



BIOMED (Equipment Utilization) KPIs

1- Average Cost of repair per failure:

Chemistry								
Equipment ID	serial number	Device	Model	unit	1st failure	cost	2nd failure	cost
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	1/10/2024	0	12/21/2023	0
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	12/18/2023	0.00	12/21/2023	0.00
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	12/21/2023	0.00	1/10/2024	0.00
Immunology								
Equipment ID	serial number	Device	Model	unit	1st failure	cost	2nd failure	cost
ANS1.2.BD.EQ.04	AC6605171D2102	Flow cytometry	BD Accuri c6+	Immunology	1/24/2023	0.00	2/8/2023	0.00
ANS1.2.BD.EQ.04	AC6605171D2102	Flow cytometry	BD Accuri c6+	Immunology	2/8/2023	0.00	5/15/2023	0.00
ANS1.2.BD.EQ.04	AC6605171D2102	Flow cytometry	BD Accuri c6+	Immunology	5/15/2023	0.00	Working properly	0.00
ANS1.2.MC ap.EQ.03	93229	Capillary electrophoresis	Mini Cap	Immunology	12/24/2023	0.00	Working properly	0.00
Hematology								
Equipment ID	serial number	Device	Model	unit	1st failure	cost	2nd failure	cost
ANS2.1.SYS.EQ.09	24631	Coagulation analyzer	CS-2500	Hematology	9/12/2023	0.00	Working properly	0.00
ANS2.1.Cent.EQ.03	2002308	BioRad blood grouping Centrifuge	6S	Hematology	1/24/2024	0.00	Working properly	0.00



BIOMED (Equipment Utilization) KPIs

ANS2.1.Pi p.EQ.12	YL218AK0083666	Pipette 100–1000)	DLAB	Hematology	5/2/2023	0.00	out of service	0.00
Microbiology								
Equipment ID	serial number	Device	Model	unit	1st failure	cost	2nd failure	cost
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	9/16/2023	0.00		0.00
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	7/21/2023	0.00		0.00
Molecular								
Equipment ID	serial number	Device	Model	unit	1st failure	cost	2nd failure	cost
ANS2.2.RT Pcr.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	1/13/2024	250000		still negotiating
ANS2.2.RT Pcr.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	10/10/2023	0	1/13/2024	0
ANS2.2.RT Pcr.EQ.03	785BR28895	Biorad real time PCR	CFX96 optics module	Molecular	9/2/2023	0	9/6/2023	0
ANS2.2.Pip.EQ.24	(21)27452170138	Real Time PCR	Quanti-studio 5	Molecular	6/5/2023			



BIOMED (Equipment Utilization) KPIs

2- Duration of unplanned downtimes:

Chemistry							
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date	
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	1/10/2024	1/16/2024	
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	12/18/2023	12/18/2023	
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	12/1/2023	12/21/2023	Spare parts installed
Immunology							
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date	
ANS1.2.BD.EQ.04	AC6605171D2 102	Flow cytometry	BD Accuri c6+	Immunology	1/24/2024	1/25/2023	
ANS1.2.BD.EQ.04	AC6605171D2 102	Flow cytometry	BD Accuri c6+	Immunology	2/8/2023	2/9/2023	
ANS1.2.BD.EQ.04	AC6605171D2 102	Flow cytometry	BD Accuri c6+	Immunology	5/15/2023	5/16/2023	
ANS1.2.MC ap.EQ.03	93229	Capillary electrophoresis	Mini Cap	Immunology	12/23/2023	12/24/2023	
Hematology							
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date	
ANS2.1.SYS.EQ.09	24631	Coagulation analyzer	CS-2500	Hematology	9/12/2023	9/12/2023	
ANS2.1.Cent.EQ.03	2002308	BioRad blood grouping Centrifuge	6S	Hematology	1/24/2024	1/24/2024	



BIOMED (Equipment Utilization) KPIs

ANS2.1.Pi p.EQ.12	YL218AK0083666		DLAB	Hematology	5/2/2023	out of service	
Microbiology							
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date	
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	9/16/2023	9/18/2023	
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	7/21/2023	11/8/2023	
Autoclave				Microbiology	1/1/2024	retirement	
Molecular							
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date	
ANS2.2.RT Pcr.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	1/13/2024		out of service
ANS2.2.RT Pcr.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	10/10/2023	10/11/2023	
ANS2.2.RT Pcr.EQ.03	785BR28895	Biorad real time PCR	CFX96 optics module	Molecular	9/2/2023	9/6/2023	
ANS2.2.Pip.EQ.24	(21)27452170138	Real Time PCR	Quanti-studio 5	Molecular	6/5/2023		out of service



BIOMED (Equipment Utilization) KPIs

3- Mean time between equipment failures:

Chemistry							
Equipment ID	serial number	Device	Model	unit	1st failure	2nd failure	time between failure
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	1/10/2024	12/12/2023	29 Days
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	12/18/2023	12/21/2023	3 Days
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	12/21/2023	1/10/2024	19 days
Immunology							
Equipment ID	serial number	Device	Model	unit	1st failure	2nd failure	time between failure
ANS1.2.BD.EQ.04	Flow cytometry	AC6605171D2 102	BD Accuri c6+	Immunology	1/24/2023	2/8/2023	16 Days
ANS1.2.BD.EQ.04	Flow cytometry	AC6605171D2 102	BD Accuri c6+	Immunology	2/8/2023	5/15/2023	19 days
ANS1.2.BD.EQ.04	Flow cytometry	AC6605171D2 102	BD Accuri c6+	Immunology	5/15/2023	Working properly	
ANS1.2.MC ap.EQ.03	Capillary electrophoresis	93229	Mini Cap	Immunology	12/24/2023	Working properly	
Hematology							
Equipment ID	serial number	Device	Model	unit	1st failure	2nd failure	time between failure



BIOMED (Equipment Utilization) KPIs

ANS2.1.SYS.EQ.09	24631	Coagulation analyzer	CS-2500	Hematology	9/12/2023		
ANS2.1.Cent.EQ.03	2002308	BioRad blood grouping Centrifuge	6S	Hematology	1/24/2024		
ANS2.1.Pi p.EQ.12	YL218AK0083666	Pipette 100–1000)	DLAB	Hematology	5/2/2023	out of service	
Microbiology							
Equipment ID	serial number	Device	Model	unit	1st failure	2nd failure	time between failure
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	9/16/2023		
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	7/21/2023		
Autoclave				Microbiology	1/1/2024	retirement	
Molecular							
Equipment ID	serial number	Device	Model	unit	1st failure	2nd failure	time between failure
ANS2.2.RT Pcr.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	1/13/2024		
ANS2.2.RT Pcr.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	10/10/2023	1/13/2024	93 Days
ANS2.2.RT Pcr.EQ.03	785BR28895	Biorad real time PCR	CFX96 optics module	Molecular	9/2/2023		
ANS2.2.Pip.EQ.24	(21)27452170138	Real Time PCR	Quanti-studio 5	Molecular	6/5/2023		



BIOMED (Equipment Utilization) KPIs

4- Number of unplanned downtimes:

