

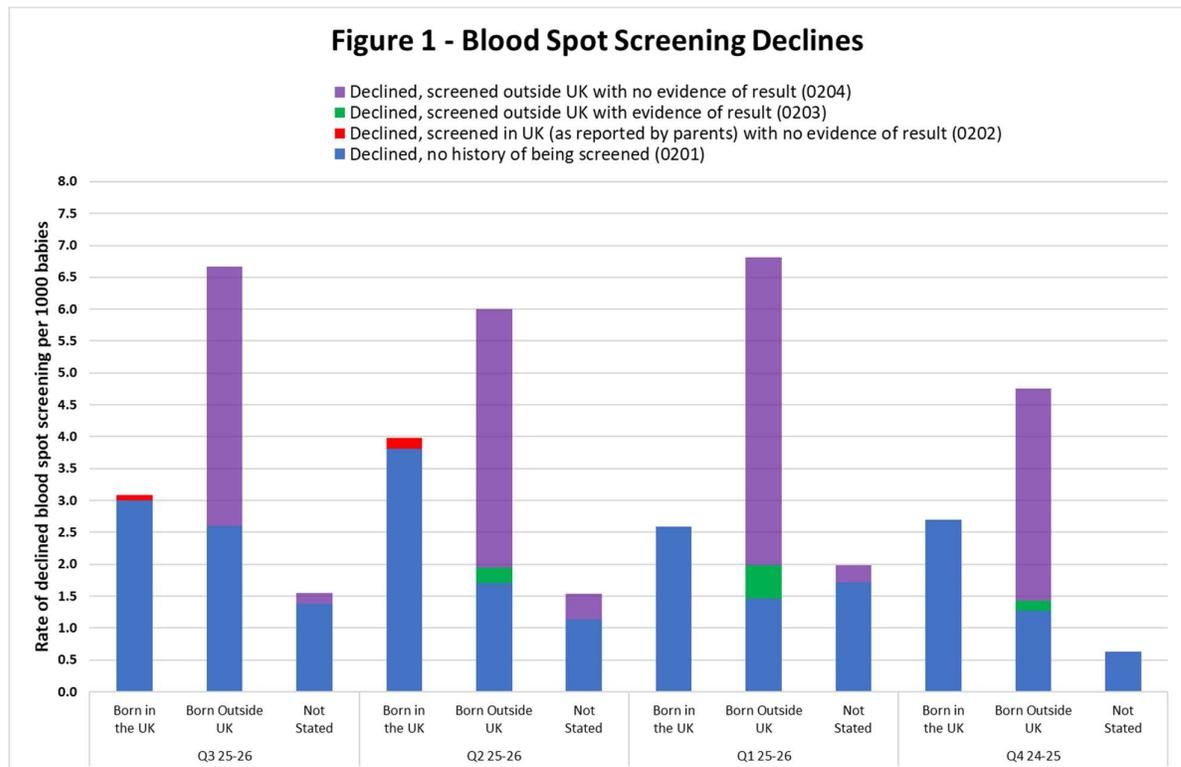
Manchester Newborn Screening Laboratory Quarterly Blood Spot Screening Report: Quarter 3 2025-26

Manchester Newborn Screening Laboratory, which serves babies born in Greater Manchester, Lancashire and South Cumbria, received 13143 blood spot samples between 1st October 2025 and 31st December 2025. This report describes performance against the NHS Newborn Blood Spot Screening Programme Standards. Full details of the standards including definitions and exclusions can be found at <https://www.gov.uk/government/publications/standards-for-nhs-newborn-blood-spot-screening>. The appendix of this document contains the data for standards 3-7 in table form.

The data for the laboratory reportable standards is presented by maternity unit/NHS trust of the sample taker. For accurate figures, please ensure the trust code is written/stamped on the blood spot card.

Declines

In Quarter 3 the laboratory received 139 notifications of declined blood spot screening. Figure 1 shows the trends in declined screens over the past year, by place of birth (born in UK or born outside of UK). The laboratory should be notified of all declines, including those for babies screened elsewhere, rather than directly notifying Child Health.



Key to colour coding

Met achievable threshold
Met acceptable threshold
Within 10% of acceptable threshold
More than 10% below acceptable threshold

Standard 3 – The proportion of blood spot cards received by the laboratory with the baby’s NHS number on a barcoded label

Acceptable: ≥ 90.0% of blood spot cards are received by the laboratory with the baby’s NHS number on a barcoded label.

Achievable: ≥ 95.0% of blood spot cards are received by the laboratory with the baby’s NHS number on a barcoded label.

Figure 2 displays performance against standard 3.

Overall, 85.8% of samples received in quarter 3 of 2025/26 had a barcoded NHS number label, which is slightly lower than the previous quarter (86%). Of the 11 maternity units, 5 met the acceptable standard with 2 of these meeting the achievable threshold.

Standard 4 - The proportion of first blood spot samples taken on day 5

Acceptable: ≥ 90.0% of first blood spot samples are taken on day 5.

Achievable: ≥ 95.0% of first blood spot samples are taken on day 5.

Figure 3 displays performance against standard 4. Overall, 92.1% of samples received in quarter 3 of 2025/26 were collected on day 5, which is lower than the previous quarter (92.5%). 8 out of the 11 maternity units met standard 4, and 2 of these met the achievable threshold.

