R- 02

MD-SOP-0030

SITE: Complete

**BATCH ID:** 

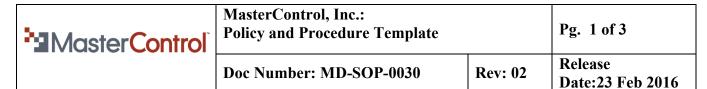
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Document Number:	
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Notes:	
Document Information:	
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Type:	Status:
Date Information:	
Effective Date:	Next Review Date:
Release Date:	Expiration Date:
The leader Butter	
Control Information:	
Author:	Previous Number:
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### POLICY AND PROCEDURE TEMPLATE

### **APPROVALS**

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### **REVISION HISTORY**

AUTHOR	REVISED SECTION/PARAGRAPH	REV	RELEASED
D Ade	Initial Release	01	See MasterControl

Draft and Archived/Obsolete revisions are not to be used.
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### 1. PURPOSE

Briefly describe the reasoning or purpose of the document.

### 2. SCOPE

Briefly describe the coverage or scope of what is covered and/or exempted from this process. Please refrain from adding policy or procedure detail in this section.

### 3. **DEFINITIONS**

- Word Definition
- Word Definition

### 4. RESPONSIBILITIES

• Responsible Party – Describe the responsible party responsibilities

## 5. PROCEDURE/POLICY/WORK INSTRUCTION (REMOVE TITLE THAT DOES NOT APPLY)

### 5.1 Process Flow

If applicable insert simple process flow chart or picture here. Keep the flowchart descriptions simple putting the detail in the next subsection. If there is not a flow chart or picture write "Not Applicable".

- 5.2 Procedure/Policy/Work Instruction (remove title that does not apply)
  - 5.2.1 Overview
  - 5.2.2 Details

### 6. APPLICABLE REFERENCES

List of applicable reference documents.

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### **Signature Manifest**

**Document Number: MD-SOP-0030** Revision: 02

Title: Blood Donation Record

All dates and times are in Mountain Time Zone.

### **SOP Approval**

### Collaboration

Name/Signature	Title	Date	Meaning/Reason		
Paul Sanderson (PSANDERSON)					
Dallas Volk (DVOLK)					
Sarah Christensen (SCHRISTENSEN)					
Mark Sloan (MSLOAN)					
Rob Carpenter (RCARPENTER)					
Matt Smith (MATT)		23 Oct 2017, 01:14:58 PM	Complete		

### **Approval**

Name/Signature	Title	Date	Meaning/Reason
Matt Smith (MATT)		23 Oct 2017, 01:16:44 PM	Approved

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