**Coro Molecular Microbiology Procedure Manual**

1. **PRINCIPLE:** A manual of standard operating procedures is required to document policies and procedures that are used in the laboratory. They provide personnel with a common set of procedures to ensure consistency in the operation of the laboratory.
2. **PROCEDURE MANUAL BINDERS**
   1. All the laboratory procedures can be found in two binders that are kept in the upper cabinet across from the Micro Molecular Printer/Fax. A table of contents is in the beginning of each binder. Procedures within the binder are separated by tabs.
   2. Instrument specific binders can be found by the instruments. These contain copies of the original procedures for tests done on that instrument.
3. **CONTENT**
   1. Each procedure will have a signage page that has the names of those responsible for writing the procedure; it will also have the adopted date and the signature of the Director. There will be a revision and review box. The director will sign and date here each time the procedure is reviewed or revised. There will be a footer with the hospital name, laboratory, and address.
   2. The format of the procedure will be as uniform as possible. Each will have a header with the current revision date. Each will have a footer with the page number.
   3. Items that will be included in each procedure as appropriate are:
      1. Principle
      2. Acceptable Specimens
      3. Reagents
      4. Step by Step instructions
      5. Calculations
      6. Controls and Corrective Action
      7. Specific Procedural Notes
      8. Limitations
      9. References
      10. Revisions
4. **REVIEWS**
   1. All new procedures are reviewed by the laboratory Directors and Technologists.
   2. All current procedures are reviewed annually by the Technologists.
   3. All current procedures are reviewed and signed by the Directors at least every two years.
5. **DISCONTINUED**
   1. When a procedure is discontinued, a paper or electronic copy is maintained for at least two years, recording the initial date of use, and retirement date.
6. **DOCUMENT CONTROL**
   1. A master document control spreadsheet is maintained on the shared Pathology drive.
   2. When procedures are revised, they will be signed by the directors, reviewed by the staff and the master document control spreadsheet will be updated by the Manager.
7. **REVISIONS**
   1. January 2020
      1. Updated signage sheet and removed footer except for page number. Noted changes in procedure.