Chemistry						
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	Jan-24	1
ANS1.1.Cobas.EQ.02	27W1-14	Cobas6000 by Roche	e601	Chemistry	Dec-23	2
Immunology						
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date
ANS1.2.BD.EQ.04	Flow cytometry	AC6605171D2 102	BD Accuri c6+	Immunology	Jan-24	1
ANS1.2.BD.EQ.04	Flow cytometry	AC6605171D2 102	BD Accuri c6+	Immunology	Feb-23	1
ANS1.2.BD.EQ.04	Flow cytometry	AC6605171D2 102	BD Accuri c6+	Immunology	May-23	1
ANS1.2.MC ap.EQ.03	Capillary electrophoresis	93229	Mini Cap	Immunology	Dec-23	1
Hematology						
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date
ANS2.1.SYS.EQ.09	24631	Coagulation analyzer	CS-2500	Hematology	September 2023	9/12/2023
ANS2.1.Cent.EQ.03	2002308	BioRad blood grouping Centrifuge	6S	Hematology	Jan-24	1/24/2024
ANS2.1.Pi p.EQ.12	YL218AK 0083666	Pipette 100–1000)	DLAB	Hematology	May-23	out of service



BIOMED (Equipment Utilization) KPIs

Microbiology						
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	September 2023	9/18/2023
ANS2.3.Biofire.EQ.01	TB03509	Film array torch system	BioFire	Microbiology	Jul-23	11/8/2023
Autoclave				Microbiology	Jan-24	retirement
Molecular						
Equipment ID	serial number	Device	Model	unit	Failure Date	Repair date
ANS2.2.RT Per.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	1/13/2024	
ANS2.2.RT Per.EQ.07	Lx10013119401	Luminex	Luminex 0/200	Molecular	10/10/2023	1/11/2023
ANS2.2.RT Per.EQ.03	785BR28895	Biorad real time PCR	CFX96 optics module	Molecular	9/2/2023	9/6/2023
ANS2.2.Pip.EQ.24	(21)27452170138	Real Time PCR	Quanti-studio 5	Molecular	6/5/2023	

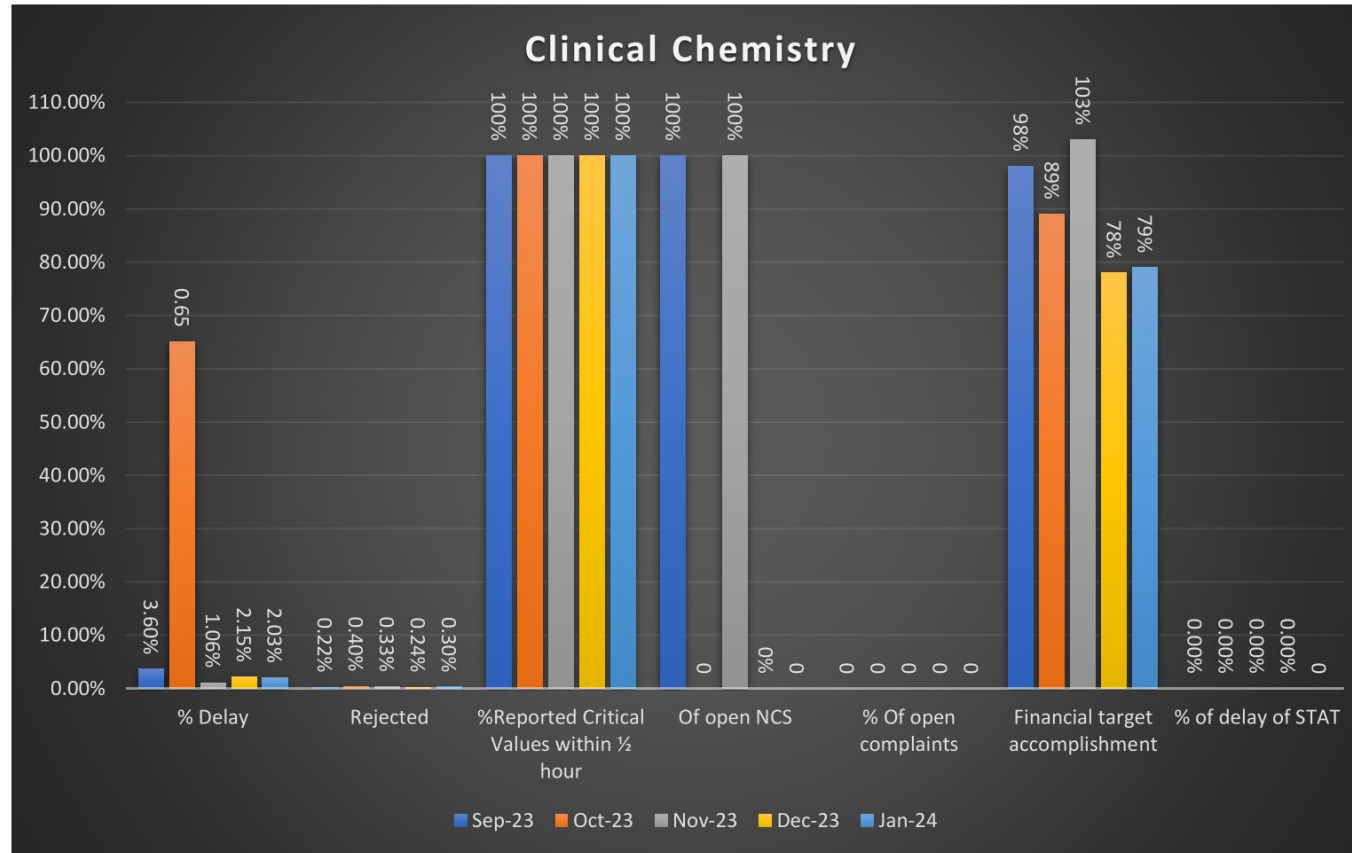


Clinical Chemistry Unit KPIs (September 2023 – January 2024)

Month/Parameter	Target	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
% Delays	< 5 %	3.60%	0.65 %	1.06%	2.15%	2.03%
% Rejections	< 5%	0.22%	0.40%	0.33%	0.24%	0.30%
% Reported Critical Values within ½ hour of result review	100%	100%	100%	100%	100%	100%
% Of open NCs	0%	100%	No NCs	100%	0%	No NCs
% Of open complaints	0%	No Complaints	No Complaints	No Complaints	No Complaints	No Complaints
% Financial target accomplishment	> 90%	98%	89%	103%	78%	79%
% Delay of STAT	0 %	14.4%	1.11%	5.59%	29.03%	2.68%
		40 delayed out of a total of 277	2 delayed out of a total of 180	10 delayed out of a total of 179	9 delayed out of a total of 31	7 delayed out of a total of 261
Proficiency testing (PT) Results	> 70 % satisfactory throughout the cycle for each parameter	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle



Clinical Chemistry Unit KPIs (September 2023 – January 2024)



