

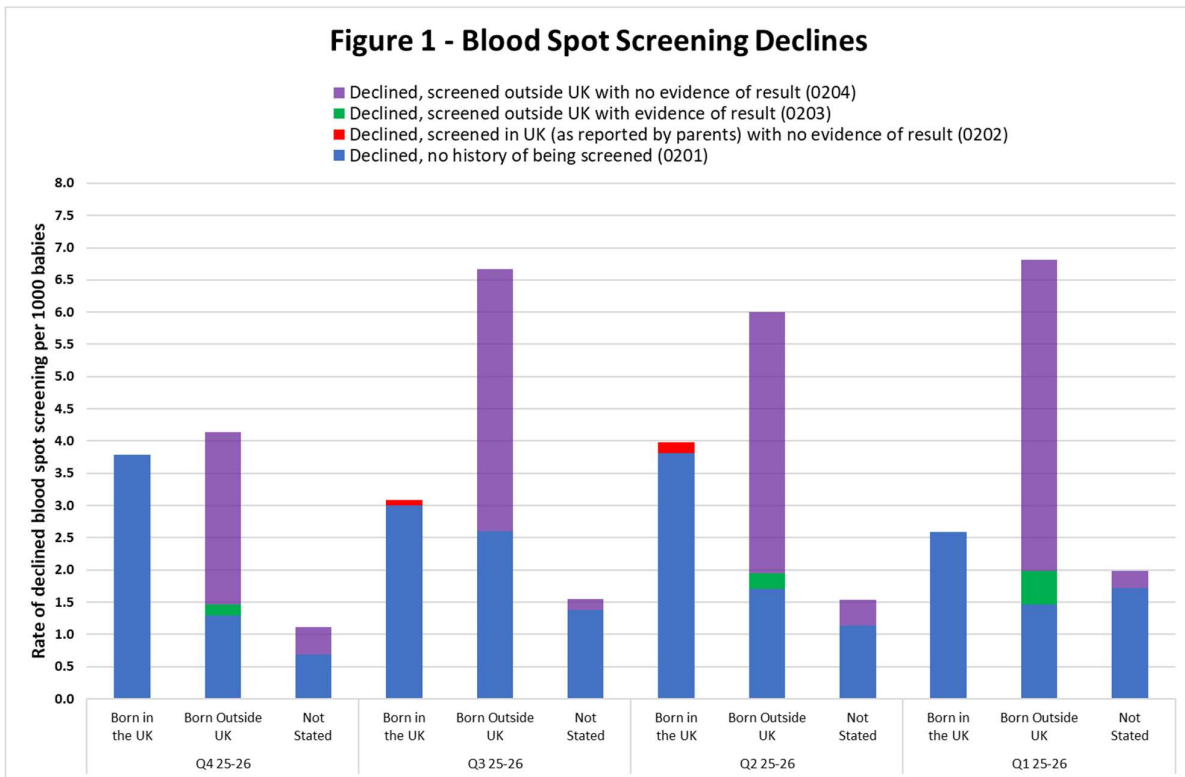
Manchester Newborn Screening Laboratory Quarterly Blood Spot Screening Report: Quarter 4 2025-26

Manchester Newborn Screening Laboratory, which serves babies born in Greater Manchester, Lancashire and South Cumbria, received 12363 blood spot samples between 1st January 2026 and 31st March 2026. 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 4 the laboratory received 105 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, 87.4% of samples received in quarter 4 of 2025/26 had a barcoded NHS number label, which is higher than the previous quarter (85.8%). Of the 11 maternity units, 4 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, 92.6% of samples received in quarter 4 of 2025/26 were collected on day 5, which is slightly higher than the previous quarter (92.1%). 8 out of the 11 maternity units met standard 4, and 4 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

