



Lt. Col. Luke Weathers, Jr., VA Medical Center  
 1030 Jefferson Ave. | Memphis, TN 38104 | 901.523.8990

Veterans Health Administration

**Title: Downtime & Troubleshooting Procedure Document No. POC 40 113 Rev. No. 1.0**

**POC 40 113 Downtime & Troubleshooting Procedure**

Copy of version 1.0 (approved and current)

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**Comments for version 1.0**

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**Approval and Periodic Review Signatures**

Type	Description	Date	Version	Performed By	Notes
Periodic review	Ancillary Testing Coordinator	11/28/2022	1.0	Kimberly Ballard	
Approval	Lab Director	1/28/2021	1.0	Eugene Pearlman	

**Version History**

Version	Status	Type	Date Added	Date Effective	Date Retired
1.0	Approved and Current	Initial version	8/21/2020	1/28/2021	Indefinite

**1/28/2021**



## POINT of CARE DOWNTIME & TROUBLESHOOTING POLICY

POC 40 113

Memphis VA Medical Center  
Memphis, TN 38104

**Service Line(s):**  
Pathology and Laboratory Medicine  
Service

**Signatory Authority:**  
Chief, Pathology and Laboratory  
Medicine Service

**Effective Date:**  
June 3, 2020

**Responsible Owner:**  
Ancillary Testing

**Recertification Date:**  
June 30, 2025

### 1. PURPOSE AND AUTHORITY

- a. The purpose of this standard operating procedure (SOP) is to describe the course of action to take if a test system becomes inoperable in which case the Ancillary Testing Coordinator or designee will notify testing areas via email or phone of the inability to perform tests and/or alternative method not mentioned in this SOP. This SOP must be followed by valid operators of point of care equipment.
- b. This SOP sets forth mandatory procedures and processes to ensure compliance with VA/VHA Directive QSE7.360.00, Pathology and Laboratory Medicine Service (P&LMS) Procedures, January 29, 2016, Joint Commission, and College of American Pathology.

### 2. PROCEDURES

- a. **Test Systems.** The various analyzers, meters, or equipment used to perform patient testing by authorized personnel such as i-STAT, Coaguchek, Accuchek, etc.
- (1) DOWNTIME. Computer downtime affecting VISTA/CPRS or RALs can delay upload of patient results to hospital computer system.
    - (a) Operators will continue to perform patient testing using the test system or analyzers during a computer downtime.
    - (b) The operator will refer to patient results on the meter as documentation until system(s) are online again.
    - (c) Once the system is online, the operator must place the meter in the base for downloading of patient results into the hospital computer system.
    - (d) RALs is monitored by ancillary testing staff daily for transmittal progress.



- (e) Notice will be made to operating staff of any prearranged downtime via email or phone
- (2) TROUBLESHOOTING. Operators are encouraged to attempt troubleshooting actions before determining not to use a device.
  - (a) Operators may contact ancillary testing for assistance in resolving device errors.
  - (b) Devices should be returned to ancillary testing for further assistance in troubleshooting or exchange of device.
  - (c) After successful repair of a device, it will be returned to that area if applicable.
  - (d) Troubleshooting efforts are specific to each device and specimen type.
- (3) COMMON TIPS. Refer to these helpful tips when troubleshooting device errors.
  - (a) Restart the device by holding the on/off button on the device.
  - (b) Make sure the device is completely charged or powered on with fresh batteries.
  - (c) Make sure device is placed properly in the base for downloading and recharging of battery.
  - (d) Ensure that the operator has maintained all required competencies and updated training whereas contact ancillary testing for renewal of access.
  - (e) Check to see that the operator barcode is intact and able to be scanned by the device.
  - (f) Make sure the infrared window used for scanning is clean and clear of any buildup.
  - (g) Verify patient identification when searching for results in VISTA/CPRS.

### 3. ASSIGNMENT OF RESPONSIBILITIES

- a. **Chief of P&LMS.** Overall responsible for ensuring the laboratory has an effective downtime system.
- b. **Ancillary Testing staff** Responsible for implementing downtime and troubleshooting procedure for specific department.
  - (1) Ensure all employees are educated on and comply with this policy.
  - (2) Ensure a standardized approach to downtime & troubleshooting procedure is developed and implemented for their services as well as interactions with other services.



(3) Responsible for repair and / or exchange of testing devices when returned for troubleshooting from operators.

c. **All Staff members.** Responsible for downtime and troubleshooting procedure.

(1) Adherence to downtime procedures and compliance measures.

(2) Notify ancillary testing when patient results are not transmitting into the patient charts via phone, email, or in person.

(3) Ensure that equipment is working properly in order to troubleshoot any downtime errors.

(4) Use alternative testing measures when ancillary testing devices are not functional.

(5) Return inoperable or broken equipment to ancillary testing as soon as possible for exchange or repair.

**4. DEFINITIONS**

a. **Hospital Information System.** Is the computer system (VISTA/CPRS) used by the VAMC in order to upload or transmit patient results from testing equipment to patient electronic chart.

b. **RALs.** Electronic computer system used only by ancillary testing to upload patient results from the meter into the HIS

c. **Downtime.** Situation in which the hospital computer system is not accessible to view, retrieve, or upload electronic patient charts or records. This can be prearranged or unexpected.

d. **Troubleshoot.** Steps taken in order to resolve instrument errors, system failures, or device malfunctions.

**5. REFERENCES**

a. VHA Directive 1106.1, Pathology and Laboratory Medicine Service (P&LMS) Procedures, January 29, 2016, [http://vaww.lab.med.va.gov/References\\_Directives\\_and\\_Regulations\\_P.asp](http://vaww.lab.med.va.gov/References_Directives_and_Regulations_P.asp)

b. POC Manual, [www.medialab.com](http://www.medialab.com)

**6. REVIEW**

This SOP will be reviewed at least every 2 years, when there are changes to the government document that need to be made and any regulatory requirement for frequent review.



June 3, 2020

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## 7. RECERTIFICATION

This SOP is scheduled for recertification on or before the last working day of June 2025. In the event of contradiction with national policy, the national policy supersedes and controls.

## 8. SIGNATORY AUTHORITY

Dr. Eugene Pearlman  
Pathology and Laboratory Medicine Service, Chief  
Date Approved: June 3, 2020

**NOTE:** *The signature remains valid until rescinded by an appropriate administrative action.*

**DISTRIBUTION:** This SOP is available in Media Lab.