - maximum and minimum values reported

Donor Number 10 - Donor Status: HIV-antibody Positive

	Percentage		Absolute	
Cell	Results		Counts	
Marker	Range	No.	Range	No.
CD45	> 100 92 - 100 < 92	0 22 1		
CD14	> 2 0 - 2 < 0	0 23 0		
CD4	> 21 15 - 21 < 15	5 115 0	> 271 154 - 271 < 154	5 102 2
CD8	> 61 43 - 61 < 43	7 112 1	> 813 421 - 813 < 421	6 100 3
CD19	> 29 8 - 29 < 8	0 92 6		
CD56	> 4 0 - 4 < 0	3 24 0		
CD56+16	> 10 2 - 10 < 2	2 63 0		
CD3 Average	> 82 62 - 82 < 62	8 96 1		
CD16	12 - 12	1	I	

Hematology Parameter	Range	No.
i didilotoi	<u>v</u>	
WBC	> 3,777 2,769 - 3,777	3 70
	< 2,769	3
	> 46	4
% Lymphs	30 - 46	71
	< 30	1
	> 1,501	3
Absolute Lymphs	960 - 1,501	71
	< 960	2

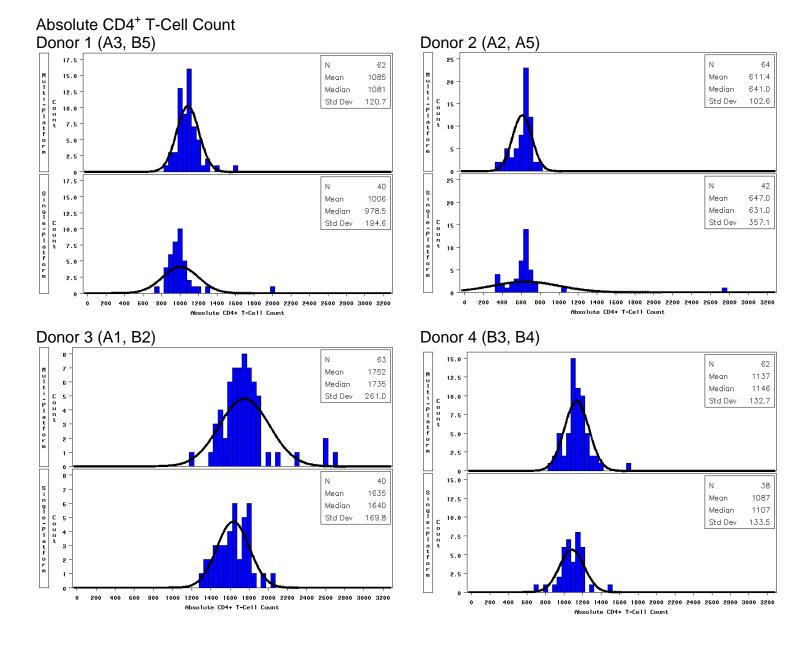
cell counts (for most donor specimens).

Effect of cell analysis	As shown in Figure 6 on the following pages, the range of results reported for absolute $CD4^+$ and $CD8^+$ T-cell counts was different depending on the method
method on the	used to obtain the result, i.e., single-platform vs. dual-platform.
range of results	 These are inclusive ranges (lowest value to highest value) and are <u>not</u> 95% confidence limits as presented in the results in Table 3.
	• The bars in the graphs represent the data submitted by the participant laboratories. The lines in the graphs represent the normalized plot of the results.
	• The mean and standard deviation in each of the graphs is based on the normalized distribution of the results.
	• As demonstrated by the difference in the standard deviations for the normalized distribution of results, the dual-platform ranges were larger than the corresponding single-platform ranges for both CD4 ⁺ and CD8 ⁺ absolute T-

