

TRAINING UPDATE

Lab Location:	SGAH & WAH	Date Distributed:	1/30/2015
Department:	Client Service, Processing	Due Date:	3/2/2015
		Implementation:	3/3/2015

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
Callback SGAH.LIS50 / WAH.LIS51 v2
Description of change(s):
<p>Section 2: clarify scope</p> <p>Section 3: remove Client Service hours and process for technologist documentation, add service policy</p> <p>Section 4: add Critical Value</p> <p>Section 5: placed sub-sections in appropriate order, update screen shots and steps due to LIS upgrade</p> <p>Section 6: add policies and SOP</p> <p>This revised SOP will be implemented on March 3, 2015</p>

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

Approved draft for training (version 2)

Non-Technical SOP

Title	Callback	
Prepared by	Marie Sabonis	Date: 11/23/2009
Owner	Marie Sabonis	Date: 11/23/2009

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

The LIS callback function automates the process for calling results to clients, documenting calls and managing call data. All results that qualify to the callback list are called and/or faxed to the appropriate health care provider by laboratory personnel and properly documented in the LIS. All results called are to be confirmed by the caregiver by reading back patient name, test name, and results.

2. SCOPE

This procedure applies to the documentation of calls in the Callback function. It does not apply to calls that are documented by appending a comment to the result.

3. RESPONSIBILITY

A. **Client Services** personnel perform notification [during operating hours \(refer to Laboratory Service Expectations policy for hours\)](#) and are to report:

1. **All out-patient** callbacks or faxes
2. **All reference lab** critical or STAT
3. **All positive microbiology** results from the callback list
4. **Discharged patient critical** results - called to the patient's ordering physician.
5. The Client Services personnel are also to report any critical inpatient results that are not called or documented by the central laboratory personnel.

B. All personnel are required to have the medical provider receiving results, repeat back those results. The only acceptable way to communicate a critical result is verbally.

NOTE: A critical result can **NEVER** be left on an answering machine/voice mail (also applies to any patient information). A fax can **NOT** be the only contact for a critical result.

4. DEFINITIONS

Critical Value – potentially life threatening result for a specific laboratory test.

Medical Provider – ordering or attending physician, nurse

Timely Notification -

1. All inpatient critical (panic) results are to be called within 1 hour of the resulting time.
2. All outpatient critical results are to be called or faxed within 2 hours of the resulting time.

Result Routing -

1. All critical inpatient results are called to the nursing unit and reported to a nurse.
2. All critical ER patient results are called to the ED charge nurse or attending nurse.
3. All critical discharged patient results are called to the ordering physician.
4. All critical outpatient results are called to the ordering physician.

Call Sequence (Callback items should be called in this sequence) -

1. Critical Results
2. Positive Cultures
3. Stat orders
4. All others

Reference Lab Critical/STAT Values -

These must be called and documented in the LIS system using the Callback procedure.

1. Reference Lab results are **called to Specimen Processing and followed by fax**.
2. Once the fax is received, determine to whom the results should be reported.
3. Access Callback and add a call for the Accession Number – refer to section H under Procedure for details.
4. Fax and call the result. Both steps must be performed but the order may vary depending on the circumstances. In some cases, a call must be made first to obtain the fax number. In other situations, it may be preferred that the receiver have a hard copy in hand when the call is made.

5. PROCEDURE

A. Understanding and Navigating the Callback Screen

In the Sunquest Gateway window, on the All tab or the Lab tab, double-click Callback. The Callback view window opens and displays a list of callback records.

