

ALLIED HEALTH PROFESSIONALS COUNCIL



MINISTRY OF HEALTH
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CHECK LIST FOR THE MINIMUM REQUIREMENTS TO OPERATE A MEDICAL LABORATORY (Level 3)

1. Name of the Laboratory
2. Type of a medical Laboratory
 - a) Stand alone b) Under a Clinic/Hospital
 - b) If (b), Is the Clinic/Hospital licensed by any Health Professional Council?
 - d) If (c) above is yes, state the Council.....
3. **Location:** District.....County.....
4. Sub-county.....

LC1.....Street.....

Postal address.....Email.....

Phone(s) Landline.....Mobile.....
5. Is the Laboratory registered with the AHPC? Yes No If yes, Reg. No.....
6. Personnel inventory.

PERSONNEL	NAME	QUALIFICATION(tick to indicate the qualification)			
		Degree	Diploma	Certificate	Others qualifications
In-charge					
Others (including part time)					

* If more technical staff, fill additional sheet of paper

S/No	Tests performed	Yes / No	Comments
SECTION	SEROLOGY / IMMUNOLOGY		
1	Brucella serological test		
2	Syphilis screening (RPR/VDRL)		
3	HIV Serology tests		
4	Hepatitis B virus screening		
5	Hepatitis C virus screening		
6	Hepatitis A virus screening		
7	Cryptococcal Antigen		
8	C – Reactive Protein		
9	Rheumatoid factor		
10	Anti Streptolysin O		
11	Anti nuclear antibodies (ANA)		
12	Serological tests for other common infectious disease conditions		
SECTION	MICROBIOLOGY		
13	Gram staining		
14	ZN staining		
15	Examination of CSF and other body fluids i. Macroscopy ii. Microscopy including cell count iii. Biochemical tests iv. Culture and sensitivity		
16	Stool: i. Microscopy ii. occult blood iii. culture and sensitivity		
17	Urine: i. urinalysis, ii. microscopy, iii. culture and sensitivity		
18	Sputum i. microscopy ii. culture and sensitivity		
19	Examination of swabs: i. microscopy,		

	ii. culture and sensitivity		
20	Blood culture and sensitivity		
21	Examinations for fungal infections		
22	Semen Analysis		
23	TB culture		
SECTION	HAEMATOLOGY		
24	Blood slides for malaria and other haemoparasites		
25	ABO and Rh grouping		
26	Blood cross - matching		
27	Compatibility testing		
28	Coomb's test (Direct and Indirect)		
29	Storage of Blood for transfusion		
30	Erythrocyte Sedimentation Rate (ESR)		
31	Full Haemogram (CBC)		
32	Differential white cell count		
33	Reticulocyte count		
34	Peripheral blood film (comments)		
35	Bleeding and clotting time		
36	Prothrombin time (INR)		
37	Partial thromboplastin time		
38	HB Electrophoresis		
39	Sickle cell screening test		
40	Lupus Erythromatus test		
41	Processing and examination of bone marrow aspirates		
SECTION	CLINICAL CHEMISTRY		
42	Blood glucose		
43	Glucose Tolerance Test		
44	Alkaline phosphatase		
45	Aspartate aminotransferase(AST)		
46	Alanine aminotransferase(ALT)		
47	Gamma Glutamyl Transferases (GGT)		
48	Bilirubin - total and direct		
49	Proteun – total and albumin		
50	Protein electrophoresis		
51	Urea (BUN)		
52	Electrolytes(Na+, K+, Cl-)		
53	Creatinine		
54	Uric acid		
55	Lactic acid		
56	Calcium		

57	Inorganic Phosphorous		
58	Magnesium		
59	Lipase		
60	Serum amylase		
61	Total cholesterol		
62	Triglycerides		
63	High density lipoprotein		
64	Low density Lipoprotein		
65	Creatine phosphokinase(CPK)		
66	Lactic dehydrogenase(LDH)		
67	Blood gases(ICU)		
68	Hormonal tests (Fertility)		
69	Thyroid function		
70	PSA and other tumour markers		
SECTION	HISTOLOGICAL TESTS		
72	Cervical smear (Pap smear)		
73	Processing and examination of cytological specimens		
74	Processing and examination of histological specimens		
	OTHER TESTS		
75	CD4, CD8 or other CD classification		
76	PCR (DNA, RNA)		
77	ARV drug resistance testing		
78	Skin snips		

S/No	Physical Space	Yes /No	Comments
1	Total testing area – 24 sq meters (minimum)		
2	Phlebotomy to fit a couch with an arm chair		
3	Lighting (Natural /Artificial)		
4	Ventilation (Sufficient / Insufficient)		
5	Reception and Waiting area (sufficient)		
6	Patient's Toilet		
7	Storage area for: i. Lab reagents ii. Supplies iii. Records		
8	Source of running water		
9	Wash hand basin		
10	Fire extinguisher		

11	Separate room with a safety cabinet or a dead end safety box for handling highly infectious samples		
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S/No	Equipment and materials	Yes / No	Comments
1	Binocular microscope		
2	Heamatology analyser		
3	Chemistry analyser		
4	Immuno cell marker counter (e.g. CD4 counter)		
5	Air incubator		
6	Hot air oven		
7	Shaker		
8	Vortex		
9	Roller mixer		
10	Glucometer		
11	Appropriate strips for tests performed		
12	Appropriate stains		
13	Staining containers or rack		
14	Waste containers		
15	Electric Centrifuge		
16	ESR rack, tubes and timer		
17	Immersion Oil		
18	Microscope slides and glass cover slips		
19	Autoclave		
20	Refrigerator		
21	Disinfectants and Antiseptics		
22	Protective wear (coat, gloves, etc)		
23	Record books (Phlebotomy, Results and sample referrals)		
24	Microtome and accessories		
25	SOPs for tests being performed		
26	Phlebotomy kit and the appropriate specimen containers (stool, urine, blood, etc)		

District Laboratory Focal Person's general comments

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DLFP's NameSignature.....Date.....

Lab In-charge's Name.....Signature.....Date.....

Recommendations of DHO

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Signed:

Full Names:

Dated:

Official stamp/seal

FOR OFFICIAL USE ONLY

Comments

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Signed.....

Full Names.....

Title.....

Date.....