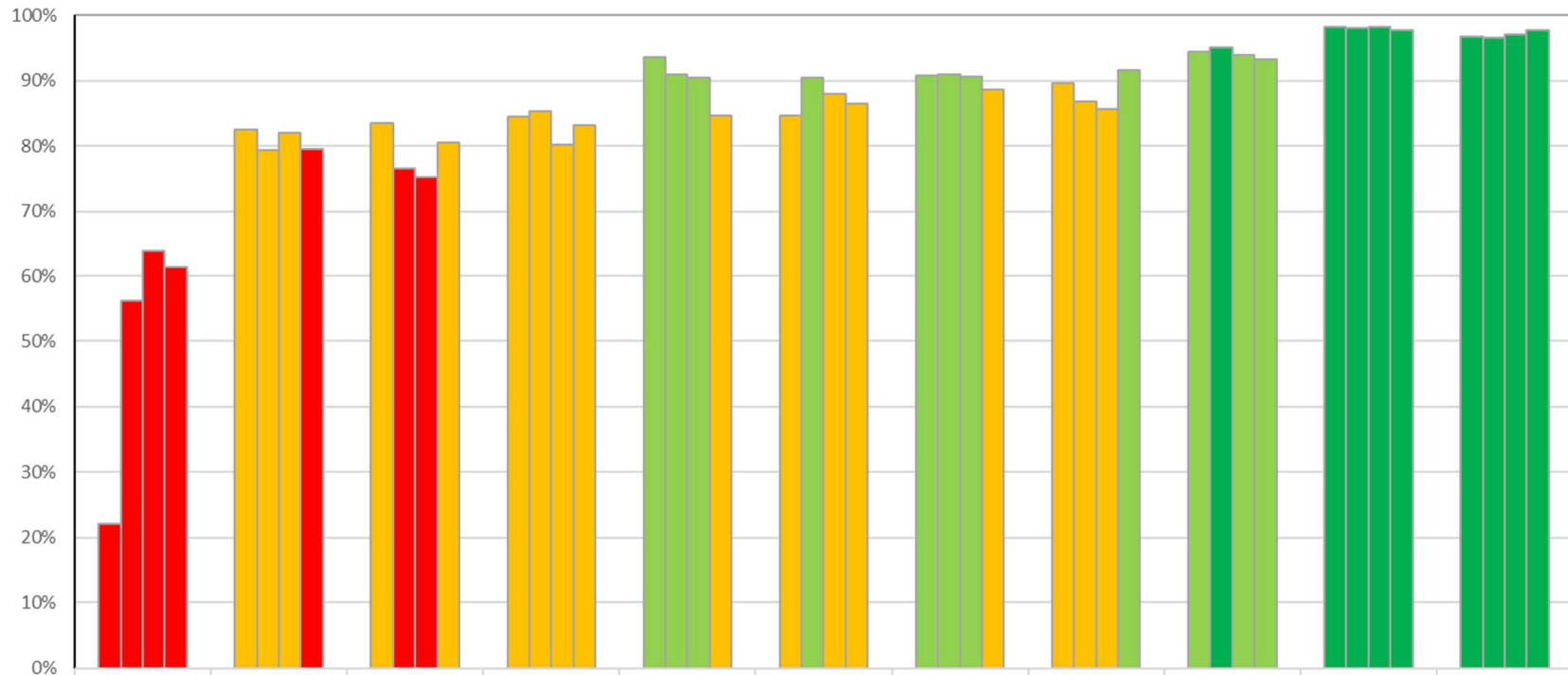
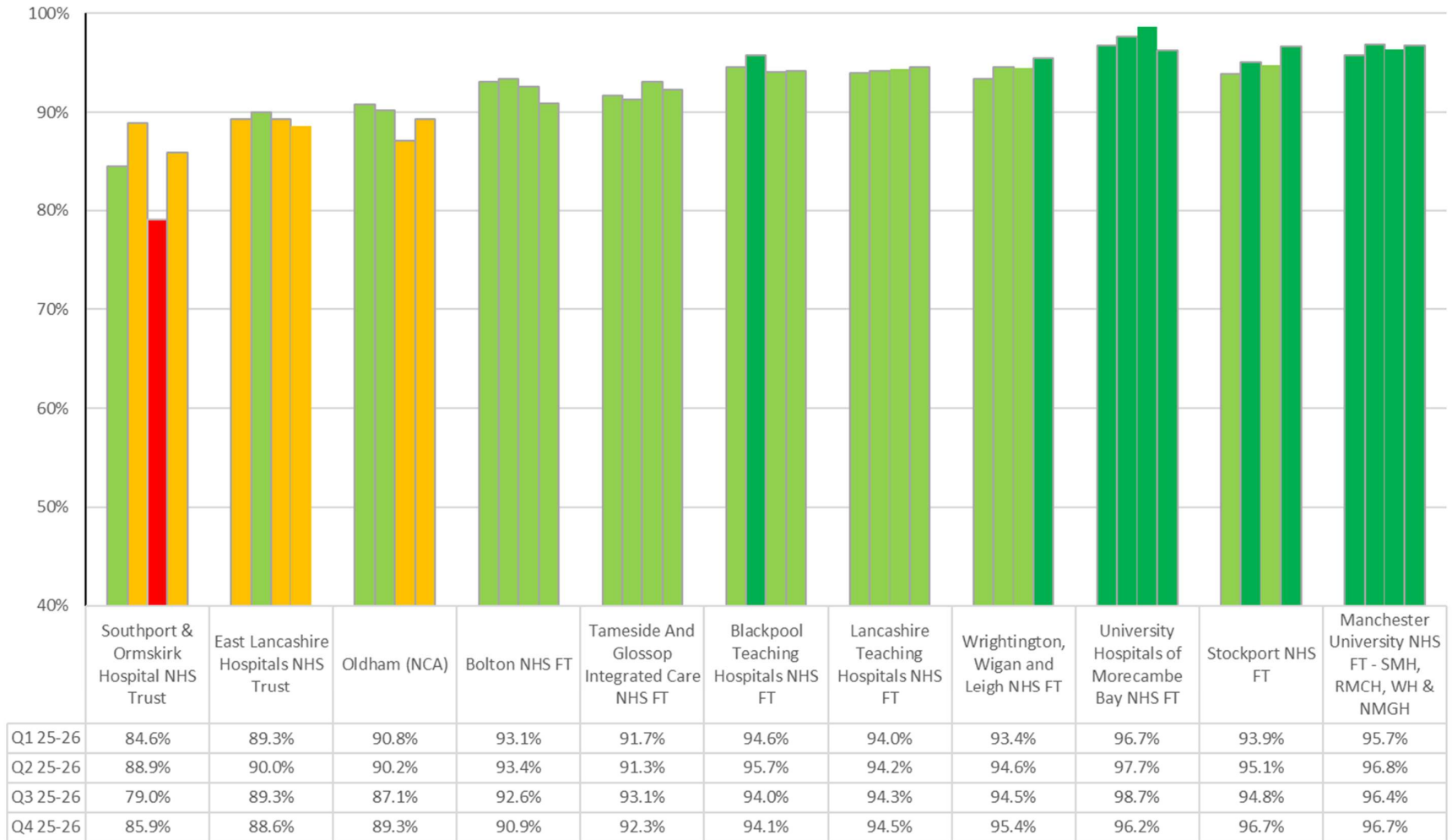