Phone	Contact	Patient Name	Acc	Order Codes	Comment	CS	RS	PR	CNS	Result Date/Time
P 301-605-74	ALY MD, SAMEH A	Nosier,Ekram	H15688	VANP		P	*C	5		11/13/2014,1311
P 301-605-74	ALY MD, SAMEH A	Nosier,Ekram	H15694	BMP		P	*C	2		11/13/2014,1242
3019776353	Adv.Home Health	Nosier,Ekram	H15688	VANP		P	*C	5		11/13/2014,1311
3019776353	Adv.Home Health	Nosier,Ekram	H15694	BMP		P	*C	2		11/13/2014,1242
P 301-990-63	BAWA MD, AVNEE	Bucu,Patrick M	H13425	XBORC,XBPPCR	CULT PENDING 11/13/2014	I	I	5		11/06/2014,1633
P 301-891-70	COCKRELL MD, J	Williams,Maurice	H15967	PGLUC		P	*C	1		11/13/2014,1334
	DEONARINE MD, J	Bryant,Ann E	M1939	XWDCG,ZZ00		P	C	1		11/10/2014,1509
P 301-926-36	DUBELMAN MD, A	Herrera,Miguel A	F71153	XBORC,XBPPCR		I	I	1		11/07/2014,1141
P 301-926-36	DUBELMAN MD, A	Brameyer,Mason Thoma	M1734	XBLC	RS PENDING 11/13/2014	I	I	2		11/10/2014,1326
301-891-6282	Joint Replacement	Polite,Sheila J	W28298	PTT1	FAX X5308 Open Mon 0700	P	*C	1		11/12/2014,2049
(301) 428-95	Lewis MD, Karen	Gant,Ava Jordyn	H15782	CBC,DBIL,RETA,		P	*I	2		11/13/2014,1247
A 877-844-62	MEKONNEN MD, D	Lewis,Carla R	H9096	XMDRO		I	*C	5		11/02/2014,0628
A	Mobile, Medical C	Sadrolashrafi,Sara	H15826	PT		P	P	5		
NONE	ROOM 2A24AA	Joffe,Marilyn R	W29486	QCDF		P	*C	5		11/13/2014,1130
6931	ROOM ED221	Varelagonzalez,Ashley G	W28865	RSV		P	*C	5		11/12/2014,1739
NONE	ROOM PD6A	Miller,Sophie June	H15656	RSV		P	*C	5		11/13/2014,1254
P 301-926-36	ROSEMAN MD, LA	Gamero,Oscar E	T47316	CBC,XF8AC,XF9		I	I	1		11/11/2014,1719
	SUBRAMANIAN MI	Changillespie,Aengus B	W28411	NBIL		P	C	2		11/12/2014,1336
UNKNOWN	TESTING	Test,Ami One	W28895	CBC		P	*C	1		11/12/2014,1702
P 301-424-16	TRAN MD, THU NC	Ellison,Ebone Lashelle	T47544	XBILET		P	P	5		
P 301-424-97	WANG MD, DONG	Mcbain,Jeannette Elise	H15786	PT		P	P	5		
	WIREDU AIDOO	Fuentesdeumanzor,Merced	H9465	XBLC,XIDS,XID:		I	*C	5		10/31/2014,0439
	WIREDU AIDOO	Blackmun,Moses	S13288	XBLC,XIDS,XID:		I	*C	2		11/10/2014,1438

The following information is available for each item in the Callback view window:

