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BSI Standards Publication

Medical laboratories — Requirements for quality and competence (ISO 15189:2012)

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This British Standard is the UK implementation of EN ISO 15189:2012. It supersedes BS EN ISO 15189:2007 which is withdrawn.

The UK participation in its preparation was entrusted to Technical Committee CH/212, IVDs.

A list of organizations represented on this committee can be obtained on request to its secretary.

This publication does not purport to include all the necessary provisions of a contract. Users are responsible for its correct application.

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English Version

Medical laboratories - Requirements for quality and competence (ISO 15189:2012)

Laboratoires de biologie médicale - Exigences concernant
la qualité et la compétence (ISO 15189:2012)

Medizinische Laboratorien - Anforderungen an die Qualität
und Kompetenz (ISO 15189:2012)

This European Standard was approved by CEN on 31 October 2012.

CEN members are bound to comply with the CEN/CENELEC Internal Regulations which stipulate the conditions for giving this European Standard the status of a national standard without any alteration. Up-to-date lists and bibliographical references concerning such national standards may be obtained on application to the CEN-CENELEC Management Centre or to any CEN member.

This European Standard exists in three official versions (English, French, German). A version in any other language made by translation under the responsibility of a CEN member into its own language and notified to the CEN-CENELEC Management Centre has the same status as the official versions.

CEN members are the national standards bodies of Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and United Kingdom.



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Foreword

This document (EN ISO 15189:2012) has been prepared by Technical Committee ISO/TC 212 "Clinical laboratory testing and in vitro diagnostic test systems" in collaboration with Technical Committee CEN/TC 140 "In vitro diagnostic medical devices" the secretariat of which is held by DIN.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by May 2013, and conflicting national standards shall be withdrawn at the latest by November 2015.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN [and/or CENELEC] shall not be held responsible for identifying any or all such patent rights.

This document supersedes EN ISO 15189:2007.

According to the CEN/CENELEC Internal Regulations, the national standards organisations of the following countries are bound to implement this European Standard: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

Endorsement notice

The text of ISO 15189:2012 has been approved by CEN as a EN ISO 15189:2012 without any modification.

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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

International Standards are drafted in accordance with the rules given in the ISO/IEC Directives, Part 2.

The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights.

ISO 15189 was prepared by Technical Committee ISO/TC 212, *Clinical laboratory testing and in vitro diagnostic test systems*.

This third edition cancels and replaces the second edition (ISO 15189:2007), which has been technically revised.

A correlation between the second and third editions of this International Standard is provided as [Annex B](#). The third edition continues the alignment established in ISO/IEC 17025:2005.

This corrected version of ISO 15189:2012 includes various editorial corrections.

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Introduction

This International Standard, based upon ISO/IEC 17025 and ISO 9001, specifies requirements for competence and quality that are particular to medical laboratories¹⁾. It is acknowledged that a country could have its own specific regulations or requirements applicable to some or all its professional personnel and their activities and responsibilities in this domain.

Medical laboratory services are essential to patient care and therefore have to be available to meet the needs of all patients and the clinical personnel responsible for the care of those patients. Such services include arrangements for examination requests, patient preparation, patient identification, collection of samples, transportation, storage, processing and examination of clinical samples, together with subsequent interpretation, reporting and advice, in addition to the considerations of safety and ethics in medical laboratory work.

Whenever allowed by national, regional or local regulations and requirements, it is desirable that medical laboratory services include the examination of patients in consultation cases, and that those services actively participate in the prevention of disease in addition to diagnosis and patient management. Each laboratory should also provide suitable educational and scientific opportunities for professional staff working with it.

While this International Standard is intended for use throughout the currently recognized disciplines of medical laboratory services, those working in other services and disciplines such as clinical physiology, medical imaging and medical physics could also find it useful and appropriate. In addition, bodies engaged in the recognition of the competence of medical laboratories will be able to use this International Standard as the basis for their activities. If a laboratory seeks accreditation, it should select an accrediting body which operates in accordance with ISO/IEC 17011 and which takes into account the particular requirements of medical laboratories.

This International Standard is not intended to be used for the purposes of certification, however a medical laboratory's fulfilment of the requirements of this International Standard means the laboratory meets both the technical competence requirements and the management system requirements that are necessary for it to consistently deliver technically valid results. The management system requirements in [Clause 4](#) are written in a language relevant to a medical laboratory's operations and meet the principles of ISO 9001:2008, *Quality management systems — Requirements*, and are aligned with its pertinent requirements (Joint IAF-ILAC-ISO Communiqué issued in 2009).

The correlation between the clauses and subclauses of this third edition of ISO 15189 and those of ISO 9001:2008 and of ISO/IEC 17025:2005 is detailed in [Annex A](#) of this International Standard.

Environmental issues associated with medical laboratory activity are generally addressed throughout this International Standard, with specific references in [5.2.2](#), [5.2.6](#), [5.3](#), [5.4](#), [5.5.1.4](#) and [5.7](#).

1) In other languages, these laboratories can be designated by the equivalent of the English term "clinical laboratories."

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Medical laboratories — Requirements for quality and competence

1 Scope

This International Standard specifies requirements for quality and competence in medical laboratories.

This International Standard can be used by medical laboratories in developing their quality management systems and assessing their own competence. It can also be used for confirming or recognizing the competence of medical laboratories by laboratory customers, regulating authorities and accreditation bodies.

NOTE International, national or regional regulations or requirements may also apply to specific topics covered in this International Standard.

2 Normative references

The following referenced documents are indispensable for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO/IEC 17000, *Conformity assessment — Vocabulary and general principles*

ISO/IEC 17025:2005, *General requirements for the competence of testing and calibration laboratories*

ISO/IEC Guide 2, *Standardization and related activities — General vocabulary*

ISO/IEC Guide 99, *International vocabulary of metrology — Basic and general concepts and associated terms (VIM)*

3 Terms and definitions

For the purposes of this document, the terms and definitions given in ISO/IEC 17000, ISO/IEC Guide 2 and ISO/IEC Guide 99 and the following apply.

3.1

accreditation

procedure by which an authoritative body gives formal recognition that an organization is competent to carry out specific tasks

3.2

alert interval

critical interval

interval of examination results for an alert (critical) test that indicates an immediate risk to the patient of injury or death

Note 1 to entry: The interval may be open ended, where only a threshold is defined.

Note 2 to entry: The laboratory determines the appropriate list of alert tests for its patients and users.

3.3

automated selection and reporting of results

process by which patient examination results are sent to the laboratory information system and compared with laboratory-defined acceptance criteria, and in which results that fall within the defined criteria are automatically included in patient report formats without any additional intervention