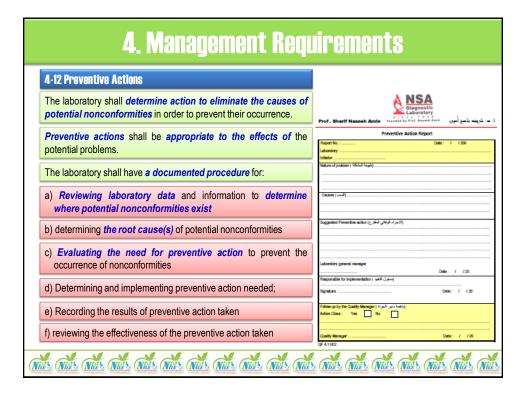
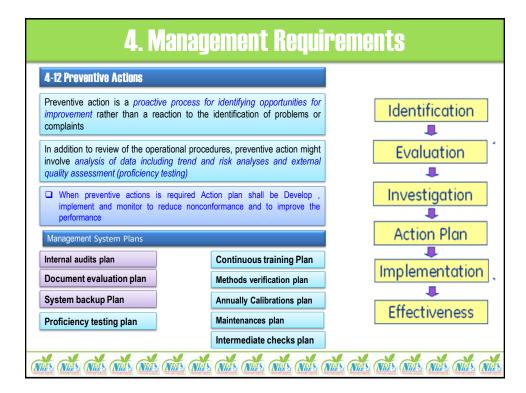
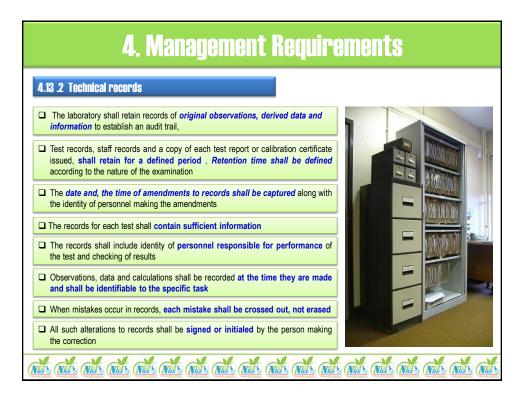


4. Management Rei 4-11 Corrective Actions	NSA Diagnostic
4.11.1 Procedure : The laboratory shall establish policy and procedures for take timely corrective action to eliminate the cause of nonconformity. This procedure will determine the following	د. شريف تاحي أمري Prof. Sherif Nasseh Amin المنتخب ال
Reviewing nonconformities	Activitylaspect: Reaeon: Customer Feedback Compleint Internel Audit Staff Observations
2- Cause analysis: Investigate to determine the root causes of the problem to ensure that the corrective actions is appropriate to the nonconformities.	Cojectve 100 1918 2012 Edvince Related disces Non-Conferently
3- Selection and implementation Select the corrective action to eliminate the problem and prevent recurrence, the required changes shall be documented	Tanka Acia:
4- Monitoring of corrective action Reviewing the effectiveness of the corrective action taken to ensure its suitability for the nonconformity and nonconformity do not recur;	Corrective Action & Estimated date for close : Responsible:
Recording the results of corrective action taken	Extended date : / / 20 (When the connection not approved) Finding
5- Additional audits, When the nonconformity affect on the management system procedures and process.	New Additional Audit Yes No Outly Version 044 4 1990 07 4 1992



