

**KAISER MEDICAL CARE PROGRAM
ORANGE COUNTY AREA
POLICIES AND PROCEDURES**

TITLE:	LABORATORY P&P	INDEX NO:	06-030-01
SECTION:	PERFORMANCE STANDARDS	ORIGIN DATE:	12/15
SUBJECT:	TEST REPORTING TURN AROUND TIME		

POLICY The Clinical Laboratory attempts to provide prompt service both in collecting specimens and performing tests at all times. Standards of service are necessary to ensure optimal utilization of the laboratory and produce the greatest benefit for the largest number of patients.

In cases where there are unexpected delays in results availability, provider notification will be made by one of the following:

- Written notification or e-mail notification
- Telephone notification

PURPOSE To ensure that results are reported timely to optimize patient care and patient outcomes. To define the tests that can be ordered on a STAT basis and the interval of time between when the sample is received in the laboratory and the results are reported.

DEFINITIONS **STAT tests-** Test results are urgently needed for the diagnosis or treatment of the patient. The delay can be life threatening.
Routine tests- Tests that are collected and batched for efficiency and cost effectiveness. These results are not needed on an immediate basis for diagnosis or treatment.
Timing Critical- Tests that are collected within +/- 15 minutes from the scheduled time. These are dose dependent, fasting or serial test orders.
TAT (Turn Around Time)- The interval of time between when a sample is received by the laboratory and the results are reported.

TAT for Tests in the Clinical Laboratory **AM draw (Inpatient)-** ICU, DOU and Med Surg 4th Floor- by 0700. All other units are by 0800.
STAT- One hour or less from when the sample was received in the laboratory.
Routine- Four hours or less from when the sample was received in the laboratory.
Timing Critical- One hour or less from when the sample was received in the laboratory.

SUBJECT:	TEST REPORTING TURN AROUND TIME	INDEX NO:	06-030-02
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**PROCESS
NOTIFICATION
OF TESTING
DELAYS**

The following process is used for any testing delays, including those due to unavailable reagents, extended instrument/equipment/computer downtimes, or significant quality failures.

Testing Personnel: Notify manager (or designee) immediately when problems are identified which will delay testing beyond published turn-around time.

Section Manager:

1. Determine corrective action to be taken.
 - a. Hold specimens until testing is available again; OR
 - b. Send specimens to Reference Laboratory
2. Determine whether medical staff should be notified
3. Notify Lab director and other managers of testing delay and corrective action.

Lab Director and Medical Director: as needed, distribute written notification to the providers.

LAB SECTION	STAT TESTS AVAILABLE
BLOOD BANK	Type and Screen Antibody ID Crossmatch DAT Fetal Screen Kleihauer - Betke
CHEMISTRY	ALT AST Acetaminophen Albumin Albumin Peritoneal Fluid Albumin Pleural Fluid Alcohol Blood Alkaline Phosphatase Ammonia B Type Natriuretic Peptide BNP BUN Bilirubin Direct Bilirubin Total C Reactive Protein CK Total CKMB Calcium Calcium Ionized Carbamazepine Level Carbon Dioxide

Chloride
Chloride Urine
Creatinine 24Hr Urine
Creatinine Clearance
Creatinine
Creatinine Peritoneal Fluid
Creatinine Urine
Digoxin
Drug Screen Triage Kit Urine
Electrolytes
Electrolytes 24 Hr Urine
Electrolytes Urine
Estradiol HMG
Fetal Fibronectin
Gentamicin
Glucose 1 Hour 50g OB
Glucose 2 Hour 75g
Glucose CSF
Glucose Fasting
Glucose Peritoneal Fluid
Glucose Pleural Fluid
Glucose Random
Glucose Tolerance 2 Hour 75g OB
Glucose Tolerance 3 Hour 100g OB
Glucose and Total Protein CSF
HCG Pregnancy Test Quant Serum
LDH
LDH Peritoneal Fluid
LDH Pleural Fluid
Lactic Acid Blood
Lactic Acid CSF
Lipase
Lithium Level
Liver Function Panel
Magnesium
Osmolality Blood
Osmolality Urine
PTH, Intraoperative
Phenobarbital Level
Phenytoin Level
Phosphorus
Potassium
Potassium Urine
Protein Creatinine Ratio Urine
Salicylate Level

	<p>Sodium Sodium Urine Theophylline Level Total Protein Total Protein 24 Hr Urine Total Protein CSF Total Protein Peritoneal Fluid Total Protein Pleural Fluid Total Protein Urine Troponin I Uric Acid Valproic Acid Level Vancomycin Level</p>
COAGULATION	<p>APTT APTT Substituted Anti XA Heparin, Unfractionated D Dimer Fibrinogen Quant INR Only PT INR and Sec Thrombin Time</p>
HEMATOLOGY	<p>APT Test CBC No Differential CBC With Differential, Auto Cell Count Body Fluid Cell Count and Differential CSF Cell Count and Differential Pleural Fluid Cell Count and Differential Synovial ESR Eosinophil Smear Sputum Eosinophil Smear Urine Hgb and Hct Infectious Mono Test Lamellar Bodies Count Platelet Count, Auto Rapid HIV Test Reticulocyte Count Semen Analysis, Complete Semen Analysis, Post Vas</p>
MICROBIOLOGY	<p>Occult Blood Gastric Fluid Occult Blood Stool Streptococcus Pneumoniae Ag Urine T and M Clue Cells T and M Wet Mount</p>

SUBJECT:	TEST REPORTING TURN AROUND TIME	INDEX NO:	06-030-05
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	Crystals-Synovial Fluid Fecal WBC Gram Stain India Ink Prep KOH Prep Malaria Rapid Test Q Score
URINALYSIS	Specific Gravity Urine Urinalysis, Auto WO Micro Urinalysis, Microscopic Only pH Urine

Note: In the event that additional verification procedures are required, the test may require more than one hour for completion.