Figure 2: Standard 3 - The proportion of blood spot cards received by the laboratory with the baby's NHS number on a barcoded label

Most recent quarter on right-hand side

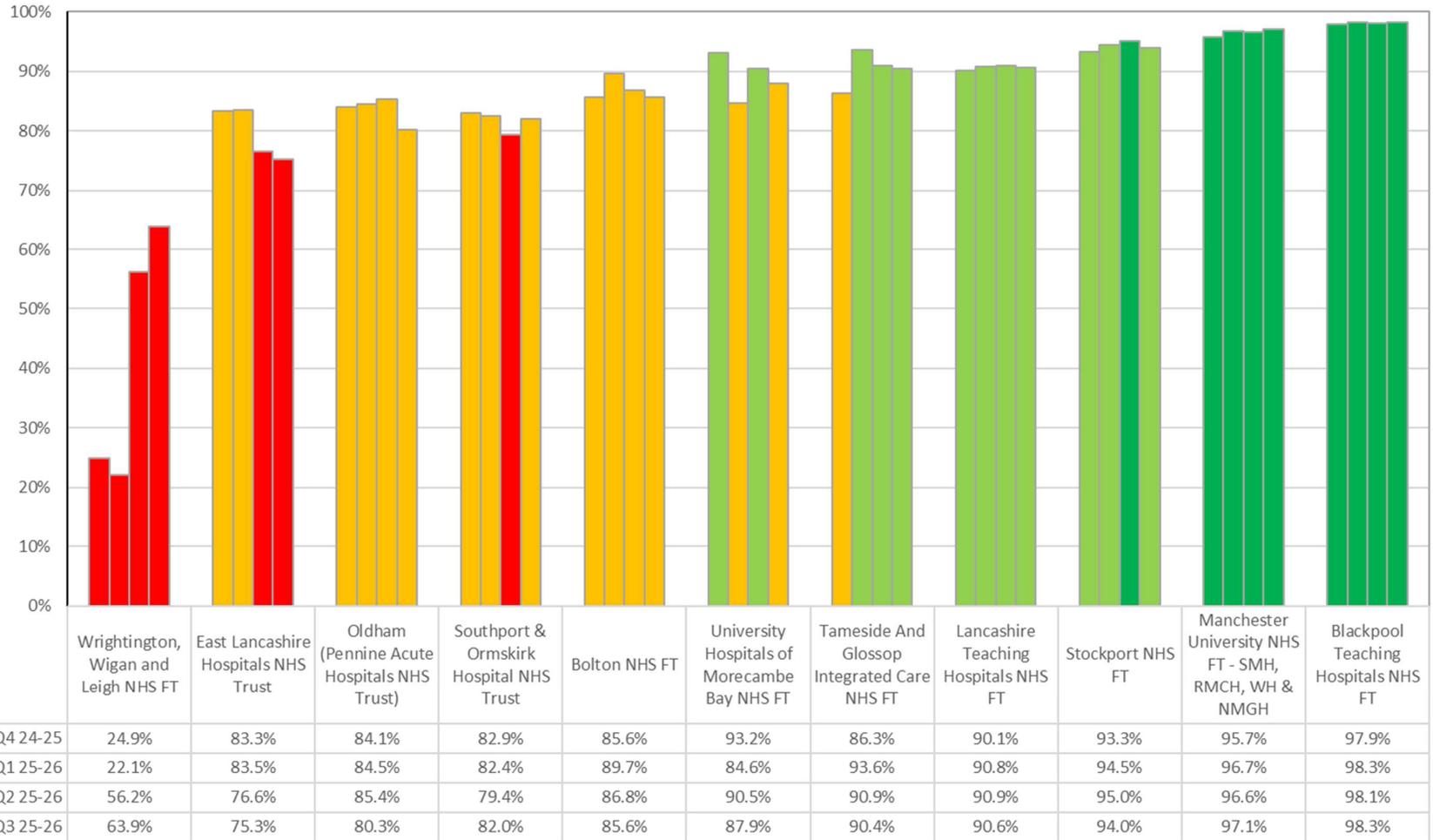
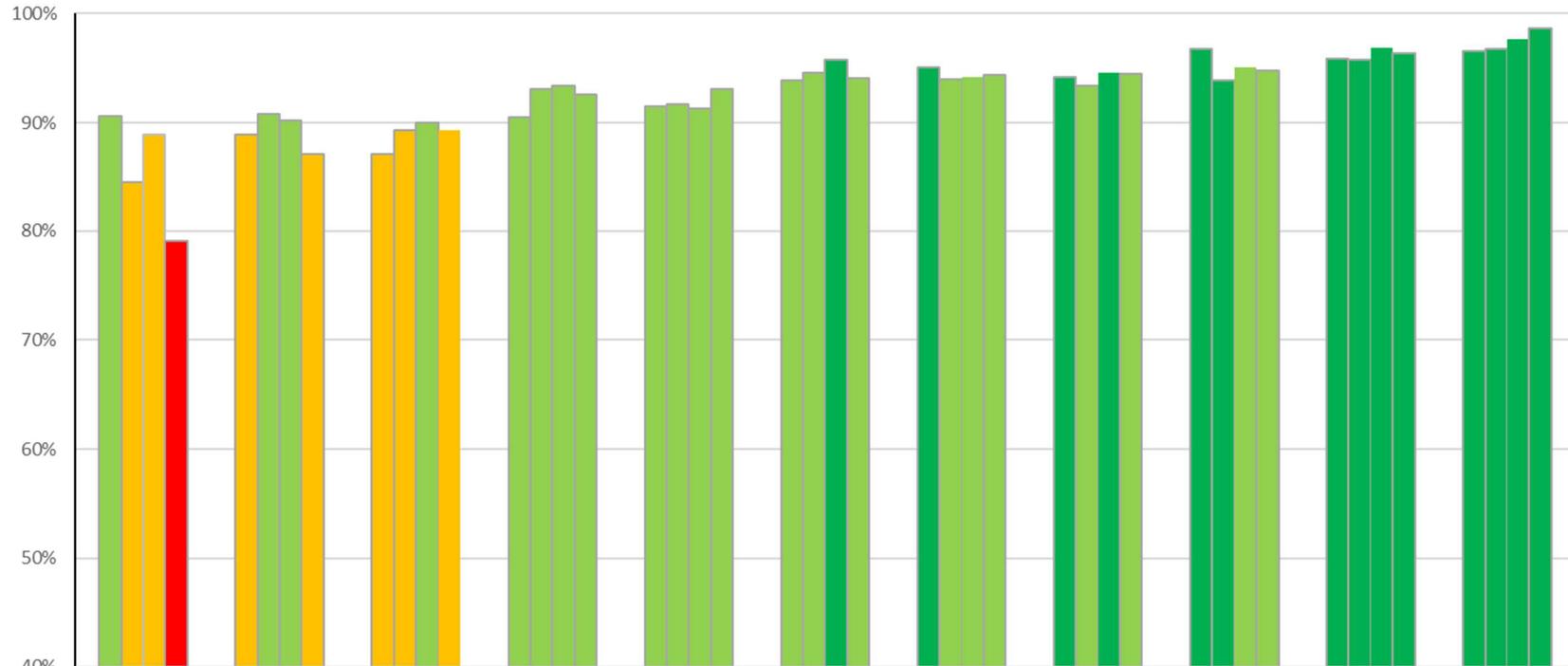


