ROYAL CENTRE FOR DISEASE CONTROL

SOP No. RCDC/QMS/QSE/SOP/11.3

STANDARD OPERATING PROCEDURE

FOR

STANDARD OPERATING PROCEDURE FOR SHORT TERM DOCUMENT ARCHIVING

Version 1.00

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1 ACRONYMS AND DEFINITION

RCDC: Royal Centre for Disease Control

SOP: Standard Operating Procedures

QA: Quality Assurance

Definitions

Document: Information and its supporting medium; digital or physical.

Record: Document stating results achieved or providing evidence of activities performed. Information captured on worksheets, forms and charts.

2 PURPOSE

This procedure explains how to archive data/documents for short term.

3 APPLICATION

It applies to all documents and records, generated by the laboratory staff, the Quality Assurance team, the Biosafety Committee and the Management Branch.

4 RESPONSIBILITIES

It is the Responsibility of Quality Manager to oversee the proper archiving of documents and records.He/She ensures appropriate system is implemented throughout the centreas per the data/document policy. QA focal persons are responsible to implement and oversee in their respective Unit.

5 PRINCIPLE

It is the process of moving data/document that is no longer actively used or in the event of some work about to take place where we currently hold our document and need to store at a separate storage device/place for short-term retention.It consists of

data/documents that remain important to the RCDC or must be retained for future reference or regulatory compliance reasons.

6 ASSOCIATED DOCUMENTS

- SOP Long Term Archivingref RCDC/QMS/QSE/SOP-11.4

7 PRECAUTIONS

Ensure the archived documents are securely stored under lock and key.

8 PROCEDURE

- The Quality Manager will be over all in charge of archiving. He/She will verify legal or normative requirements for which documents and records are required to be kept and retention time. However, QA Focal persons will be in charge of their respective unit and implement practice based on the current recommedation
- Generally all logbooks and records should be placed into specific folders or binders and archived when it is no longer in use for10 years.
- The request forms must be stored for a minimum of 10 years.
- The laboratory reports must be stored for a minimum of 10 years.

All archived documents should:

- be labeled with the date of archiving;
- remain legible, readily identifiable and retrievable

A file system should be started to store and archive data in different appropriate folders. Each folder will contain all documents and records of its category.

Data will be referenced in the corresponding archiving logbook, and labeled with appropriate structural and data collection information.

Invalid or obsolete documents and data may be archived separately for historical reference or background knowledge preservation.

When an archived document is to be retrieved, the date and person retrieving it will be noted in the archiving logbook. The replacement of the document will also be logged.

- After **5** years of short term archiving, documents with no legal value can be discarded; the documents of legal value will be transported to 10 years for long term archiving (refer to RCDC/QMS/QSE/SOP-11.4)

Related documents

- SOP Document Distribution and Control Ref RCDC/QMS/QSE/SOP-11.5
- SOP Long Term Archiving Ref RCDC/QMS/QSE/SOP-11.4
- SOP Short Term Archiving Ref RCDC/QMS/QSE/SOP-11.3

9 REFERENCE

https://www.who.int/ihr/training/laboratory_quality/quality_manual/en/

1. ANNEXURE

Internal Audit Checklist (ref QSE/Form-6.1)

Annexure1: SOP Revision History

Version Number	Brief Description of changes	Effective date