Figure 3: Standard 4 - The proportion of first blood spot samples taken on day 5

Most recent quarter on right-hand side



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, 97.7% of samples were received within 3 working days. Eight Trusts met the standard, with 4 of these reaching the achievable threshold. Performance was more than the previous quarter (97.5% 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

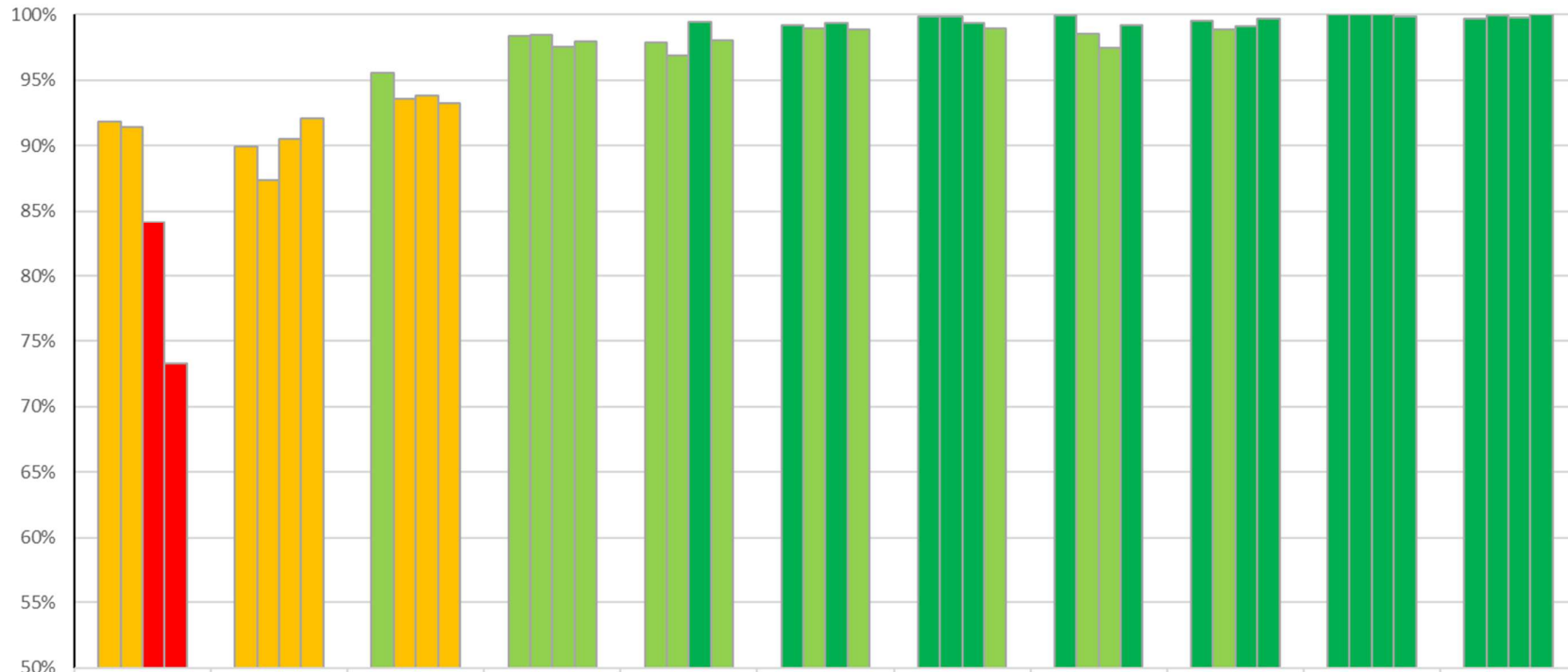
Acceptable: Avoidable repeat rate is $\leq 2.0\%$

