Standard operating procedure (SOP) · FRT-SOP-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 8.3

At a glance

- Every gamete and embryo has a unique identifier from collection to use or disposal.
- Two identifiers are checked at each handling step, and the check is witnessed.
- Each movement is recorded in the traceability register (FRT-REG-001).
- No gamete or embryo is used or moved without a match to the correct patient.
- Stop and get help straight away if: a gamete or embryo is handled, moved or used without an identifier check and a witness.

1. Purpose

To make sure each gamete or embryo is matched to the correct patient at every step (8.3).

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

A gamete or embryo in the wrong place, or matched to the wrong patient, cannot be undone. Identification and traceability from collection to use or disposal is what prevents it.

5. Responsibilities

Role	Responsibility	Competence
Senior embryologist	Owns the identifiers and the witness rule	Embryologist
Embryologist	Checks and records each step	Embryologist

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. Identify.

- Give each gamete and embryo its identifier at collection, and record it in FRT-REG-001.

Key point: One identifier, one patient.

Step 2. Check at each step.

- Check two identifiers against the patient record and a witness at each handling step.

Key point: Witnessed, every step.

Step 3. Record the movement.

- Record each movement, storage and use in the register, with the time and the witness.

Key point: Every movement is in the register.

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
Handling steps witnessed	100%	Monthly	Senior embryologist	Escalate to clinical director
Registers complete for each gamete and embryo	100%	Monthly	Senior embryologist	Escalate to clinical director

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
FRT-REG-001	Gamete and embryo traceability register	Register
FRT-SOP-006	Gamete and embryo mix-up response	Mix-up

17. Evidence

Reference	Note
E-009	Based on ESHRE revised guidelines for good practice in IVF laboratories (2015).
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

- **Fertility & IVF Accreditation Training** (AMB-13)
- **Equipment, Reagents & Traceability** (LAB-04)

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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