RIQAS

CYFRA 21-1 (CYTOKERATIN 19) PROGRAMME RQ9175

	Lab. Reference Number	
Please tick the correct option:	This is a new registration for CYFRA 21-1	
	This is an update to an existing CYFRA 21-1 registration	
If you wish to register multiple instrume	ents, please complete separate enrolment documents for each instru	ment
On each document please state an instru	ument identification name here	
Instrument Group Reports		
	ease contact RIQAS or your local Randox office or distributor for more details.	
Inter-Laboratory Group Reports To receive inter-laboratory group reports, please contact l	RIQAS directly.	
Please indicate cycles required in boxes b	pelow	
Cycle 10 March 2025 - February 2026	Cycle 11 March 2026 - February 2027	
Primary Contact Details: (CAPITAL LE	ETTERS ONLY)	
Laboratory / Hospital Name		
Department		<u> </u>
Postal Address		
City	State	
Postal / Zip Code Co	ountry	
Telephone Number		
Randox Office / Distributor		

RIQAS CYFRA 21-1 (CYTOKERATIN 19) PROGRAMME

RIQASNet - ELECTRONIC CORRESPONDENCE

Participation on RIQAS requires access to RIQASNet, a web-based online method for result entry, viewing of released reports and addition or change of assay details. In addition, PDF reports can be e-mailed to up to 3 e-mail addresses. Internet access and login details are required for RIQASNet. A login will be supplied by RIQAS based on "e-mail address 1" below. It is also possible to receive a csv file containing the information found on the summary page of the routine report.

I wish to receive a summary csv file (csv files must be sent to the same email addresses as the PDF reports)	FOR RIQAS USE ONLY RIQASNet Nc
	Date added: By:
	PDF copies set to csv copies set to
Primary Contact email for RIQASNet/PDF reports/summary csv files (Please E-mail address 1:	write in capital letters only)
E-mail addresses for additional PDF reports/summary csv files	
E-mail address 2:	

Customer Declaration: By submitting this enrolment document to RIQAS, either directly or via my local Randox representative, I, (the customer of RIQAS) confirm that:

- 1) I have read and understood the RIQAS policies stated in the most recent Method Questionnaire associated with this programme.
- 2) I understand that the submission of this enrolment document to RIQAS marks the beginning of an on-going agreement, and I will be automatically enrolled in subsequent cycles of this programme until RIQAS receives written confirmation of my cancellation. This should be received by RIQAS 12 weeks prior to the month in which the cycle starts.
- 3) I understand that I must inform RIQAS of any changes to my contact details, assay details or contract status
- 4) I authorise Randox Laboratories Ltd. to send communication related to the products and service provided to the e-mail or postal addresses stated on this document
- 5) I understand that I am permitted to request disclosure of, change or erase personal details held by Randox Laboratories Ltd. at any time.

REGISTRATION OF ASSAY DETAILS

It is possible to inform RIQAS of your chosen parameters and assay details by

- 1) Completing the 'REGISTRATION OF ASSAY DETAILS' on the following pages **OR**
- 2) Adding your own assay details using RIQASNet

Please select one of the following options

I wish to add my own assay details via RIQASNet once I have received my username, password and Lab Reference Number from RIQAS

(You do not need to complete the 'REGISTRATION OF ASSAY DETAILS' section of this document)

I wish to inform RIQAS of my assay details using this enrolment document

(please complete all remaining pages of the 'REGISTRATION OF ASSAY DETAILS' section)

For any further queries, please contact your local Randox office, Sales Representative or RIQAS directly.

Please contact RIQAS at

E-mail address 3:

Tel: +44 (0) 28 9445 4399
E-Mail: mail@riqas.com
RIQAS Scheme Co-ordinator: Sarah Fleck

RANDOX LABORATORIES LTD., 55 Diamond Road, Crumlin, County Antrim, BT29 4QY, United Kingdom

This programme is accredited by UKAS TO ISO/IEC 17043:2010 via Flexible Scope



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_ab. Reference Number	

RIQAS CYFRA 21-1 (CYTOKERATIN 19) PROGRAMME REGISTRATION OF ASSAY DETAILS

ONLY COMPLETE THIS SECTION IF YOU DO NOT INTEND TO REGISTER YOUR METHODS VIA RIQASNET

Please indicate your requirements by ✓ or by writing in the boxes below. Current participants should complete the document only for method changes

Current participants should complete the document only for method changes.							
ANALYTE	METHOD CODE	INSTRUMENT	REAGENT	SI UNITS	\checkmark	OTHER UNITS	
CYFRA 21-1 (CYTOKERATIN 19)				ng/ml			
Please use this space to desc	ribe "other" methods.						