



University of Washington Medical Center 1959 NE Pacific Street. Seattle, WA 98195 Transfusion Services Laboratory Policies and Procedures Manual	Original Effective Date: 07-26-2021	Number: OR-0002.02
	Revision Effective Date: 05-23-2022	
TITLE: TSL Medical Director Designation of Record Review		

PURPOSE:

To define the Designation Policy for the Transfusion Service Medical Director of the University of Washington Medical Center (UWMC) Transfusion Service Laboratory (TSL).

PRINCIPLE & CLINICAL SIGNIFICANCE:

NA

POLICIES:

The CLIA Director for UWMC Department of Laboratory Medicine and Pathology designates the Transfusion Service Medical Director for the following roles and responsibilities. A change in medical directorship requires review of all policies and procedures by the incoming director. A TSL Medical Director or qualified designee is always on-call. This person has authority and responsibility for all consultative and support services that relate to the care and safety of transfusion recipients.

Role	Designee	Frequency
New policy, process and procedure document review and approval	Transfusion Service Medical Director	Any time there is a new policy, process, or procedure
Substantial policy, process, and procedure changes	Transfusion Service Medical Director	All substantial change to a policy, process, or procedure
Non-substantial changes	Transfusion Service Medical Director or TSL Operation and TSL Quality Manager	All non- substantial change to a policy, process, or procedure
Policy and procedure review	Transfusion Service Medical Director	Biennial
Proficiency Testing & Evaluation	Transfusion Service Medical Director	As received
Review of quality control records	Designated to TSL Operation and TSL Quality Manager, Medical Laboratory Scientist Lead and Medical Laboratory Scientist 2	Monthly

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Role	Designee	Frequency
Review of Equipment and Maintenance Records	Designated to TSL Operation and TSL Quality Manager, Medical Laboratory Scientist Lead and Medical Laboratory Scientist 2	Monthly
Competency and Training	Designated to TSL Operation and TSL Quality Manager	Upon hire, semiannually and annually. As needed

SPECIMEN REQUIREMENTS:

NA

REAGENTS/SUPPLIES/EQUIPMENT:

NA

QUALITY CONTROL

NA

INSTRUCTIONS:

NA

CALCULATIONS/INTERPRETATIONS/RESULTS REPORTING/NORMAL VALUES/CRITICAL VALUES

NA

CALIBRATION:

NA

PROCEDURE NOTES AND LIMITATIONS:

NA

REFERENCES:

CAP TRM Checklist

RELATED DOCUMENTS:

NA

APPENDIX:

NA

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UWMC SOP Approval:	
UWMC CLIA Medical Director	_____
Andrew Bryan, MD	Date _____
Transfusion Service Manager	_____
Nina Sen	Date _____
QA Manager	_____
Tayler Reeves	Date _____
Transfusion Service Medical Director	_____
Monica Pagano, MD	Date _____
UWMC Biennial Review:	
_____	Date _____
_____	Date _____

REVISIONS:
4-25-22: Frequency of procedure review updated, competency and training delegation added