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

The avoidable repeat rate for quarter 4 was 2.3%, which is lower compared to quarter 3 (3.0%). The main reason for an avoidable repeat was insufficient blood followed by a compressed/damaged sample. The performance for each trust is displayed in figure 5. Three Trusts met the acceptable standard. 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 1.8% for babies at home (2.4% in quarter 3) and 6% for samples collected from in-patients (7.8% in quarter 3).

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



	Southport & Ormskirk Hospital NHS Trust	Wrightington, Wigan and Leigh NHS FT	Oldham (NCA)	Stockport NHS FT	Tameside And Glossop Integrated Care NHS FT	East Lancashire Hospitals NHS Trust	University Hospitals of Morecambe Bay NHS FT	Bolton NHS FT	Manchester University NHS FT - SMH, RMCH, WH & NMGH	Blackpool Teaching Hospitals NHS FT	Lancashire Teaching Hospitals NHS FT
Q1 25-26	91.8%	89.9%	95.6%	98.3%	97.9%	99.2%	99.8%	99.9%	99.5%	100.0%	99.7%
Q2 25-26	91.4%	87.4%	93.6%	98.4%	96.9%	98.9%	99.8%	98.5%	98.9%	100.0%	99.9%
Q3 25-26	84.1%	90.5%	93.8%	97.6%	99.4%	99.3%	99.4%	97.5%	99.2%	100.0%	99.8%
Q4 25-26	73.3%	92.1%	93.2%	98.0%	98.1%	98.8%	98.9%	99.2%	99.7%	99.8%	100.0%

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

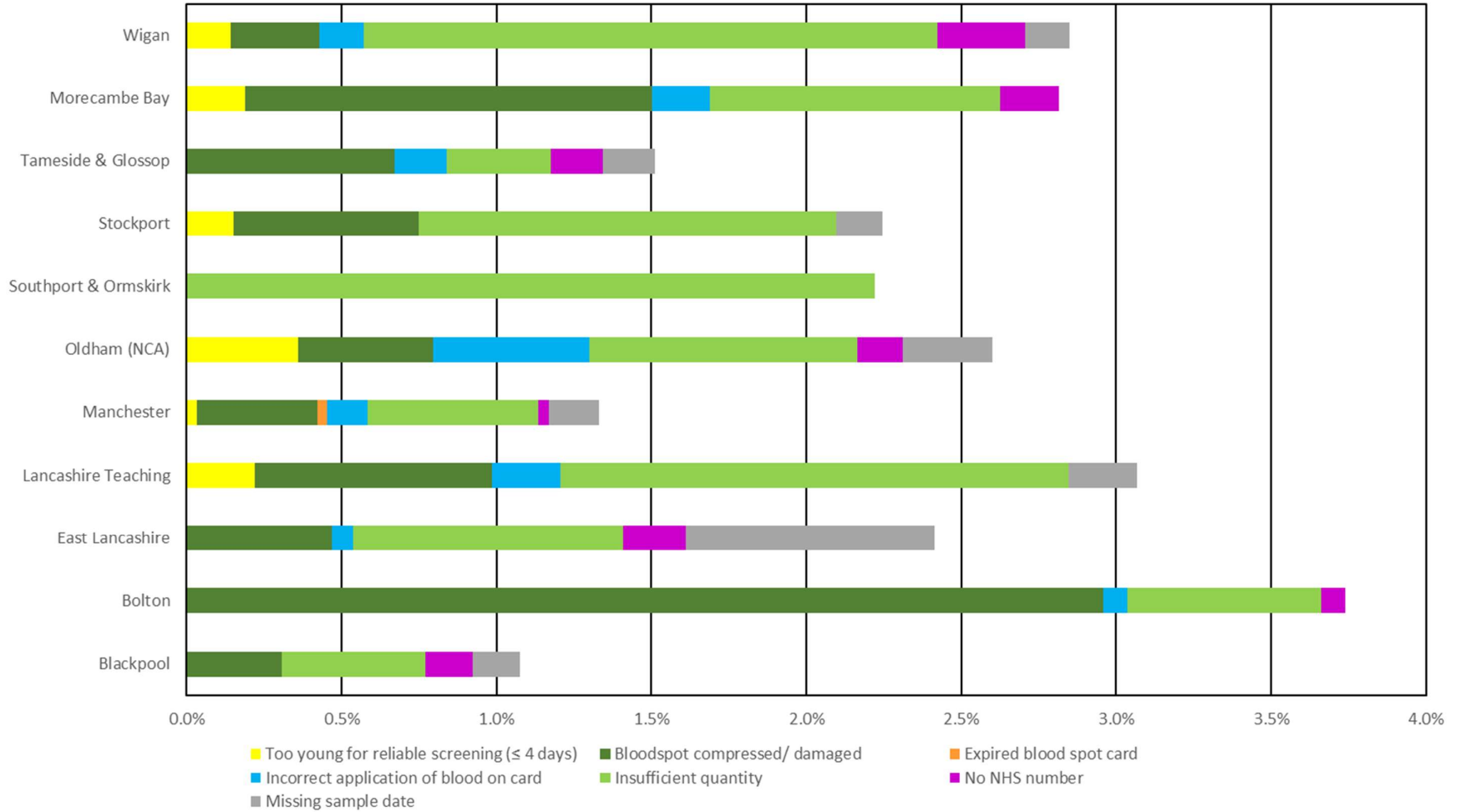
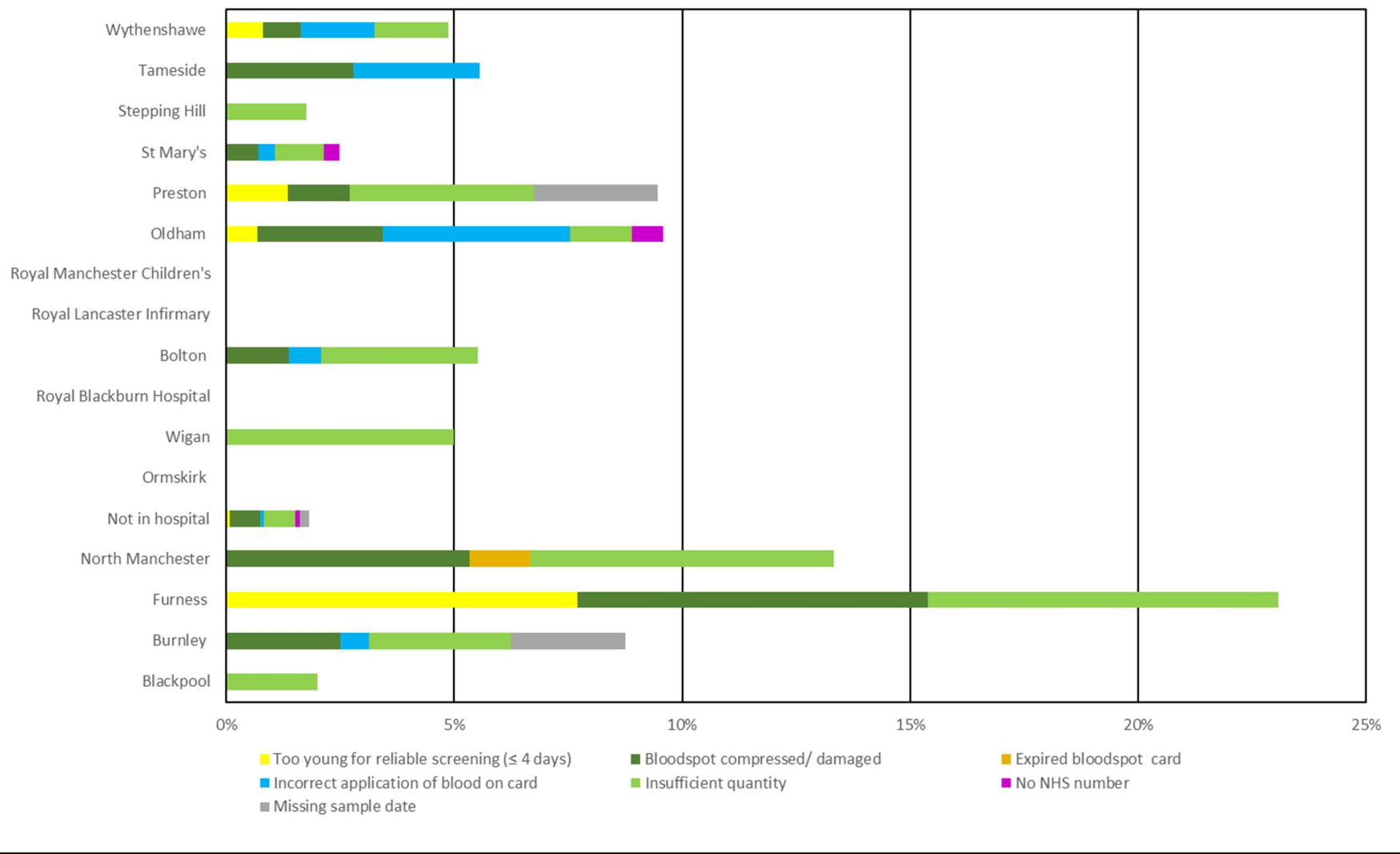


