TRAINING UPDATE

Lab Location: Department:

GEC, SGAH & WAH

Core

Date Distributed:
Due Date:

Implementation:

11/4/2013 11/30/2013 **12/1/2013**

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Manual Urinalysis QC form, AG.F02.2

Description of change(s):

Removed columns for Ictotest

Add columns to record acceptability for each level of QC material (indicated by marking "Y" or "N")

This revised FORM will be implemented on December 1, 2013

Document your compliance with this training update by taking the quiz in the MTS system.

44.5	Quest Diagnostics
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AG.F02.2

MANUAL URINALYSIS QC Germantown Emergency Center

☐ Shady Grove Adventist Hospital

☐ Washington Adventist Hospital

Year_____T aval II Lot # Month_

Performed once per day

for implementation 12/2013

Level I Lot # exp			xp		Level II Lot # exp			Level II	e	хp	* Open vials are stable for 7 days						
Day 1	Tech	Clini	SSA	QC OK?	Tech	Clini	SSA	QC OK?	Tech	Clini	SSA	QC OK?	Day	Tech	Refrac	ctometer	QC OK?
Acceptable Ranges								Y/N				Y/N	Accep	otable	H2O 1.000	5%NaCl 1.023-1.025	
				Y/N	Range				Range				Range	;			Y/N
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2 3 4													2				
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31													31				
Clinitest		exp				•			SSA Lot		exp	•		VaCl Lot#		exp	
Weekly	Review	:	Week	ly Rev	riew:	Wee	kly Revie	ew:	We	ekly Rev	iew:	N	I onthly	Review:			_