Figure 3: Standard 4 - The proportion of first blood spot samples taken on day 5

Most recent quarter on right-hand side



	Southport & Ormskirk Hospital NHS Trust	Oldham (NCA)	East Lancashire Hospitals NHS Trust	Bolton NHS FT	Tameside And Glossop Integrated Care NHS FT	Blackpool Teaching Hospitals NHS FT	Lancashire Teaching Hospitals NHS FT	Wrightington, Wigan and Leigh NHS FT	Stockport NHS FT	Manchester University NHS FT - SMH, RMCH, WH & NMGH	University Hospitals of Morecambe Bay NHS FT
Q4 24-25	90.6%	88.9%	87.1%	90.5%	91.5%	93.9%	95.1%	94.2%	96.8%	95.9%	96.5%
Q1 25-26	84.6%	90.8%	89.3%	93.1%	91.7%	94.6%	94.0%	93.4%	93.9%	95.7%	96.7%
Q2 25-26	88.9%	90.2%	90.0%	93.4%	91.3%	95.7%	94.2%	94.6%	95.1%	96.8%	97.7%
Q3 25-26	79.0%	87.1%	89.3%	92.6%	93.1%	94.0%	94.3%	94.5%	94.8%	96.4%	98.7%

Standard 5 - The proportion of blood spot samples received less than or equal to 3 working days of sample collection

Acceptable: $\geq 95.0\%$ of all samples received less than or equal to 3 working days of sample collection.

Achievable: $\geq 99.0\%$ of all samples received less than or equal to 3 working days of sample collection.

Figure 4 displays performance against standard 5.

Overall, 97.5% of samples were received within 3 working days. Eight Trusts met the standard, with 6 of these reaching the achievable threshold. Performance was more than the previous quarter (97.2% samples received within 3 working days).

Standard 6 - The proportion of first blood spot samples that require repeating due to an avoidable failure in the sampling process

Acceptable: Avoidable repeat rate is $\leq 2.0\%$

Achievable: Avoidable repeat rate is $\leq 1.0\%$

The avoidable repeat rate for quarter 3 was 3.0%, which is higher compared to quarter 2 (2.6%). The main reason for an avoidable repeat was a compressed/damaged sample followed by insufficient blood. The performance for each trust is displayed in figure 5. Two Trusts met the acceptable standard with one of these reaching the achievable threshold. Figure 6 compares the avoidable repeat rate for samples collected from in-patients with samples collected from babies at home/in the community. The rate was 2.4% for babies at home (2.1% in quarter 2) and 7.8% for samples collected from in-patients (6.6% in quarter 2).

Figure 4: Standard 5 - The proportion of blood spot samples received less than or equal to 3 working days of sample collection