Figure 6: Standard 6 - Avoidable repeats for in-patients vs community



Q4 25-26 Table 1 - Summary of Performance				
Trust	Standard 3	Standard 4	Standard 5	Standard 6
Blackpool Teaching Hospitals NHS FT	97.8%	94.1%	99.8%	1.1%
Bolton NHS FT	91.5%	90.9%	99.2%	3.7%
East Lancashire Hospitals NHS Trust	80.6%	88.6%	98.8%	2.4%
Lancashire Teaching Hospitals NHS FT	88.7%	94.5%	100%	3.1%
Manchester University NHS FT (SMH, RMCH, WH & NMGH)	97.8%	96.7%	99.7%	1.3%
Oldham (NCA)	83.2%	89.3%	93.2%	2.6%
Southport & Ormskirk Hospital NHS Trust	79.6%	85.9%	73.3%	2.2%
Stockport NHS FT	93.2%	96.7%	98.0%	2.2%
Tameside And Glossop Integrated Care NHS FT	84.6%	92.3%	98.1%	1.5%
University Hospitals of Morecambe Bay NHS FT	86.4%	96.2%	98.9%	2.8%
Wrightington, Wigan and Leigh NHS FT	61.3%	95.4%	92.1%	2.8%

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 4 there were 3 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 4 2025-26 - Standard 7a				
Maternity Unit	Age at collection of CF repeat		Total	% collected day 21-24
	21 d	22 d		
Manchester University NHS FT - Wythenshawe	0	1	1	100%
Oldham (NCA)	1	0	1	100%
Southport & Ormskirk Hospital NHS Trust	1	0	1	100%
Total	2	1	3	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 4 there were 23 repeats for borderline TSH (CHT). Of these, 91% were collected 7-10 days after the original sample. Table 3 displays the information by Trust.

Table 3

Quarter 4 2025-26 - Standard 7b							
Trust	Number of days between original sample and collection of repeat sample					Total	% collected 7-10 days after original sample
	4	5	7	8	9		
Blackpool Teaching Hospitals NHS FT	0	0	0	1	0	1	100%
Bolton NHS FT	0	1	0	0	0	1	0%
East Lancashire Hospitals NHS Trust	0	0	1	0	1	2	100%
Lancashire Teaching Hospitals NHS FT	0	0	0	1	0	1	100%
MFT combined	1	0	4	4	2	11	91%
Oldham (NCA)	0	0	0	1	1	2	100%
Tameside And Glossop Integrated Care NHS FT	0	0	0	2	0	2	100%
University Hospitals of Morecambe Bay NHS FT	0	0	0	1	0	1	100%
Wrightington, Wigan and Leigh NHS FT	0	0	1	1	0	2	100%
Grand Total	1	1	6	11	4	23	91%

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 4, 111 CHT pre-term repeats were received. Performance by trust is displayed in table 4. 86% were collected on day 28 or at discharge, 12% were collected after day 28.

Table 4

Quarter 4 25-26 - Standard 7c					
Trust	Number of Pre-term CHT second			Total	% Prem repeats
	EARLY	ON-TIME	LATE		
Blackpool Teaching Hospitals NHS FT		6		6	100%
Bolton NHS FT	1	14	2	17	82%
East Lancashire Hospitals NHS Trust		12	2	14	86%
Lancashire Teaching Hospitals NHS FT		5	2	7	71%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	0	25	3	28	89%
Oldham (NCA)		17	3	20	85%
Southport & Ormskirk Hospital NHS Trust		1		1	100%
Stockport NHS FT		4		4	100%
Tameside And Glossop Integrated Care NHS FT	1	3		4	75%
University Hospitals of Morecambe Bay NHS FT	1	3		4	75%
Wrightington, Wigan and Leigh NHS FT		5	1	6	83%
Grand Total	3	95	13	111	86%

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 14 screen positive samples for CHT and 3 for IMD in quarter 4. 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.

Table 5: Standard 11						
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, 1 GA1, 1 IVA (The IVA baby was a false positive - Isobars indicate pivaloylcarnitine interference - mum on antibiotics)
CHT (suspected on first sample)	Attend first clinical appointment by 14 days of age	Acceptable: 100%	4	4	100%	
CHT (suspected on repeat following borderline TSH)	Attend first clinical appointment by 21 days of age	Acceptable: 100%	8	8	100%	
CF (2 CFTR mutations detected)	Attend first clinical appointment by 28 days of age	Acceptable: ≥ 95.0% Achievable: 100%	3	3	100%	
HCU	Attend first clinical appointment by 28 days of age	Acceptable: ≥ 95.0% Achievable: 100%	0	0	N/A	No referrals in Q4
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 Q4
SCD	Attend first clinical appointment by 90 days of age	Attend first clinical appointment by 90 days of age	8	8	100%	3 babies excluded as not yet 90 days of age