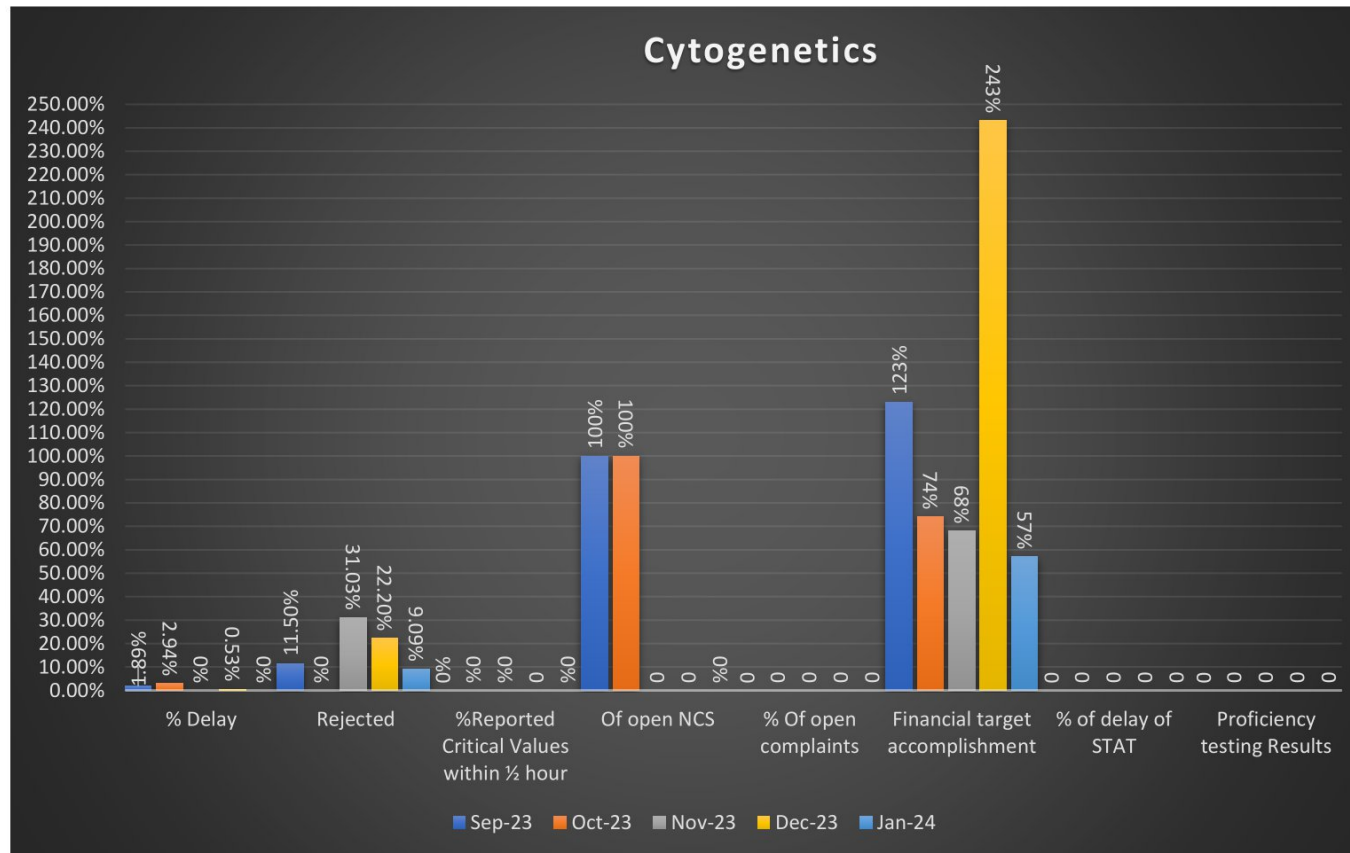


Cytogenetics Unit KPIs
(September 2023 – January 2024)

Month/Parameter	Target	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
% Delays	< 5 %	1.89%	2.94%	0%	0.53%	0%
% Rejections	< 5%	11.50%	0%	31.03%	22.20%	9.09%
% Reported Critical Values within ½ hour of result review	100%	NA	NA	NA	NA	NA
% Of open NCs	0%	100%	100%	No NCs	No NCs	0%
% Of open complaints	0%	No Complaints	No Complaints	No Complaints	No Complaints	No Complaints
% Financial target accomplishment	> 90%	123%	74%	68%	243%	57%
% Delay of STAT	0 %	No STAT entries	No STAT entries	No STAT entries	No STAT entries	No STAT entries
Proficiency testing (PT) Results	> 70 % satisfactory throughout the cycle for each parameter	No PT Participation. AAPs are performed instead.	No PT Participation. AAPs are performed instead.	No PT Participation. AAPs are performed instead.	No PT Participation. AAPs are performed instead.	No PT Participation. AAPs are performed instead.



Cytogenetics Unit KPIs (September 2023 – January 2024)

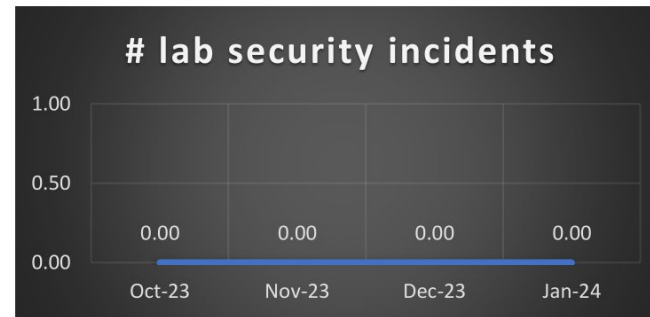
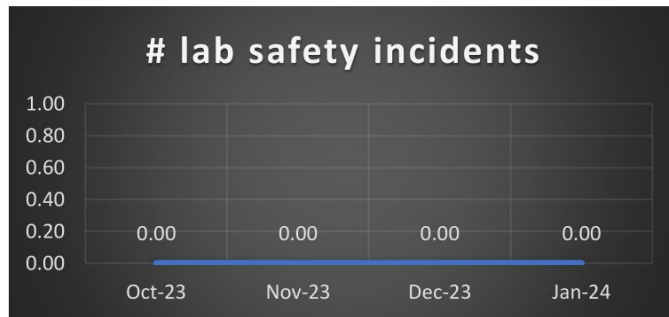




Environment and Facility Safety (EFS) Unit KPIs

(September 2023 – January 2024)

KPI name (Identification)	KPI Category	Target Performance	Sept 2023	Oct 2023	Nov 2023	Dec 2023	Jan 2024
Number of laboratory incidents related to safety (injuries and accidents)	Environmental and Facility Safety (EFS)	ZERO	ZERO	ZERO	ZERO	ZERO	ZERO
Number of laboratory incidents related to security	Environmental and Facility Safety (EFS)	ZERO	ZERO	ZERO	ZERO	ZERO	ZERO





