![UnityPoint Health] UnityPoint Health Methodist	Page 1 of 7	Section: UPM RL	Policy #: 22
REFERENCE LAB LABORATORY	Approved by: see signature block at end of document		Date: 2/28/18 Review by: 2/28/18
	Supersedes: Date Revised: 8/19/16, 2/28/18		
	Primary Responsible Parties: Peggy Bennett Secondary Responsible Parties: Deb Deeb		
	CAP Standard: NA		
SUBJECT: RECEIVING IN TESTS			

I. PURPOSE
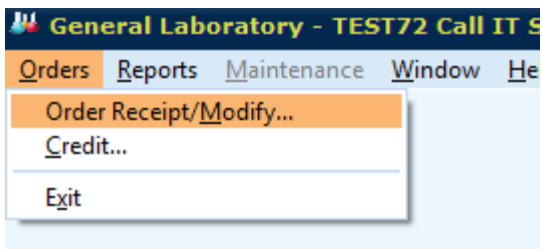To ensure all testing is received into laboratory

II. GENERAL INFORMATION
N/A

III. POLICY SCOPE:
The scope of this policy applies to all Laboratory staff that prepares laboratory specimens for testing at UnityPoint Methodist.

IV. PROCEDURE
A. In SQ Gateway got to GENERAL LABORATORY>ORDERS>ORDER RECEIPT/ MODIFY

B. Select PATIENT ID from the ACCESS OPTION drop down and SCAN or ENTER the name MRN# in the blank. Select GET PATIENT (typing enter works as well)

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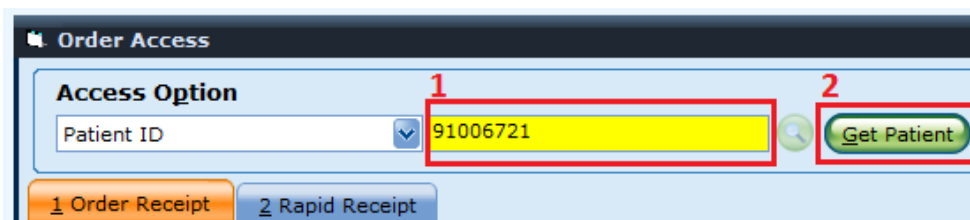
C. Once you've selected the correct patient (1), select the radio button (Alt+U) UNRECEIVED under ORDER STATUS.(2) Select DISPLAY ORDERS (Alt+O).(3)

D. Select the correct testing from the ACCESSION LIST (will hi-light peach). All tests under an accession list must be received at the same time, although different testing order/specimen types may require that they be received in separately from another group. Please pay close attention that the correct testing gets received in, and that the process is duplicated until all orders received are fulfilled.

E. Under GENERAL INFORMATION enter the COLLECTION and RECEIVE DATE and TIME. (1) The current date and time will autofill the received date and times fields. Verify the ORDER PHYSICIAN crossed correctly from Epic. If not this will need to be changed to match the correct provider using the F3 key and searching or by entering the Epic physician number. (2)

F. Scroll/Tab/Arrow down in the general information fields and you will find additional fields that will need entered.

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G. FYI the order account number is the CSN number that the bloodwork will release back to epic on. (3) For ORDER WORKLOAD CODE, you will enter VNON. (4) Entering the ORDER COMMENT (5) of the collector and tracking barcode if necessary.

Enter in the format of COLB-;RN or with barcode COLB-;RN-;OF462694 (replacing RN with the initials or UNK; scanning barcodes works in this field)

X104115 Accession Level Inform

General Information

COLB~COLLECTED BY:-;RN

Order Location	PERIO~AMB
Order Physician 3	128485~TRI
Order Account Number	580079134
Phlebotomist Code 4	
Order Workload Code	VNON~PRM
Specimen Comment 5	COLB~COLL

Reassign ...

H. You can add modifiers on this screen as well. Select the space next to the test you need to modify under the column MODIFIER. Here you will enter any callback information needed and or change the orders to STAT testing.

I. If a test is missing and should be ordered under the same Accession number, you can also add that additional testing on be entering it on the next available line.

