MD-SOP-0031

6350 South 3000 East Salt Lake City, Utah 84121

Document Number:	
Title:	
Notes:	
Document Information:	
Revision:	Vault:
Type:	Status:
Date Information:	
Effective Date:	Next Review Date:
Release Date:	Expiration Date:
Control Information:	Dravious Number
Author:	Previous Number:
Owner:	Change Number:

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			
☐ PATH	□ QA	□SA	☐ MSN		☐ 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
<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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MasterControl MasterControl		STANDARD OPERA	ATING PROCEDURE
SOP NUMBER:		VERSION:	

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

## <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>
	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>	
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#### CHANGES FROM THE PREVIOUS VERSION OF THIS SOP

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SOP SECTION	CHANGE
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## **APPENDICES**

<List Appendices>

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# APPENDIX 1: <PROCESS OVERVIEW (RECOMMENDED)>

<Add Flowchart>

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BHUSHAN DEORE 2022-12-16T05:36:45.190Z Printed By: Printed Date & Time:

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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.

# **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

Printed By: BHUSHAN DEORE Printed Date & Time: 2022-12-16T05:36:45.190Z

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ELS.