



Myeloproliferative Neoplasms Diagnostic Testing (Not Accredited)

Please note this will be the final trial of the current format MPN Diagnostic Testing (Pilot - Not Accredited) programme. In the next registration period, 2024-2025, this programme will incorporate the current *JAK2* p.Val617Phe (V617F) mutation status (Accredited) programme and will consist of four trials. Two samples will be issued in each trial, and participants will be expected to test each of the eight samples for the core clinically significant MPN variants: *JAK2* p.(Val617Phe) and clinically significant variants within *JAK2* exon 12, *CALR* exon 9 and *MPL* exon 10 (assuming such testing is provided by their laboratory). Further details will be provided prior to re-registration. Please find enclosed one vial containing lyophilised cell line derived material for MPN diagnostic testing analysis. Please note that samples are representative of **diagnostic** samples and **NOT** follow-up samples. Sample ID (approximate total white cell count) and relevant clinical details:

MPN DT 111 (7.0 x10^6)

In line with the forthcoming changes to this programme, please analyse this sample for ALL four gene regions listed below. Additional results (e.g. from extended NGS panel testing) are not submissible. Please note that testing of all four gene regions is not mandatory if your laboratory does not routinely provide such testing; please test this sample according to your laboratory's current test repertoire.

- JAK2 c.1849G>T p.(Val617Phe) (V617F)
- JAK2 exon 12
- CALR exon 9
- MPL exon 10

Exon numbering and variant nomenclature based on reference sequences: NM_004972.4(JAK2); NM_004343.4(CALR); NM_005373.3(MPL).

Nucleic acid extraction from the External Quality Assessment (EQA) material provided may benefit from minimal adaptations to your current methodology (see guidance below). However, wherever possible please treat the sample(s) as routine specimens adhering to standard operating procedures and local quality controls. There are no specific environmental conditions that need to be considered for this EQA trial.

SAMPLE STABILITY, STORAGE AND PROCESSING

Lyophilised (freeze dried) material has the advantage of improved stability. However, inherent differences to fresh patient samples means that making slight modifications to your extraction protocol may further improve resultant nucleic acid quality and yield. Always store lyophilised samples at 2-8°C in their stable lyophilised state until you are ready to proceed with nucleic acid extraction - Do not reconstitute and store.

Reconstitute the lyophilised sample with 1mL RNase/DNase free water or directly using an appropriate volume of initial buffer, as per your extraction protocol. The sample will reconstitute with gentle pipetting (there is no requirement for vortexing). The sample now forms a suspension of leucocytes and can be processed from an appropriate point in your chosen extraction protocol. **The reconstituted sample(s) must be processed immediately.**

Lyophilised samples do not require a red cell lysis step. Even if they appear red, any red cells originally present in the specimen will have already lysed during the freeze drying process. It is important to always take account of the cell numbers in the sample(s) stated above. Please note the approximate white cell counts are ascertained prior to lyophilisation, some cell loss is acknowledged during the freeze drying process. **You may need a larger volume of reagent(s) or smaller amount of sample than routinely used for patient samples**; cell line samples are often highly expressing and/or polyploid. If you are applying the sample to a column or cartridge it is important take account of the maximum capacity of the column/cartridge; please read the manufacturer's information carefully. Reducing the number of cells can be facilitated by diluting the sample (after its initial reconstitution with 1mL RNase/DNase free water) using phosphate buffered saline (1x PBS). Centrifuge the determined volume of the cell suspension at 500-600xg to pellet the leucocytes. Remove the supernatant and proceed with the nucleic acid extraction process as per laboratory protocol, ensuring that the cell pellet is thoroughly homogenised in your chosen buffer.

The DNA/RNA extracted should be subjected to local quality control procedures (e.g. spectrophotometry, fluorometry, electrophoresis). If the extracted nucleic acid does not meet local quality control procedures a repeat sample should be requested as soon as possible (see the section below for guidance on requesting a repeat sample). Please do contact us (see contact details section) if you require any additional support optimising your standard nucleic acid extraction protocol for lyophilised material.

