# Facilitating the implementation of NGS-based Diagnostic Testing in Infectious Disease Laboratories

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CDC's QMS Risk-Based Approach to Next Generation Sequencing



Quality Management System – provides the foundation to build upon

Challenges of NGS to Regulatory Compliance and Patient Safety on a PHL CLIA Certificate

- Use of non-validated, uncontrolled technologies.
- Experts in use and development of NGS technologies often less versed in clinical laboratory standards or regulations.
- Ever expanding laboratory activities can potentially impact patient care (and directly impact CLIA certification):
  - Patient identifiers de-coded offsite
  - Outbreak investigations and "research use only" testing
  - "Behind the scenes" testing
- Challenges compounded by complexity of novel technology and difficulty in interpreting specific CLIA regulations.



# Diagnostic NGS at CDC Infectious Disease Laboratories

- Two diagnostic tests using NGS on the Roybal campus CLIA menu:
  - FVIII Gene Sequencing
  - Enteric Bacterial Identification
- Other NGS activities (unable to report at a patient level):
  - Pathogen characterization\*
  - Phylogenetic analysis
  - Hospital infection control
  - Antimicrobial resistance/susceptibility\*
  - Metagenomics/pathogen discovery\* \*in pipeline towards CLIA activity
- CDC reference labs are often "end of the line" for diagnostic testing: arguable need to provide this specialized testing to PHL partners and US population.



# OID/CDC Efforts to Support Diagnostic NGS Implementation

- Challenge: Multiple, specialized laboratories. Re-inventing the wheel is impractical.
  - Solution: Generate ready-to-implement SOPs and forms, each made flexible for customization to individual laboratory needs.
- Resources available: Scientific, technologic, quality systems and bioinformatic expertise throughout organization.
  - Engagement: Provide a venue to communicate and define best practices.
- Desire to work with external partners.



# CDC NGS Quality Workgroup: Description

- The NGS Quality Workgroup meets monthly to identify challenges and gaps in laboratories performing NGS for both research and diagnostics.
  - Lead: Rebecca Hutchins, started in 2015.
  - Participation from multiple Centers: NCEZID, NCIRD, NCHHSTP, CSELS, NCEH.
- The workgroup develops SOPs, forms, guidance, and tools to address the gaps.
- Key success factors:
  - Inclusion of laboratorians, bioinformaticians, and quality managers (NGS users).
  - Interactive and inclusive discussions.
  - Systematic approach.
  - Surveyed NGS users to determine areas of greatest need from their perspective.



# Alignment to Quality System 12 Essential Elements

- Workgroup output aligned to the 12 QSEs (Clinical and Laboratory Standards Institute).
- In 2015, a survey to NGS-using laboratories, identified the QSEs of Equipment, Personnel and Process Management to have the largest gaps and posed the greatest risk.
- These were prioritized to address.



