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Urine Sediment Morphologic Observation Evaluation

Purpose This procedure provides instructions for the competency assessment of the Clinical Laboratory Scientist (CLS), and Medical Laboratory Technician (MLT) where applicable, in performing morphologic observation and identification of formed elements in the urine specimen.

Policy At least annually, an assessment of the CLS and MLT competency in morphology observations will be conducted.

Specimen sources

- Proficiency testing clinical microscopy survey urine sediment photomicrographs from previously evaluated kits with referee and consensus identifications.
- External educational or training websites, like MTS, providing digital images for technical training.
- Random patient samples previously resulted.

Safety Refer to the safety manual for general safety requirements.

Procedure for PT survey materials Follow the steps below to use PT survey materials:

Step	Action
1	AFTER the result submission due date has passed, circulate photomicrographs of urine sediment among performing staff to be identified.
2	Evaluate response/s of each performing staff. <ul style="list-style-type: none">• If response was equivalent to the "Good"/Acceptable PT survey response, mark as acceptable. Count for score.• If response was not equivalent to the acceptable PT survey response, mark as needing review. Do not count for scoring.
3	Calculate total score for each performing staff. <ul style="list-style-type: none">• If total score equals to or greater than 80%, mark as "Passed".• If total score is less than 80%, performing staff will review reference material and be provided an opportunity to re-take the competency assessment within one week. Note: The staff will not be scheduled in the urinalysis area without direct supervision until successful completion of the competency assessment.

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Urine Sediment Morphologic Observation Evaluation, Continued

Procedure for Previous Specimen Testing Materials Follow the steps below to use previous specimen testing materials:

Step	Action
1	AFTER a specimen with abnormal results is verified and released, save pertinent images to be used.
2	Circulate image/s of urine sediment among performing staff to be identified.
3	Establish acceptable response. <ul style="list-style-type: none"> • Verify with the laboratory director or designee to determine the "Acceptable" response.
4	Evaluate response/s of each performing staff. <ul style="list-style-type: none"> • If response was equivalent to the "Acceptable" response, mark as acceptable. Count for score. • If response was not equivalent to the acceptable response, mark as needing review. Do not count for scoring.
5	Calculate total score for each performing staff. <ul style="list-style-type: none"> • If total score equals to or greater than 80%, mark as "Passed". • If total score is less than 80%, performing staff will review reference material and be provided an opportunity to re-take the competency assessment within one week. Note: The staff will not be scheduled in the urinalysis area without direct supervision until successful completion of the competency assessment.

External Assessment Programs

External assessment programs have defined passing scoring criteria.

- If performing staff did not meet passing score, ask staff to identify and review their mistakes.
- Re-assign staff to take the assessment for a second time.
 - If performing staff still does not pass for the second time, assign staff appropriate educational training associated with their missed responses.
 The staff will not be scheduled in the urinalysis area without direct supervision until successful completion of the competency assessment.
 - Re-assign staff to take the assessment for a third time.
 If staff still does not pass for the third time, evaluate staff's performance.

Urine Sediment Morphologic Observation Evaluation, Continued

Non-Controlled Documents The following non-controlled documents support this policy.

College of American Pathologists (CAP) Laboratory Accreditation Program
Urinalysis Checklist

Author(s) • SCPMG Hematology UA Working Group, UA Subgroup

Signature Manifest

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Operations Director Approval

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Medical Director Approval

Name/Signature	Title	Date	Meaning/Reason
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