



SDI Review Form 1.6

Journal Name:	Current Journal of Applied Science and Technology
Manuscript Number:	Ms_CJAST_43874
Title of the Manuscript:	QUALITY MANAGEMENT OF THE PRE-ANALYTICAL PHASE: MONITORING AND CONTROL
Type of the Article	

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	When identification of error is on the subject and one needs to talk about its corrective and preventive actions. And how check list can help to reduce pre-analytical process error apart from training and continuous education in the form of external workshops, symposia, workshop and colloquium.	Review of the accreditation criteria, patient safety concerns and discussions in the literature indicate some clear areas for action for laboratories that wants to extend their quality attention outside the physical confines "outside the box" of the laboratory. The areas of highest priority in the pre-analytical phase are patient/sample identification. Laboratories can develop clear sample acceptance and rejection criteria which are linked to monitoring of the collection and transportation processes. Sample hemolysis and clotting are the commonest causes of unsuitable blood specimens and most laboratories have procedures to handle such specimen at sample receipt, but a more pro-active approach is extending this back to the point of collection [33,34]. The laboratories procedures regarding unlabeled or mislabeled specimens should be clear and sample relabeling by laboratory personnel, clinical staff or third parties is strongly discouraged [35,36]. Collection procedure, container, transport temperature/time/safety and within – laboratory pre-analytical temperature/time/safety criteria should be stipulated and monitored. Inspection are carried out by teams of practicing laboratory professionals using checklist which cover general laboratory functions as well as specific disciplines. The checklist questions are explicit in their intent and the required evidence or compliance (e.g., records, written procedures and policies). More than 6,000 laboratories worldwide are college of American Pathologists (CAP) accredited. The laboratory general checklist specifically refers to the monitoring of pre-analytical quality and the CAP laboratory patient safety goals which requires the quality management program to include monitoring important key indicators of quality including patient/sample identification, test order accuracy and specimen acceptability.
Minor REVISION comments	Possibly author can go through the manuscript once again to do the little cosmetic changes including the spell check. Emphasizing quality management system author can mention the hierarchy process pf documentation which will have policies, manuals, SOPs, and formats. Sample preparation in the table, make a difference between centrifugation and freezing otherwise it looks like same word is repeated.	
Optional/General comments	It is good to point out the effective way of monitoring especially in the pre-analytical processes but it is well known. The said quality monitoring points in the preanalytical process can be implemented effectively by giving proper training to the personnel one who involved in the process. Currently even the auditors are insisting to use the check list of lead assessor and technical assessors. Since it covers entire system of the laboratory and give thorough verification of each and every phase of activity is performed.	