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6330 South 3000 East, Suite 200 Salt Lake City, UT 84121

DOCUMENT NUMBER:	
DOCUMENT TITLE:	
DOCUMENT NOTES:	
Document Information	
Revision:	Vault:
Doc Type:	Status:
Date Information	
Effective Date:	Next Review Date:
Release Date:	Expiration Date:
Control Information	
Author:	Previous Number:
Owner:	Change Number:

All dates and times are in

PROTOCOL NO.:

Master Control		STANDARD OPERATING PROCEDURE	
SOP NUMBER:		VERSION:	
SOP TITLE:			

PURPOSE OF THIS SOP AND WHAT IT IS APPLIED TO

<Describe the purpose of the SOP, what it should be applied to and when/under which circumstances. Include details of any specific limitations and/or exclusions>

WHO THIS SOP IS APPLICABLE TO

FUNCTION(S)		SITE(S)		REGULATIONS			
□ ED			☐ Global			☐ GCP	☐ GLP
□ смс	□ GBT	☐ GxP Supt Dept.	☐ ALN	□ СНА	☐ DEN	☐ GMP	☐ None
□ LO	☐ NCFS	☐ Non-GxP Supt	☐ GRN	☐ HAR			
☐ PATH	□ QA	□SA	☐ MSN	☐ MUE	☐ PCV		
☐ SA GOS			☐ SHA				
			•			•	

ADDLICADILITY	essary, list sub-functions, groups or specific roles that the SOP to and any specific exclusions, otherwise "N/A" >
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OTHER DOCUMENTS NEEDED TO EXECUTE THIS SOP

DOC REFERENCE	TYPE	TITLE
<add doc="" reference=""></add>	<add doc="" type=""></add>	<add doc="" title=""></add>

STEP-BY-STEP INSTRUCTIONS

<Add Heading 2; remove if no sub sections>

ROLE		ACTION
<add role=""></add>	1	<add instructional="" text=""></add>
		• <add decision="" option="" text=""></add>
	2	<add instructional="" text=""></add>
	3	<add instructional="" text=""></add>
	4	<add instructional="" text=""></add>

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SOP NUMBER:		VERSION:	

ROLE		ACTION
	5	<add instructional="" text=""></add>

<Add Heading 2; remove if no sub sections>

ROLE		ACTION	
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		 <add decision="" option="" text=""></add> 	
	2	<add instructional="" text=""></add>	
	3	<add instructional="" text=""></add>	
	4	<add instructional="" text=""></add>	
	5	<add instructional="" text=""></add>	

SUPPLEMENTARY INFORMATION THAT IS NEEDED

<Add Heading 2; remove if no sub sections>

<Add Text>

<Add Heading 3; remove if no sub-sub headings>

<Add Text>

DEFINITIONS

TERM	DEFINITION
<add term=""></add>	<add definition="" non-obvious=""></add>
<add term=""></add>	<add definition="" non-obvious=""></add>

CHANGES FROM THE PREVIOUS VERSION OF THIS SOP

SOP SECTION	CHANGE
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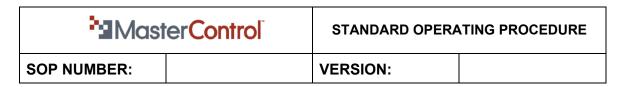
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PROTOCOL NO.:



SOP SECTION	CHANGE
<sop section=""></sop>	<summarise change=""></summarise>

APPENDICES

<List Appendices>

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PROTOCOL NO.:

APPENDIX 1: <PROCESS OVERVIEW (RECOMMENDED)>

<Add Flowchart>

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PROTOCOL NO.:

APPENDIX 2: <ADD TITLE>

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Signature Manifest

Document Number: MD-SOP-0031 Revision: 02

Title: Blood Draw

All dates and times are in Mountain Time Zone.

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SOP Approval

Collaboration

Name/Signature	Title	Date	Meaning/Reason
Paul Sanderson (PSANDERSON	1)		
Dallas Volk (DVOLK)			
Sarah Christensen (SCHRISTENSEN)			
Mark Sloan (MSLOAN)			
Rob Carpenter (RCARPENTER)			
Matt Smith (MATT)		23 Feb 2016, 12:14:58 PM	Complete

Approval

Name/Signature	Title	Date	Meaning/Reason	
Matt Smith (MATT)		23 Feb 2016, 12:16:44 PM	Approved	

