

TRAINING UPDATE

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

Date Distributed: 9/45/2013
Due Date: 10/19/2013
Implementation: n/a

DESCRIPTION OF PROCEDURE

Name of procedure:
Corrected Results POCT-42Ø
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. Note that you must complete a lab QV form if you correct a POCT result.</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 – 42.1
 Effective: 7/15/13
 Reviewed:
 Revised: 9/20/2013

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		
Robert SanLuis Laboratory Services Director		
Judy Codling, POCT Supervisor		
Anne Schoonover POCT Supervisor		

Review:24 month (or new) management review and approval: Signature acknowledges SOP version remains in effect with no revisions.		
Print Name	Signature	Date

**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

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 Blood Gas Laboratory Incident Report or a Laboratory Quality Variance Form must be initiated and submitted to the POCT Supervisor or designee.

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 prom pt, <ENTER> the test code corresponding the result needing correction (See Section 4, Definitions)
5. <ENTER> A to accept
6. At the ACC No. prom pt, <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

C. Corrected Reports Crystal Report

1. On a daily basis the P OCT 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 Blood Gas Laboratory Incident Report or a Laboratory Quality Variance form (with a copy of the revised patient report).
2. Generating the Corrected Reports crystal report
 - a) From the Adventist Intranet Home page, <SELECT> Clinical
 - b) <SELECT> Laboratory Crystal Report

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- 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

Quality Variance Form (QA22), Laboratory SOP

7. REFERENCES

SunQuest Systems Functions Training Manual, 7/3/2001

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
POCT-42.1	9/20/13	Section 5: Add note to complete appropriate reporting form Section 6: Add SOP title Section 9: Add Blood Gas Incident Report form	Anne Schoonover	See cover sheet

9. ADDENDA AND ATTACHMENT

Attachment A – Blood Gas Laboratory Incident Report

Blood Gas Laboratory Incident Report

Occurrence Date: ___/___/_____

Employee name: _____

Patient name (affix label if available):	
Patient name: _____ <small>(L Name)</small>	_____ <small>(F Name)</small>
MR# _____	Patient location: _____

Description of Incident

HERCULES # _____

<input type="checkbox"/> critical value not called	<input type="checkbox"/> key stroke error- change to wrong data entered	<input type="checkbox"/> TAT complaint
<input type="checkbox"/> critical value message not attached (CTRB)	<input type="checkbox"/> wrong sample entered on istat	<input type="checkbox"/> Data entry complaint
<input type="checkbox"/> results entered on wrong patient by respiratory	<input type="checkbox"/> sample quality issues (clots, heparin, air)	<input type="checkbox"/> Employee inquiry
<input type="checkbox"/> results entered on wrong patient by operating room	<input type="checkbox"/> cartridge problem (star outs)	<input type="checkbox"/> Other (specify below)

Comments: (see back for more free text space)

Attach iSTAT Tape HERE	Attach iSTAT Tape HERE	Attach iSTAT Tape HERE	Attach iSTAT Tape HERE	Attach iSTAT Tape HERE	Attach iSTAT Tape HERE
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Attach all supporting documentation (iSTAT printout, corrected report)

For ABG LAB TECHNICAL SUPERVISOR ONLY

Date received:		Date MEM-LIS:		Date Verified in HIS:		RALS Entry Yes No
Equipment Corrective Action:						
Technical Supervisor Signature:					Date:	
Comments:						