



Initial Accreditation Process Description

Who	Action	Timeframe
1. Facility	Obtain initial accreditation information from AABB Web, which includes the following: <ul style="list-style-type: none">• Accreditation Brochure• Initial Accreditation Process Description• Accreditation Process Description• Locations Table• ISBT 128 Labeling Questionnaire• Infectious Disease Testing Questionnaire• Cord Blood Questionnaire (Cord Accreditation only)• AABB Institutional Membership Application• AABB Institutional Membership pricing• Suggested References List• AABB Marketplace	
2. AABB National Office Accreditation Department	Direct interested facilities to AABB Web site to obtain initial accreditation information.	Within one week of receipt
3. Facility	Submit <ul style="list-style-type: none">• Locations Table• ISBT 128 Labeling Questionnaire• Infectious Disease Testing Questionnaire• Cord Blood Questionnaire (Cord Accreditation only)• AABB Institutional Membership Application	Within 2 weeks of receipt
4. AABB National Office Accreditation Department	Determines <ul style="list-style-type: none">• eligibility to pursue AABB Accreditation• any complex dues needs	Within one week of receipt
5. AABB National Office Accreditation Department & Membership Department	Set up facility information in database.	Within one week of receipt
6. AABB National Office Membership Department	Sends dues invoice to facility	Within one week of notification.



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7. Facility	Submit dues payment, and publication orders (if any).	Within 3 months of receipt of invoice
8. AABB National Office Membership and Sales Department	Send to facility: <ul style="list-style-type: none"> • Complimentary copy of applicable <i>Standards</i> • Publication orders (if any) • Notify Accreditation Department of new member 	Within ten (10) business days
9. AABB National Office Accreditation Department	Email facility the self-assessment information: <ul style="list-style-type: none"> • Location of Accreditation Information Manual (AIM) on Web site • Name, email and phone number of the technical specialist in the Accreditation Department who will be the facility's contact person for the Self-Assessment phase • Location on the Web site of the 'Guidance for Performing the Self-Assessment' 	Within 2 weeks of receipt
10. Facility	Submit completed Self-Assessment documents to AABB National Office Accreditation Department. <ul style="list-style-type: none"> • Completed Assessment Tool for each activity • Master List of Policies, Processes, Procedures, Labels and Forms (i.e. list of each document name, version number, effective date, locations if >1) • Quality Plan Overview • Medical Director's information: <ul style="list-style-type: none"> ○ CV ○ demonstration of licensure as a physician, ○ qualification by training and/or experience in the area(s) for which the facility is seeking accreditation, ○ verification of continuing education in the area(s) for which the facility is seeking accreditation • SOP for how the facility manages the transition to new editions of Standards • Request for Variance to Standards Form (if applicable) <p>IRL additional requirement:</p> <ul style="list-style-type: none"> • Submit 3 lab workups reflecting simple, intermediate and complex problems. <p>Relationship testing labs additional requirement:</p> <ul style="list-style-type: none"> • Submit 3 cases for review including worksheets, calculations, raw data, ID forms, chain of custody forms, etc. with personal identifiers 	Within 3 months



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	including the names, Social Security number, or driver's license number of parties involved obscured. <ul style="list-style-type: none"> • A complete listing of current platforms. • A summary of validation for testing, databases, software. • A lab layout demonstrating how DNA contamination is detected. 	
11. AABB National Office Accreditation Department	Receive completed Self Assessment documents. <ul style="list-style-type: none"> • Send notification of receipt to facility • Send notification if information is incomplete to facility 	Within 1 week of receipt
12. Applicable Standard Program Unit, and SEIV for international facilities	Review Request(s) for Variance to Standards, (if applicable)	Within 2 months of request
13. AABB National Office Accreditation Department	Review Self-Assessment documents and communicate status to facility. <ul style="list-style-type: none"> • If READY, assign tentative quarter for on-site assessment (usually 6 months in the future, for IRL & RT accreditation see below). <p>All facilities</p> <ol style="list-style-type: none"> 1. Documents reviewed and released from QA 2. Facility has been in business >6 months <p>IRL additional requirement:</p> <ol style="list-style-type: none"> 1. IRL enrolls in AABB Proficiency Testing program and pass at least 5 of 6 consecutive events prior to on-site assessment 2. National Office notifies ARDP <p>Relationship Testing labs additional requirement:</p> <ol style="list-style-type: none"> 1. RT lab must participate in 2 years of Proficiency Testing or exchange 12 blinded cases from an accredited RT lab • If NOT READY, communicate additional needs to facility. 	Within 1 month of receipt of self-assessment materials
14. Facility	Respond as to acceptability of assigned quarter.	Within 1 week.
15. AABB National Office Accreditation Department	Receive facility's response to assigned quarter. <ul style="list-style-type: none"> • Send notification of receipt to facility. 	Within 1 week of receipt
16. AABB National Office Accreditation Department	Begin on-site assessment process for quarter assigned.	See 'Accreditation Process Description'