Most recent quarter on right-hand side

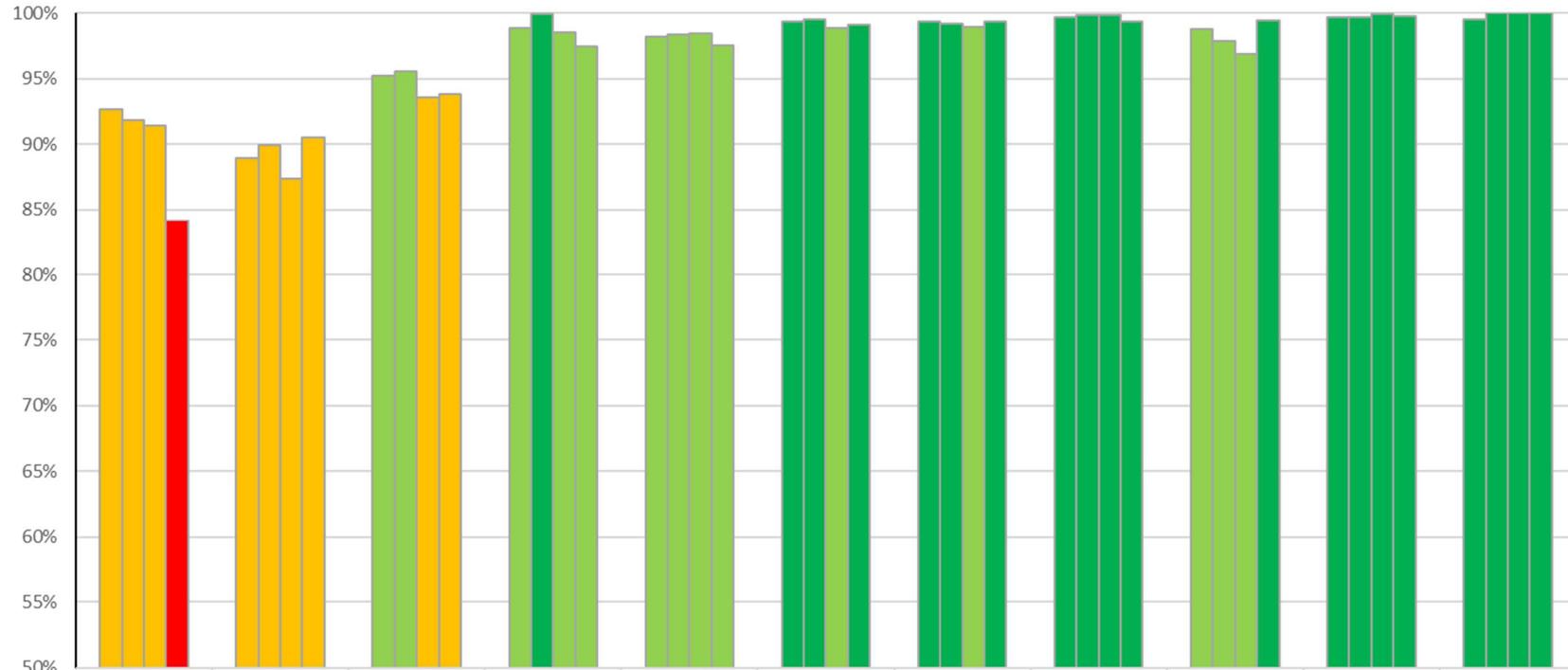


Figure 5: Standard 6 - The proportion of first blood spot samples that require repeating due to an avoidable failure in the sampling process by Trust

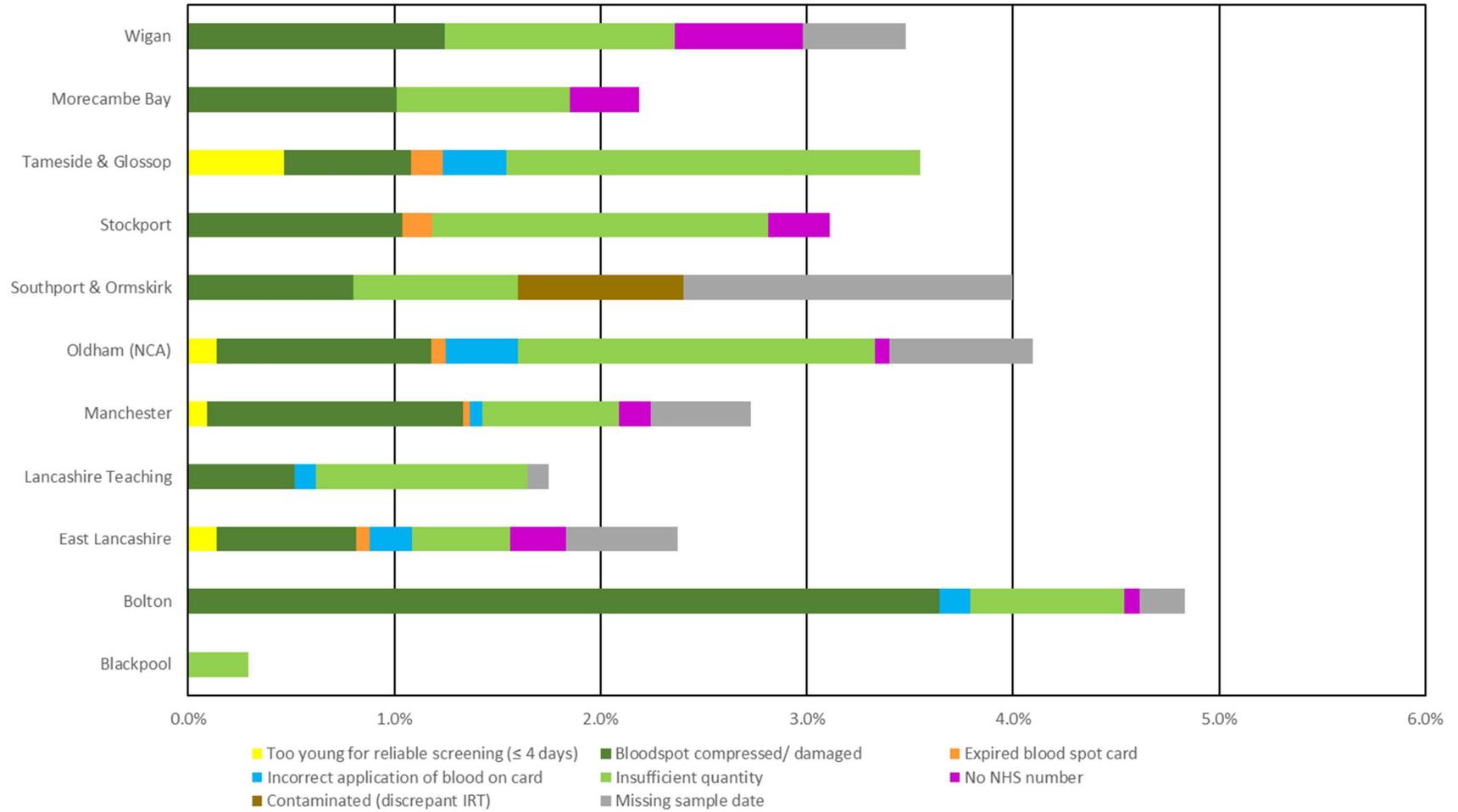
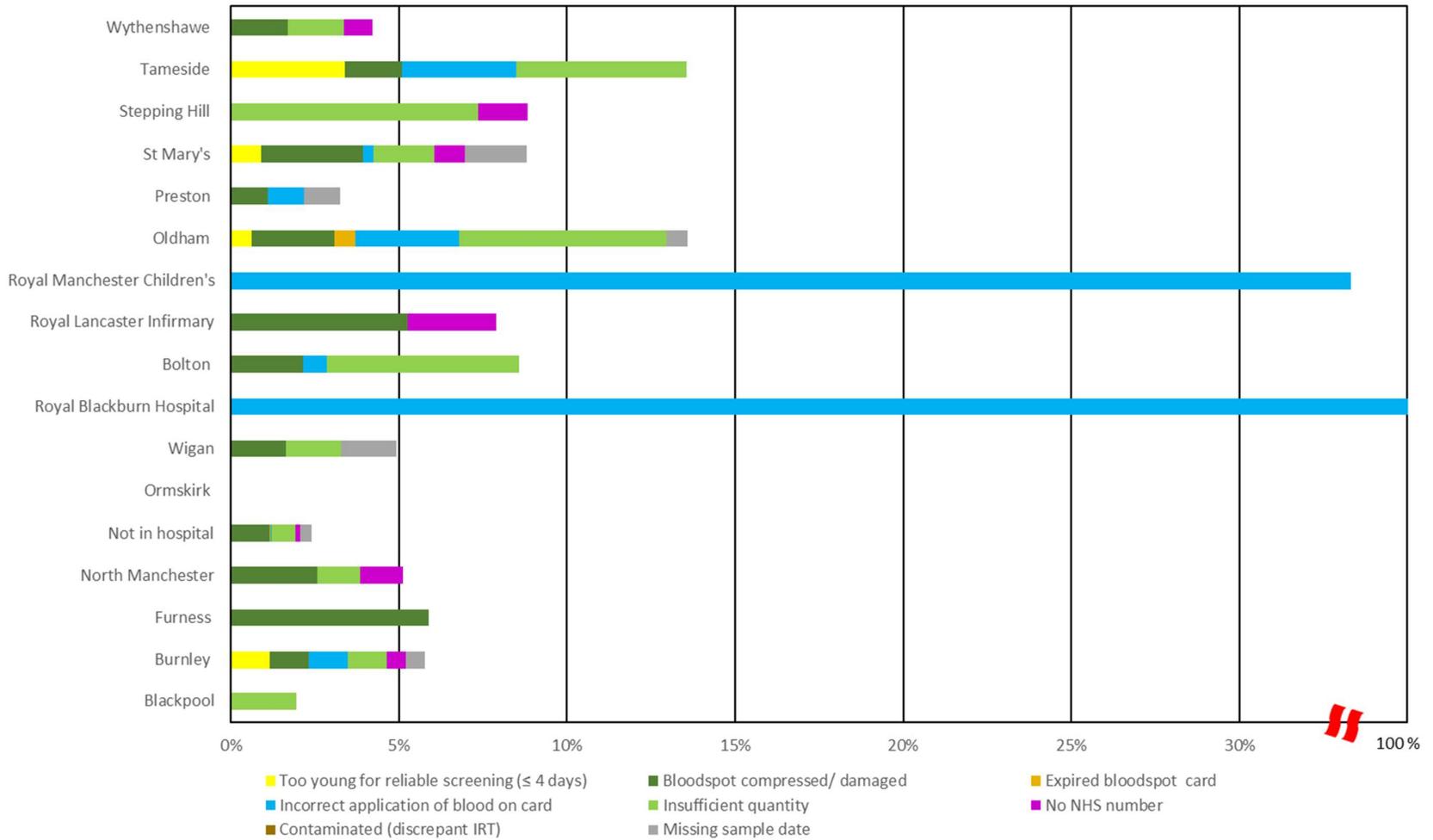


