

TRAINING UPDATE

Lab Location: GEC, SGAH & WAH
Department: Core Group Leads

Date Distributed: 1/22/2014
Due Date: 2/24/2014
Implementation: 2/24/2014

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
Failed Delta Value Report SGAH / WAH.LIS37, GEC.LIS33 v1
Description of change(s):
Sections 1, 3 & 5: update Group Lead title Section 5: Item B – add hosp ID ARH; Item C – add note for ARH; update PI to QV report This revised SOP will be implemented on February 24, 2014

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

Approved draft for training all sites (version 1)

Non-Technical SOP

Title	Failed Delta Value Report	
Prepared by	Leslie Barrett	Date: 8/20/2009
Owner	Marie Sabonis	Date: 8/20/2009

Laboratory Approval		
Print Name and Title	Signature	Date
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

Review:		
Print Name	Signature	Date

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1. PURPOSE

To describe the printing and review of the LIS Failed Delta Value report by the Core Lab Group Lead. The report is reviewed to confirm that all appropriate action is taken.

2. SCOPE

This procedure applies to all failed delta values.

3. RESPONSIBILITY

The Group Lead reviews report daily and checks that delta failures are investigated and documented by the technologist. The reviewer checks the report for trends such as an unusual number of delta failures for an analyte that may not be seen by a single technologist and takes appropriate corrective action as needed.

4. DEFINITIONS

Delta check: a comparison of consecutive values for a given test in a patient's laboratory file used to detect abrupt changes, usually generated as a part of a computer-based quality control program.

5. PROCEDURE

A. General information

1. Delta check parameters are set up in the test files in the Laboratory Information System (LIS). During delta checking, the LIS compares the current result to the previous result. When the difference exceeds predetermined limits (%D and abs D), the LIS alerts the technologist to the delta check failure.
2. Laboratory technical staff are responsible for verifying the validity of any result that fails delta checking. This validity check is documented as a comment in the LIS.
3. The LIS Failed Delta Value report is printed daily by the Core Lab Group Lead to verify that all delta failures have appropriate documentation recorded.

B. Printing the report

1. Function: **RP**

2. Printer: enter appropriate LIS printer number
3. ? prompt: select **6** (Quality Assurance Report)
4. Date: **T-1**
5. Hospital ID: **SGAH** or **WAH** as appropriate
6. Hospital ID: **ARH** both sites must include this
7. Hospital ID: <cr>
8. Accept / Modify / Reject: **A**
9. ? prompt: select **2** (Delta Failures)
10. ? prompt: select **4** (by Lab Location)
11. Tech: <cr>
12. Lab Loc. <cr>
13. Test: <cr>
14. Worksheet: <cr>
15. Techs requested **ALL**
 Accept / Modify / Reject: **A**
16. Tests requested **ALL**
 Accept / Modify / Reject: **A**
17. Worksheets requested **ALL**
 Accept / Modify / Reject: **A**

18. Example of the report:

04/10/2006
 09:19

Adventist HealthCare, Inc.
 QUALITY ASSURANCE REPORT FOR 04/09/2006 (by lab location)
 Verify Range Failures
 FOR HOSPITAL WAH

NAME	DIAGNOSIS	HOSP NO.	LOC	DATE	TIME	COLLECTION		TEST	RESULT	NML	VER	DEL	TEC
						ACC #	TEST						
Chemistry: SHIFT 1													
LAB LOC: WS1 SPEC. PROCESSING 1													
HOOD,NANCY	; ALTERED MENTAL +	690754	4300	04/09	1207	X6121		GLUC	623	*	^		@
TCHOUATE,JACQUES	; PNEUMONIA 486, +	477466	4200	04/09	0550	X5129		K	6.7	*	^		COM1
BROOKS,HORACE	; CHEST PAIN CARDIAC	690680	5300	04/09	0730	X5160		TROPI	31.08	*	^		COM2
GENTILCORE,ANTHONY P	; ACUTE ISCHEMIC +	411375	5300	04/09	0800	X5486		TROPI	101.11	*	^	0.59	@
													COM3
													COM4
LAB LOC: R ROUTINE													
HOOD,NANCY	; ALTERED MENTAL +	690754	4300	04/09	1443	X6313		GLUCO	589	*	^		
Chemistry: SHIFT 2													
LAB LOC: WS1 SPEC. PROCESSING 1													
GENTILCORE,ANTHONY P	; ACUTE ISCHEMIC +	411375	5300	04/09	1600	X5487		TROPI	70.37	*	^		@
SOMMERS,ROBERT T	; CVA PNEUMONIA	586609	2500	04/09	1735	X6425		TROPI	0.94	*	^	0.20	
													COM5

COM1 CALLED TO NANCY. TEST REPEATED.
 COM2 CALLED TO PAT. TEST REPEATED.
 COM3 CALLED TO PODDAR.
 COM4 CALLED TO KAREN. TEST REPEATED.
 COM5 CLD TO SHADON AT 1915/2500

Form revised 3/31/00

C. Reviewing the report:

1. Review the results on the report to confirm that appropriate follow up was taken. This is noted by a comment or English text code following the result.
Note: On the Adventist Rehab Hospital (ARH) report, patient location ARHT denotes ARH at Takoma Park and ARHR denotes ARH at Rockville. Review results for the location appropriate to the laboratory site.
2. A **Quality Variance (QV) report** is generated for all results that do not have valid documentation.
4. Failed delta value reports are retained for two years, and may be sent to off-site storage.

6. RELATED DOCUMENTS

Delta Check, QA policy
Delta Value - LIS Investigation, LIS procedure

7. REFERENCES

None

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP LIS035.001		
000	1/3/14	Sections 1, 3 & 5: update Group Lead title Section 5: Item B – add hosp ID ARH; Item C – add note for ARH; update PI to QV report Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13.	L. Barrett	M. Sabonis

9. ADDENDA AND APPENDICES

None