



RCPA QAP

The Royal College of Pathologists of Australasia
Quality Assurance Programs

What's New 2026



rcpaqap.com.au

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Note from the CEO

Welcome to the 2026 RCPAQAP Enrolment Year

As we look ahead to the 2026 enrolment year, I'm delighted to share an important update.

We warmly welcome John Crothers as the new CEO of RCPAQAP. John brings over 25 years of experience in diagnostics and healthcare leadership, including senior roles at Abbott and founding Pathology Awareness Australia. His expertise and vision will help us continue delivering excellence in external quality assurance.

After ten years as CEO, I would like to thank you for the trust and support you have shown me throughout this time. I am confident you will extend the same support to John as he steps into the role. I'm also pleased to let you know that I will remain with RCPAQAP in a new role as Senior Research Fellow, supporting John and the team through research, education, and strategic initiatives.

Thank you for your continued support. We look forward to working with you in 2026 and beyond.

Kind regards,



Tony Badrick – Senior Research Fellow



John Crothers – Chief Executive Officer



myQAP Developments

The myQAP customer portal was refined in 2025, strengthening the user experience when reviewing and troubleshooting survey reports.

Data Analytics – Linear Regression Tab

The Linear Regression tab allows you to combine participant data, allowing for a more comprehensive review of precision and accuracy across multiple instruments. The new tab will help you better understand performance trends and identify areas for improvement.

Post Analytical Correction Factor Modal

A new modal interface has been introduced to for customers who apply Post Analytical Correction Factors to patient results. You can now:

- Save correction factors directly in the portal – "Result Entry".
- Automatically apply them to defactor survey results during submission.

Late Enrolment Support

Late enrolments are now supported with a new feature that allows you to enter past survey results. This allows the customer to view performance via the Analytics Platform and ensures continuity and insight even if you join a mid-cycle program.

Coming in 2026

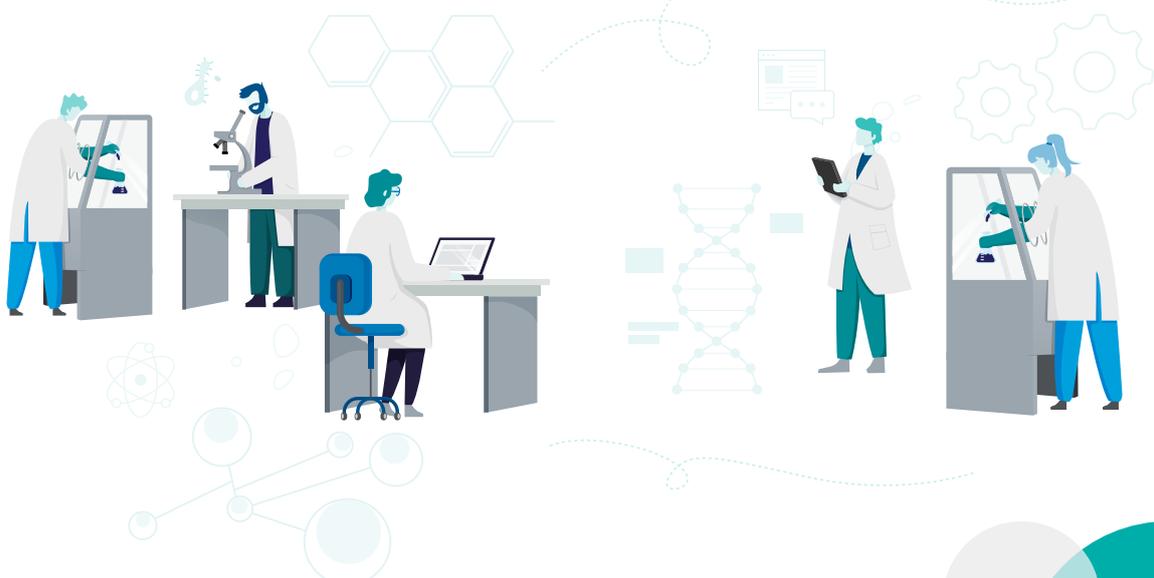
Corrective Action Form Integration

We are introducing a Corrective Action Form that will integrate with the Report Review functionality, allowing you to:

- Document corrective and preventative actions directly within the portal.
- Create a seamless workflow from review to resolution, supporting your compliance and quality improvement efforts.