Hutchins, R. Manuscript in preparation

## CDC NGS Quality Workgroup: Output

#	Document Title	Document Type	QSE
1	Ion PGM Sequencer Competency Assessment Form	Form	Personnel
2	Ion PGM Sequencer Competency Assessment SOP	SOP	Personnel
3	MiSeq Competency Assessment Form	Form	Personnel
4	MiSeq Competency Assessment SOP	SOP	Personnel
5	Ion PGM Sequencer Training Form	Form	Personnel
6	Ion PGM Sequencer Trainer Designation Form	Form	Personnel
7	Ion PGM Sequencer Training SOP	SOP	Personnel
8	MiSeq Employee Training Form	Form	Personnel
9	MiSeq Trainer Designation Form	Form	Personnel
10	MiSeq Training SOP	SOP	Personnel
11	Ion Chef Preventive Maintenance Log	Log	Equipment
12	Ion Chef Preventive Maintenance SOP	SOP	Equipment
13	Ion OneTouch 2 Preventive Maintenance Log	Log	Equipment
14	Ion OneTouch 2 Preventive Maintenance SOP	SOP	Equipment
15	Ion OneTouch ES Preventive Maintenance Log	Log	Equipment
16	Ion OneTouch ES Preventive Maintenance SOP	SOP	Equipment
17	Ion PGM Equipment Error Log	Log	Equipment
18	Ion PGM In-Use Equipment Daily Maintenance Log	Log	Equipment
19	Ion PGM In-Use Equipment Weekly Maintenance Log	Log	Equipment
20	Ion PGM Power Off Equipment Maintenance Log	Log	Equipment
21	Ion PGM Preventive Maintenance Wash Flowchart	Job Aid	Equipment
22	Ion PGM Sequencer Preventive Maintenance SOP	SOP	Equipment
23	MiSeq Equipment Error Log	Log	Equipment
24	MiSeq In-Use Equipment Maintenance Log	Log	Equipment
25	MiSeq Preventive Maintenance SOP	SOP	Equipment
26	MiSeq Preventive Maintenance Wash Flowchart	Job Aid	Equipment
27	MiSeq Standby Equipment Maintenance Log	Log	Equipment
28	Ion PGM System Equipment Pre-Installation Checklist	Job Aid	Equipment
29	MiSeq Equipment Pre-Installation Checklist	Job Aid	Equipment
30	Vendor-Performed IQ/OQ Coversheet	Form	Equipment
31	Ion PGM Sequencer Software Update Evaluation SOP	SOP	Equipment
32	Ion PGM Sequencer Software Update Form	Form	Equipment
33	MiSeq Software Update Evaluation SOP	SOP	Equipment
34	MiSeq Software Update Form	Form	Equipment
35	NGS QC Guidance for Illumina Workflows	SOP	Process Management
36	Bioinformatics QC Workflows	SOP	Process Management
37	Sequencing QC SOP	SOP	Process Management
38	Pre-Analysis QC SOP	SOP	Process Management
39	Assembly QC SOP	SOP	Process Management

- The Workgroup collaborated to develop guidance, SOPs and Forms for QSE's
   Equipment, Personnel and Process
   Management.
- A total of 39 documents have been reviewed for external release.
- Multiple additional documents that have not been reviewed for external release (e.g. analytical SOPs) or are in "working drafts".

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# Example Forms: Personnel Training & Equipment Pre-Installation

		MiSeq En	nployee Training For	m	
	Doc. No.	Rev. No.	Effective Date:	1	Page 1 of 3
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		Employee Name		Training S	itart Date
Secti video	on I – Base Knowledge s and documents as appr	(Video and Reading Require ropriate]	ements) [select videos and docume	ents relevant to your	lab processes; add other
Mis	eq: Sequencing Chemist	Video Title try	1	Trainee Initials	Date Watched
Mis	geg: How to Start a Run	Added System			
Mis	Seq: Instrument Washes				
Tru Tru	Seg: Best Practices Seg: Controls				
In	Seg: Sample Purification	n Bead Size Selection and Bes	t Practices		
Nez	ttera DNA Sample Prep				
Nez	Nextera Sample Prep: Best Practices           Illumina Experiment Manager				
Illu					
Mis	eg: Does My Run Look	Good?			

These relatively simple forms are ready to implement and customizable. Such forms can save laboratories the work of creating *de novo*.

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## Example Procedure and Form: Software Updates

Restant the Partner of		MEC	were Undete Eveluation					$\mathbb{N}$	liSeq Software Up	date Forn	1	
N NT		Miseq Son	ware Update Evaluation	D 1 60	н.	Doc. No.	R	lev. No.	Effective Date:		Page 1 of 1	
Joc. No.		Kev. No.	Effective Date:	Page 1 of 3	Ŀ	+						
					11	Lab:			Bui	lding #:	Room #:	
						Equipment	t: MiSeq		Equ	ipment ID	:	
	5.3.7	Complete a verif	fication run as described below p	prior to releasing the	н.	Manufactu	irer: Illumina		Mo	del #:	• "	
	equipment back into service.				н.	Serial #:	D-4		ESC	ESO/CDC Barcode #:		
		a) Using a star boratory, pe	ndard, well-characterized sample erform a sequencing run.	previously ran in the la-	Н.	Log Start	Date.	_	Log	; Ellu Date.		
		<ul> <li>b) If the sequence comparable further action</li> </ul>	encing data obtained with the new to the data obtained with the pri on is needed.	v software versions are or software versions, no		Current So	oftware Versio	ns:				
		c) If the sequer not compara conduct a re	ncing data obtained with the new able to the data obtained with the evalidation of the assay.	v software versions are e prior software versions,	ľ	Illumina S Workflow(	equencing (s) currently us	sed				
	5.3.8	Attach additiona tion, Verification	al information as needed (e.g. Re n / Validation data) to the MiSeq	lease Notes documenta- Software Update Form.	Hr	III the labor	Tatory.	Do	the updates affect the	e	Do the updates potentially affe	
	5.3.9	Sign, date, and o	obtain applicable reviews and app	provals.	ш	Release No	otes Reviewed?	seq lab	uencing workflow us ooratory?	ed in the	the sequencing data output results?	
						🔲 Yes 🔲	No		Yes 🔲 No		🗖 Yes 🔲 No	
0 Rev	vision Hist	ory DCR # Char	nge Summary	Date	Ш	Required A	Action:		Verification 🔲 None	e		

highlighting the strength of the quality systems approach to identify needs.