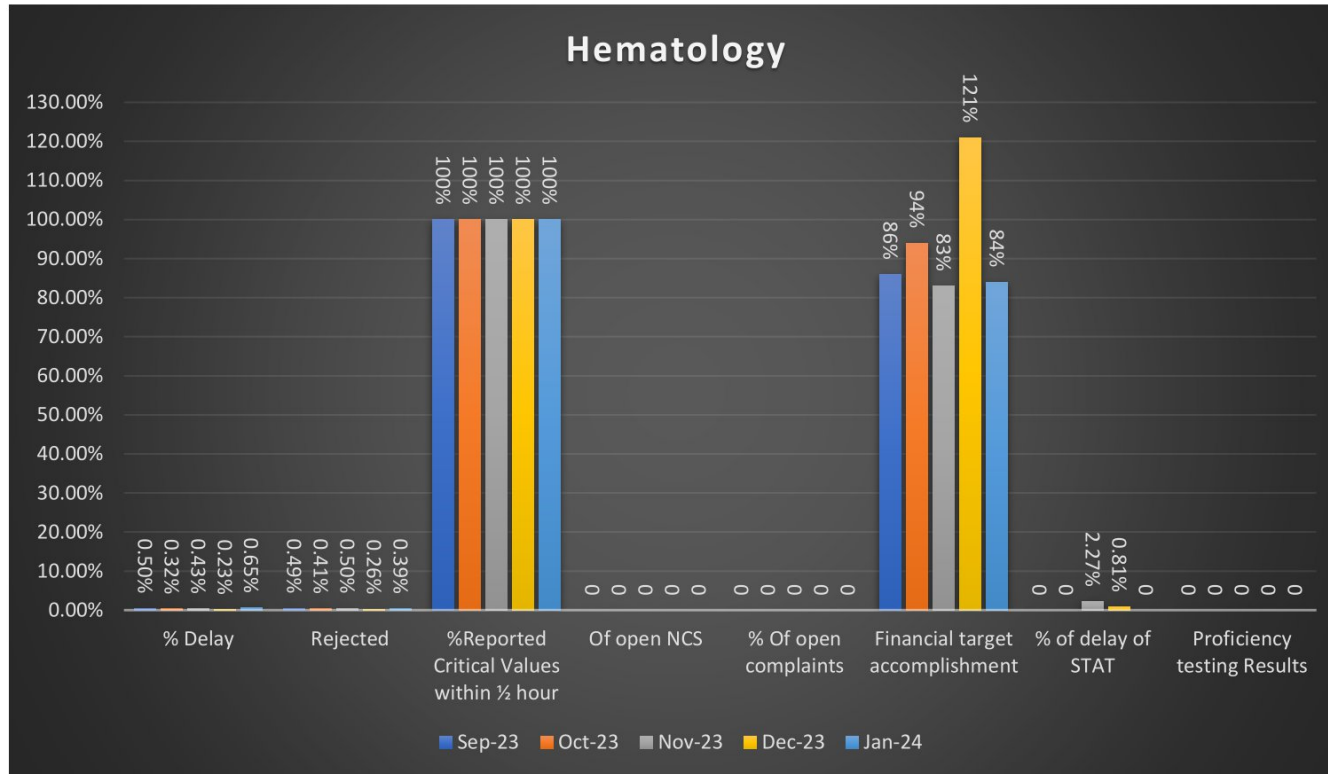
Hematology Unit KPIs

(September 2023 – January 2024)

Month/Parameter	Target	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
% Delays	< 5 %	0.50%	0.32%	0.43%	0.23%	0.65%
% Rejections	< 5%	0.49%	0.41%	0.50%	0.26%	0.39%
% Reported Critical Values within ½ hour of result review	100%	100%	100%	100%	100%	100%
% Of open NCs	0%	No NCs	No NCs	No NCs	No NCs	No NCs
% Of open complaints	0%	No Complaints	No Complaints	No Complaints	No Complaints	No Complaints
% Financial target accomplishment	> 90%	86%	94%	83%	121%	84%
% Delay of STAT	0 %	Zero %	No STAT entries	2.27%	0.81%	Zero %
Proficiency testing (PT) Results	> 70 % satisfactory throughout the cycle for each parameter	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle



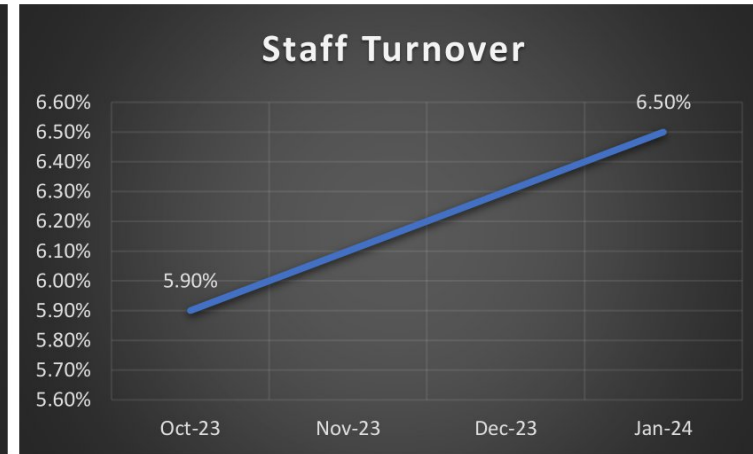
Hematology Unit KPIs (September 2023 – January 2024)



Workforce Management (WFM) KPIs

(October 2023 and January 2024)

KPI name (Identification)	KPI Category	Target Performance	Parameter	Oct 2023	Jan 2024
Staff Satisfaction	HR / WFM	<ul style="list-style-type: none"> Excellent and very good votes both constitute 75% or more of the total votes for each parameter No unsatisfactory votes مقبول أو غير مرضي. 	تقييم الرضا الوظيفي بصفه عامة	<p>The excellent and very good votes both constituted 81.8% of total votes.</p> <p>No unsatisfactory votes were obtained</p>	<p>The excellent and very good votes both constituted 82.4% of total votes.</p> <p>No unsatisfactory votes were obtained</p>
Staff Turnover	HR / WFM	< 20%		5.9%	6.5%