Materials used in the production of samples for UK NEQAS LI EQA programmes are obtained from a variety of sources. In all cases these materials (patient samples, cell lines, blood products etc) are provided under the conditions that they be used only for the educational purpose of EQA. **Participants must only use the samples provided for the purpose intended**. UK NEQAS LI, Sheffield Teaching Hospitals NHS Foundation Trust and any of its employees will not be responsible for any misuse of samples issued in this programme.





COSHH (Control of Substances Hazardous to Health): The cell preparations utilised by this trial are human derived and judged as having a minimal likelihood that pathogens are present. They have been virologically tested at authentication and found negative for Epstein-Barr virus (EBV), Hepatitis B (HBV) and *Human Immunodeficiency Virus* (HIV). Samples may contain antibiotics (penicillin and streptomycin) and an antimycotic (amphotericin B). No material is knowingly used that is positive for pathogens. However, it should be handled in accordance with local laboratory Health & Safety practices

Packaging: UK NEQAS LI sample(s) are sent by first class post or courier accordingly. Packaging is guided by Package Instruction P650.

Disposal/Spillage: The sample(s) cannot be assumed to be free from infectious agents therefore the material should be assessed as potentially infectious (refer to COSHH). If found to be damaged the packaging and sample(s) should be disposed of in accordance with local Health & Safety and waste management practices. It is advised that any spillage of reconstituted material should be dealt with in line with the local protocol for small volume blood spills. If no specific protocol is available, UK NEQAS LI suggests liberally covering the area with a suitable disinfectant (allowing sufficient contact time for effective action), absorbing the treated spillage with a paper towel before rinsing the area with water and drying thoroughly. See the section below for guidance on requesting a repeat sample.

REPEAT SAMPLES

Requests for repeat samples should be made by email (repeatsamples@ukneqasli.co.uk). Should this not be possible please telephone our Administration team on the number provided below. Please make a repeat sample request as soon as possible. If following repeat sample(s) processing, results obtained still do not pass local internal QC please contact UK NEQAS LI.

RESULTS SUBMISSION

Please only submit results applicable to the scope of this EQA programme. The online results submission pages for this programme are currently hosted externally by the data entry system JotForm. Participants are encouraged to carefully read and follow the instructions provided on the individual submission pages.

The JotForm data entry pages can be accessed from the UK NEQAS LI website (www.ukneqasli.co.uk) via the **Participant Hub**. Participants are required to log into this area of the website using their Lab number (also known as PRN, participant reference number), Identity and Password. (Trials/Data Entry>Myeloproliferative Neoplasms Diagnostic Testing (Not Accredited). Click the link symbol adjacent to the trial (MPN DT 232402). URL: https://form.jotform.com/UKNEQASLI/232402_MPNDT

Please note, all numerical fields must be completed using only decimal points to separate numbers, and not commas (e.g. enter 6.3 not 6,3).

If you experience any problems submitting your trial results, please do contact us (see contact details section) for assistance. Participants can make changes to existing laboratory contact details, request a password reminder or add a new contact at any time via the Participant Hub. Alternatively, please email (admin@ukneqasli.co.uk) or telephone the number provided below for assistance.

Failure to return your results will be recorded as a non-return and for an accredited programme impact upon your performance status. If you have any queries with regards to online data entry, please do not hesitate to contact us. It is the responsibility of participants to ensure that their results have been received by UK NEQAS LI. Further information can be found in the associated trial issue email and on our website (www.ukneqasli.co.uk).

REPORT DISTRIBUTION

The trial report for this programme will be available online at the UK NEQAS LI website (www.ukneqasli.co.uk). Participants are required to log into the **Participant Hub** (using their web user details) to retrieve PDF report(s). Participants will be notified regarding the availability of an issued report by email. To ensure you receive such emails please check the contact details we hold for your laboratory are accurate and current at re-registration. Participants can make changes to existing laboratory contact details, request a password reminder or add a new contact at any time via the Participant Hub. Alternatively, please email (admin@ukneqasli.co.uk) or telephone the number provided below for assistance.

CONTACT DETAILS

UK NEQAS LI, Pegasus House, 4th Floor, 463A Glossop Road, Sheffield, S10 2QD, UK.

Tel: +44 (0) 114 267 3600; e-mail: admin@ukneqasli.co.uk

Please state PRN (participant reference number) on all correspondence.