Figure 6. Absolute CD4⁺ T-cell counts, by donor, by method

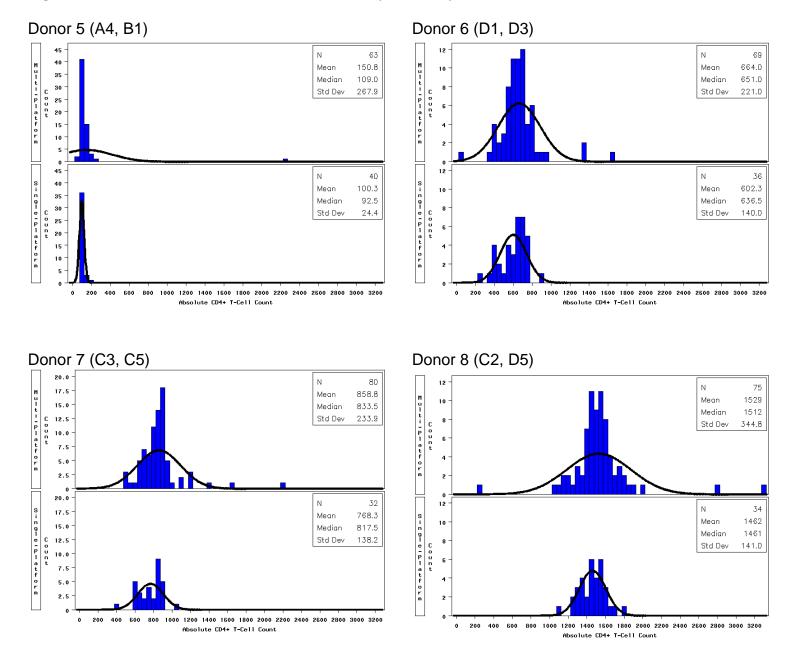
Description of graphs depicted below:

- Upper plot -- absolute CD4⁺ T-cell count derived using dual-platform methods.
- Lower plot -- absolute CD4⁺ T-cell count derived using single-platform methods.
- X-axis -- range of absolute CD4⁺ T-cell counts.
- Y-axis --number of laboratories obtaining a particular CD4⁺ T-cell count.



CDC Model Performance Evaluation Program CD4⁺ T-cell Determinations

Figure 6, continued. Absolute CD4⁺ T-cell counts, by donor, by method



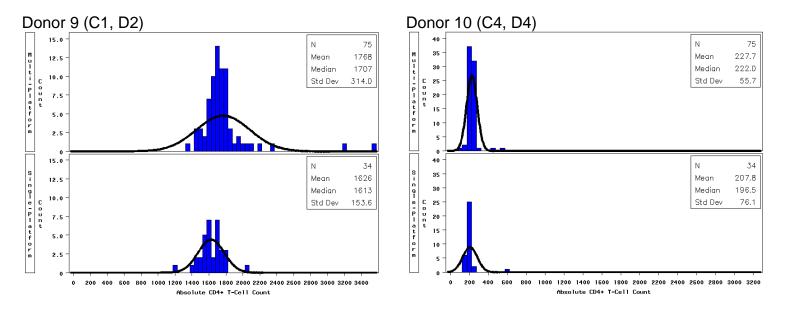


Figure 6, continued. Absolute CD4⁺ T-cell counts, by donor, by method

Reporting errors

The magnitude of the ranges shown in Figure 6 may be partially due to reporting errors on the part of the laboratories.

- One laboratory for one of the specimens they tested reported a lymphocyte count result that was in error by nearly a factor of 10 (e.g., the laboratory reported a WBC of 1110 and a lymphocyte percent of 29, which should have yielded a lymphocyte count of 322; however, the laboratory reported a lymphocyte count of 3185).
- Two other laboratories reported lymphocyte counts on one of the specimens they tested that were in error by a factor of 2.
- In total, six laboratories reported lymphocyte counts that differed by more than 5% from the true calculated lymphocyte count (WBC X Lymphocyte percent) on at least one specimen.

Significance of method of analysis on mean CD4 value

• In general, the mean CD4 value of the normalized curve for the dual-platform results was larger than the mean CD4 value of the normalized curve for the single-platform results.

- As can be seen in Table 4 below, for some donors this shift in the mean CD4 values was statistically significant.
- If the shift in CD4 value occurs around a medical treatment or AIDS case defining decision point (e.g., 500 or 200 absolute CD4 counts), the shift may have clinical significance.

Donor	Dual-Platform mean CD4+ Value	Single-Platform mean CD4+ Value	p value	Significance
1	1085	1006	p=0.025	Significant*
2	611	647	p=0.533	Not Significant
3	1752	1635	p=0.007	Significant
4	1137	1087	p=0.066	Not Significant
5	151	100	p=0.142	Not Significant
6	664	602	p=0.084	Not Significant
7	859	768	p=0.013	Significant
8	1529	1462	p=0.150	Not Significant
9	1768	1626	p=0.002	Significant
10	228	208	p=0.021	Significant
	* Significant if p-valu	ie is <0.05		

Table 4. Mean CD4 values, Dual-Platform vs. Single-Platform Methods

Effect ofThe ranges ofhematologylymphocyte coresults onthe followingdual-platformresultsmethods,Figure 7