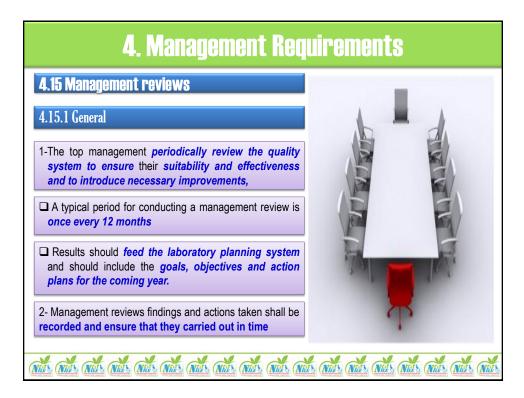




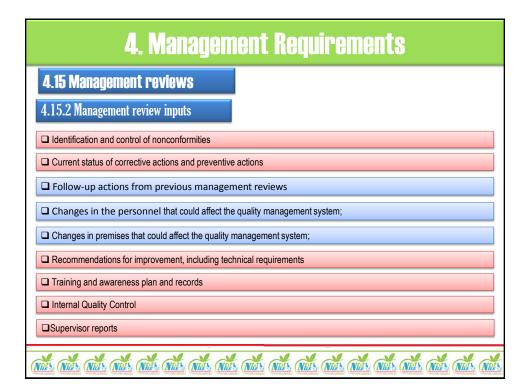
4. Management Requirements 4.4 Internal Audits Systematic and independent examination of the quality management system (QMS) What are you doing? Does it comply with the standard? Can be by someone within the organisation or from someone outside To check that the QMS implemented exactly as intended ? Identify opportunities to improve To see if the QMS meets the requirements of standards ? To investigate a problem • why did it occur ? • how can it be prevented in future ?

4. Management Requirements				
4.14 Internal Audits The laboratory shall conduct internal audits at <i>planned intervals</i> to determine whether <i>all activities</i> in the quality management system <i>are complied</i> to :				
17025 Standard Laboratory requirements	custo	omers requirements	ACC. Bodies requirements	
 2- Audits shall be: Formally planned and organized, Carried out by the quality manager. Implemented by qualified personnel. Personnel shall not audit their activities. Defined and documented procedure ind a) The types of audit, b) Frequencies, 				
c) Methodologies, d) Required documentation.		and the second s		

4. Management Requirements		
4.14 Internal Audits		
 Internal audit to quality system Conducted periodically (6 Month, Yearly) Carried out by independent , trained and qualified personnel, 	 2- Lab. Shall take: Timely corrective action Notify customers in written if defects show that the lab results may have been affected. 	
 According to procedure and plan Under authority and planned by of the quality manager Address all elements of the system, including the testing activities 	 3- Record the audited area , the activity, the audit findings and corrective actions 4- Follow up to ensure the effectiveness of implementation of corrective actions 	
The positive and negative findings shall be recorded and summary top management and discussed in the management review.	nered to the	
Vertical Audit : Audit all Activities (All clauses) for one sa same time	ample at the	
Horizontal Audit : Audit one Activities for the laboratory in o same time		
ats nats nats nats nats nats nats nats n	s nas nas nas nas nas nas nas n	



<section-header> 4. Management Requirements 4.15 Management reviews 4.15.2 Management review inputs Suitability of procedures Assessment of user feedback Staff suggestions Internal audits Risk management: Use of quality indicators; Quality Objectives Performance of suppliers Results of participation in inter-laboratory comparison programs Monitoring and resolution of complaints