Figure 6: Standard 6 - Avoidable repeats for in-patients vs community



Q3 25-26 Table 1 - Summary of Performance				
Trust	Standard 3	Standard 4	Standard 5	Standard 6
Blackpool Teaching Hospitals NHS FT	98.3%	94.0%	100.0%	0.3%
Bolton NHS FT	85.6%	92.6%	97.5%	4.8%
East Lancashire Hospitals NHS Trust	75.3%	89.3%	99.3%	2.4%
Lancashire Teaching Hospitals NHS FT	90.6%	94.3%	99.8%	1.8%
Manchester University NHS FT (SMH, RMCH, WH & NMGH)	97.1%	96.4%	99.2%	2.7%
Oldham (NCA)	80.3%	87.1%	93.8%	4.1%
Southport & Ormskirk Hospital NHS Trust	82.0%	79.0%	84.1%	4.0%
Stockport NHS FT	94.0%	94.8%	97.6%	3.1%
Tameside And Glossop Integrated Care NHS FT	90.4%	93.1%	99.4%	3.5%
University Hospitals of Morecambe Bay NHS FT	87.9%	98.7%	99.4%	2.2%
Wrightington, Wigan and Leigh NHS FT	63.9%	94.5%	90.5%	3.5%

Standard 7a - The proportion of second blood spots for raised IRT taken on day 21 to day 24

Acceptable: ≥ 80% of second blood spot samples taken on day 21 to day 24

Achievable: ≥ 90% of second blood spot samples taken on day 21 to day 24

During quarter 3 there were 4 repeats for raised IRT (CF inconclusive). All samples were collected on day 21-24. CF inconclusive repeats are performed by Screening Link Health Visitors. The data is presented by Maternity Unit in table 2.

Table 2

Quarter 3 2025-26 - Standard 7a				
Maternity Unit	Age at collection of CF repeat		Total	% collected day 21-24
	21 d	24 d		
East Lancashire Hospitals NHS Trust	1	0	1	100%
Lancashire Teaching Hospitals NHS FT	1	0	1	100%
Manchester University NHS FT - SMH & RMCH	1	1	2	100%
Total	3	1	4	100%

Standard 7b - The proportion of second blood spot samples for borderline TSH taken between 7 and 10 calendar days after the initial borderline sample

Acceptable: ≥ 80.0% of repeat blood spot samples taken as defined

Achievable: ≥ 90.0% of repeat blood spot samples taken as defined

During quarter 3 there were 26 repeats for borderline TSH (CHT). Of these, 81% were collected 7-10 days after the original sample. Table 3 displays the information by Trust.

Table 3

Quarter 3 2025-26 - Standard 7b									
Trust	Number of days between original sample and collection of repeat sample							Total	% collected 7-10 days after original sample
	6	7	8	9	10	11	14		
Blackpool Teaching Hospitals NHS FT	0	1	0	0	0	0	0	1	100%
Bolton NHS FT	0	0	1	0	1	2	0	4	50%
East Lancashire Hospitals NHS Trust	0	1	5	1	0	0	0	7	100%
Lancashire Teaching Hospitals NHS FT	0	1	0	1	0	0	0	2	100%
Manchester University NHS FT - SMH & RMCH	0	0	1	1	0	0	0	2	100%
Manchester University NHS FT - Wythenshawe	0	2	0	0	0	0	0	2	100%
Oldham (NCA)	1	0	0	0	0	0	0	1	100%
Stockport NHS FT	0	0	0	0	0	1	1	2	0%
University Hospitals of Morecambe Bay NHS FT	0	3	1	0	0	0	0	4	100%
Wrightington, Wigan and Leigh NHS FT	0	0	0	1	0	0	0	1	100%
Grand Total	1	8	8	4	1	3	1	26	81%

Standard 7c - The proportion of CHT pre-term repeats collected on day 28 or at discharge

Acceptable: ≥ 75.0% of repeat blood spot samples taken as defined

Achievable: ≥ 85.0% of repeat blood spot samples taken as defined

During quarter 3, 151 CHT pre-term repeats were received. Performance by trust is displayed in table 4. 81% were collected on day 28 or at discharge, 17% were collected after day 28.

Table 4

Quarter 3 25-26 - Standard 7c					
Trust	Number of Pre-term CHT second samples			Total	% Prem repeats
	EARLY	ON-TIME	LATE		
Blackpool Teaching Hospitals NHS FT		7		7	100%
Bolton NHS FT	1	15	2	18	83%
East Lancashire Hospitals NHS Trust		13	5	18	72%
Lancashire Teaching Hospitals NHS FT		14	4	18	78%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	0	35	9	44	80%
Oldham (NCA)		16	2	18	89%
Southport & Ormskirk Hospital NHS Trust	1			1	0%
Stockport NHS FT		6	1	7	86%
Tameside And Glossop Integrated Care NHS FT	1	8		9	89%
University Hospitals of Morecambe Bay NHS FT		3	1	4	75%
Wrightington, Wigan and Leigh NHS FT		6	1	7	86%
Grand Total	3	123	25	151	81%

Standard 9 - Timely processing of CHT and IMD (excluding HCU) screen positive samples

Acceptable: 100% of babies with a positive screening result (excluding HCU) have a clinical referral initiated within 3 working days of sample receipt

There were 12 screen positive samples for CHT and 3 for IMD in quarter 3. All were referred within 3 working days of sample receipt.

Standard 11 - Timely entry into clinical care

Data for standard 11 is displayed in table 5.

Condition	Criteria	Thresholds	Number of babies seen by specialist services by condition specific standard	Number of babies referred	Percentage seen by specialist services by condition specific standard	Comments
IMDs (excluding HCU)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	3	3	100%	1 PKU suspected. 1MCADD suspected. 1 PKU not suspected other disorder. The 4 babies below are not included in the statistics to the left. 1 MCADD died prior to referral (born at 23+6 week gestation.) 1 MSUD and 2 additional MCADD all diagnosed prior to day 5 screening.
CHT (suspected on first sample)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	3	4	75%	1 baby had clinic appointment on day 15. Baby was referred on day 11 (Fri) should have attended appointment on on day 14 (Mon) but parents said that was too short notice so attended on day 15 (Tues).
CHT (suspected on repeat following borderline TSH)	Attend first clinical appointment by 21 days of age	Acceptable: 100%	5	6	83%	1 baby had clinic appointment on day 23. This is due to delays with testing of day 5 sample due to a bank holiday and a weekend which delayed analysis. KPIs for transport and lab analysis of 3 working days were met.
CF (2 CFTR mutations detected)	Attend first clinical appointment by 28 days of age	Acceptable: ≥ 95.0% Achievable: 100%	0	0	N/A	No referrals in Q3
HCU	Attend first clinical appointment by 28 days of age	Acceptable: ≥ 95.0% Achievable: 100%	0	0	N/A	No referrals in Q3
CF (1 or no CFTR mutation detected)	Attend first clinical appointment by 35 days of age	Attend first clinical appointment by 35 days of age	0	0	N/A	No referrals in Q3
SCD	Attend first clinical appointment by 90 days of age	Attend first clinical appointment by 90 days of age	6	6	100%	

Incidents

Details of incidents which have been referred to QA, either detected by the laboratory or occurred at MFT.

Incident Number	Incident Date	Incident Severity	Incident Harm	Summary of incident	Further details	MFT or external	Lab/ Ward/ Maternity Unit	Local Area Team	QA informed
2665778	02/10/25	1 - low	1 - no harm	Delay in sending blood spot sample: found on ward	Bloodspot screening sample had been taken on day 5 (PNW) but not sent to lab. Sample found on ward and sent to lab.	MFT	North Manchester Maternity Unit	Greater Manchester	No
2667524	03/10/25	1 - low	1 - no harm	Blood spot transport issue: sample(s) delayed/lost in transit or not dispatched, resulting in	Day 5 sample taken but lost. Required repeat sample.	MFT	North Manchester NNU	Greater Manchester	No
2680628	14/11/25	2 - minor	2 - slight	Blood spot labelling error: demographic sticker contained errors e.g. another baby's NHS number (some details correct)	Demographic sticker states twin two but had twin one NHS number.	External	Wigan Community Midwives	Greater Manchester	Yes
2680906	18/11/25	1 - low	1 - no harm	Delay in sending blood spot sample: found on ward	Sample found on PNW and then sent to lab	MFT	North Manchester Maternity Unit	Greater Manchester	No
2684437	24/11/25	2 - minor	2 - slight	Blood spot labelling error: another baby's bar-coded demographic sticker, detected prior to reporting	Lab identified error from discrepancies between demographic sticker and hand written information of blood spot card	External	Morecambe Bay Maternity Unit	Lancashire	Yes
2689044	20/11/25	1 - low	1 - no harm	Bloodspot collection error: PICU took day 5 sample which was rejected. This should have been collected by community.	PICU took blood spot./ multispotted - rejected - should be collected by community midwife. Who took repeat	MFT	Ward 77, RMCH	Greater Manchester	No
2691193	18/12/25	1 - low	1 - no harm	Lab reporting error: MSUD screening was performed on a baby who had a clinical diagnosis. As baby was on treatment at the time of bloodspot collection, the leucine result was low and MSUD was reported as 'not suspected.'	Baby diagnosed with MSUD prior to screening and on treatment (sibling with diagnosis). NBS lab not informed - screened baby as 'not suspected' due to baby being on treatment so leucine result was normal. An amended report was issued 'declining' MSUD condition with comment stating baby had positive diagnosis and was on treatment for condition.	MFT	Willink Lab	Greater Manchester	Yes
2692503	18/12/25	1 - low	1 - no harm	Blood spot labelling error: sample date missing	Newborn blood spot sample rejected due to missing date of sample on card. Sample not sent to radio room for 2nd checking by community TL/screening midwife	MFT	Ward 66. SMH	Greater Manchester	No

