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# Beaumont

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Area: *Laboratory-Hematology*

Key Words:

Applicability: *Royal Oak*

## Critical Values and Response for Coagulation Results- RO

Document Type: Procedure

### I. PURPOSE AND OBJECTIVE:

Documentation of critical results from tests and diagnostic procedures that fall significantly outside the normal range and may indicate a life-threatening situation, is required to ensure that results are communicated in a timely manner to a licensed practitioner, so the patient can be promptly treated.

### II. ACRONYMS:

- A. Activated Partial Thromboplastin Time (aPTT)
- B. Anticoagulant Management Service (AMS)
- C. Emergency Center (EC)
- D. Fibrinogen (FIB)
- E. International Normalized Ratio (INR)
- F. Laboratory Information System (LIS)
- G. Nursing Home (NH)

### III. PROCEDURE:

#### A. Critical Values:

Assay	Value
INR-NH	$\geq 3.1$
INR- AMS	$\geq 5.0$
INR (Inpatients/Outpatients)	$\geq 5.0$
aPTT	$> 110$ Seconds
FIB	$< 100$ mg/mL

#### B. Notification of Critical Values:

1. With the exception of EC, critical values in the LIS are routed to Outreach Customer Services for

calling. Refer to Outreach Customer Services for further information.

- a. INPATIENT: Outreach Customer Services notifies the nursing unit.
- b. OUTPATIENT: Outreach Customer Services notifies the requesting physician's office or answering service.
- c. Outreach Customer Services (NH): Outreach Customer Services notifies the nursing home.
- d. CLINIC PATIENT: Outreach Customer Services notifies the appropriate clinic. (This includes AMS).

**C. Emergency Center Patient:**

1. Phone the EC area where the patient is located and request to speak with the EC physician covering this patient.
2. Initiate the conversation with this script: "Hello, this is (your name) from (your lab section) with a critical lab result on (patient's name). The patient's birth date is (month/day/year) or medical record number (MRN). Would you please read back this name and birth date or MRN?"
3. The EC physician must read back the patient's name and birth date before you deliver the critical result(s).
4. Deliver the critical result(s).
5. Request that the EC physician read back the critical result(s) to ensure the accurate verbal transfer of information.
6. Request the EC physician's pager number or full name.
7. Complete the documentation of the critical result in the LIS for audit trail to include:
  - a. Contact outcome (successful)
  - b. EC Physician's pager number or full name (Provider)
  - c. Current time
  - d. Select the LIS comment option "Results were read back by phone recipient".

**D. NOTE:**

1. If EC physician is unable to take the critical call, Lab Tech politely states "I'm sorry, Dr. I will call the Charge Nurse with these critical results".
2. Phone back to speak with the EC Charge Nurse or Nurse taking care of the given patient. In these cases, the EC phone recipient (Nurse) must read back the patient's name and birth date, read back the critical result(s) and state his/her employee badge number or full name.
3. Notify hematology resident, fellow or pathologist if unknown patient.
4. When paging a physician, make sure that you include the 10-digit call-back phone number (where you can be reached). Some physicians may see patients at multiple hospitals and may not be able to interpret only a 5-digit number.
5. If the call is an outside client, also include in the initial information that the call is from Beaumont Health, Royal Oak.
6. Do not call critical values on deceased patients. Once the patient is confirmed as deceased, add this information in the LIS (i.e. patient deceased) and do not follow through with the usual process of giving the results and requiring the read-back.

## IV. REFERENCES:

- A. [Communicating Critical Laboratory Results](#)

### Attachments

[Attachment A- Process Flow for Calling Critical Lab Results to the Emergency Center \(EC\).pdf](#)

### Approval Signatures

Step Description	Approver	Date
CP Chief Medical Director	Peter Millward: Chief, Pathology Service Line	5/13/2021
Coagulation Medical Director Designee	Marc Smith: System Med Dir, Coagulation	5/13/2021
Policy and Forms Steering Committee Approval (if needed)	Tamara Sabih: Medical Technologist Lead	5/11/2021
Policy and Forms Steering Committee Approval (if needed)	Gail Juleff: Project Mgr Policy	5/11/2021
System Operations Director	Brittnie Berger: Dir, Lab Operations C	5/11/2021
System Manager	Rebecca Bacarella: Mgr Laboratory	5/11/2021
	Tamara Sabih: Medical Technologist Lead	5/4/2021

### Applicability

Royal Oak