Report Reviewer enhancements

A facility to manage reviewers' status that will allow supervisors to oversee the review status of a report review.





Anatomical Pathology

New programs

- **Melanocytic Lesions Diagnostic:** full program consisting of 1 survey/10 cases per year. Diagnostic learning and proficiency testing in surgically resected melanocytic lesions for individual pathologist, trainees and laboratories. Ten diagnostic challenges are provided as whole slide H&E images, and ancillary testing if relevant, in the myQAP portal. USBs can be purchased separately. This will be included in the future as a rotating sub-specialty program.
- **Immunohistochemistry PD-L1 scoring in TNBC (CPS):** full program consisting of 1 survey/6 cases per year. PD-L1 expression predictive biomarker scoring proficiency testing for laboratories and individual pathologists applying a Combined Proportion Score (CPS) in TNBC for pembrolizumab (Keytruda). Six Combined Proportion Score challenges are provided as whole slide H&E and PD-L1 images in the myQAP portal. USBs cannot be purchased for this program.
- **HPV Brightfield ISH (BRISH) Technical:** full program consisting of 1 survey/1 case per year. Proficiency testing for laboratories performing HPV brightfield in situ hybridisation in head and neck SCC cases.

Program Changes

- **Immunohistochemistry PD-L1 scoring in NSCLC (TPS):** Will also be offered as a laboratory enrolment in 2026. In 2025 it was offered as an individual enrolment only.
- **Immunohistochemistry HER2 IHC low expression scoring in Breast Cancer:** Will also be offered as a laboratory enrolment in 2026. In 2025 it was offered as an individual enrolment only.
- **FISH Diagnostic:** The probe for 2026 will be ETV6
- **Technical General:** Will include a Gram stain and Elastin special stain
- **Sarcoma Gene Testing:** The tests will be MDM2 and COL1A1-PDGFB
- **Neuropathology Immunohistochemistry and Technical:** The tests will be p53 and AFB staining
- **Immunohistochemistry Lymphoma Markers:** The tests will be: TdT (CD7); IgG4 (CD79a); CD19 (c-Myc)
- **Immunohistochemistry Mismatch Repair (MMR) protein:** The tests will be MLH1 and PMS2 on colorectal carcinoma and a second tissue type. This will be dispatched in July instead of May in 2026.
- **Immunohistochemistry General:** The tests will be Calretinin (MTAP); PTEN (NKX3.1); p16 (AE1/AE3)
- **Immunohistochemistry Breast Markers:** The tests will be ER, PR, HER2 IHC, CD34, S100. This will be dispatched in May instead of July in 2026.
- The rotating diagnostic specialist programs are 'Thoracic Diagnostic' and the new 'Melanocytic Lesions Diagnostic'.
- The Preferred Diagnosis field will become mandatory for each sample submission in the Diagnostic programs. This is to enable a new survey status "PARTIAL SUBMISSION" in the myQAP portal.



Biosecurity

New Programs

SSBA eLearning module for Melioidosis will be added to the suite of eLearning modules for Biosecurity in 2026. Similar to other eLearning modules, it provides general and technical training for laboratory staff. It generally takes 60 minutes to complete and there is a questionnaire at the end of the module.

Mycobacterial Specimen program: 1 survey/ 6 samples.

The program is available to selected Australian public health laboratories and approved private laboratories that routinely perform testing on MTBC strains. It will contain live mycobacterial isolates for phenotypic testing (identification and drug susceptibility testing) and whole genome sequencing (WGS). Participants will be required to perform wet-lab WGS and subsequent bioinformatics analysis of sequence data derived from the WGS wet-lab workflow.

Program Changes

- Organisms that will be included in Whole Genome Sequencing – Viral, Emerging Biological Threats, Viral Specimen and Bacterial Specimen Programs are yet to be determined. Updates regarding the 2026 enrolment will be sent when it is available.
- Simulated Exercise Program: Biopreparedness Exercise – Bacterial, consisting of *Bacillus anthracis* will be offered in 2026. The program provides scenario-driven exercises to assess laboratories' testing capabilities and ensure timely result reporting, which assists with public health responses.



