

NATIONAL OPHTHALMIC PATHOLOGY EQA SCHEME

CASE SUBMISSION FORM

EQA sequential No:

Case type: Scoring () Educational ()

Local laboratory number:

Gender of patient (if known):

Age of patient (if known):

Type of specimen:

Clinical information available at time of reporting:

Relevant macroscopic information:

Relevant information on special stains / immunohistochemistry:

Diagnosis as reported:

Participant submitting the case:

Please send at least **40 H&E** stained sections to the National Ophthalmic Pathology EQA Scheme Secretary at the following address:

Department of Histopathology, 1st Floor, CSB1
Central Manchester University Hospitals
Oxford Road
Manchester
M13 9WL

According to the National Ophthalmic Pathology EQA scheme SOP 4, the submitting participant is required to check that the material submitted is of adequate quality and contains the diagnostic features. The submitting participant must ensure that the given clinical details are not misleading in the setting / context of an EQA exercise.