


<b>Name of Policy:</b> Selection of Reference Laboratories <b>Policy Number:</b> 3364-107-312 <b>Approving Officer:</b> Medical Director, Clinical Pathology <b>Responsible Agent:</b> Director, Clinical Pathology Administrative Director, Lab <b>Scope:</b> Pathology Laboratory University of Toledo Medical Center		 <b>Effective date:</b> 04/17/2025 <b>Original effective date:</b> 3/31/2005	
Key words: Esoteric tests, CLIA certification, quality, testing performed, quality data.			
<input type="checkbox"/>	New policy proposal	<input checked="" type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

Esoteric testing and tests not performed at University of Toledo Medical Center are sent to carefully chosen reference laboratories.

(B) Purpose of policy

To provide quality results for testing not performed at University of Toledo Medical Center Laboratories.

(C) Procedure

1. Laboratories chosen for reference testing must be CLIA certified. CLIA certificates of reference laboratories will be kept on file in the specimen processing area. Alternatively, they can be downloaded from vendor’s websites if not filed.
2. The laboratory director, in consultation with medical staff or physician clients, (where or when appropriate), is responsible for selecting reference laboratories.
3. Reference laboratories are chosen based on the quality of testing performed.
4. The laboratory director or designee monitors the quality of test results received from these reference laboratories.
5. Send-out testing samples will be collected, processed, and handled according to the specifications of the testing laboratory.
6. Quality data from the main reference laboratory will be incorporated into the laboratory’s overall quality plan.

<p>Approved by:</p> <p>/s/</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Name: Amira Gohara, M.D.                  Title: Medical Director, Clinical Pathology</p> <p>4/17/2025</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p>Date</p> <p><i>Review/Revision Completed by:                  Administrative Director, Pathology Lab</i></p>	<p><b>Policies Superseded by This Policy:</b></p> <ul style="list-style-type: none"> <li>• Q-12</li> </ul> <p>Initial effective date: 3/31/2005</p> <p>Review/Revision Date: 03/07/2025</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr><td style="padding: 2px;">9/30/2005</td><td style="padding: 2px;">1/04/2023</td></tr> <tr><td style="padding: 2px;">9/18/2006</td><td style="padding: 2px;">01/04/2025</td></tr> <tr><td style="padding: 2px;">9/14/2007</td><td style="padding: 2px;">03/07/2025</td></tr> <tr><td style="padding: 2px;">6/10/2008</td><td style="padding: 2px;">4/17/2025</td></tr> <tr><td style="padding: 2px;">5/1/2011</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">3/1/2013</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">3/1/2013</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">2/20/2015</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">2/15/2017</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">1/22/2019</td><td style="padding: 2px;"></td></tr> <tr><td style="padding: 2px;">1/4/2021</td><td style="padding: 2px;"></td></tr> </table> <p style="margin-top: 10px;">Next Review Date: 4/17/2027</p>	9/30/2005	1/04/2023	9/18/2006	01/04/2025	9/14/2007	03/07/2025	6/10/2008	4/17/2025	5/1/2011		3/1/2013		3/1/2013		2/20/2015		2/15/2017		1/22/2019		1/4/2021	
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