Chemical Pathology

New Programs

- **Preeclampsia Markers:** full program consisting of 3 surveys/2 samples per year. sFLT-1, PIGF and the sFlt-1/PIGF ratio
- **Preterm Labour Markers:** full program consisting of 3 surveys/2 samples per year. IGFBP-1 for the assessment of premature rupture of membranes and phosphorylated IGFBP-1 as a predictor of preterm labour
- **PoCT CRP:** full program consisting of 4 surveys/2 samples per year. This program covers C-reactive protein and is designed for PoC devices.

New Measurands

- **Inborn Errors (Dried blood spot):** additional measurands Biotinidase, C26:0 lysophosphatidylcholine (LPC) have been added
- **Urine Toxicology:** pH has been added
- **Chromogranin A and Copeptin:** Fibroblast Growth Factor (FGF23) and Alkaline Phosphatase – Bone specific (Ostase) have been added

Programs released in 2025

- **Chromogranin A and Copeptin:** full program consisting of 3 surveys/2 samples per year. This program covers Chromogranin A, Copeptin and Cystatin C
- **Special Drugs: Beta-Lactams, Tuberculosis, and Other Drugs - Full Program:** 12 surveys/2 samples per year. Lyophilised sample. This program covers a range of beta-lactams, tuberculosis and other drugs, including Busulfan
- **Reference Interval Program:** complimentary addition to the Liquid Serum Chemistry enrolment

Program Changes

Condensed Serum and Liquid Serum Chemistry: Australasian customers now have the option to enrol in the Condensed Serum Chemistry program which comprises 12 surveys per year as opposed to 21 for General Serum Chemistry. The General Serum Chemistry Program will still be available as previously for those laboratories that prefer more frequent surveys

Liquid Serum Chemistry: Increasing from 3 to 4 surveys and a new measurand for Fibrosis 4 index for liver fibrosis

On-Site Urine Toxicology: program name changed to On-site/laboratory Screening Urine Toxicology Program to reflect the suitability of this program for AS/NZS 4308:2023 urine toxicology screening for both on-site devices and laboratory immunoassay methods. Addition of Creatinine as a check for adulteration.

Program in Development

- mTBI Markers – Traumatic Brain Injury
- Urine Oxalate
- Alzheimer's Markers
- Liquid Urine Chemistry



Cytopathology

New Programs

Cervical Screening Test Reporting (Australian participants only):

Annual proficiency testing in the reporting of cervical screening tests for laboratories performing cervical screening. In February, ten challenges will be provided, each including clinical notes, the current screening episode HPV NAT result, the current screening episode LBC result, and the National Cancer Screening Register (NCSR) history. This testing has been separated from the Gynaecological ThinPrep and SurePath programs and will be offered free of charge. The Gynaecological ThinPrep and SurePath programs will consist of a morphological assessment only.

Program Changes

- The Non-gynaecological Specialty program will consist of urine samples in 2026
- The Technical program will be a Papanicolaou staining exercise on a non-gynaecological sample
- The Gynaecological programs assessment mapping document is subject to change in 2026
- The Cervical Screening Program Indicators (Australian laboratories only) will be collected from the myQAP portal in 2026 and will reflect the *NPAAC Requirements for cervical screening, Third edition 2025*



Haematology

New Programs

- **Reticulocyte - Option 4 Abbott Alinity and Siemens Advia:** full program consisting of 6 surveys/2 samples per year
- **Reticulocyte - Option 5 Mindray:** full program consisting of 6 surveys/2 samples per year
- **Reticulocyte - Option 6 Sysmex:** full program consisting of 6 surveys/2 samples per year
- **HITTS Screen:** full program consisting of 2 surveys/2 samples per year. Heparin-induced thrombotic thrombocytopenia syndrome (HITTS) testing program will be suitable for screen and assays including CLIA/ELISA/Multiplate/SRA
- **Digital Differential:** full program consisting of 4 surveys/1 sample per year. Differential cell counts including unclassified cells on digital morphology instruments
- **DOAC urine dipstick Program:** suitable for detection of Direct Oral Anticoagulants in urine samples using (DOASENSE) urine dipstick

Program released in 2025

Viable CD34: full program consisting of 3 surveys/1 sample per year. This program is now open to New Zealand and Australian participants

