

AAFP-PT Quality Assurance (QA) Self-Graded Program

For Waived & PPM laboratories looking for a less expensive alternative to a full Proficiency Testing program for quality assurance, AAFP-PT is pleased to offer the **AAFP-PT Self-Graded QA Program**.

Twice each year, laboratories enrolled in the QA program receive one sample for each test performed.

The samples are shipped in April & November. Along with the samples, you will receive an answer key that will allow you to self-grade your performance.

QA program participants are also eligible to earn up to 12 Continuing Education credits at no additional charge.

The QA program includes the tests/ analytes listed at right. Please call AAFP-PT at (800) 274-7911 to enroll, fax this order form to (913) 906-6079, or mail to:

AAFP-PT
11400 Tomahawk Creek Parkway
Leawood, KS 66211

Annual Registration Fee – \$75

MODULE#		PRICE
<input type="checkbox"/> 801	Cholesterol	\$40
<input type="checkbox"/> 802	Clinical Microscopy	\$40
<input type="checkbox"/> 804	Fecal Occult Blood	\$40
<input type="checkbox"/> 805	Fructosamine	\$40
<input type="checkbox"/> 806	Glycohemoglobin	\$40
<input type="checkbox"/> 819	Glycohemoglobin (Affinion)	\$40
<input type="checkbox"/> 807	Group A Strep	\$40
<input type="checkbox"/> 808	H. pylori	\$40
<input type="checkbox"/> 809	Hemoglobin	\$40
<input type="checkbox"/> 810	Infectious Mono	\$40
<input type="checkbox"/> 811	ITC Microcoagulation Protime	\$40
<input type="checkbox"/> 812	Sed Rate	\$40
<input type="checkbox"/> 813	Spun Hematocrit	\$40
<input type="checkbox"/> 814	Urine Dipstick & Urine hCG	\$40
<input type="checkbox"/> 815	Whole Blood Glucose	\$40
<input type="checkbox"/> 816	Whole Blood Glucose (Hemacue)	\$40
<input type="checkbox"/> 817	Viral Antigen Detection: Influenza A & B, RSV (3 samples)	\$100
<input type="checkbox"/> 818	Cholestech Package: Includes Glucose, Cholesterol, HDL, Triglycerides, ALT, AST	\$135
MODULE TOTAL		\$ _____
ANNUAL REGISTRATION FEE		\$ <u>75.00</u>
(Note fees are nonrefundable)		
TOTAL DUE		\$ _____

ORDER INFORMATION

AAFP-PT # _____

CLIA # _____

Practice Name _____

Medical Director (please print as listed on CLIA certificate) _____

Street Address _____

City, State, Zip _____

Attention _____

Phone Number _____

Fax Number _____

E-mail _____

PAYMENT INFORMATION — PAYMENT TERMS: NET 30 DAYS

Invoice Check Enclosed (Payable to AAFP) MC/VISA/DISCOVER/AMEX

PO # _____

Credit card # _____

Name _____ Exp. Date _____

Signature _____

Retain a photocopy of this form for your records.

2011 SHIP DATES: MARCH 7, JUNE 6, OCTOBER 23
Products ordered may contain pathogenic materials.
AAFP-PT is not liable or responsible for the handling,
storage, use and disposal of the product upon receipt
by your office.

Order before December 1, 2010 to guarantee specimen availability.

**PLEASE PRINT ALL REQUESTED INFORMATION ON THE ORDER FORM AND
 MAIL OR FAX TO:**

AAFP-PT, 11400 Tomahawk Creek Pkwy, Leawood, KS 66211-2680
FAX: (913) 906-6079 • PHONE: (800) 274-7911

ORDER INFORMATION

AAFP-PT Plus NEW COLA Member

How did you hear about us?

AAFP-PT # _____

Practice Name _____

Medical Director (please print as listed on CLIA certificate)

Is the Medical Director or other staff physician a member of the AAFP? Yes – AAFP Member # _____ No

Number of Physicians in Practice _____ Number of Family Physicians in Practice _____

Street Address _____

City, State, Zip _____

Attention _____

Phone Number _____

Fax Number _____

E-mail _____

Consultant Name/ Distributor Company Name (if applicable) _____

Address _____

City, State, Zip _____

Phone Number _____

Fax Number _____

E-mail _____

Sales Rep Name _____

Distributor P.O.# _____

PAYMENT INFORMATION — PAYMENT TERMS: NET 30 DAYS

Invoice Check Enclosed (Payable to AAFP) MC/VISA/DISCOVER/AMEX

PO # _____

Credit card # _____

Name _____ Exp. Date _____

Signature _____

REGULATORY INFORMATION

CLIA ID# ____ D _____

CLIA Classification: Waived Compliance PPM Accredited

COLA # _____ JCAHO Affiliated

Other Accrediting Agency # _____

State Agency (or region, if applicable) # _____

Note: All Texas labs must indicate CMS Region

Changes and Additions to Order

All changes must be submitted in writing by fax, mail or e-mail to AAFP-PT three weeks prior to an event shipping date. Any module may be added to an existing order depending on the shipping schedule, result due date and material availability. A \$25.00 shipping charge will be applied if a separate shipment is required. The module cost will be prorated according to the number of shipments remaining in the program year and the financially responsible party will be invoiced.

Refund/Cancellation Policy

Module cancellations must be received in writing 6 weeks prior to the event ship date to receive credit for that event. The annual registration fee is not prorated and is non-refundable. Facilities will be issued a credit for deleted modules based on the number of shipments remaining in the program year. Credits will be applied to the following year's proficiency testing order. If no order is being placed for the next year, a refund check will be issued upon request at the end of the current program year.

Off Schedule/Reinstatement Testing

Subject to product availability, proficiency testing specimens are available throughout the program year. AAFP-PT provides reinstatement specimens for regulated analytes as required by CLIA regulations. Under normal circumstances, specimens can be shipped the same day or next day, with a 7-10 day evaluation process once results are received (unless otherwise specified when the order is placed). AAFP-PT will report your reinstatement testing performance to CMS or COLA the same day you receive your evaluation. Price is per specimen. Pre-paid orders only are accepted for off schedule shipments. AAFP-PT will provide specimen handling instructions and simple to use result forms. For more information call (800) 274-7911, ext. 4146.

Accreditation Statements

AAFP Physician's Proficiency Testing Program has been reviewed and is acceptable for up to 12 Prescribed credits by the American Academy of Family Physicians. AAFP accreditation begins 3/3/10. Term of approval covers three events offered within one year from this date with option for yearly renewal.

The American Academy of Family Physicians is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. The American Academy of Family Physicians designates this educational activity for a maximum of 12 AMA PRA Category 1 Credit(s)[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity. Credit may be claimed for one year from the date of this event.

AAFP-PT is approved as a Provider of continuing education programs in the clinical laboratory sciences by the ASCLS P.A.C.E.[®] Program. AAFP-PT is also an approved provider for California clinical laboratory licensees under the P.A.C.E.[®] Program. The level of instruction for this event is basic. This event is worth 4 P.A.C.E.[®] Contact Hours.