

TRAINING UPDATE

Lab Location: SGAH & WAH
Department: POCT (Core lab)

Date Distributed: 9/19/2013
Due Date: 10/19/2013
Implementation: n/a

DESCRIPTION OF PROCEDURE

| |
|--|
| Name of procedure: |
| Corrected Results POCT-42 |
| Description of change(s): |
| <p>This is a NEW POCT procedure to explain the process that is already in place. It is very similar to the laboratory SOP.</p> <p>This SOP is already in effect.</p> |

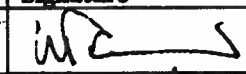
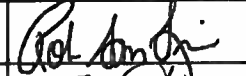


Document your compliance with this training update by taking the quiz in the MTS system.

**ADVENTIST HEALTHCARE
LABORATORY POLICY and PROCEDURE**

SECTION: POC Testing
 TITLE: Corrected Results
 Procedure #: POCT - 42
 Effective: 7/15/13
 Reviewed:
 Revised:

Non-Technical SOP

| | | |
|--------------------|-------------------------------|---------------|
| Title | Corrected Results | |
| Prepared by | Anne Schoonover | Date: 6/26/13 |
| Owner | Judy Codling, Anne Schoonover | Date: 6/26/13 |

| Laboratory Approval | | |
|---|--|--------------|
| Print Name and Title | Signature | Date |
| Nicolas G. Cacciabeve, Laboratory Medical Director |  | 7/3/13 |
| Robert SanLuis Laboratory Services Director |  | 7/3/13 |
| Judy Codling, POC Supervisor |  | 8/20/13 |
| Anne Schoonover POCT Supervisor |  | 26/June 2013 |

| Review: 24 month (or new) management review and approval: Signature acknowledges SOP version remains in effect with no revisions. | | |
|--|------------------|-------------|
| Print Name | Signature | Date |
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**ADVENTIST HEALTHCARE
LABORATORY POLICY and PROCEDURE**

TITLE: Corrected Results

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1. PURPOSE

This procedure outlines the process for making corrections to previously reported results for point of care testing

2. SCOPE

Any reports that require correction must be corrected via this procedure.

3. RESPONSIBILITY

Applies all laboratory and respiratory therapy technical staff

4. DEFINITIONS

MEM: Manual Result Entry
LIS: Laboratory Information System, Sunquest Systems
PUMAC Urine dipstick
A/M/D/P/R: Accept/ Modify/ Display/ Preliminary/ Reject
CRW: Credit Test Request without Update of Patient Data
PTROP: Troponin
PBMP: Basic Metabolic Profile
PLAC: Lactic Acid
PACT Activated Clotting Time
BGART: Blood Gas Arterial
BGMV: Blood Gas Mixed Venous
BGCAP: Blood Gas Capillary
BACOR: Blood Gas Arterial Cord
BVCOR: Blood Gas Venous Cord
BGEART: Blood Gas Electrolyte Arterial
BGEVEN: Blood Gas Electrolyte Venous
BGEMVN: Blood Gas Electrolyte Mixed Venous
BGEACD: Blood Gas Electrolyte Arterial Cord
BGEVCD: Blood Gas Electrolyte Venous Cord
BGECAP: Blood Gas Electrolyte Capillary

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5. PROCEDURE

NOTE: Prior to finalizing the result correction in the LIS, call the primary care giver and report the corrected results to the nurse, physician assistant, or physician caring for the patient. Ensure that the name and time of notification are obtained for entry into the LIS.

A. LIS Result Correction Process

1. Log onto LIS
2. At the Function prompt,,<ENTER> MEM
3. Press Enter until Test -1 prompt is displayed
4. At the Test-1 prompt, <ENTER> the test code corresponding the result needing correction (See Section 4, Definitions)
5. <ENTER> A to accept
6. At the ACC No. prompt, <ENTER> the accession # of the test to be corrected using the format M – T123456
7. With cursor flashing underneath the incorrect result, <ENTER> the correct numerical result followed by a hyphen and semicolon (- ;), and <ENTER> the notification information obtained during the phone call to the primary care giver.
8. If the corrected result to be entered is not numerical, <ENTER> the text code followed by the hyphen and semicolon (- ;) as detailed in step 7.
 - a. The most commonly utilized text codes are
 - i. WPT –wrong patient tested (Use when sample mis-labeling has occurred)
 - ii. WSDR – wrong sample type (Use when the incorrect test code is ordered, i.e. arterial blood ordered instead of venous)
9. At the A/M/D/P/R prompt, <ENTER> A to accept the change.

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EXAMPLE:

An incorrect lactic acid result of 100 was reported, but the correct result is 6.5. The corrected results were called to the patient's nurse.

- Original result PLACT 100
- Corrected result<ENTER> 6.5-; CALLED TO SUE SMITH, RN AT 1830.

The LIS will append the following messages to the result:

PLACT : 6.5

CALLED TO SUE SMITH, RN AT 1830.

CORRECTED ON 01/06/02 AT 0930: PREVIOUSLY REPORTED AS 100

10. For all result corrections, the LIS will generate an automatic message on the final report detailing the previously reported results in conjunction with the corrected results.

B. LIS Patient Test Crediting

NOTE: To ensure patient accounts do not get charged for orders that do not have valid results (i.e. wrong patient tested, wrong sample type), the orders must be credited.

1. At the Function prompt, <ENTER> CRW
2. At the ACC No. prompt, <ENTER> the accession # of the test to be corrected using the format T123456
3. At the Test-1 prompt, <ENTER> the test code corresponding to the result needing correction (See Section 4 Definitions)
4. <ENTER> A to accept
5. Complete a Point of Care Testing Incident Form.

C. Corrected Reports Crystal Report

1. On a daily basis the POCT Supervisor will monitor the Corrected Report crystal report to ensure that the following was performed when a corrected result was issued:
 - a. Documentation of notification to the primary care giver of the corrected result.
 - b. Initiation of a Performance Improvement Case Review (PI) form including required documentation.

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2. Generating the Corrected Reports crystal report

- a) From the Adventist Intranet Home page, <SELECT> Clinical
- b) <SELECT> Laboratory Crystal Report
- c) At the System prompt, leave blank
- d) At the User name prompt, <ENTER> Quest QA
- e) At the password prompt, <ENTER> QuestQA
- f) At the Authentication prompt, <SELECT> Enterprise
- g) <SELECT> Log On
- h) From the Home folder tree, <SELECT> Public Folders,
- i) <SELECT> Quest QA Reports
- j) <SELECT> All Sites
- k) <SELECT> WAH SGAH Daily Corrected Report with Bbank-051211
- l) <SELECT> history
- m) <SELECT> the report to be viewed by date ensuring the report has a status of success.

D. Hospital Incident Reports

- 1. After review of the submitted PI form, Laboratory Quality Assurance will initiate a hospital incident report if necessary.

6. RELATED DOCUMENTS

SOP SGAH.QA22.

7. REFERENCES

SunQuest Systems Functions Training Manual, 7/3/2001

8. REVISION HISTORY

| Version | Date | Reason for Revision | Revised By | Approved By |
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9. ADDENDA AND ATTACHMENT

None