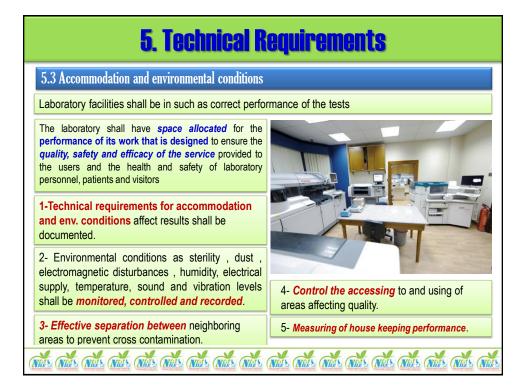


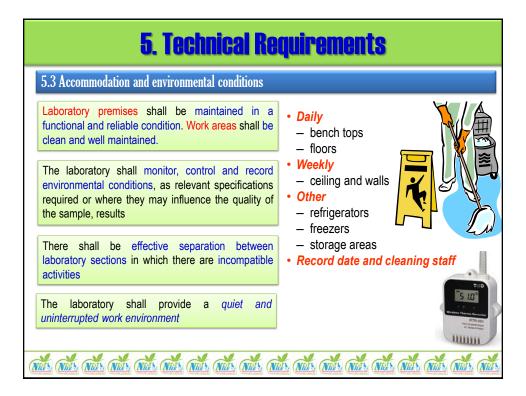
5. Technical Requirements						
5.2.1 Personnel Qualifications						
		operate equipment and evaluate results . nce and demonstrated skills needed, and				
5.2.2 Procedure						
	The laboratory shall have a documented procedure for formulate the goal w.r.to Education, training, and skills of lab staff. and maintain records for all personnel to indicate compliance with requirements.					
5.2.3 New and unemployed personnel						
The laboratory shall have a <i>program to</i> the person will work, the terms and condit		aboratory , the department or area in which ties.				
ISO 17025 Awareness	On job training	Management system Procedure				
Emergency and Fire	Risk Awareness	Safety requirement awareness				
When laboratory uses unemployed person	When laboratory uses unemployed personnel; it shall ensure that they are supervised and competent					
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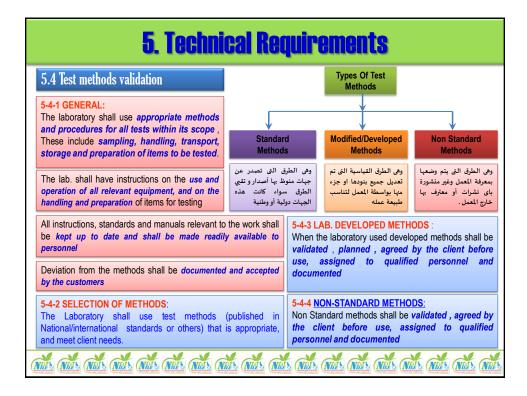
5.2 Personnel						
5.2.6 Competency Assessment						
the laboratory shall assess the competence of each person to perform assigned managerial or technical tasks according to established criteria						
Direct Observation Procedure observations		Name : Procedure for		tion Date	e	Evaluato
Calculation of z Score Calculation of precision factor Equipment maintenance		Evaluation Procedure item Read procedure manual	Accept	Partial	No	r Comment
Indirect Observations		Equipment set up appropriately				
re-testing case studies		Work area neat Reagent preparation				
Planed and timely according to experiences		Perform task accurately Perform task timely				
Use standard forms		Other: Specify				







5.1	Fechnical Requir	ements
Contingency plans		
Preparing Contingency plan to cove	r the following points	تقرير طوارىء أجهاداتة رقم : التاريخ :
2- مواجهة مخاطر أعطال نظام الحاسبات	1- مواجهة مخاطر الحرائق	الوحدة / الموقع نوع الطارى .
4- أنسكاب العينات و الكيماويات .	3- مواجهة مخاطر أنقطاع المياه عن المعمل	إنسكاب عينات إنسكاب كيماويات حرائق انقطاع المياد إنقطاع التيار الكبري أصابة مرضى
6- مواجهة مخاطر أنقطاع التيارالكهربي .	5- مواجهة مخاطر الطقس السيىء	ئوسيف الحادثة :
8- مواجهة مخاطر تغييرات نظام الادارة .	7- مواجبة مخاطر عدم تواجد العمالة و الافراد	
Meeting room	Unit No. 4	ان الجرائق) أنكرسيب الاشعال (ق حالة الجرائق) أنكرسيب الاشعال
Unit No. 3	Reeception Patients information register	الإيراءك الثيمة :
Bath Room	Sample Distribution Area Reports Recoving	الاسم / التاريخ : تقييم مسئول الامان :
	Patient Preparing	 الاسم / التوبغ :
Unit no. 2	Unit No. 1	قرارالدير الفق :
	Sampling Room	الاسم / التاريخ :
NIEL NEL NEL NEL NEL N	ter nær nær nær nær nær	NAS NAS NAS NAS NAS NAS NAS



5. Technical Requirements			
5.4 Test methods validation			
5-4-5 VALIDATION OF METHODS: Validate non-standard methods and lab developed methods and the standard methods used outside	5-4-7 CONTROL OF DATA: Calculations and data transfers shall checks in a systematic manner		
their intended scope.	2- When computers or automated equipment are used		
The lab. Should record the validation results	a) Computer software shall documented in detail		
The range and accuracy of validated methods shall be relevant to clients needs.	 and is suitably validated as being adequate for use b) Procedures are established and implemented for protecting the data; 		
5-4-6 ESTIMATION OF UNCERTAINTY OF MEASUREMENTS: The laboratory shall have procedure to estimate the	c) Maintenance plan for computer to ensure proper functioning and are provided with the environmental and operating condition		
uncertainty of all tests. Consider all uncertainty components using appropriate methods of analysis	Maintenance Plan Computer Password		
	Software Validation Staff Authorization		
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