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
2698944	14/01/26	1 - low	1 - no harm	Blood spot labelling error: sample date missing	No date recorded on day 0 sample	MFT	Ward 68, SMH (NICU)	Greater Manchester	No
2699127	12/01/26	1 - low	1 - no harm	Blood spot labelling error: sample date missing	Newborn blood spot rejected due to missing date of sample on card	MFT	Ward 47B, SMH	Greater Manchester	No
2700868	20/01/2026	2 - minor	2 - slight	Blood spot collection error: delay/ failure to collect screening sample	A newborn bloodspot screening sample was unsuitable for analysis (no valid NHS number provided). Despite 3 letters requesting a repeat sample (every 10 days), a repeat has not been received. Screening has now been terminated for this baby.	External	Bolton Health Visitors	Greater Manchester	Yes
2708360	01/02/26	1 - low	1 - no harm	Blood spot collection error: delay/ failure to collect screening sample	Missed newborn blood spot - not referred to the community midwives on day 5 as per usual practice. Identified on national failsafe on day 14 (flags on day 12, failsafe checked weekdays only)	MFT	Ward 78, RMCH	Greater Manchester	No
2711046	09/02/26	1 - low	1 - no harm	Blood spot collection error: delay/ failure to collect screening sample	Newborn blood spot failsafe flagged baby on day 12 as not having had NBBS taken day 5 - sample never received in NBBS lab. Documentation on Hive stated NBBS was taken day 5. Checked with ward, unable to find sample. Repeat taken at home on day 13. Noted baby was awaiting foster care address. In these cases please don't delay sending sample if waiting for an address - put screening midwives address on sample.	MFT	Ward 47B, SMH	Greater Manchester	No
2713605	16/02/2026	1 - low	1 - no harm	Blood spot collection error: delay/ failure to collect screening sample	Newborn blood spot not taken on day 5. Noted after discharge from hospital. Day 6 collected by community	MFT	Ward 66. SMH	Greater Manchester	No
2719014	17/03/2026	2 - minor	2 - slight	Blood spot transport issue: sample(s) delayed/ lost in transit or not dispatched, resulting in retesting of baby	2 NBBS taken on 13/3/26 missing from Lanceburn, Salford	MFT	SMH Community Midwives	Greater Manchester	No

Appendix

Quarter 4 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	667	666	652	3	100%	97.8%	0.4%
Bolton NHS FT	1454	1453	1331	23	99.9%	91.5%	1.6%
East Lancashire Hospitals NHS Trust	1692	1689	1363	5	99.8%	80.6%	0.3%
Health Visitor	138	138	8	0	100%	5.8%	0.0%
Lancashire Teaching Hospitals NHS FT	962	962	853	44	100%	88.7%	4.6%
Manchester University NHS FT - SMH & RMCH & WH & NMGH	3220	3219	3149	11	100%	97.8%	0.3%
Not Stated	4	4	3	0	100%	75.0%	0.0%
Oldham (NCA)	1472	1470	1224	4	99.9%	83.2%	0.3%
Southport & Ormskirk Hospital NHS Trust	147	147	117	2	100%	79.6%	1.4%
Stockport NHS FT	695	695	648	9	100%	93.2%	1.3%
Tameside And Glossop Integrated Care NHS FT	625	624	529	20	100%	84.6%	3.2%
University Hospitals of Morecambe Bay NHS FT	553	552	478	5	99.8%	86.4%	0.9%
Wrightington, Wigan and Leigh NHS FT	734	732	450	162	99.7%	61.3%	22.1%
Grand Total	12363	12351	10805	288	99.9%	87.4%	2.3%

Quarter 4 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	611	24	10	1	3	0.0%	94.1%	3.7%	1.5%	0.2%	0.5%
Bolton NHS FT	0	1176	88	14	2	14	0.0%	90.9%	6.8%	1.1%	0.2%	1.1%
East Lancashire Hospitals NHS Trust	0	1318	137	13	11	8	0.0%	88.6%	9.2%	0.9%	0.7%	0.5%
Health Visitor	0	7	0	0	0	86	0.0%	7.5%	0.0%	0.0%	0.0%	92.5%
Lancashire Teaching Hospitals NHS FT	2	864	38	5	1	4	0.2%	94.5%	4.2%	0.5%	0.1%	0.4%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	1	2982	65	12	9	14	0.0%	96.7%	2.1%	0.4%	0.3%	0.5%
Not Stated	0	1	0	0	0	1	0.0%	50.0%	0.0%	0.0%	0.0%	50.0%
Oldham (NCA)	7	1237	102	16	7	16	0.5%	89.3%	7.4%	1.2%	0.5%	1.2%
Southport & Ormskirk Hospital NHS Trust	0	116	14	2	0	3	0.0%	85.9%	10.4%	1.5%	0.0%	2.2%
Stockport NHS FT	1	645	19	1	1	0	0.1%	96.7%	2.8%	0.1%	0.1%	0.0%
Tameside And Glossop Integrated Care NHS FT	0	550	35	8	1	2	0.0%	92.3%	5.9%	1.3%	0.2%	0.3%
University Hospitals of Morecambe Bay NHS FT	1	513	16	2	0	1	0.2%	96.2%	3.0%	0.4%	0.0%	0.2%
Wrightington, Wigan and Leigh NHS FT	1	669	19	1	2	9	0.1%	95.4%	2.7%	0.1%	0.3%	1.3%
Grand Total	13	10689	557	84	35	161	0.1%	92.6%	4.8%	0.7%	0.3%	1.4%

