

# Beaumont

Origination 11/18/2020  
Last Approved 8/18/2023  
Effective 8/18/2023  
Last Revised 8/24/2021  
Next Review 8/17/2025

Document Contact: **Kylene McIntosh: Mgr, Lab Support Svcs**  
Area: **Laboratory-Processing**  
Applicability: **Dearborn**

## Dearborn Specimen Processing Send Out Result Audits

Document Type: Procedure

### I. PURPOSE AND OBJECTIVE:

The purpose of this document is to describe the process of randomly auditing Sendout results that were manually entered into the laboratory system. Random clerical errors are detected by comparing the patient test results in laboratory computer system with a report from the Sendout Lab.

### II. PROCEDURE:

- A. All lab reports that are manually entered into the laboratory computer system will be placed in a file marked "Completed Reports"
- B. Audits will be performed by selecting every 10th report. Review each chosen entry to verify that the correct information is documented in the hospital and laboratory computer system.
  1. Confirm each of the following are correct:
    - a. Results
    - b. Send out lab address
    - c. Reference Ranges
    - d. Any other pertinent information
    - e. If reports were scanned, verify that the imaged report shows in both the hospital and laboratory computer systems.
  2. Date and initial the report in the following manner:
    - a. Audited by with the initials of person that performed audit and the date.
  3. If an error is found do the following:

- a. Caregivers must be notified promptly of all modified results. Document in the result message the name of the caregiver (at minimum first initial and last name) who is aware of the error, the time the notification occurred and the location of the patient, if inpatient, at the time of notification.
  - b. Correct the result following the "[Laboratory Procedure for Canceling Orders and Results on Unacceptable Specimens](#)" procedure and issue a corrected lab report. Include the caregiver notified as stated about.
  - c. Have a management team member review correction.
  - d. File all corrected reports in a file marked "Corrected Reports". Attach a copy of the previous results, and the corrected results, and why the results were corrected.
4. Once reports are audited, file the reports in a file marked "Completed Result Audits".
  5. Complete the Manual Send Out Result Audit Log monthly.
    - a. Week ending date
    - b. Total number of patients resulted manually
    - c. Number of results audited
    - d. Number of results corrected
    - e. Number of corrected results sent

COPY

## Attachments

[Manual Send Out Result Audit Log.xlsx](#)

## Approval Signatures

Step Description	Approver	Date
CLIA Medical Directors	Jeremy Powers: Chief, Pathology	8/18/2023
Policy and Forms Steering Committee Approval (if needed)	Kylene Mcintosh: Mgr, Lab Support Svcs	8/9/2023
Lab Operations Directors	Kimberly Geck: Dir, Lab Operations B	8/9/2023
Lab Processing Best Practice Committee	Kylene Mcintosh: Mgr, Lab Support Svcs	8/9/2023

## Applicability

Dearborn

COPY