Programs Changes

- **Blood Film Differential:** Frequency changed from 6 to 4 surveys per year
- **Morphology:** Frequency changed from 6 to 4 surveys per year. Number of cases per survey increased from 2 to 3
- **ESR Options:** Changes to APS for all 3 options
- **Paediatric Morphology and Morphology:** Review flagging on total/possible scores for descriptions have been enabled
- **Paediatric Morphology:** Harmonisation of terminology – expected feature vs highest scoring feature
- **Malarial Parasite:** Harmonisation of terminology – expected feature vs highest scoring feature
- **Unfractionated Heparin Monitoring and Low Molecular Weight Heparin monitoring:** Frequency increased from 2 to 3 surveys per year
- **D-Dimer:** the default unit will be updated from DDmg/L to FEU mg/L in Result Submission and Analytics
- **von Willebrand Factor:** measurand nomenclature has been updated to reflect contemporary convention
- Reticulocyte Option 2 Automated is being discontinued

Programs in Development

- Body Fluids Automated Haematology
- Alpha Thalassaemia Immunochromatographic
- **Reptilase Time:** full program consisting of 2 surveys/2 samples per year. Reptilase time is used for differentiating heparin effects, presence of FDP / D Dimer and dysfibrinogenaemia
- **Echis Time:** full program consisting of 2 surveys/2 samples per year. Echis time is used as a screening test for liver disease and sometimes for indicating presence of direct thrombin inhibitors

Immunology



Program Changes

- **Paraproteins:** urine monoclonal immunoglobulin measurands have been aligned with the serum naming convention
- **Tissue Autoantibodies:** SMA-G has been added as an option for Smooth Muscle Ab - Qualitative Pattern. Multiple patterns can now be selected if required. (This measurand remains unassessed.)
- **Type 1 Diabetes Antibodies:** a quantitative component for the ZnT8 measurand has been added
- **Extractable Nuclear Antigen (ENA) Antibodies:** the DFS measurand has been updated to DFS70

Program in Development

- T cell Subsets



KIMMS

Updates to the help resources available

KIMMS [Data Analysis & Assessment Criteria](#) section on the myQAP portal:

Includes general information, including data collection, result entry, the KIMMS report and calculating risk

KIMMS help videos on the myQAP portal:

- [Introduction to KIMMS](#)
- [KIMMS Report Calculations and Risk](#)
- [Examples of Calculating Risk in KIMMS](#)

Links:

1. <https://dataanalysis.rcpaqap.com.au/discipline/key-incident-monitoring-and-management-system/>
2. <https://myqaphelp.rcpaqap.com.au/video/introduction-to-kimms/>
3. <https://myqaphelp.rcpaqap.com.au/video/kimms-report-calculations-and-risk/>
4. <https://myqaphelp.rcpaqap.com.au/video/examples-of-calculating-risk-in-kimms/>

Microbiology



New Programs

- **Molecular Diphtheria Toxin:** 2 surveys/6 samples. Toxin testing in *Corynebacterium diphtheriae* is vital for monitoring the prevalence and spread of toxigenic strains in the community. The program will provide heat-inactivated liquid cultures suitable for molecular testing. The participants will be assessed for the detection of the toxin gene.
- ***Aspergillus* Galactomannan Antigen:** 2 surveys/6 samples. The test is a crucial diagnostic tool for identifying invasive aspergillosis in immunocompromised patients. The program will contain simulated patient specimens suitable for *Aspergillus* galactomannan antigen testing. The participants will be assessed for the detection of the galactomannan antigen.
- **Molecular Group B Streptococcus:** 1 survey/6 samples. A dedicated program for the molecular detection of Group B Streptococcus in pregnant women, enhancing laboratory testing for this pathogen using rapid molecular assays.
- **Whole Genome Sequencing – General Bacterial:** 1 survey/2 samples. The program will contain simulated patient specimens consisting of lyophilised samples. Participants will be required to perform testing (including subculture) and confirm the species identification prior to whole genome sequencing (WGS). They will also be required to analyse the sequence data from the WGS using their choice of bioinformatics pipeline.

Programs released in 2025

- **Molecular Dermatophytes:** 2 surveys/6 samples. The program will contain simulated clinical material consisting of liquid culture samples. Participating laboratories will be assessed for their ability to detect and identify a comprehensive range of dermatophytes such as *Microsporum*, *Trichophyton*, *Epidermophyton* and *Nanizzia* using molecular techniques.
- ***Helicobacter pylori* faecal antigen:** 2 surveys/3 samples. Liquid faecal sample. *H. pylori* stool testing is non-invasive and involves detecting *H. pylori* antigen in human stool samples. The program will contain simulated clinical material suitable for *H. pylori* faecal antigen testing via enzyme immunoassay or immunochromatography. Participating laboratories will be assessed for the detection of the antigen.