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(and Validation, if applicable)

#### Process Control for the Wet and Dry NGS laboratories





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#### Example QC Checkpoint Checklist

CDC CDC Infec	ctious Diseases Laboratories			
NGS				
Doc. No.	Rev. No. Effective Date:	Page 8 of 8		
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OC Checkpoint (Process Step)	Method (SOPs)	Expected Results*		
cDNA Synthesis* (2.6)	Purity (choose one):	<b>Purity:</b> A <sub>260</sub> /A <sub>280</sub> = 1.8-2.0		
• Quantitate purity and concentration	NanoDrop Nucleic Acid Quantitation Assay Other AND Constraints (channels)	<b>Concentration:</b> > 500 ng in a 20-100 μL sample		
*for RNA sample only	<ul> <li>Concentration (choose one):</li> <li>Qubit dsDNA or RNA Quantitation Assay</li> <li>Quant-iT Assay</li> <li>Other</li> <li>Other</li> <li>OR</li> <li>Electrophoresis Instrument for NGS (choose one):</li> <li>TapeStation Assay</li> <li>Bioanalyzer Assay</li> <li>BluePippin DNA Size Selection Assay</li> <li>Other</li> </ul>			
Library Preparation (2.8)	Concentration (choose one):	Concentration: > 1 mM		
Quantitate concentration and confirm size selection	Qubit dsDNA or RNA Quantitation Assay Quant-iT Assay KAPA qPCR Other AND Electrophoresis Instrument for NGS (choose one): TapeStation Assay Bioanalyzer Assay BluePippin DNA Size Selection Assay	<b>Electropherogram results:</b> Single peak of desired size with no tailing and excessive broadening per lab specifications		

\*The expected results included are based on standard NGS methods in use at the time of document development. The advancement of new methods and technologies may allow for successful sequencing with QC results differing from those listed in this document.

# Ad hoc Discussions to Determine Best Practices

- Consideration of external sequence data as a clinical sample.
  - Acceptance criteria driven by meeting defined QC checkpoints.
- Internal/external controls and individualized quality control plans (ongoing).
- Venue to communicate reagent recalls and identify reagent quality issues.



Work Group Expertise Provided Input to the CLIAC Federal Advisory Committee, April 2018

- Provided the public health voice at this session.
- Identified specific CLIA regulatory challenges and described CDC best practices to address:
  - Personnel.
  - Process control, including distributive testing.
  - System validation and re-validation.
  - Analysis (including record retention) and reporting.
- CLIAC recommended formation an NGS workgroup.

Hutchins, R: "Diagnostic NGS Challenges: CDC PHL Perspective"

http://ftp.cdc.gov/pub/CLIAC\_meeting\_presentations/pdf/Addenda/cliac0418/7\_Hutchins\_NextGen\_Sequencing\_Public\_Health.pdf

### CDC NGS Quality Workgroup: Future Direction

- The Workgroup is tackling the QSEs of Process Management, Organization, Information Management and Assessments:
  - NGS Method Validation: Guidance, Procedures and forms.
  - Individualized Quality Control Plan.
  - Quality Assurance planning.
  - Information Management Guidance (data file retention).
  - Proficiency testing



# Next Steps

- Manuscript in preparation (including 39 documents and forms) on personnel, equipment and process control.
  - Will be publically available, but a "snapshot" as field rapidly evolves.
- Plan to strengthen collaboration with CDC's Division of Laboratory Systems (CSELS) and APHL
  - Engagement and interaction.
  - Development of resources to support public health quality management of NGS-based testing.



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Disclaimer: The findings and conclusions in this presentation are those of the author and do not necessarily represent the views of Centers for Disease Control and Prevention.



# CDC NGS Quality Workgroup: Approach

 Systematic approach to improve quality management systems for labs that perform NGS testing



