SOP · ALR-SOP-003 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 53.3

At a glance

- Skin and blood allergy tests are performed with validated methods and reagents (LBT-REG-004 for external assessment).
- Each test run includes positive and negative controls, checked before results are reported (LBT-SOP-002).
- Results are interpreted by a qualified clinician with the clinical history (ALR-FRM-002).
- Results are reported with the clinical context and the limits of the test.
- Stop and get help straight away if: a result is reported from a test run whose controls failed.

1. Purpose

To make sure allergen tests are reliable and their results are interpreted with the clinical picture (53.3).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

To make sure allergen tests are reliable and their results are interpreted with the clinical picture (53.3).

5. Responsibilities

Role	Responsibility	Competence
Allergologist	Interprets results with the clinical history and signs the report	Clinical lead
Laboratory lead	Runs quality control and the external assessment	Clinical lead

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Control.

- Run the positive and negative controls with each test run, and check them before reporting.

Key point: Controlled.

Step 2. Interpret.

- Interpret each result with the clinical history and record it (ALR-FRM-002).

Key point: Interpreted.

Step 3. Report.

- Report with the clinical context and the limits of the test (LBT-SOP-008).

Key point: Reported.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Test runs with controls passing before reporting	100%	Each run	Laboratory lead	Withhold the result and repeat the run
Results signed by a qualified clinician	100%	Each result	Allergologist	Escalate to the clinical lead

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
ALR-FRM-002	Allergy test result and interpretation record	Record
LBT-SOP-002	Internal quality control (existing, reused)	SOP

17. Evidence

Reference	Note
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- **Allergy & Immunotherapy Safety Endorsement** (AMB-18)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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