



جامعة جدة
University of Jeddah
(059)

إدارة الخدمات الطبية
Medical Services Administration

رؤية جامعة جدة
الجامعة السعودية الحديثة
NEW SAUDI UNIVERSITY VISION



Policy Title: Lab Quality Management Program.			
Department/Unite: Laboratory Unit.	Policy Number: UOJ-MSA-LB-P/01	Replaces No.:	
Creation Date: 10/11/2022	Effective Date:	Review Date:	
Revision History			
Subject	Changes made	Done by	Revision date

1. **CONDITIONS:** 1.1 All Lab Staff.
2. **PURPOSE:** 2.1 Ensure conformance to the requirements of patients and physicians who are the ultimate laboratory users or customers.
2.2 Ensure implementation of all quality laboratory processes, their assessment, improving and planning.
3. **DEFINITIONS:** 3.1 **Conformance:** means commitment of all laboratory personnel to the requirements and elements of quality assurance program.
3.2 **Organization:** The laboratory is a department in the center organization system that is headed by lab director and lab technicians running all laboratory processes constitute the skeleton of laboratory chart.
3.3 **IPT:** Internal Proficiency Testing.
4. **Related Documents:** 549 N/A
5. **POLICY:** 5.1 All quality laboratory processes should be documented.
5.2 This includes all processes and sub-processes that take place from time of initial laboratory request for a test to the time of its final interpretation.
5.3 must give attention to the most procedures susceptible to error.
5.4 Any error in specimen's acquisition, processing, analysis and reporting will invalidate the lab results and allow the lab to fall short of its quality.
5.5 The Laboratory must have adequate space for equipment, materials, supplies, stuffing, supervision and budgetary resources.
5.6 All personal in the laboratory must be committed to and be key person in enforcing quality.
5.7 All line workers in the processes and sub-processes must be technically competent for high quality services.
5.8 All members of the lab must have educational background and experience in all laboratory processes.

5.9 Problem solving mechanisms must be implemented to have a feedback loop that responds to an error signal, reduce its size and prevent its recurrence.

5.10 Pre-analytical variables should be controlled.

5.11 Quality control programs must be enforced and followed strictly.

6. PROCEDURES:

6.1 control of pre-analytical variables:

6.1.1 Test requests and samples are monitored according to patient file in the medical data management system.

6.1.2 Patients are prepared before specimen collection according to the test requested by the physician.

6.1.3 Patients should identify by phlebotomist before specimen collection.

6.1.4 Specimen acquisition (collection, transport and TAT) is documented and monitored periodically to ensure compliance.

6.2 Control of analytical process:

6.2.1 Instrument daily, weekly, monthly and biannually maintenance should have followed strictly.

6.2.2 Records of maintenance should have filled.

6.2.3 Daily calibration if required or as requested to monitor machine performance and to ensure good standard curve.

6.2.4 Avoid specimen mix-up and incorrect volume of specimens.

6.2.5 Run QCs daily to monitor the reagents and kits used as in IPT policy.

6.3 Control of post-analytical:

6.3.1 Refer to result reporting policy.

7. RESPONSIBILITIES:

7.1 All members of the laboratory are responsible for implementation of the program each one in his site of work.

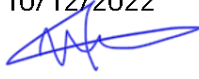
8. Appendix:

N/A

9. REFERRANCES:

9.1 Tietze clinical chemistry 2008.



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