(A) Policy Statement

All laboratory documents are to be kept in an organized manner consistent with CAP standards.

(B) Purpose of Policy

To ensure consistent standards of practice concerning maintenance of laboratory documents.

(C) Procedure

1. Documents are written by appropriate staff.

2. Approval authority:
   a. Medical Director signs and authorizes all new and revised policies.
   b. Administrative Director, Lab Managers, Coordinators, Supervisors and/or designee may do the mandatory review of policies and procedures every two years.

3. Staff reviews relevant policies and procedure annually, with records maintained as part of annual competency.

4. Policy and Procedure locations:
   a. Administrative policies are located at this link: http://utoledo.edu/policies/.
   b. Pathology Handbook is located on the Clinical Portal.
   c. Clinical procedure and policy manuals are located in each section for the clinical laboratory as appropriate.
   d. Document control files are located on the common “Z” drive.
   e. Each department maintains their document control files and updates as necessary.

5. Obsolete method procedures are retained for a minimum of two years.

6. Medical director must initially approve all procedures. Supervisory staff, medical director, or designee must review each procedure at least every two years. All changes must be documented on the master copy. All changes must be signed and dated by appropriate personnel.
<table>
<thead>
<tr>
<th>Approved by:</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert L. Booth, Jr., M.D.</td>
<td>2-25-17</td>
</tr>
<tr>
<td>Associate Professor</td>
<td></td>
</tr>
<tr>
<td>Director, Clinical Pathology/Hematopathology</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Daniel Barbee, RN BSN, MBA</td>
<td>3/1/2017</td>
</tr>
<tr>
<td>Chief Executive Officer-UTMC</td>
<td></td>
</tr>
<tr>
<td>Review/Revision Completed By:</td>
<td></td>
</tr>
<tr>
<td>Cynthia O'Connell - Administrative Director - Lab</td>
<td></td>
</tr>
</tbody>
</table>

**Review/Revision Date:**  
3/31/2005  
9/30/2005  
9/18/2006  
9/14/2007  
6/10/2008  
5/1/2011  
3/1/2013  
2/20/2017  

**Next Review Date:** 2/20/2019  

**Policies Superseded by This Policy:**  Q-11-B