Appendix

Quarter 3 2025-26: Standard 3							
Trust	Number of all samples (including repeats)	Number of blood spot cards including baby's NHS number	Number of blood spot cards including ISB label barcoded baby's NHS number	Unreadable Barcodes	Percentage of all blood spot cards including babies' NHS number	Percentage of all blood spot cards including ISB bar-coded babies' NHS number	Percentage of all Unreadable Barcodes
Blackpool Teaching Hospitals NHS FT	695	695	683	4	100%	98.3%	0.6%
Bolton NHS FT	1509	1508	1292	17	99.9%	85.6%	1.1%
East Lancashire Hospitals NHS Trust	1690	1686	1272	6	99.8%	75.3%	0.4%
Health Visitor	211	209	6	0	99%	2.8%	0.0%
Lancashire Teaching Hospitals NHS FT	1007	1007	912	34	100%	90.6%	3.4%
Manchester University NHS FT - SMH & RMCH & WH & NMGH	3502	3497	3402	14	100%	97.1%	0.4%
Not Stated	6	6	5	0	100%	83.3%	0.0%
Oldham (NCA)	1550	1549	1244	3	99.9%	80.3%	0.2%
Southport & Ormskirk Hospital NHS Trust	128	128	105	2	100%	82.0%	1.6%
Stockport NHS FT	699	697	657	13	100%	94.0%	1.9%
Tameside And Glossop Integrated Care NHS FT	686	686	620	9	100%	90.4%	1.3%
University Hospitals of Morecambe Bay NHS FT	621	619	546	4	99.7%	87.9%	0.6%
Wrightington, Wigan and Leigh NHS FT	839	834	536	192	99.4%	63.9%	22.9%
Grand Total	13143	13121	11280	298	99.8%	85.8%	2.3%

Quarter 3 2025-26: Standard 4												
Trust	Number of first samples taken on or before day 4	5	6	7	8	9+	4 or earlier	5	6	7	8	9 or later
Blackpool Teaching Hospitals NHS FT	0	645	30	5	3	3	0.0%	94.0%	4.4%	0.7%	0.4%	0.4%
Bolton NHS FT	0	1244	75	9	4	11	0.0%	92.6%	5.6%	0.7%	0.3%	0.8%
East Lancashire Hospitals NHS Trust	3	1313	116	9	5	24	0.2%	89.3%	7.9%	0.6%	0.3%	1.6%
Health Visitor	0	3	0	0	0	143	0.0%	2.1%	0.0%	0.0%	0.0%	97.9%
Lancashire Teaching Hospitals NHS FT	0	916	46	3	2	4	0.0%	94.3%	4.7%	0.3%	0.2%	0.4%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3	3174	83	5	11	17	0.1%	96.4%	2.5%	0.2%	0.3%	0.5%
Not Stated	0	2	0	0	0	0	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%
Oldham (NCA)	2	1248	125	17	8	33	0.1%	87.1%	8.7%	1.2%	0.6%	2.3%
Southport & Ormskirk Hospital NHS Trust	0	98	19	2	1	4	0.0%	79.0%	15.3%	1.6%	0.8%	3.2%
Stockport NHS FT	0	640	27	1	1	6	0.0%	94.8%	4.0%	0.1%	0.1%	0.9%
Tameside And Glossop Integrated Care NHS FT	3	604	34	5	1	2	0.5%	93.1%	5.2%	0.8%	0.2%	0.3%
University Hospitals of Morecambe Bay NHS FT	0	586	8	0	0	0	0.0%	98.7%	1.3%	0.0%	0.0%	0.0%
Wrightington, Wigan and Leigh NHS FT	1	757	36	2	0	5	0.1%	94.5%	4.5%	0.2%	0.0%	0.6%
Grand Total	12	11230	599	58	36	252	0.1%	92.1%	4.9%	0.5%	0.3%	2.1%

Quarter 3 2025-26: Standard 5

Trust	Number of samples received in 3 or fewer working days of sample being taken	Number of samples received in 4 or fewer working days of sample being taken	Number of samples received in 5 or more working days of sample being taken	Total number of samples received	Percentage of samples received by laboratories in 3 or fewer working days of sample being taken	Percentage of samples received by laboratories in 4 or fewer working days of sample being taken	Percentage of samples received by laboratories on or after 5 working days of sample being taken
Blackpool Teaching Hospitals NHS FT	694	694	0	694	100%	100%	0.0%
Bolton NHS FT	1399	1424	11	1435	97.5%	99.2%	0.8%
East Lancashire Hospitals NHS Trust	1527	1533	4	1537	99.3%	99.7%	0.3%
Health Visitor	131	138	15	153	85.6%	90.2%	9.8%
Lancashire Teaching Hospitals NHS FT	1004	1006	0	1006	99.8%	100%	0.0%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3400	3413	16	3429	99.2%	99.5%	0.5%
Not Stated	2	2	4	6	33.3%	33.3%	66.7%
Oldham (NCA)	1430	1511	13	1524	93.8%	99.1%	0.9%
Southport & Ormskirk Hospital NHS Trust	106	125	1	126	84.1%	99.2%	0.8%
Stockport NHS FT	681	696	2	698	97.6%	99.7%	0.3%
Tameside And Glossop Integrated Care NHS FT	680	684	0	684	99.4%	100.0%	0.0%
University Hospitals of Morecambe Bay NHS FT	613	615	2	617	99.4%	100%	0.3%
Wrightington, Wigan and Leigh NHS FT	756	817	18	835	90.5%	97.8%	2.2%
Grand Total	12423	12658	86	12744	97.5%	99.3%	0.7%