Program Changes

- **Molecular CSF Pathogens:** Newly added pathogens for 2026, include *Escherichia coli* K1, *Listeria monocytogenes* and *Streptococcus agalactiae*.
- **Molecular Enterovirus:** Featured as a liquid sample for 2026 and will be distributed as part of the bulk dispatch.



Molecular Genetics

Programs released in 2025

- **3 Gene Carrier Screening:** 2 surveys/4 samples (2 reproductive couples). This module assesses laboratory performance in the detection and interpretation of *CFTR*, *FMR1* and *SMN1* gene variants in a carrier screening context
- **RCPAQAP Non-Small Cell Lung Carcinoma Panel Testing:** 1 survey/2 samples. This module will provide 2 cases of 5 x 6µm FFPE tissue sections (mounted) for nucleic acid-based multi-gene panel testing of *EGFR*, *BRAF*, *KRAS*, *MET*, *ALK*, *ROS1*, *RET*, *NTRK1*, *NTRK2* and *NTRK3* genes
- **RCPAQAP DPYD genotyping:** 1 survey/2 samples. This module assesses laboratory performance in the detection and interpretation of clinically relevant DPYD variants for fluoropyrimidine toxicity
- **RCPAQAP HLA-B*15:02 and HLA-A*31:01:** 2 surveys/2 samples. This module assesses laboratory performance in the detection and interpretation of HLA-B*15:02 and HLA-A*31:01 variants for carbamazepine hypersensitivity
- **RCPAQAP HLA-B*58:01:** This module assesses laboratory performance in the detection and interpretation of HLA-B*58:01 variant for allopurinol hypersensitivity

Program Changes

- **Thrombosis:** Up to 1.5µg of purified DNA in TE pH 8.0 will be provided
- **FLT3 ITD and TKD:** Up to 1.5µg of purified DNA in TE pH 8.0 will be provided
- **Molecular Testing in Glioma:** IDH1/2 genotyping and MGMT methylation results will have separate clinical interpretation measurands
- **3 Gene Carrier Screening:** Analytical Scope replaces the Limit of Detection measurand
- **Quality Assessment of DNA Extracts:** New measurand added for DNA Extraction – “Platform used”
- **Quality Assessment of FFPE DNA Extracts:** New measurand added for DNA Extraction – “Platform used”
- **RCPAQAP Non-Small Cell Lung Carcinoma Panel Testing:** Patient report upload and additional method details enabled for each sample

Programs in Development

- Childhood Syndromes Genomic Testing
- Inherited Bone Marrow Disorders
- MLH1 Methylation

Serology



New Programs

- **Melioidosis:** full program consisting of 1 survey/2 samples per year. Clinical material provided to assess the detection of *Burkholderia pseudomallei* using serological markers. This program facilitates routine surveillance testing to monitor exposure or infection
- **Diphtheria and Tetanus:** full program consisting of 2 surveys/2 samples per year. Clinical material provided to assess immunity to diphtheria and tetanus through the detection of specific IgG antibodies

Program Changes

- **Entamoeba:** Sample volume reduced from 500 μ L to 200 μ L
- **Influenza A and B Antibody:** Sample volume reduced from 500 μ L to 400 μ L
- **Measles:** The program will no longer include reporting for Total Antibody
- **Legionella Antigen:** New measurand added – Legionella Urinary Total Antigen; Additional interpretive comments added for *L. longbeache*.=
- **Coronavirus SARS-CoV-2 Antibodies:** Number of surveys reduced from 4 to 2
- **Coronavirus SARS-CoV-2 Antigen:** Number of surveys reduced from 4 to 2
- **Cytomegalovirus:** The program will no longer include reporting for Total Antibody
- **Summary of performance update:** Coloured flagging will be applied when ≥ 6 participants using the same method show $\geq 80\%$ consensus. A yellow flag indicates your result aligns with overall consensus but differs from your peer group. An amber flag indicates your result differs from overall consensus but aligns with your peer group.
- Method-specific cut-off values will be included across all quantitative charts to improve clinical relevance



