Title:	Alert Values		
Department/Service Line:	Laboratory		
Approver(s):	CLIA Director		
Location/Region/Division:	BSWH		
Document Number:	BSWH.LAB.QM.0527.P_V2		
Last Review/Revision Date:	See Signatures	**Origination Date:**	11/2017

SCOPE

This policy applies to personnel in the BSWH Laboratories who perform, result, and report tests.

DEFINITIONS

When used in this document with initial capital letter(s), the following word(s)/phrase(s) have the meaning(s) set forth below unless a different meaning is required by context. Additional defined terms may be found in the BSWH P&P Definitions document.

Alert result: test results that are significant in the diagnosis of disease and/or treatment of the patient.

Reporting Timeframe: The time interval between the identification of the result and the reporting to a caregiver.

Responsible Licensed Caregiver: The licensed l practitioner who assumes, within their scope of practice and/or working under a medical staff orders and has responsibility for acting upon the result.

POLICY

The BSWH Laboratory will develop and implement a system for recognizing, reporting, and documenting alert test results.

PROCEDURE

System Development

- A list of Alert values is developed by BSWH Laboratory and Pathology Council

General Process Requirements

- The alert value communication is made by approved personnel to a licensed caregiver. When contacting a physician office, it may be necessary to give the alert value to non-licensed personnel.
- Documentation of the alert value communication is required.
- When calling the result
  a. State the patient's name and medical record number or date of birth for outpatients.
  b. Communicate the value and obtain verbal read back.
- Document the alert value communication.

Use the canned comment in the LIS for calling alert values.

Alert values may be communicated face-to-face, by phone, secure email or through Epic in basket.

The reporting timeframe for alert values is as follows:

- Inpatients- Alert values will be called within 3 hours after result verification.
- Outpatients- Alert values will be communicated the same day up until 5pm. If unable to reach the provider the results will be called the next morning.

Guidelines for Problem Communications

- Patient is not in expected location (inpatient) -If floor personnel communicate change in patient location, call the patient's current location and communicate the alert value to the licensed caregiver. Document the call.
- If floor personnel, including the charge nurse, cannot identify the patient's current location, notify (page) the nursing administrative supervisor immediately. Communicate the situation and the alert value to the nursing administrative supervisor, documenting the communication.
- Patient is not known to licensed caregiver (outpatient or discharged patient)
    - Briefly research in the LIS and /or HIS to see if patient's medical service/provider has changed.
    - Check paper order or requisition to see if correct provider contact information is available.
    - Make two documented attempts to locate the correct caregiver and communicate the alert result.
    - If correct caregiver cannot be located, contact pathologist-on-call or the laboratory medical director. The pathologist should call back the technologist to convey the final communication to appropriate caregiver for documentation into the LIS.

ATTACHMENTS

Alert Values (BSWH.LAB.QM.0527.A1)

RELATED DOCUMENTS

None.

REFERENCES

None.

REVISION HISTORY

Version #	Effective Date	Description of Change	Revised By
2	See Signatures	Updated A1 with the following changes: Removed Heparin Assay Value of "None", Updated Heparin Assay Value to >1.00. Added PCR Stool Panel on Outpatients. Removed Lidocaine, Primidone, Procainamide, Quinidine, and O&P.	R. Steward

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TEST	*ALERT VALUE*
Anti-Factor Xa (Heparin Assay)	>1.00 U/mL
Blood Bag Culture	Positive
Blood Smear	Positive for Malaria, Babesia, or other blood parasite
C. Difficile	Positive
Drug resistant-GNR Culture : ESBL, MDRO or CRE	Positive
Ethylene glycol, serum	Any detected level
Ionized Calcium	< 0.5 mmol/L or > 1.75 mmol/L(NTX) <2.00mg/dL or >7.00 mg/dL (CTX)
Heparin Antibody (HIT)	Positive
HIV screen and confirmation	Positive
Malarial Smear	Positive
Methanol	Positive
O2 sat (adults)	<75 or >100 arterial; <50 venous; <50 or >100 mixed venous
O2HB (adults)	<75 or >100 arterial; >100 mixed venous
PCR Bordetella pertussis on inpatients	Positive
PCR C. difficile on inpatients	Positive
PCR dimorphic fungus	Positive
PCR Stool Panel on inpatients	Positive
PCR Stool Panel on outpatients	All Positive State Reportable Organisms
PCR for MRSA on inpatients	Positive
PCR Varicella Zoster on inpatients	Positive
Phenytoin (Dilantin) FREE	> 4 mcg/mL
Platelet Culture	Positive
Sperm in UA of female <16yr	Present
Syphilis Screen	Positive
Transfusion Services	
Identification of unexpected complex immunohematology evaluation delaying typical time to procure units	
Inadequate product or supply to fill routine blood product use order	
Alert Values CTX only	
Methotrexate	Any value
Respiratory Virus by PCR on Inpatients	Positive
DAT on Cord Blood	Positive
Alert Values NTX only	
Blood Urea Nitrogen (BUN)	>100mg/dL
Strep B- Rapid by PCR from Vaginal source or neonates	Positive

T-Spot/Quantiferon Gold	Positive
Vaginal Strep Screen or Newborn Culture	Positive