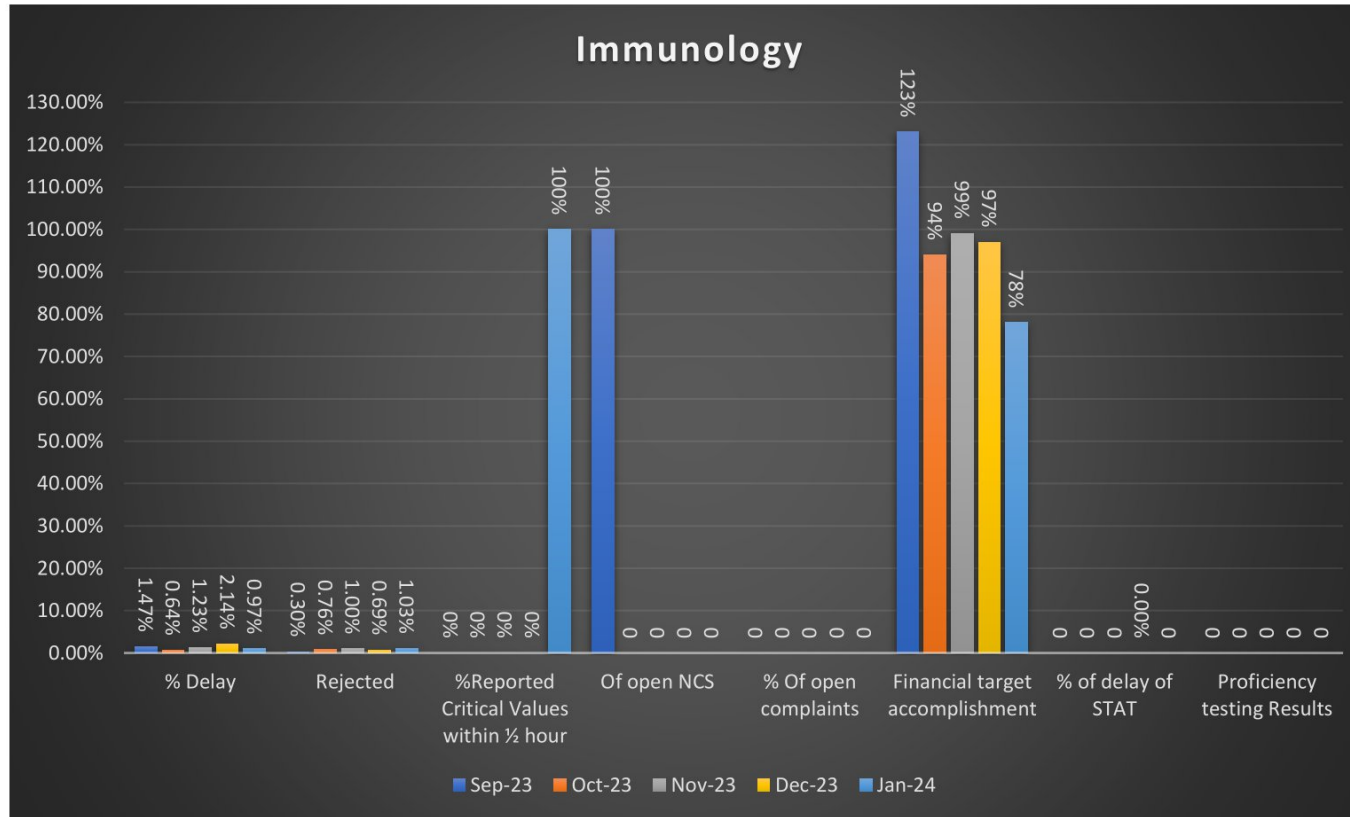
Immunology Unit KPIs

(September 2023 – January 2024)

Month/Parameter	Target	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
% Delays	< 5 %	1.47%	0.64%	1.23%	2.14%	0.97%
% Rejections	< 5%	0.30%	0.76%	1.00%	0.69%	1.03%
% Reported Critical Values within ½ hour of result review	100%	NA	NA	NA	NA	100%
% Of open NCs	0%	100%	No NCs	No NCs	No NCs	No NCs
% Of open complaints	0%	No Complaints	No Complaints	No Complaints	No Complaints	No Complaints
% Financial target accomplishment	> 90%	123%	94%	99%	97%	78%
% Delay of STAT	0 %	No STAT entries	No STAT entries	Zero %	33.3% 1 delayed out of a total of 3	No STAT entries
Proficiency testing (PT) Results	> 70 % satisfactory throughout the cycle for each parameter	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle



Immunology Unit KPIs (September 2023 – January 2024)

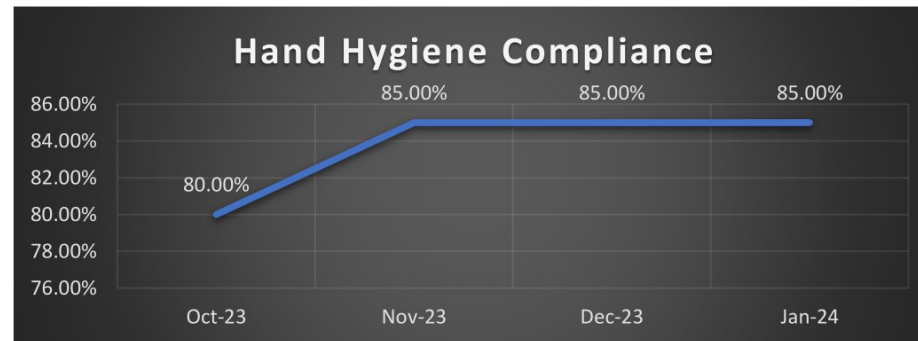




Infection Prevention and Control (IPC) KPIs

(September 2023 – January 2024)

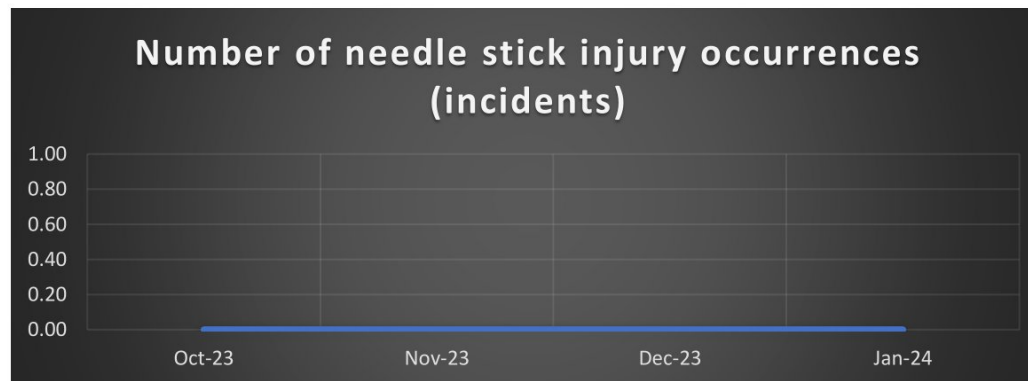
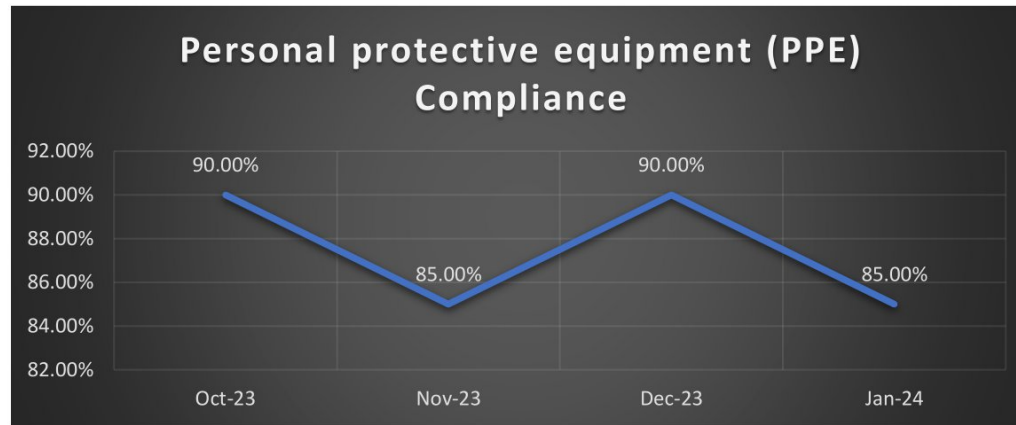
KPI name (Identification)	KPI Category	Target Performance	Sept 2023	Oct 2023	Nov 2023	Dec 2023	Jan 2024
Hand Hygiene Compliance	IPC	80% compliance or more	80%	80%	85%	85%	85%
Personal protective equipment (PPE) Compliance	IPC	80% compliance or more	85%	90%	85%	90%	85%
Number of needle stick injury occurrences (incidents)	IPC	0 (ZERO)	0	0	0	0	0





Infection Prevention and Control (IPC) KPIs

(September 2023 – January 2024)