Quarter 3 2025-26: Standard 6 by Trust														
Status code and description of avoidable repeat	Blackpool Teaching Hospitals NHS FT	Bolton NHS FT	East Lancashire Hospitals NHS Trust	Health Visitor	Lancashire Teaching Hospitals NHS FT	Manchester University NHS FT - SMH & RMCH & WH & NMGH	Not Stated	Oldham (NCA)	Southport & Ormskirk Hospital NHS Trust	Stockport NHS FT	Tameside And Glossop Integrated Care NHS FT	University Hospitals of Morecambe Bay NHS FT	Wrightington, Wigan and Leigh NHS FT	Grand Total
0301: too young for reliable screening (≤ 4 days)	0	0	2	0	0	3	0	2	0	0	3	0	0	10
0302: too soon after transfusion (<72 hours)	0	2	3	0	2	4	0	3	0	0	0	1	0	15
0303: insufficient sample	2	10	7	2	10	22	0	25	1	11	13	5	9	117
0304: unsuitable sample (blood quality): incorrect blood application	0	2	3	2	1	2	0	5	0	0	2	0	0	17
0305: unsuitable sample (blood quality): compressed/damaged	0	49	10	2	5	41	0	15	1	7	4	6	10	150
0306: Unsuitable sample: day 0 and day 5 on same card	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0307: unsuitable sample for CF: possible faecal contamination	0	0	0	0	0	0	0	0	1	0	0	0	0	1
0308: unsuitable sample: NHS number missing/not accurately recorded	0	1	4	2	0	5	0	1	0	2	0	2	5	22
0309: unsuitable sample: date of sample missing/not accurately recorded	0	3	8	0	1	16	0	10	2	0	0	0	4	44
0310: unsuitable sample: date of birth not accurately matched	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0311: unsuitable sample: expired card used	0	0	1	0	0	1	0	1	0	1	1	0	0	5
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0313: unsuitable sample: damaged in transit	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Number of Avoidable Repeat Requests	2	65	35	8	17	90	0	59	5	21	23	13	28	366
Number of first samples received/ babies tested	683	1344	1473	104	971	3299	2	1440	125	675	648	594	805	12163
Avoidable Repeat Requests Rate	0.3%	4.8%	2.4%	7.7%	1.8%	2.7%	0.0%	4.1%	4.0%	3.1%	3.5%	2.2%	3.5%	3.0%

Transfusion Repeats are not included in the Avoidable Repeat calculation

Quarter 3 2025-26: Standard 6 by Current Hospital																		
Status code and description of avoidable repeat	Blackpool Victoria Hospital	Burnley General Hospital	Furness General Hospital	North Manchester General Hospital	Not in hospital	Ormskirk & District General	Royal Albert Edward Infirmary	Royal Blackburn Hospital	Royal Bolton Hospital	Royal Lancaster Infirmary	Royal Manchester Childrens Hospital	Royal Oldham Hospital	Royal Preston Hospital	St Mary's Hospital	Stepping Hill Hospital	Tameside General Hospital	Wythenshawe Hospital	Grand Total
0301: too young for reliable screening (≤ 4 days)	0	2	0	0	2	0	0	0	0	0	0	1	0	3	0	2	0	10
0302: too soon after transfusion (<72 hours)	0	3	0	0	1	0	0	0	2	0	0	3	2	4	0	0	0	15
0303: insufficient sample	1	2	0	1	78	0	1	0	8	0	0	10	0	6	5	3	2	117
0304: unsuitable sample (blood quality): incorrect blood application	0	2	0	0	3	0	0	1	1	0	1	5	1	1	0	2	0	17
0305: unsuitable sample (blood quality): compressed/damaged	0	2	1	2	121	0	1	0	3	2	0	4	1	10	0	1	2	150
0306: Unsuitable sample: day 0 and day 5 on same card	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0307: unsuitable sample for CF: possible faecal contamination	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
0308: unsuitable sample: NHS number missing/not accurately recorded	0	1	0	1	14	0	0	0	0	1	0	0	0	3	1	0	1	22
0309: unsuitable sample: date of sample missing/not accurately recorded	0	1	0	0	34	0	1	0	0	0	0	1	1	6	0	0	0	44
0310: unsuitable sample: date of birth not accurately matched	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0311: unsuitable sample: expired card used	0	0	0	0	4	0	0	0	0	0	0	1	0	0	0	0	0	5
0312: unsuitable sample: >14 days in transit, too old for analysis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0313: unsuitable sample: damaged in transit	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Number of Avoidable Repeat Requests	1	10	1	4	257	0	3	1	12	3	1	22	3	29	6	8	5	366
Number of first samples received/ babies tested	51	173	17	78	10764	7	61	1	140	38	3	162	92	330	68	59	119	12163
Avoidable Repeat Requests Rate	2.0%	5.8%	5.9%	5.1%	2.4%	0.0%	4.9%	100.0%	8.6%	7.9%	33.3%	13.6%	3.3%	8.8%	8.8%	13.6%	4.2%	3.0%

Transfusion Repeats are not included in the Avoidable Repeat calculation