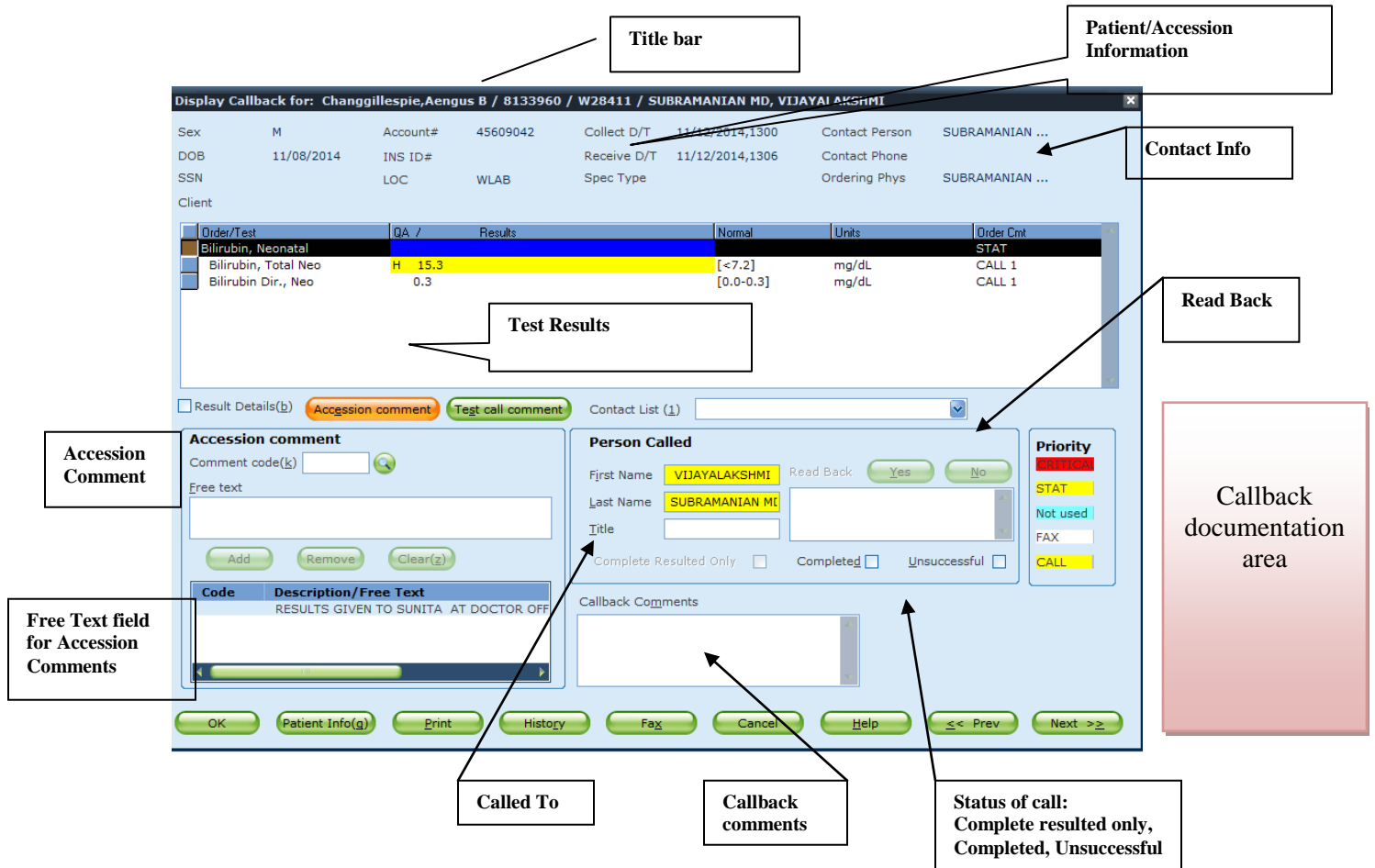
- PR** - Callback Priority
 System-defined priority code between 1 and 5, where the highest call priority is 1 and the lowest is 5. This is also displayed with color coding.
- CS** - Call Status
 - C** - Complete. All tests on the call record have been completed successfully.
 - I** - Incomplete. Some tests on the call record have been called successfully.
 - P** - Pending. No successful calls have been made or new data is available that needs to be called.
 - R** - Review. Supervisor must review.
 - X** - Remove. Flagged for removal.
- RS** - Result Status
 [Note, an asterisk before the result status indicates that newly entered results, modified results, or credited tests have not been viewed]
 - C** - Complete. All tests have been resulted or credited in the battery or order.
 - I** - Incomplete. Some tests have been resulted or credited in the battery or order.

- c. P - Pending. Tagged tests have not been resulted or credited in the battery or order.