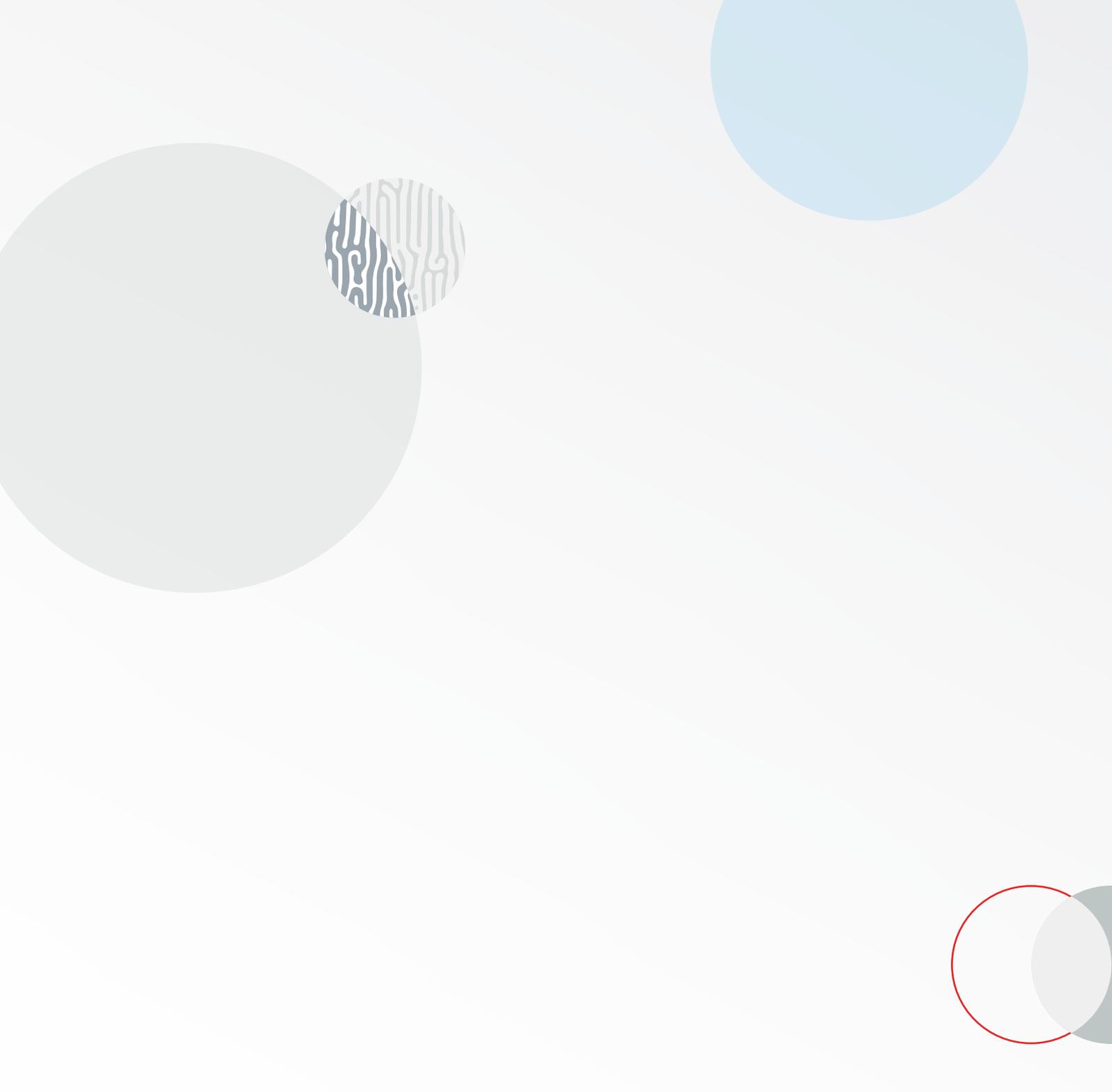
Transfusion

Programs released in 2025

- **Haemolytic Disease of the Newborn:** 2 surveys/ 2 samples. EDTA whole blood

Program Changes

- **ABO Titration:** A new measurand has been added for data collection purposes – “Are Commercial Red Cells Being Used?”
- **Haemolytic Disease of the Newborn:** The program will no longer include reporting for Patient IDs



The Royal College of Pathologists of Australasia Quality Assurance Programs (RCPAQAP) provides excellent, peer-reviewed external quality assurance assessments that are used by medical laboratories on six continents.

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