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T-Sep 2022-09

MD-SOP-0031

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

	DOCUMENT NUMBER:						
	DOCUMENT TITLE:	DOCUMENT TITLE:					
	DOCUMENT NOTES:						
Do	ocument Information						
	Revision:	Vault:					
	Doc Type:	Status:					
Da	te Information						
	Effective Date:	Next Review Date:					
	Release Date:	Expiration Date:					
Co	entrol Information						
	Author:	Previous Number:					
	Owner:	Change Number:					
	All dates and times are in						

All dates and times are in

MD-SOP-0031

* 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)		REGUL	ATIONS
□ ED			☐ Global			☐ GCP	☐ GLP
□ смс	☐ GBT	☐ GxP Supt Dept.	☐ ALN	☐ CHA	☐ DEN	☐ GMP	☐ None
□ LO	☐ NCFS	☐ Non-GxP Supt	☐ GRN	☐ HAR	\square IND		
☐ PATH	□ QA	□SA	☐ MSN	☐ MUE	☐ PCV		
☐ SA GOS			☐ SHA				

	<if groups="" list="" necessary,="" or="" p="" roles="" sop<="" specific="" sub-functions,="" that="" the=""></if>
APPLICABILITY	applies to and any specific exclusions, otherwise "N/A" >

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
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		• <add decision="" option="" text=""></add>
2		<add instructional="" text=""></add>
3		<add instructional="" text=""></add>
	4	<add instructional="" text=""></add>

Document Template Reference: GL-GEN-001-B V01	Page 1 of 5
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Training procedure

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

ROLE		ACTION
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<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		
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CHANGES FROM THE PREVIOUS VERSION OF THIS SOP

SOP SECTION	CHANGE	
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Document Template Reference: GL-GEN-001-B V01	Page 2 of 5
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Training procedure

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MasterControl MasterControl		STANDARD OPERATING PROCEDURE	
SOP NUMBER:		VERSION:	

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

APPENDICES

<List Appendices>

Document Template Reference: GL-GEN-001-B V01 Page 3 of 5

T-Sep 2022-09

BATCH ID:

Training procedure

SITE: Austin

Master Control		STANDARD OPERATING PROCEDURE	
SOP NUMBER:		VERSION:	

APPENDIX 1: <PROCESS OVERVIEW (RECOMMENDED)>

<Add Flowchart>

Document Template Reference: GL-GEN-001-B V01 Page 4 of 5

Training procedure

SITE: Au

MasterControl MasterControl		STANDARD OPERATING PROCEDURE	
SOP NUMBER:		VERSION:	

APPENDIX 2: <ADD TITLE>

Document Template Reference: GL-GEN-001-B V01	Page 5 of 5
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23 Feb 2016, 12:14:58 PM

Complete

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Revision: 02

MD-SOP-0031

Signature Manifest

Document Number: MD-SOP-0031

Title: Blood Draw

All dates and times are in Mountain Time Zone.

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)			

Approval

Matt Smith (MATT)

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