B. Processing a Call Request in Callback

Double click on a call from the list in Callback

This is the Anatomy of the Display window for Callback



1. **The Title Bar** - the title bar across the top of the window. This gives you quick access to vital information. It will contain the Patient's Name, Medical Record Number, Accession Number, and Doctor.
2. **The Patient / Accession Information** - The top third of the screen. It provides patient information on the left (gender, DOB, location, SSN, account number). The right hand side provides accession information (Collection and received date and time, ordering physician, specimen type)
3. **Test Results** - Test, Results (these will flag if high low or critical), Normal Range, and Units.

4. **Callback documentation** - This area is for creating a record of calls. Fields in this area that are mandatory are highlighted in yellow.
 - a. **Comment fields:**
 - 1) **Accession comments** - These comments are for documenting successful calls and will appear on some types of reports attached to the accession number header.
 - 2) **Callback Comments** - These comments do not print on reports and cannot be viewed outside of Callback. This is the area to document failed calls.
 - b. **Read Back** - A mandatory field that requires you to click on Yes or No before you can save your Call.
If you check 'No' a comment field becomes mandatory to document why there was no readback and which member of management it was reported to.

Note: This is not the field for comments on an unsuccessful call that is still pending. Clicking 'No' and saving will complete the callback with NO notification.
 - c. **Called To** - A set of three fields. If a contact person is entered at the time of order, their name will default here. First and Last Name are mandatory, Title is optional.
 - d. **Contact Info** - Information on who to call with results
 - e. **Complete / Unsuccessful** - You must choose the status of the Callback before you can save. Options are:
 - 1) **Complete** - for results that were successfully called and documented. Selecting this option will finalize the Callback.
 - 2) **Complete Resulted Only** - for the completed portion of a preliminary report. This option will complete the call back for the tests that currently have results, but will leave the Callback open for the pending tests.
Example: a positive culture that has a pending susceptibility.
 - 3) **Unsuccessful** - For results that have not yet been called and read back.
Example: if you are unable to reach the RN or waiting for a Doctor to return a page.

C. Documentation of a Call:

Call the Results, the contact phone number is in the upper right corner of the screen. The person receiving the call **MUST** read back the patient name, test name, and result **AND** give their full name.

1. **If this was a successful call that is now complete:**
 - a. In the "Comment code" box type **CBACK**<enter>. This will translate below under Description/Free Text as "Called to and read back by:"

- b. In the “Free text” box type in the contact information Use the exact format:
First Name Last Name and Title, date, time, and your tech code. Type the name of the test that was called in the report comment field.
- c. Click “**Add**” to move the free text down in to the Description/Free Text box.
- d. The contact name associated with the call will default in the “Person Called” area. If this is not the person you notified, enter the correct name and title of the medical provider. This field is mandatory.
- e. Check the “**Completed**” box.
- f. At the Read Back: prompt Click the “**YES**” button.
- g. Click **OK** to save comments and return to the Callback list.

2. **If the call was unsuccessful:**

Example: Waiting for physician to call back after being paged.

- a. Check the “**Unsuccessful**” box near the Person Called fields.
- b. In the “Callback Comments” field, document your attempt to call with the time and date, your tech code, and any appropriate comments. This will create a time stamp as the first attempt for the call.
- c. Callback comments are internal only and only appear in the Callback function. This comment shows up on the Callback list, so the next person processing Callback can also see the comment.
- d. Do NOT put unsuccessful call comments in the Accession comment fields. These will print on the patient report.

3. **If the call was successful but this is a preliminary or partial result, with more to follow:**

Example: Culture results with a sensitivity to follow.

- a. In the “Comment code” box type **CBACK**<enter>. This will translate below under Description/Free Text as “Called to and read back by:”
- b. In the “Free text” box type in the contact information Use the exact format:
First Name Last Name and Title, date, time, and your tech code. Key in the name of the test that was called in the report comment field.
- c. Click “**Add**” to move the free text down in to the Description/Free Text box.
- d. The contact name associated with the call will default in the “Person Called” area. If this is not the person you notified, enter the correct name and title of the medical provider. This field is mandatory.
- e. Check the “**Complete Resulted Only**” box.
- f. At the Read Back: prompt Click the “**YES**” button
- g. The call comments will attach to the completed results, but the call status will remain pending until the rest of the test results are resulted and called.

