

	<i>The American Association for Laboratory Accreditation</i>	
	A608 – MEDICAL ASSESSOR INFORMATION QUESTIONNAIRE	Document Revised: August 3, 2011
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Thank you for your interest in serving as a medical assessor for the American Association for Laboratory Accreditation (A2LA).

Please complete the following information and provide a rating for all applicable areas in which you are technically qualified. Please attach your resume detailing your direct conformity assessment related experience (i.e. medical laboratory testing/auditing), and the technologies, materials and/or equipment directly related to your experience.

If A2LA has an immediate need for your services, we will provide you with information concerning the assessor position. Once we have identified an appropriate assessment, we will provide you with a contract and start you on an assessment as a technical assessor, working with a veteran assessor and a staff person. Once you qualify as a technical assessor you will be asked to serve as a lead assessor with staff oversight. Once that is completed, you will be qualified to perform assessments on your own.

Somewhere in this time frame you will also have to take our Assessor Orientation Course during our annual A2LA Technical Forum normally held in April. You would receive a special invitation to attend. This is a mandatory course that you would attend at our expense. Please also keep in mind that all A2LA medical assessors are required to serve on the A2LA Accreditation Council (the group of volunteers that renders decisions on granting new and renewal accreditations). More information regarding the Accreditation Council will be sent to you as you progress further through the assessor application & training process.

Please forward this application/questionnaire and your resume to me at [tmcinturff@A2LA.org](mailto:tmcinturff@A2LA.org). Do not hesitate to contact me if you have any questions or need any additional information.

Respectfully,



American Association for Laboratory Accreditation

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Name: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Payee: \_\_\_\_\_ SSN or FID: \_\_\_\_\_

E-mail: \_\_\_\_\_

- 1) How many assessments are you available and willing to perform in a year, in terms of the number of trips \_\_\_ and the total billable days \_\_\_\_?
- 2) Are you willing to do foreign assessment trips (answering yes does not mean you'll ever get such an assignment)? \_\_\_\_\_ If yes, please indicate which areas you are willing to travel to:

Canada:	Mexico:	Caribbean:	S. America:
Europe:	Russia:	Pacific Rim:	Middle East:
China:	India:	Africa:	Central America:

- 3) Identify the time periods during the year that you definitely know now that you are not available to perform assessments?
- 4) What are the most desirable time periods to perform assessments?
- 5) Are there any other restrictions or other information that we should know about with regard to your availability?
- 6) Do you have any senior discount or other air travel arrangements that substantially reduces the cost of your travel for A2LA assessments?

No \_\_\_ Yes \_\_\_. If yes, please explain:

- 7) Do we have your permission to share your name with the Centers for Medicare and Medicaid Services as a part of our regulatory compliance? (U.S. Based applicants only)

Yes \_\_\_ No \_\_\_



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8a) List any auditor qualifications and training attained (e.g., ASQ and/or ASCP certification, CQA) and **attach copies** of applicable certificates and other evidence of attainment:

8b) List any conformity assessment standards (i.e. ISO 15189, CAP, CLIA, ISO/IEC 17025, etc.) with which you have good familiarity.

8c) Do you have practical, hands-on auditing experience?  Yes  No

If yes, please provide us with information on the total number of audits you have performed, and describe in detail the last 5 audits performed (i.e. standard(s) used to assess; lead or associate assessor; full or partial assessment; 1st, 2nd or 3rd party assessments, etc.).

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9) Please provide us with a list of references (with telephone numbers) of individuals who are your technical peers and can confirm the technical experience included in your resume.

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**KEY WORD LIST FOR IDENTIFYING TECHNICAL ASSESSORS**

The assessor must identify, on a scale of 0 to 5 (as explained below) the levels of his/her technical knowledge on the Key Word list.

- Left blank or 0 - no knowledge; should never be assigned in this area
- 1 - some familiarity, but no depth or experience
- 2 - familiarity, but very little depth or experience
- 3 - satisfactory knowledge and experience
- 4 - very good knowledge and experience
- 5 - recognized by peers as expert in this area

<b>MEDICAL TESTING</b>	0	1	2	3	4	5
Histocompatibility						
• Transplant Medicine						
• Regenerative medicine(Stem cells)						
• Tissue banking						
• Tissue culture (Stem cells or other)						
Microbiology - Bacteriology						
• PCR						
• Other Microbiology techniques (Please list in notes)						
Microbiology - Mycobacteriology						
Microbiology - Mycology						
Microbiology - Parasitology						
Microbiology - Virology						
Diagnostic Immunology - Syphilis serology						
Diagnostic Immunology - General Immunology						
• Florescent microscopy						
• Other Immunological techniques (Please list in notes)						
Chemistry - Routine Chemistry						



<b>MEDICAL TESTING</b>	0	1	2	3	4	5
• Clinical Chemistry(Spectrophotometric)						
• Immunochemistry						
• Other Chemical techniques (Please list in notes)						
Chemistry - Urinalysis						
Chemistry - Endocrinology						
Chemistry - Toxicology						
• Therapeutic Drug Monitoring						
• Drugs of abuse						
• Forensic Toxicology						
Hematology						
• Manual counting						
• Flowcytometry						
• Other hematology techniques (Please list in notes)						
Immunohematology – ABO Group & Rh type						
• Tube/Slide Techniques						
• Gel techniques						
• Other immunohematology techniques (Please list in notes)						
Immunohematology – Antibody Detection (transfusion)						
Immunohematology – Anti body Detection (non-trans)						
Immunohematology – Antibody Identification						
Immunohematology – Compatibility Testing						
• Electronic Compatibility Testing						
Immunohematology – Blood Donor -Collection						
• Pheresis						
Immunohematology – Blood Donor -Testing						
Pathology - Histopathology						
• Anatomic Pathology						



<b>MEDICAL TESTING</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
○ Forensic Pathology						
○ Pathology – Cytology (GYN)						
○ Pathology – Cytology (Non-GYN)						
○ Surgical pathology						
○ Immunohistological Staining						
• Clinical Pathology						
○ Molecular pathology						
Pathology - Dermatology						
Pathology - Oral						
Radiobioassay						
Clinical Cytogenetics						
• Molecular Cytogenetics (ie. FISH, CGH)						
• Other Molecular techniques (Please list in notes)						
Other Unlisted experiences (Please list in notes)						
<b>CHEMICAL TESTING</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Chemical Instrumentation:						
- Atomic Absorption Spectroscopy						
- Gas Chromatography						
- Gas Chromatography/Mass Spectroscopy						
- High Performance Liquid Chromatography						
- Ion Chromatography						
- Electroanalysis						
- Inductively Coupled Plasma – Atomic Emission Spectroscopy						
- X-Ray Fluorescence Spectroscopy						
- Nuclear Magnetic Resonance Spectroscopy						
- Polarography						
- Infrared Spectroscopy						



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<b>CHEMICAL TESTING</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
- Fourier Transform Infrared Spectroscopy						
- Ultraviolet/Visible Spectroscopy						
Microscopy						
- Light						
- Electron						

Notes: (Please list any techniques, specialties, or disciplines not listed on the questionnaire)

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