

# Test forms for the External Quality Assessment (EQA) for laboratories participating in the European Antimicrobial Resistance Surveillance Network (EARS-Net), 2023

**Participating laboratories can only submit results online via the webtool.**  
**This form cannot be submitted.**

This form is designed to help participating laboratories prepare their results before submission in the EARS-Net EQA webtool (<https://earsnet.ega.dtu.dk/>). When submitting the results online in the webtool, participants will be asked for the following information:

## TEST FORM METHODS

***Klebsiella pneumoniae* - strain no.** \_\_\_\_\_

The isolate should be considered as being obtained from a patient with a bloodstream infection.

For aminoglycosides (amikacin, gentamicin and tobramycin) and colistin, it should be assumed that the antimicrobials will be administered in combination with other agents.

Breakpoints currently based on ECOFF values can be used for interpretation of results, when applicable, if no other relevant EUCAST clinical breakpoints exist.

Non-reported results will not be scored, but will still be visible in the individual evaluation reports.

1. Which methodology did you mainly use for antimicrobial susceptibility testing (AST) in this EQA exercise?

- Broth microdilution
- Macro broth dilution (tubes)
- Agar dilution
- Gradient test
  - E-test
  - MIC strip
  - Other – specify: \_\_\_\_\_
- Disk/Tablet diffusion
  - Oxoid
  - Neo sensitabs
  - BD/BBL sensi disc
  - MAST
  - Liofilchem
  - Other– specify: \_\_\_\_\_

Automated system

VITEK

Phoenix

Microscan Walkaway

Other – specify: \_\_\_\_\_

Other

If other, please specify: \_\_\_\_\_

2. Which standard/guideline did you use when performing AST?

EUCAST

Other

If other, please specify: \_\_\_\_\_

3. Would you normally send this (invasive!) strain to a reference or other laboratory?

Yes/No

4. Please change method for the relevant antibiotic(s) if it differs from the chosen method in question 1. The result will by default be set to the information provided in question 1.

| Antimicrobial               | Method |
|-----------------------------|--------|
| Amikacin                    |        |
| Amoxicillin-clavulanic acid |        |
| Cefepime                    |        |
| Cefotaxime                  |        |
| Ceftazidime                 |        |
| Ceftriaxone                 |        |
| Ciprofloxacin               |        |
| Colistin                    |        |
| Ertapenem                   |        |
| Gentamicin                  |        |
| Imipenem                    |        |
| Levofloxacin                |        |
| Meropenem                   |        |
| Moxifloxacin                |        |
| Ofloxacin                   |        |
| Piperacillin-tazobactam     |        |
| Tobramycin                  |        |

| Strain ID | Antimicrobial               | Results and interpretation |  |                   |
|-----------|-----------------------------|----------------------------|--|-------------------|
|           |                             | ≤ / = / >                  | MIC value (mg/L)<br>or zone diameter<br>(mm) | S / I / R /<br>NA |
|           | Amikacin                    |                            |  |                   |
|           | Amoxicillin-clavulanic acid |                            |  |                   |
|           | Cefepime                    |                            |  |                   |
|           | Cefotaxime                  |                            |  |                   |
|           | Ceftazidime                 |                            |  |                   |
|           | Ceftriaxone                 |                            |  |                   |
|           | Ciprofloxacin               |                            |  |                   |
|           | Colistin                    |                            |  |                   |
|           | Ertapenem                   |                            |  |                   |
|           | Gentamicin                  |                            |  |                   |
|           | Imipenem                    |                            |  |                   |
|           | Levofloxacin                |                            |  |                   |
|           | Meropenem                   |                            |  |                   |
|           | Moxifloxacin                |                            |  |                   |
|           | Ofloxacin                   |                            |  |                   |
|           | Piperacillin-tazobactam     |                            |  |                   |
|           | Tobramycin                  |                            |  |                   |

Kindly note, due to the Material Transfer Agreements (MTAs) between DTU and the original providers of the isolate:

1. It is recommended to store the strain in your strain collection (e.g. in a -80°C freezer), at least until you have reviewed your results from this EQA exercise. This will allow for repetition of species identification and AST, if needed, in light of your individual performance.
2. Strains received for the 2023 EARS-Net EQA cannot be re-distributed further by the recipient laboratories.
3. It is not possible for DTU or the National EARS-Net EQA Coordinator to distribute strains to laboratories after the EQA exercise, e.g. for confirmatory, training, or reference purposes.