Effective Date: 10/1/2024



Critical Result Notification Instructions

Purpose

This procedure provides instructions for notification of Microbiology Critical and Alert Value results. Results of Critical and Alert Values are required to be called as soon as the results are available. Each hospital/clinic/outpatient service ordering Microbiology tests is responsible to follow up and is who we want to notify of Critical or Alert values. Using the Cerner PowerChart banner bar and Amion can help determine which provider/service to notify.

Principal and Clinical Significance

Critical and Alert Values encompass the detection of clinically important microorganisms and viruses that require notification and immediate action by the provider. Notification of the correct provider/service is important to ensure the best patient care. Using the Cerner Powerchart banner bar and Amion will help identify the correct provider/service.

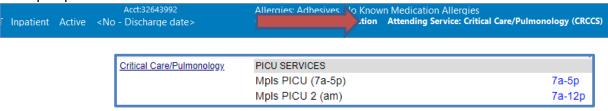
Policy Statements

This procedure applies to Microbiologists that work in the Microbiology Department.

Procedure

- 1. Refer to MCVI 4.0 Critical Results for the list and description of the Critical and Alert values for the Microbiology department.
- 2. Results are reported within 60 minutes (with the exception of the BioFire BCID which are reported within 30 minutes) of result.
- 3. Determine the hospital, clinic, or outpatient service caring for the patient.
 - Sunguest may provide the location of the patient.
 - Cerner Powerchart will provide an accurate location and list the Attending Service.
 - Follow the bullets below for each type of service for instructions.
- 4. For **Inpatients** (patients admitted into the hospital):
 - Call the floor and ask for the RN or provider (depending if BCID or not).
 - **Or** use Cerner Powerchart banner bar to determine the Attending Service for the patient. Use Amion to find on-call staff for each particular service.

Example: patient in PICU



Example: patient in SCN

2910 01		Acct:32648121	Allergies: No Known Allergies
SCN-M 9/17/2024 14:53:00 CDT II	npatient Active	<no -="" date="" discharge=""></no>	Code Status: Full Resuscitation Attending Service: Children's Neo

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<u>Neonatology</u>	Mpls NICU Day Rounde	er 1	7:30a-4:30p
	Mpls NICU Day Rounde	er 2	7:30a-4:30p
	Mpls NICU Day Rounde	er 3	7:30a-4:30p
	Mpls ICC	N	7:30a-4:30p
	Mpls ICC PNP	4	6:30a-4:30p
	Mpls SCN		7:30a-4:30p

- For CVCC/CVICU patients call 5-8411.
 - During the day, you may be asked to call another number depending on what team is caring for the patient
- 5. For **ED** (Emergency Department)
 - Call the ED for patients in ED and discharged from ED.
- 6. For Clinic patients (HemOnc, PIP clinics, MCC, CLC etc.):
 - Use Cerner Powerchart Banner Bar to determine the Attending Service of the patient.
 - Use Amion to find on-call staff for each particular service.
 - Call the clinic on-call staff.
 - For example, HemOnc, PIP clinics, MCC and CLC all have providers on-call with 24-hour coverage.
 - This would mean calling the on-call staff, not the provider that ordered the test.







7. For Discharged patients:

- Use Cerner Powerchart Banner Bar to determine the Attending Service of the patient.
- Use AMION to find On-call staff for each particular service.
 - Discharged Surgery patients are following by the Surgery service.

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Surgery - General Pediatric	PSA Gen Surg CNP MPLS CAMPUS ONLY (7:30a-3:30p)	7:30a-3:30p
	PSA Gen Surg CNP StP CAMPUS ONLY 7:30a-3:30p	7:30a-3:30p
	PSA Gen Surg Mpls 8A-5p	8a-5p
	PSA Gen Surg StP 8A-5p	8a-5p
	PSA Outside Consults 8:30a-5p	8a-5p
	PSA Gen Surg BOTH CAMPUSES 5P-8a	5p-8a
	PSA Outside Consults 5p-8:30a	5p-8a

If Hospitalist is listed in the Cerner Powerchart banner bar:



Hospitalist Bi-Campus Clinical Support can be used between the hours of 0600-1400.



OR

Minneapolis or St Paul Admissions Day, Cross-Cover Evening or Cross-cover Night.





- 8. The Housestaff list should not be called.
- 9. If a patient comes in through the ED or a clinic, is admitted in the hospital and then discharged, you would call the hospitalist or the service from the admission.
- 10. Staff will need to see what service is caring for the patient and call accordingly. This translates to not just calling the hospitalist.
- 11. Documentation of notification of all Critical and alert values will be completed in Sunguest. Documentation must include:

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- Critical/alert value
- CAL code to document that results were 'called and ready back by'.
- First name, last name initial and credentials of person receiving the result.
- Date and time of call.

Training Plan/ Competency Assessment

Training Plan	Initial Competency Assessment	
 Employee must read the procedure. 	 Direct observation. 	
Employee will observe trainer performing the procedure.		
 Employee will demonstrate the ability to perform procedure, record results and document corrective action after instruction by the trainer. 		

Historical Record

Version	Written by:	Effective Date:	Summary of Revisions
1	Susan DeMeyere	10/1/2024	Initial Version