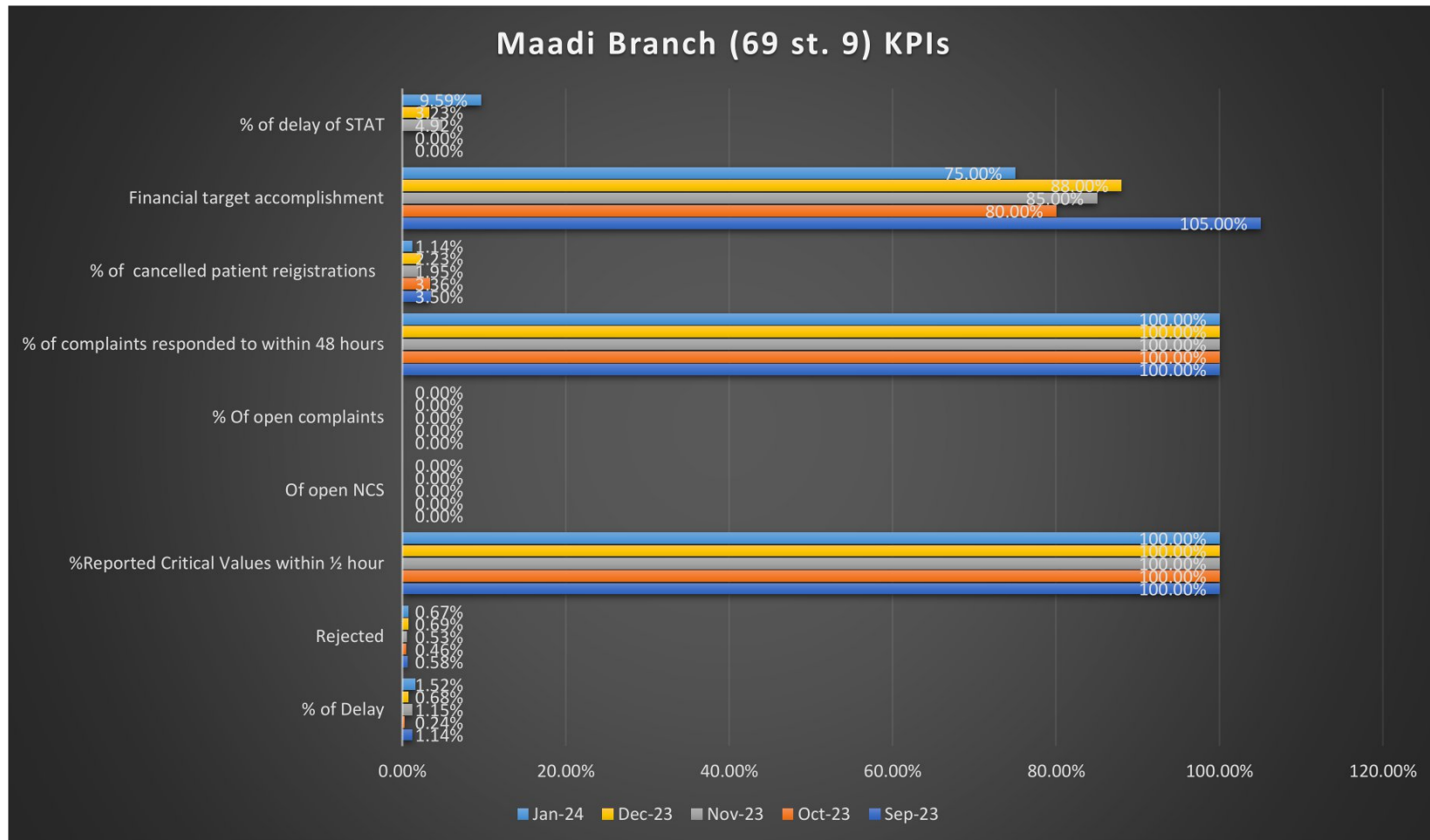
Maadi Branch (69 street 9) KPIs

(September 2023 – January 2024)

Month/Parameter	Target	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
% Delays	< 5 %	1.14%	0.24%	1.15%	0.68%	1.52%
% Rejections	< 5 %	0.58%	0.46%	0.53%	0.69%	0.67%
% Reported Critical Values within ½ hour of result review	100 %	100%	100%	100%	100%	100%
% Of open NCs	0%	No NCs	No NCs	0%	0%	0%
% Of open complaints	0%	No Complaints	0%	0%	No Complaints	No Complaints
% of complaints responded to within 48 hours	100 %	100%	100%	100%	100%	100%
% of cancelled patient registrations	< 5 %	3.50%	3.36%	1.95%	2.23%	1.14%
% Financial target accomplishment	> 90%	105%	80%	85%	88%	75%
% Delay of STAT	0 %	Zero %	Zero %	4.92%	3.23%	9.59%
				3 out of a total of 61	1 out of a total of 31	7 out of a total of 73



Maadi Branch (69 street 9) KPIs (September 2023 – January 2024)

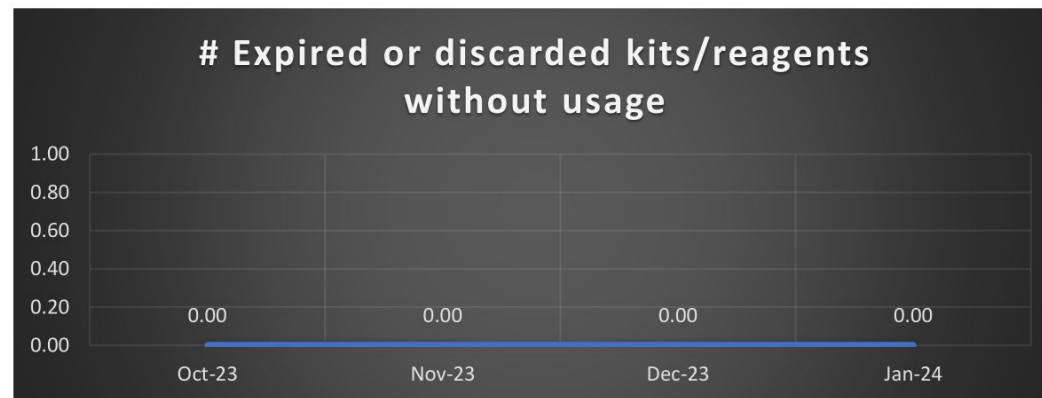




Material management (Kit/reagent Utilization Management) KPI

(September 2023 – January 2024)

KPI name (Identification)	KPI Category	Target Performance	Sept 2023	Oct 2023	Nov 2023	Dec 2023	Jan 2024
Number of kits/reagents that were expired and/or discarded without usage	Kit/Reagent Utilization management	ZERO	ZERO	ZERO	ZERO	ZERO	ZERO





