

**International Consortium for Harmonization of Clinical Laboratory Results**  
**Harmonization Oversight Group / Council Conference Call Meeting**

**DATE:** 14 September 2017

**TIME:** 7:00 a.m. to 8:00 a.m. EDT

<b>HOG Member</b>	<b>Present this call</b>	<b>Council Member</b>	<b>Present this call</b>
Greg Miller (chair)	x	Gary Myers (chair, AACC)	x
Eunice Lee (Vice-Chair)	x	Junghan Song (KSLM)	x
Joseph Passarelli	x	Hideo Kato (JCCLS)	x
Steve Master		Katsuyuki Nakajima (JCCLS)	x
Amy Saenger	x	Akira Seki (JCCLS)	x
Tony Killeen	x		
Ian Young			
Masato Maekawa	x		

**AACC Staff:**

Ms. Stefanie Kleinman (Scientific and Practice Affairs Specialist)

**Minutes:**

1. The draft revised operational procedures from the August meeting were reviewed. A decision was made to discontinue the Organizational Member category and to rename the Strategic Partner Group as the Stakeholder Member category. For 2018 the Council agreed the annual fee for a Stakeholder Member will be \$1500 for organizations and \$500 for individuals. The annual fee for a Council Member will be \$10,000. The revised operational procedure with the changes noted was approved by the Council. This approved draft will be used to work with IFCC to transition the secretariat for 2018 and following.
2. Anti-ds DNA Ab was reviewed and the HOG agree with low priority for the qualitative test and medium priority for the quantitative test.
3. ANA was reviewed and an active status will be assigned.
4. Additional measurands from the spreadsheet were discussed and assignments for review and recommendations were agreed as shown below.

5. Next conference call meetings are October 12, November 22, and December 13.

Follow up assignments:

Measurand	Decision	Assigned to
Protein S	H for Asian population; M other areas; decision needed	<b>Steve</b> : Protein S, per my colleague, has significant variation and would benefit from harmonization in the same way that other coag tests have already benefitted. It looks like the scientific and standardization committee of ISTH already has a committee looking into this, so I'll see if I can contact them for further information.
CO2		<b>Greg</b> has crossover data with 4 mmol/L constant bias. <b>Steve</b> has crossover data with a 2 mmol/L bias. <b>Greg</b> to contact <b>Eunice</b> for her experience.
Tacrolimus, serolimus		<b>Ian</b> to review

Measurand	Decision	Assigned to
Various drugs		<b>Greg</b> got feedback from Paul Janetto and Bill Clarke. Generally adequate agreement but some improvement desirable. Greg will ask a colleague to review comments and recommend a relative priority.
Gentamycin		<b>Greg</b>
carbamazepine		<b>Greg</b>
antistreptolysin O		<b>Tony</b>
Compliment C3 and C4		<b>Tony</b>
urine chloride, calcium, urea		<b>Amy</b>
Hepatitis C RNA		<b>Steve</b>
Procalcitonin		<b>Amy</b>
IgE		<b>Tony</b>
Squamous Cell Carcinoma Ag		<b>Eunice</b>
Compliment CH-50		<b>Amy</b> to ask a colleague
beta-2 microalbumin		<b>Steve</b>