

List of Planned Associated Projects in the NORDKEM Project 5/89 on Medical Need for Quality Specifications in Laboratory Medicine

<u>No.</u>	<u>Participants</u>	<u>Title</u>
1.	Hørder M, Olivarius N, Jørgensen PJ, Bihlet I, Hyltoft Petersen P	Diabetes in Primary Health Care
2.	Fraser C, Hyltoft Petersen P Antonsen S	Quality Specifications for Detection Limit
3.	Grodum E, Hyltoft Petersen P, Hangaard J, Bollerslev J et al.	Reference interval for cortisol at CRH-test
4.	Djurhus S, Rohold A, Vadstrup S, Hyltoft Petersen P	Reference intervals for S--Potassium
5.	Magid E, Hyltoft Petersen P et al.	Evaluation of clinical tests
6.	Heedman P-A, Olsson S, Larsson O Ritter B, Marsell R, Östergaard H, Olander B, Åkerblom Å	Prevalence of idiop. hemochromatosis and hypercholest. 18 y men
7.	Arends J, Hyltoft Petersen P, Nørgaard-Pedersen B	Qual. spec. maternal S- α -Fetoprotein analysis
8.	Uldall A, Blaabjerg O	Planning & implement. of Nordic reference S
9.	Tryding N et al.	Analyt. specificity, tests in primary care
10.	Nilsson Ehle P	Qual. spec. S--Cholest
11.	Westgard J O, Hyltoft Petersen P	S--Cholest. Clin strat, anal. qual., control system
12.	Sandberg S	Qual. spec. for tests in primary care
13.	Kaikola H-L	--"
14.	Penttilä I M	Qual. spec. S-- α -Feto- protein
15.	Lindstedt G	Qual. spec. thyroid hormones
16.	Lindstedt G	Qual. spec. prostate specific antigen
17.	Lytken-Larsen M, Fraser C, Hyltoft Petersen P	Qual. spec. - HbA _{1c}

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| 18. Kofstad J, Momsen G, Gade
Christensen N | Qual. spec. B--pH, pCO ₂ ,
pO ₂ , Ca ⁺⁺ |
| 19. Nilsson Ehle H | Qual. spec. iron de-
ficiency parame-
ters |
| 20. Linnet C | Anal. goals for P--
Bilirubin (unconj)
determinations |
| 21. Linnet C | Anal. goals for P--
Creatinine determ. |
| 22. Dybkaer R, Hyltoft Petersen P,
de Verdier C-H et al. | Nomenclature |
| 23. Stenman U-H | Qual. spec. for
human choriogonado-
tropin (hCG) |
| 24. Brandslund I, Borg Rasmussen J | Conc α ₁ -antitrypsin
in workers in dusty
work areas |
| 25. Sorto A, Kaihola H-L | Quality goals & orga-
nization of QC in pri-
mary care lab. |

In the associated projects the quality specification work should be performed for each analytical quantity in each specified situation. Models for estimation of needed quality and for specification of acceptable analytical performance and critical errors have been developed during the past ten years. These models should be applied to the clinical strategy in the project, whether a screening, a diagnostic situation or a time-related pathological process. Each clinical situation should be analyzed concerning the type of model to be used, and - if no relevant model is available - to develop or elaborate new and useful models.

The main project group must be directly involved by providing the associated groups with the available literature and, if needed, to help the groups to find their relevant models or to try to develop new useful models. On the other hand the main project group should try to compile the collected knowledge and make it useful.