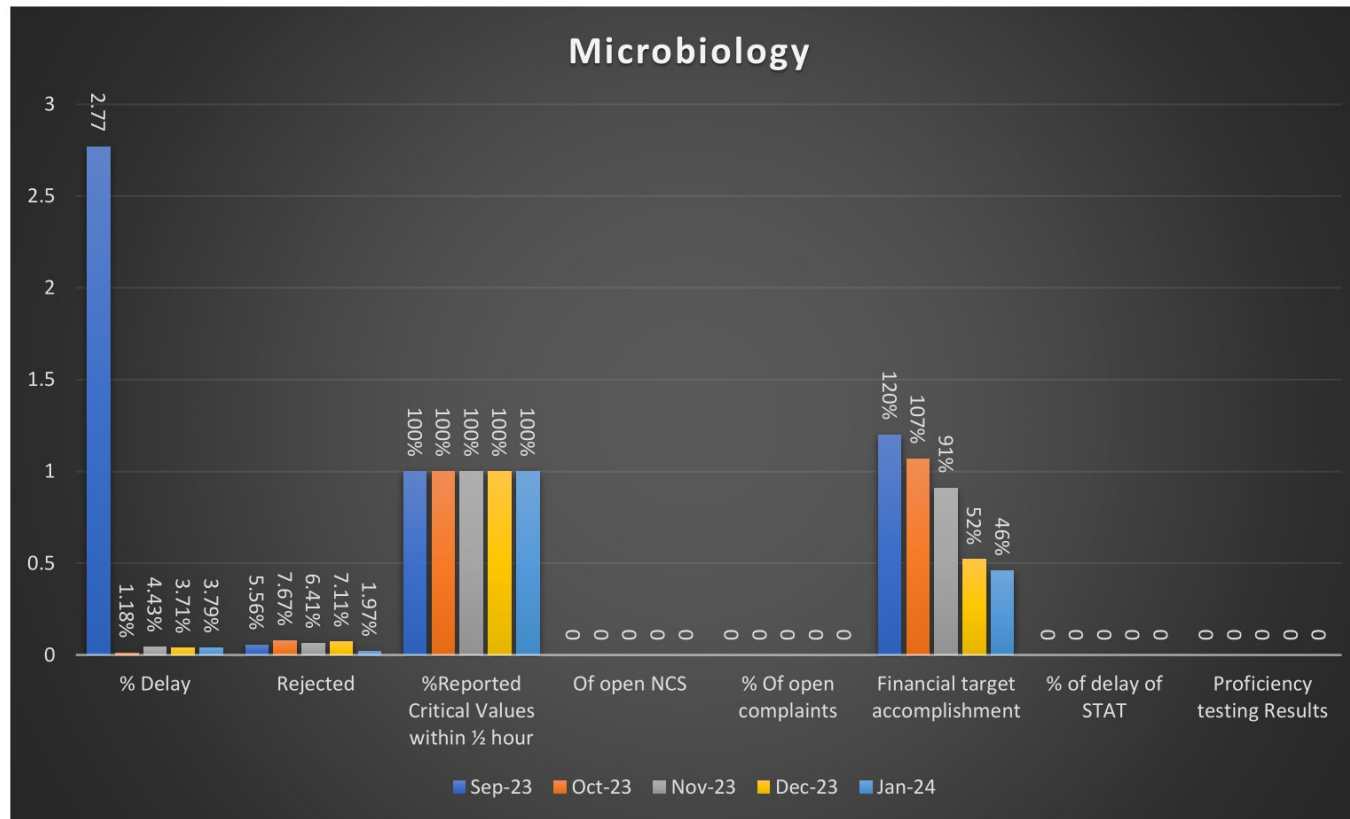
Microbiology Unit KPIs

(September 2023 – January 2024)

Month/Parameter	Target	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
% Delays	< 5 %	2.77%	1.18%	4.43%	3.71%	3.79%
% Rejections	< 10 %	5.56%	7.67%	6.41%	7.11%	1.97%
% Reported Critical Values within ½ hour of result review	100%	100%	100%	100%	100%	100%
% Of open NCs	0%	No NCs	No NCs	No NCs	No NCs	No NCs
% Of open complaints	0%	No Complaints	No Complaints	No Complaints	No Complaints	No Complaints
% Financial target accomplishment	> 90 %	120%	107%	91%	52%	46%
% Delay of STAT	0 %	Zero %	% Zero	Zero%	Zero%	No STAT entries
Proficiency testing (PT) Results	> 70 % satisfactory throughout the cycle for each parameter	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle



Microbiology Unit KPIs (September 2023 – January 2024)



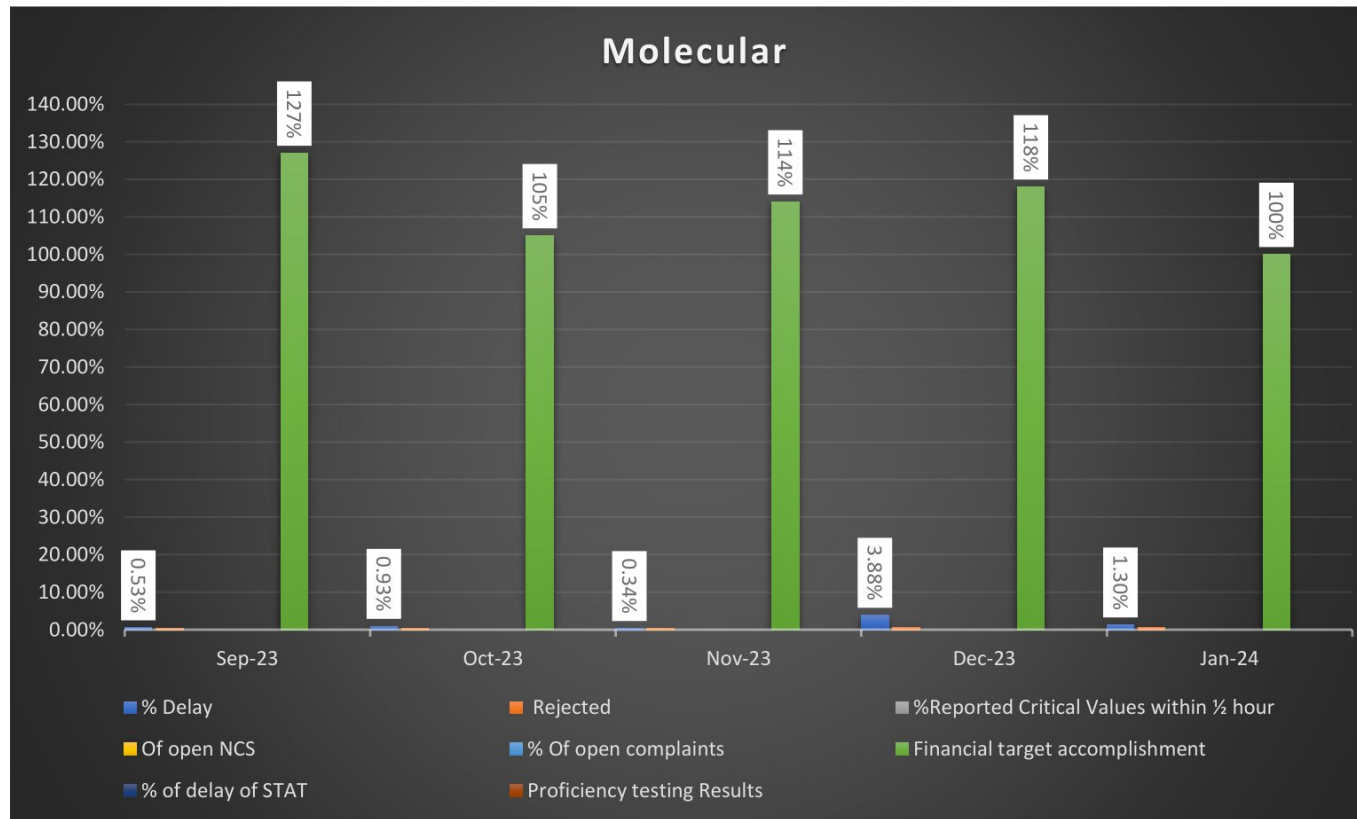


Molecular Biology Unit KPIs
(September 2023 – January 2024)

