

WAIVER OF CONFIDENTIALITY

Dear Participant

According to ISO 17043 clauses 4.10, the identity of participants in a proficiency testing scheme shall be confidential and known only to **the persons involved in the operation** of the proficiency testing scheme i.e. the laboratory personnel running the PT. This effectively means that even the Quality Managers of the various laboratory groups are not allowed to receive these reports.

It is our belief that labs WISH TO HAVE the name and address on the report as this makes the function of those reviewing the reports easier and reduces the risk of error.

Thus we propose to leave the laboratory details on all our reports UNLESS you return this document to us indicating your unwillingness to have your lab details on the report.

In other words, we **ASSUME** that you wish to waive your rights to the confidentiality in ISO 17043, clause 4.10, as we believe that it is to the labs advantage to have the name.

If you are in agreement with this waiver, please do nothing.

If you wish your laboratory details to be removed, then sign below and return to thistleqa@lgcgroup.com a.s.a.p.

Name: _____	Designation: _____
Programme & QA #: _____	Programme & QA #: _____
Programme & QA #: _____	Programme & QA #: _____
Programme & QA #: _____	Programme & QA #: _____
Lab group: _____	Lab name: _____
I _____ request that Thistle QA removes the details of my laboratory from all my reports.	
Signed _____ on the _____ day of _____	
at _____	