Order Code(s)

Order Code	Modifier	Diagnosis Code
GLYCO	RT	
PLCH7	RT	

HIS Number   Credit ...   Reschedule

J. Once you have entered all of the modifiers and verified all of the testing, select SAVE.

K. CONTAINER and SPECIMEN ENTRY will pop up.

L. A list of the required containers for the testing will populate. Check that the specimens you have match what's on the list. If something is missing then the testing cannot be done and will have to be cancelled. A cancelation sheet MUST be filled out! If tests are unclear contact office or lab administrator on call.

M. Check your Specimen Containers you have vs what is listed in the system. (1) If you have more specimens than what is on the list, and there is not any testing of that specimen type, click cancel and go back to where you enter the orders and order a JIC test for each tube you have in excess then continue as before. If there is testing for the specimen type you have, simply add the proper amount of containers to the list (2).

[i.e. If you have testing for a Protime and a CMP, and you received a lavender top, you will need to go back and add a SXL (JIC Lavender). If you have orders for a Protime and a CMP and they sent 2 gold and a Lt Blue, you will add an additional SS to the Container list.]

N.   Select ROUTE and your labels will print to the linked printer (3).
O.   If you entered a CB1 or CB2 in the modifier, a callback box will pop up for you to enter the fax number(s) of additional places the results are requested to go. In the Contact Type drop down select other. (1)
P.   In the Contact field type the name or Fax. (2)
Q.   Contact Phone Field enter the fax number. Be sure to use the format 91309XXXXXXX. (3)
R.   If there are additional fax numbers Select Additional Call and repeat steps 21-23. (4)
S.   Once all fax numbers have been entered, select OK. (5)
T.   If there are multiple accession numbers, this process will need duplicated for each accession (steps 21-25)

U. If there is a specimen that requires additional specimen source information a pop up box will populate. In the results column under SDES you will enter the Micro Site Code. (i.e. If you have a wound culture you will enter the code WND.) Under SREQ if you have additional footnoting information, replace the words HIDE by selecting this field, enter that in this field followed by a ; (i.e. ;Full work up)

V. Labels will then print to the label printer mapped to the PC.
W. Verifying specimen(s) identity using 2 unique patient IDs, label the specimen(s) with the labels generated from LIS. When possible, labels should be placed so that the patients name on the original label is still visible. The last name of the LIS generated label should be on top, closest to the specimen cap. When processing Vaginal Pathogens DNA Direct Probes, label the physical swab, then place swab into a transport container for transportation to testing department.

V. REFERENCES
A. Dana Spears, HTL(ASCP), Laboratory Manager, Methodist Medical Center, Peoria, IL, 2016.
B. Peggy Bennett, Client Services Coordinator, UnityPoint Health Methodist, Peoria, IL, 2016

VI. MAINTENANCE AND STORAGE
A. All policies and procedures are reviewed every two years (safety standards are reviewed yearly) by Laboratory Administration and/or the Medical Director of the Laboratory or designee.
B. The Laboratory Administration and Medical Director review policies and procedures when there are changes in practice standards, or requirements.
C. All policies and procedures are reviewed every two years by staff or at the time new or revised ones are put in effect.
D. All policies are retained 8 years after being discontinued or revised.
E. All procedures are retained 2 years after being discontinued or revised.

MEDICAL DIRECTOR		
DATE	NAME	SIGNATURE
January 29, 2017	Elizabeth A. Bauer-Marsh, M.D.	*Elizabeth A. Bauer-Marsh MD*
ADMINISTRATIVE DIRECTOR		
	Dana A. Spears	*Dana A. Spears*

REVISION HISTORY			
Rev	Description of Change	Author	Effective Date
0	Written for EPIC system.	J. Turpin	2/14/16
1	Addition of cancelation sheet to complete, added steps for 2 identifiers and proper label placement, to include vaginal pathogen testing	P. Bennett	2/27/18

REVIEWED BY

Coordinator	Date	Manager	Date	Administrative Director	Date
P. Bennett	8/22/16			*Dana A. Spears*	8/22/16
P. Bennett	2/27/18	*Deb Deeb*	2/27/18	*Dana A. Spears*	2/28/18