Laborato	ry Details				
Details	Details Data Feeded by Lab				
Name of the Laboratory					
Type of Laboratory					
Country					
State/Province					
District					
Sub District					
Village/Town					
Pincode					
Mobile No.					
Landline					
Email Id					
Are You NACD Laboratory					
Are you from SEZ region (Special Economic					
Zone)					
Туре	Download file				
GST No					
PAN No					
TAN No					
Contact pers	on for NABL				
Name					
Designation					
Mobile No.					
E-mail					
Technic	al Head				
Name					
Designation					
Mobile No.					
E-mail					
Is This Authorised Signature					
Details of staff including Lab	Technicians and support staff				
Sl Name Designation Academic and Professional Qualifications	Experience related to present work (in years) Is this Authorised Signature				
No Data Available!					

		Scop	e Applied		
Sl No.	Discipline	Type of Samples	Specific tests	Method	Is PT/ILC Done
No Data A	Available!				

List of major test equipment available for use
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Sl No.	Discipline	Name of equipment	Model	Serial No. of Equipment	Туре	Year of Make	Image With	Image of	No Data Available!
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			Participation	on in PT / /EQAS/ a	any other Int	er Laborato	ry Compariso	n		
S	Hiscinling	Type of Proficiency testing	Details of Test(s)/ examination	Product/Material	Date of Testing/ examination	Organizing body	Performance in terms of z score or any other criteria	Corrective action taken (if required)	Upload PT/ILC Reports	No Data Available!

<u> </u>	Criteria -
	Checklist Section
Inf	frastructure
Sig	ynage
(1)	Name of the person-in-charge with qualification and registration number
(2)	Broad services provided i.e. Biochemistry, Haematology, Medical Microbiology & Immunology etc.
(3)	Timings of different consultant
(4)	
(5)	Fee Structure
Hy	giene and Safety (wherever applicable)
(1)	General Cleanliness (Dust free and Good Housekeeping)
(2)	Universal standard precautions for safety
(3)	Safety hazard and caution signs - Biomedical waste segregated in colored bins and bags as per Biomedical Waste Management Rules, 2016 including radioactive materials, toxic chemicals, microbial agents, infected biological material
(4)	Appropriate Fire exit signage- Minimum one fire extinguisher
Sp	ace requirement
(1)	Registration, waiting room, public utilities, safe drinking water etc
(2)	Sample collection area
(3)	Laboratory with adequate diffuse and spot lighting
(4)	Reporting and billing area
(5)	Washing area
(6)	Preservation of the specimen and slides
(7)	Electrical facilities

(0)	
(9)	Counselling room for HIV
Fu	rniture and Fixtures
(1)	Communication system: (Desirable) Telephone and Mobile no. for appointment
(2)	Wash Basins
LE	GAL OR STATUTORY REQUIREMENTS AS APPLICABLE
(1)	Registration under the provisions of Biomedical Waste Management Rules, 2016 with State or Union territories
(2)	Pollution Control Board with registration number and date of expiry, site, space, location and environmental requirements to be as per local bye- laws
RE	CORD MAINTENANCE AND REPORTING
(1)	Whether Reports of all patients date wise as per regulatory requirement or till next audit, whichever is later are available.
(2)	Whether Medico legal records, if applicable (as per relevant law) are maintained.
(3)	Whether Records of technicians working in laboratory indicating their details of qualification training and others are maintained.
(4)	Whether there is any availability of reference library including books or periodicals or e- journals.
(5)	Duration of preservation of record (as applicable from time to time)
ST	ANDARDS ON BASIC PROCESSES
(1)	Whether infection Control practices - as per Bio Medical Waste Management Rules, 2016 are followed.
(2)	Whether lab is using disposable needles etc.
(3)	Whether provision is there to collect Patient Information and Education (Yes/No)
(4)	Whether Process of calibration of equipment and reagents is available (Yes/No)
(5)	Whether Booklet of Standard operating procedures of all procedures available(kit inserts may be used as SOPs) - (Yes/No)
(6)	Whether the process of Grievance registration and disposal mechanism is defined (Yes/No)
(7)	Whether Quality Control in the form of Internal Quality Control (at least one level to be run on the day of testing samples) is processed (Yes/No)
(8)	Whether Inter-laboratory comparison in the form of external quality assurance scheme is available (Yes/No)