

**OLIVE VIEW-UCLA MEDICAL CENTER
DEPARTMENT OF PATHOLOGY
POLICY & PROCEDURE**

**NUMBER: 5504
VERSION: 2**

SUBJECT/TITLE: ADM 55.0: DOCUMENT CONTROL POLICY

POLICY: All written policies, procedures and forms must have a document management or control system to assure that:

- All copies of policies and procedures are current
- Personnel have read the policies/procedures relevant to their job activities
- All policies/procedures have been authorized by the laboratory director, before implementation and/or significant revisions (e.g., changes in methodology, reference ranges, etc.)
- Policies and procedures are reviewed at least biennially by the laboratory director or designee
- Discontinued policies/procedures are quarantined in a separate file for a minimum of 2 years after the date of discontinuation (5 years for Transfusion Medicine).

PURPOSE: To assure that written policies and procedures are current; personnel are aware of the policies/procedures relevant to their job activities; all policies and procedures have been authorized by the laboratory director or designee before implementation; policies and procedures are reviewed at least biennially by the laboratory director or designee; and discontinued policies/procedures are retained in a separate file for a minimum of 2 years after the date of discontinuation (5 years for Transfusion Medicine).

DEPARTMENTS: PATHOLOGY

DEFINITIONS:

PROCEDURE: Each Laboratory section must maintain a Document Control System for both technical and operational procedures that encompasses the section specific policies and protocols necessary to assure the accurate, timely and safe provision of patient care.

1. All laboratory section supervisors must maintain a document control system (See Attachment ADM 55.0 Form 1) consistent with requirements of the College of American Pathologists.

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2. All policies and procedures must be authorized by the laboratory director before implementation and/or significant revisions (e.g., changes in methodology, reference ranges, etc.)
3. All policies and procedures must be reviewed at least biennially by the laboratory director or designee
4. All policies and procedures must be retained for 2 years after discontinuation (5 years for Transfusion Medicine).
5. All administrative and section specific protocols must be reviewed by laboratory personnel prior to completion of the probationary period. Each section supervisor is responsible for documentation of staff's knowledge of the procedure manual.
6. Policies and procedures must be available to all Laboratory personnel for reference and review 24 hours per day, seven days per week.

Date:	Revisions made:	By:	Rev:
9/22/12	Placed in PPM system	S. Spike	55.0

"No changes in procedure content, new version was created to satisfy CAP requirement TLC.11485 - New Director Procedure Approval "	
References:	
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