# Form 4: OWM PT Action Form

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| **Created by** |  | | **Date** |  | | **Action # or ID** | |  |
| **Action Typea** | *Select one* | **Criteriab** | Select one | **Priorityc** | Select one | | **Source**d | Select one |
| **Title/Short Description** | *Create a title or short description that can easily be referenced* | | | | | | | |
| **Finding/**  **Observation(s)** | *Describe in clear terms the finding that needs to be addressed* | | | | | | | |
| **Risk Assessment** | *Assess the risk to your laboratory as a result of the finding* | | | | | | | |
| **Root Cause** | *Use a common root cause analysis approach to evaluate why this happened (e.g., five whys)* | | | | | | | |
| **Proposed Action(s)** | *Describe what action(s) is proposed to resolve the finding(s)* | | | | | | | |
| **Due Date** |  | **Task Assigned To** |  | | | | | |
| **Completion Date** |  | **Task Verified By** |  | | | | | |
| **Final Action(s)** | *Describe what was the final action(s) taken to resolve the finding* | | | | | | | |
| **Action Effectiveness** | *Describe how was the action evaluated for effectiveness and if it proved to be effective* | | | | | | | |
| **Evaluation Date** |  | **Task Verified By** |  | | | | | |

aAction Types: Corrective Actions (CA), Risk Minimization (RM), Improvement Actions (IA), Not Applicable (NA); bCriteria: Meets Criteria (OK), Nonconformity (X), Comment (C); cPriority: High = 1, intermediate = 2, Low = 3; dSource: Complaint or Feedback (C/F), Internal Audit (A), Employee Observations (EO)