Note: You must check all Chantilly reports for pending status. If the result is still PENDING for more results use the “Complete Resulted Only”.

Note: If multiple calls were ordered, the contact list drop down menu will let you select the calls and complete them one after the other.

D. Faxing Results from Callback


1. Select a Call from the “Callback List” screen and double click. The “Display Callback” screen for that call opens.
2. Select “**Fax**” on the bottom of the screen. The “Fax Interim Report” screen opens.
3. From the drop down menu select the correct FAX device
(This is the location from which you are faxing the results from)
WAH: 1000 or 2000
SGAH: 3000 or 4000
4. Click on **OK** in the “Fax Interim Report” window. The “Enter a Fax Number” window opens.
5. The pre-defined fax number for this contact populates the fax number field.
6. Highlight the number, right click the mouse and select **Copy**.
7. Click on the Comment Code field on the left side of the screen and type “**FRT**” and then <enter>. The comment will translate to “Faxed results to”
8. Press <tab> to move down to the free text field and right click and paste the fax number.
9. If the result does NOT need to be called then check the “Completed ” box.
 - a. At the Read Back: prompt Click the “NO” button.
 - b. The field below read back will turn yellow making an explanation mandatory.
 - c. Type “Faxed”
10. Click OK to save comments and return to the Callback list.

E. Creating a hard copy of the call (printing an interim report)

1. Click on the accession number.
2. Select “**print**” on the bottom of the screen.
3. Enter a printer number in the “printer device” field.
4. Click “**OK**”.

F. Removing calls from Callback


**Calls should ONLY be removed when they are completed

1. From the Callback list highlight the test to be removed.
2. Click on the trash can icon on the top of the screen. 
3. At the next screen, check the “**remove**” selection and click on **OK**.
4. Call status will become X to show it is flagged for removal, but it will not leave the list until you refresh or exit.

G. Exiting Call back

Select File, Exit. DO NOT save any changes.

H. Adding an Accession Number to Callback

1. Click on the “**add Callback**” button (button with a “+ sign and a picture of a phone”). It is located on the tool bar at the top of the callback screen. 

2. Two boxes pop up. In the box on the left, arrow down and choose “**accession No**”. Enter the accession number in the box on the right, and click the “**OK**” button.
3. A box will pop up that says ‘accession list.’ This list has all of the patient’s accession numbers. Arrow down and find the accession number to be added. Double click on that accession number.
4. In the top right hand corner, arrow down and choose the correct contact person to add.
5. In the bottom left corner you will find a box to choose the priority level of the accession number.
6. Then click the “**OK**” box located along the left side of the bottom of the Callback screen.
7. You will return to the accession list.
8. If you need to add another accession number for the same patient, simply choose the next accession number and follow the above instructions.
9. If you do not need to add another accession number, click the “**Close**” button and you will return to the callback list.

6. RELATED DOCUMENTS

Laboratory Service Expectations, Laboratory policy
 Critical Values, Laboratory policy
 Critical Values-Accepting Results in LIS, LIS procedure

7. REFERENCES

N/A

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes CS011.002		
000	12/13/10	Section 3: update times	M Sabonis	M Sabonis
001	1/22/15	Section 2: clarify scope Section 3: remove Client Service hours and process for technologist documentation, add service policy Section 4: add Critical Value Section 5: placed sub-sections in appropriate order, update screen shots and steps due to LIS upgrade Section 6: add policies and SOP Footer: version # leading zero’s dropped due to new EDCS in use as of 10/7/13	M Sabonis L Barrett	M Sabonis

9. ADDENDA AND APPENDICES

None