Month/Parameter	Target	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
% Delays	< 5 %	0.53%	0.93%	0.34%	3.88%	1.30%
% Rejections	< 5%	0.30%	0.32%	0.34%	0.62%	0.54%
% Reported Critical Values within ½ hour of result review	100%	NA	NA	NA	NA	NA
% Of open NCs	0%	No NCs	No NCs	No NCs	No NCs	No NCs
% Of open complaints	0%	No Complaints	No Complaints	No Complaints	No Complaints	No Complaints
% Financial target accomplishment	> 90%	127%	105%	114%	118%	100%
% Delay of STAT	0 %	Zero %	Zero%	No STAT entries	No STAT entries	No STAT entries
Proficiency testing (PT) Results	> 70 % satisfactory throughout the cycle for each parameter	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle	Shall be evaluated cumulatively at the end of the cycle



Molecular Biology Unit KPIs (September 2023 – January 2024)



	Performance Improvement plan	F02.P01.4.12.Q
		Issue No/Date:1/Jan 2023

Year: 2024

Action No.	Action description	Responsibility (Person/dep.)	Proposed Date	Follow up
1.	<ul style="list-style-type: none"> Create a system for employees' career progression and promotion for 	HR department staff: Dr. Yasmin El Ansary Mr. Talaat Harb	By the 1 st quarter of 2024	In progress
2.	<ul style="list-style-type: none"> Shifting to electronic HR related forms (soft copies instead of hardcopies): Create a drive for HR department. Create electronic signatures for all employee 	HR department staff: Dr. Yasmin El Ansary Mr. Talaat Harb	By the 1 st quarter of 2024	In progress
3.	<ul style="list-style-type: none"> Connection of Material management module with LDM to have Realtime and automated kit utilization management 	Dr. Menna Salama Dr. Marwa Toba	By the 4 th Quarter 2024	In progress
4.	<ul style="list-style-type: none"> Applying for Iso 15189 accreditation for the scope of: Chemistry: ALT, AST, Urea, Creatinine, Glucose Hematology: CBC on Mindray Molecular biology: Low resolution HLA typing (A, B, DRB1) 	Dr. Menna Salama	By the third quarter of 2024	In progress
5.	Improve non-competitive TAT: <ul style="list-style-type: none"> Brucella ISO electric focusing 	Dr. Marwa Toba with Dr. Safiya & prof Dr. Mervat	By Jan 2024	Done

	Performance Improvement plan	F02.P01.4.12.Q
		Issue No/Date:1/Jan 2023

Action No.	Action description	Responsibility (Person/dep.)	Proposed Date	Follow up
6.	Increase transporters number	Dr. Menna Salama	Feb 2024	In progress

Quality Manager's signature:

Lab director's signature:

Date:

Date:

The Quality Policy of Ansary Laboratories

INTENT:

To define the Quality Management System and ensure that it is communicated to all staff.

All staff are required to read and acknowledge understanding of the policy.

POLICY:

- ❖ Ansary Laboratories provide a comprehensive diagnostic service with premium quality that takes into consideration the needs and demands of its customers to achieve their satisfaction.
- ❖ To ensure that the needs and requirements of users are met, Ansary Laboratories will:
 - Set and implement a **quality management system (QMS)** to integrate & document the organization's procedures, processes and resources.
 - Set **quality goals and objectives** with their action plans in order to implement this quality policy and achieve continual quality improvement.
 - Ensure that all **personnel are familiar with the quality manual and all procedures relevant to their work.**
 - Uphold professional **values** and be **committed to good professional practice and conduct.**
 - Create and nurture a **quality ethos** based on **continual improvement.**
 - Ensure that the suitability and effectiveness of this policy is reviewed as part of the annual management review.
 - Carry out **internal audits and management reviews** on a scheduled basis and take the appropriate corrective and preventive actions to achieve the planned results.
- ❖ The **scope** of the lab services includes Immunology, Hematology, Clinical Chemistry, Molecular biology, Cytogenetics, Microbiology, Parasitology, Clinical microscopy and Pathology.
- ❖ Ansary Laboratories recognize their responsibilities with full **leadership commitment** towards establishing a high-quality performance.
This is achieved through the establishment, implementation, and continuous improvement of its QMS which complies with:
 - a) ISO 15189:2022 international standard for medical laboratory accreditation.
 - b) GAHAR clinical laboratory standards
 - c) Quality goals and objectives of Ansary Laboratories
- ❖ Ansary Laboratories will **comply with ISO 15189: 2022 and GAHAR clinical laboratory standards** and is committed to:
 - Staff recruitment, training, development, and retention at all levels to provide a full and effective service to its users.

- Ensuring the availability of high caliber personnel (doctors, chemists, receptionists, workers, and porters) with adequate experience in the different fields of medical laboratory practice.
- Ensuring the high quality of work using the most recent equipment, material and kits that are approved by international organizations such as FDA or CE.
- The collection and analysis of customer feedback, in addition to conducting internal audits and participating in external quality assessments, for continual quality improvement.
- Ensuring that examinations and process are designed and implemented with the focus on customer requirements, and identification of the processes' interactions to ensure efficient implementation of operation and control.
- The collection, transport, and handling of all specimens in such a way as to ensure the correct performance of laboratory examinations.
- Undertaking consistent analytical work so that systematic and random errors do not exceed specified limits; and these limits are within those considered as best laboratory practice.
- Keeping the confidentiality of the patient data and their test results.
- Providing a secure and controlled archiving system for the storage of records and clinical material.

Signed:

Laboratory Director, Prof. Dr. Mervat Ansary



خطة المبادرات المجتمعية لمعامل الأنصاري

المبادرات المجتمعية التي تمت في عام 2023:

- مبادرة السيد الرئيس للأنيما والتقرم والسمنة في محافظات القاهرة والجيزة والإسكندرية
- من تاريخ 2023/1/1 الى 2023/12/31
- عمل يوم طبي بمدرسة الهلالية بالإسكندرية يوم 2023-1-1
- عمل يوم طبي بنقابة محامين الجيزة بتاريخ 2023-1-1
- عمل يوم طبي بسفارة السودان بتاريخ 2023-6-10
- عمل يوم طبي بنادي المعادي ولمدة يومين تاريخ 2023-7-14 و 2023-7-15
- عمل يوم طبي بنادي أصحاب الجياد بالإسكندرية يوم 2023-9-14
- عمل يوم طبي بنادي الجزيرة ولمدة يومين بتاريخ 2023-9-9 و 2023-9-10
- عمل يوم طبي بنادي المعادي ولمدة يومين بتاريخ 2023-11-9 و 2023-11-10

خطة المبادرات المجتمعية لعام 2024:

- الاشتراك في مبادرة السيد الرئيس للأنيما و التقرم من شهر يناير الى شهر مارس ومن شهر أكتوبر الى شهر ديسمبر
- الاشتراك في مبادرة السيد الرئيس لفيروس سي لطلبة المدراس الربع الرابع من نهاية العام القادم
- التعاون مع شركة أسترازينيكا للأدوية في عمل دواء جديد بالسوق المصري بداية من شهر يناير
- عمل مبادرات مع الجمعيات الخيرية في:
 - محافظات القاهرة الربع الأول من العام
 - محافظة الاسماعلية الربع الأول من العام
 - محافظة الجيزة والاسماعلية الربع الثاني من العام
- التواجد الميداني في النوادي:
 - محافظة الاسماعلية الربع الأول من العام
 - محافظة القاهرة الربع الثاني من العام
 - محافظة الجيزة الربع الثالث من العام
 - محافظة الإسكندرية الربع الرابع من العام