Quarter 4 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	664	665	0	665	99.8%	100%	0.0%
Bolton NHS FT	1364	1372	3	1375	99.2%	99.8%	0.2%
East Lancashire Hospitals NHS Trust	1530	1541	7	1548	98.8%	99.5%	0.5%
Health Visitor	94	95	5	100	94.0%	95.0%	5.0%
Lancashire Teaching Hospitals NHS FT	956	956	0	956	100%	100%	0.0%
Manchester University NHS FT - SMH, RMCH, WH & NMGH	3169	3178	0	3178	99.7%	100%	0.0%
Not Stated	0	0	2	2	0.0%	0.0%	100%
Oldham (NCA)	1361	1436	24	1460	93.2%	98.4%	1.6%
Southport & Ormskirk Hospital NHS Trust	107	131	15	146	73.3%	89.7%	10.3%
Stockport NHS FT	679	692	1	693	98.0%	99.9%	0.1%
Tameside And Glossop Integrated Care NHS FT	609	618	3	621	98.1%	99.5%	0.5%
University Hospitals of Morecambe Bay NHS FT	546	552	0	552	98.9%	100.0%	0.0%
Wrightington, Wigan and Leigh NHS FT	674	714	18	732	92.1%	97.5%	2.5%
Grand Total	11753	11950	78	12028	97.7%	99.4%	0.6%

Quarter 4 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	0	0	2	1	0	5	0	1	0	1	1	11
0302: too soon after transfusion (<72 hours)	0	2	6	0	1	5	0	2	1	0	0	0	0	17
0303: insufficient sample	3	8	13	1	15	17	0	12	3	9	2	5	13	101
0304: unsuitable sample (blood quality): incorrect blood application	0	1	1	1	2	4	0	7	0	0	1	1	1	19
0305: unsuitable sample (blood quality): compressed/damaged	2	38	7	1	7	12	0	6	0	4	4	7	2	90
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	0	0	0	0	0	0
0308: unsuitable sample: NHS number missing/not accurately recorded	1	1	3	0	0	1	0	2	0	0	1	1	2	12
0309: unsuitable sample: date of sample missing/not accurately recorded	1	0	12	0	2	5	0	4	0	1	1	0	1	27
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	0	0	0	1	0	0	0	0	0	0	0	1
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	7	48	36	3	28	41	0	36	3	15	9	15	20	261
Number of first samples received/ babies tested	650	1284	1491	65	913	3082	2	1385	135	668	596	533	702	11506
Avoidable Repeat Requests Rate	1.1%	3.7%	2.4%	4.6%	3.1%	1.3%	0.0%	2.6%	2.2%	2.2%	1.5%	2.8%	2.8%	2.3%

Transfusion Repeats are not included in the Avoidable Repeat calculation

Quarter 4 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	0	1	0	7	0	0	0	0	0	0	1	1	0	0	0	1	11
0302: too soon after transfusion (<72 hours)	0	6	0	0	0	1	0	0	2	0	0	2	1	5	0	0	0	17
0303: insufficient sample	1	5	1	5	71	0	2	0	5	0	0	2	3	3	1	0	2	101
0304: unsuitable sample (blood quality): incorrect blood application	0	1	0	0	7	0	0	0	1	0	0	6	0	1	0	1	2	19
0305: unsuitable sample (blood quality): compressed/damaged	0	4	1	4	70	0	0	0	2	0	0	4	1	2	0	1	1	90
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0308: unsuitable sample: NHS number missing/not accurately recorded	0	0	0	0	10	0	0	0	0	0	0	1	0	1	0	0	0	12
0309: unsuitable sample: date of sample missing/not accurately recorded	0	4	0	0	21	0	0	0	0	0	0	0	2	0	0	0	0	27
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	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
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	14	3	10	186	0	2	0	8	0	0	14	7	7	1	2	6	261
Number of first samples received/ babies tested	50	160	13	75	10250	10	40	1	145	33	12	146	74	281	57	36	123	11506
Avoidable Repeat Requests Rate	2.0%	8.8%	23.1%	13.3%	1.8%	0.0%	5.0%	0.0%	5.5%	0.0%	0.0%	9.6%	9.5%	2.5%	1.8%	5.6%	4.9%	2.3%

Transfusion Repeats are not included in the Avoidable Repeat calculation