



TRAINING UPDATE

Lab Location: SGMC & WOMC
Department: Micro

Date Distributed: 3/11/26
Due Date: 3/25/26
Implementation: 3/11/26

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
<p>AG.F525 BioFire FilmArray® Respiratory Panel 2.1 (RP2.1) Internal QC Log - retired AG.F575 BioFire FilmArray® Blood Culture Identification (BCID2) Internal QC Log - retired AG.F639 BioFire FilmArray® Meningitis/ Encephalitis (ME) Internal QC Log - retired AG.F708 BioFire FilmArray® Gastrointestinal (GI) Panel Internal QC Log – retired</p> <p>AG.F503 Flu / RSV PCR Quality Control Log AG.F509 Cepheid SARS-CoV-2 PCR Quality Control Log AG.F409 MRSA PCR Quality Control Log AG.F410 Clostridium difficile PCR Quality Control Log</p>
Description of change(s):
<p>The first four forms listed have been retired as we no longer need to record patient data, since the Cepheid and BioFire are interfaced.</p> <p>The second group of forms have been updated to remove spaces for recording patient data, and going forward will only be used for QC.</p>

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



FLU A / B / RSV PCR QUALITY CONTROL LOG

- Shady Grove Medical Center
- White Oak Medical Center

1. **External Positive and Negative Controls** are tested and documented with each new kit lot number or shipment or every 31 days, whichever is more frequent.
2. If QC results are not acceptable, document corrective action. Do not accept patient results before reviewing QC results for proper reactions.

Date	Kit	Internal Controls	External Pos Control Pos/Pos/Pos		External Neg Control Neg/Neg/Neg		Tech Code	Corrective Action
	Lot # / Expire	Pass / Fail	Lot # / Expire	Result	Lot # / Expire	Result		

Weekly review:	Weekly review:	Weekly review:
Weekly review:	Weekly review:	Monthly review:



Cepheid SARS-CoV-2 PCR QC LOG

- Shady Grove Medical Center
- White Oak Medical Center

1. **External Positive and Negative Controls** are tested and documented with each new kit lot number or shipment or every 31 days, whichever is more frequent.
2. If QC results are not acceptable, document corrective action. Do not accept patient results before reviewing QC results for proper reactions.

Date	Kit	Internal Controls	External Pos Control DET		External Neg Control NTD		Tech Code	Corrective Action
	Lot # / Expire	Pass / Fail	Lot # / Expire	Result	Lot # / Expire	Result		

Weekly review:	Weekly review:	Weekly review:
Weekly review:	Weekly review:	Monthly review:



MRSA PCR QUALITY CONTROL LOG

- Shady Grove Medical Center
- White Oak Medical Center

1. **External Positive and Negative Controls** are tested and documented with each new kit lot number or shipment or every 31 days, whichever is more frequent.
2. If QC results are not acceptable, document corrective action. Do not accept patient results before reviewing QC results for proper reactions.

Date	Kit	Internal Controls	External Positive Control (DET) = Detected		External Negative Control (NTD) = Not Detected		Tech Code	Corrective Action
	Lot # / Expire	Pass / Fail	Lot # / Expire	Result	Lot # / Expire	Result		

Weekly review:	Weekly review:	Weekly review:
Weekly review:	Weekly review:	Monthly review:



C. difficile PCR QUALITY CONTROL LOG

- Shady Grove Medical Center
- White Oak Medical Center

1. **External Positive and Negative Controls** are tested and documented with each new kit lot number or shipment or every 31 days, whichever is more frequent.
2. If QC results are not acceptable, document corrective action. Do not accept patient results before reviewing QC results for proper reactions.

Date	Kit	Internal Controls	External Pos Control (DET/PHPV)		External Neg Control (NTD/NHPV)		Tech Code	Corrective Action
	Lot # / Expire	Pass / Fail	Lot # / Expire	Result	Lot # / Expire	Result		

Weekly review:	Weekly review:	Weekly review:
Weekly review:	Weekly review:	Monthly review: