#### TRAINING UPDATE

Lab Location: Department: GEC Mgmt, Lead & Sr Tech 
 Date Distributed:
 4/18/2017

 Due Date:
 5/1/2017

 Implementation:
 5/1/2017

## **DESCRIPTION OF PROCEDURE REVISION**

Name of procedure:

# Laboratory Director Visits GEC.QA245 v1

# Laboratory Director Site Visit Log, GEC AG.F374.0

**Description of change(s):** 

Update intended to inform staff of process and awareness that log will be available with other documents that Dr Cacciabeve reviews

Section 2: specify SOP applies to GEC Section 6: update form number

Re-instated form with new number (original form had been retired)

This revised SOP and form will be implemented on May 1, 2017

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

## Non-Technical SOP

| Title       | Laboratory Director Visits |                 |  |
|-------------|----------------------------|-----------------|--|
| Prepared by | Leslie Barrett             | Date: 6/14/2016 |  |
| Owner       | Cynthia Bowman-Gholston    | Date: 6/14/2016 |  |

| Laboratory Approval                        |                       |      |  |  |  |
|--|-----------------------|------|--|--|--|
| Print Name and Title                       | Signature             | Date |  |  |  |
| Refer to the electronic signature page for |                       |      |  |  |  |
| approval and approval dates.               |                       |      |  |  |  |
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| Local Issue Date:                          | Local Effective Date: |      |  |  |  |

| Review:    |           |      |  |  |
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| Print Name | Signature | Date |  |  |
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## TABLE OF CONTENTS

| 1. | PURPOSE                | . 2 |
|----|------------------------|-----|
|    | SCOPE                  |     |
|    | RESPONSIBILITY         |     |
| 4. | DEFINITIONS            | . 2 |
| 5. | PROCEDURE              | . 2 |
| 6. | RELATED DOCUMENTS      | . 3 |
| 7. | REFERENCES             | . 3 |
| 8. | REVISION HISTORY       | . 3 |
| 9. | ADDENDA AND APPENDICES | . 3 |
|    |                        |     |

#### 1. PURPOSE

This procedure describes the frequency and responsibilities for onsite visits by the Laboratory Director.

#### 2. SCOPE

This procedure applies to the Laboratory Director's onsite visits to the Germantown Emergency Center.

#### **3. RESPONSIBILITY**

The senior QA specialist is responsible for maintenance and periodic review of this SOP. The Laboratory Director is responsible for complying with this procedure.

#### 4. **DEFINITIONS**

None

#### 5. **PROCEDURE**

- 1. The Laboratory Director makes monthly site visits.
- 2. The Laboratory Director assesses the following laboratory characteristics:
  - a. Cleanliness, neatness, and order
  - b. Staff compliance with using personal protective equipment (PPE)
  - c. Staff compliance with QC, equipment maintenance, and correlation studies
  - d. Equipment appearance and obvious functionality
- 3. The Laboratory Director documents corrective action, after discussion with the tech on duty.
- 4. A written record of each site visit is maintained.

#### 6. **RELATED DOCUMENTS**

Laboratory Director Site Visit Log, GEC (AG.F374)

#### 7. **REFERENCES**

College of American Pathologists Commission of Laboratory Accreditation, Accreditation Checklist (Team Leader). Northfield, IL: College of American Pathologists, current edition

#### 8. **REVISION HISTORY**

| Version | Date    | Reason for Revision  | Revised<br>By | Approved By   |
|---------|---------|--|---------------|---------------|
| 0       | 3/24/17 | Section 2: specify SOP applies to GEC<br>Section 6: update form number | C Bowman      | Dr Cacciabeve |
|         |         |  |               |               |
|         |         |  |               |               |

# 9. ADDENDA AND APPENDICES

N/A



# Laboratory Director Site Visit Log

Codes: A=Acceptable; U=Unacceptable; \*=Corrective Action Below

| Date | Staff PPE | Work<br>Benches | QC | Equipment | Maintenance | Refrigerator<br>storage | Signature |
|------|-----------|-----------------|----|-----------|-------------|-------------------------|-----------|
|      |           |                 |    |           |             |                         |           |
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**Comments / Corrective Actions:**