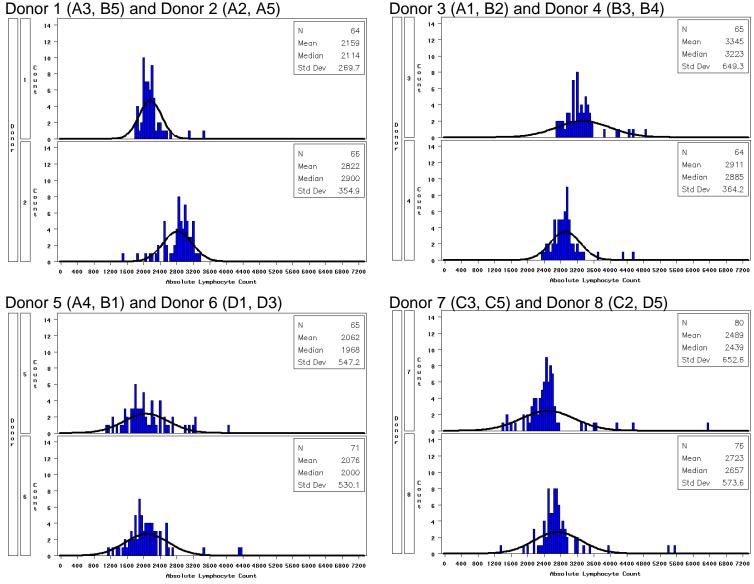
The ranges of dual-platform results were affected by the extent of variability in the absolute lymphocyte count results derived from hematology instruments. As shown in Figure 7 on the following pages, often the range of results was quite large.

Figure 7. Absolute Lymphocyte Counts, by Donor

Description of graphs depicted below:

- Upper plot -- absolute lymphocyte count for one donor.
- Lower plot -- absolute lymphocyte count for another donor.
- The identity of the donors can be read in the bars on the left hand side of the plot.
- X-axis -- range of absolute lymphocyte counts.
- Y-axis -- number of laboratories obtaining a particular absolute lymphocyte count.

Absolute Lymphocyte Count (Hematology Instrument)

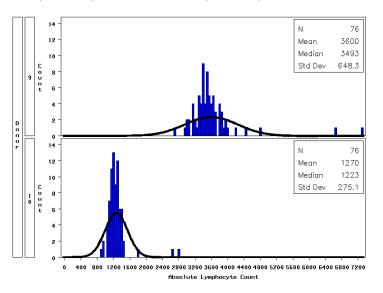


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CDC Model Performance Evaluation Program CD4⁺ T-cell Determinations

Figure 7, continued. Absolute Lymphocyte Counts, by Donor

Donor 9 (C1, D2) and Donor 10 (C4, D4)



Discussion

Effect of delayed shipments	Several laboratories reported delays in preparing specimens for analysis. These delays were related to delay in receipt due to problems with the overnight courier, delivery problems within the receiving institution, and delay in processing the specimens after receipt in the laboratory.
	A total of 60 laboratories reported specimen preparation delays (3 laboratories reported both late deliveries and delays in processing).
	 These specimen preparation delays may have affected the testing results from these laboratories. Of the 60 laboratories reporting specimen preparation delays, 39 laboratories (65.0%) reported one or more results outside the established 95% confidence ranges. One laboratory reported 13 of 35 results (37.1%) submitted and another laboratory reported 19 of 50 results (38.0%) submitted outside the 95% confidence ranges.
Possible reasons for differences in laboratory performance	 Differences in laboratory performance of cell marker analysis may be related to: the use of the CDC CD4⁺ T-cell testing guidelines the use of dual-platform versus single-platform procedures the use of different flow cytometer, hematology instrument, and reagent manufacturer combinations factors associated with specimen preparation (including specimen fixation before analysis and delay in preparing specimens for analysis), and reporting errors on the part of the laboratories.
Ensuring accurate calculated results	Laboratories should have a mechanism in place to ensure accurate and reliable calculated results. Laboratories are reminded that this is a requirement in the regulations implementing the Clinical Laboratory Improvement Amendments (CLIA) [Sec. 493.1291 (a) (1)]. This standard is as follows: " (a) The laboratory must have adequate manual or electronic systems in place to ensure test results and other patient-specific data are accurately and reliably sent from the point of data entry (whether interfaced or entered manually) to final report destination, in a timely manner. This includes the following: (1) Results reported from calculated data."
CDC Guidelines	Those laboratories performing CD4 ⁺ T-cell determinations using a single-platform method are encouraged to follow the recently published CDC <i>Guidelines for Performing Single-Platform Absolute CD4+ T-Cell Determinations with CD45 Gating for Persons Infected with Human Immunodeficiency Virus</i> [MMWR 2003; 52(RR-2):1-13].