

**University of Minnesota**  
**Center for Magnetic Resonance Research**  
**Standard Operating Procedure**  
**New SOP and Policy Process**

SOP Number / Version: SOP003 / Version 1

Approval Date:

Implementation

Author/Owner: Jeramy Kulesa

<b>Approval Signatures</b>	<b>Date</b>
Author/Owner:	
Regulatory Compliance Coordinator:	
Center Director:	

**1 Purpose**

The purpose of this procedure is to define the process for proposing, writing, and approving new SOP's and policies at CMRR.

**2 Scope**

This procedure will apply to anyone wishing to propose new CMRR SOP's or policies.

**3 Definitions**

Standard Operating Procedure	A document providing detailed written procedural instructions to achieve consistency and uniformity of the performance of a specific function.
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**4 Responsibility**

It is the responsibility of all users of the CMRR facility to adhere to this SOP.

It is the responsibility of the owner/author listed above to review the content of this SOP for accuracy and continued applicability on at least an annual basis.

**5 Procedure**

**5.1** An idea for new SOP can be provided to any CMRR committee member.

**5.2** All ideas brought forward will be placed on the meeting agenda for a preliminary discussion about the relative benefits, costs, priority and ramifications.

**5.3** After preliminary discussions, the Chair of the Committee will provide a summary of the idea to the CMRR Operations Director to obtain approval for moving forward from the Leadership Committee.

**5.4** The Chair of the Committee (or designee) will draft the SOP.

**5.5** This draft will then be presented to the Committee for refinement.

**5.6** Once acceptable to the Committee, the Chair of the Committee will provide the draft SOP to CMRR Operations Director to obtain approval for releasing the SOP for general comment from the Leadership Committee.

**5.7** The draft will be put on the CMRR SOP review website and an email will be sent to the user group(s) notifying them of the new draft SOP and will request feedback on the proposed SOP. The SOP review period will be 10 business days.

**5.8** The Chair of the Committee will bring comments and suggestions to the respective Committee for further refinement the SOP.

**5.9** The revised SOP draft will be written by Chair of Committee (or designee).

**5.10** This draft will then be presented to the Committee for refinement. If changes are substantial, the Committee, at its discretion, can repost it on the CMRR SOP review website.

**5.11** The revised draft will be presented to the Committee and Leadership Committee for final approval.

**5.12** If both groups approve the final draft of the policy, the final SOP will be uploaded to the CMRR SOP library. An email will go out to the users informing them of the new SOP, including instructions related to IRB or IACUC protocols.

**5.13** SOP's will be reviewed at least annually by the responsible Committee. Necessary changes will be made following the same procedures as outlined above.

## **6 References**

N/A

## **7 Forms and Templates**

N/A

**8    Appendices / Tables**

N/A

**9    Revision History**

Version Number	Approval Date	Change from Previous Version