TRAINING UPDATE

Lab Location:	GEC, SGMC & WAH	**Date Distributed:**	3/13/2016
Department:	Mgmt, IT & QA	**Due Date:**	3/31/2016
		Implementation:	**3/31/2016**

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Verification of Patient Results SGAH/WAH.IT24 v2

Medical Director Patient Report Review AG.F300.1

Description of change(s):

Current SOP titled "Review of Cumulative Reports" (QA45) will be retired.
Process for medical director review of patient reports will include printed LIS copies and HIS screen shots. It will be performed in tandem with the process to review result transmission from origin to LIS / HIS posting as described in the SOP titled "Verification of Patient Results."

Form F300 has been re-titled (replaced 'Cumulative' with 'Patient')

This revised SOP & form will be implemented on March 31, 2016

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	**Verification of Patient Results**	
Prepared by	Marie Sabonis	Date: 12/15/2008
Owner	Marie Sabonis	Date: 12/15/2008

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

Review:		
Print Name	**Signature**	**Date**

Form revised 3/31/00

TABLE OF CONTENTS

1. PURPOSE

To describe the system in place to verify that patient results are accurately transmitted from the point of data entry (interfaced and manual input) to all types of patient reports.

2. SCOPE

LIS staff verifies that results from the starting point, i.e., the instrument, post correctly in the LIS and then finally posts correctly in HIS. The documentation is provided to the Medical Directory for review.

3. RESPONSIBILITY

LIS staff and Medical Director perform this procedure.

4. DEFINITIONS

N/A

5. PROCEDURE

a. LIS staff will obtain result examples for Hematology, Coagulation, Manual Entry, Chemistry, Urinalysis, Reference lab (Micro and Non-Micro), Blood Bank, Micro In house and Point of Care. The following is obtained, if applicable
   - Instrument printouts or manual log sheets
   - Instrument LIS trace file, if applicable
   - LIS Interim and Cumulative reports
   - HIS Print screen
   - Copy of Reference Lab report (Micro and Non-Micro)

b. LIS staff reviews from point of entry to last point of output (HIS). Review is documented on the chart titled HIS and LIS Mini Validation (Addenda A).

c. All documents, HIS and LIS Mini Validation chart and Medical Director Patient Report Review (see Related Documents) are submitted for review and sign off by the Medical Director.

d. This process will be completed biennially, and in the following cases:

NEW INSTRUMENTS
New instruments are tested in TEST AREA before bringing them online in Production. In the test area, all test codes and calculations (if defined) are exercised, the instrument printout verified for expected results and then accepted in the LIS. Using Inquiry in the LIS, the results are checked against the printout from the instrument for accuracy; this must include High (H), Low (L) and C (Critical) flags. A patient sample should also be run on an instrument and checked for accuracy on the HIS side.

PATCH, SOFTWARE VERSION UPDATES
All online instruments are tested in the TEST area for accuracy by comparing data sent by instrument to LIS and HIS TEST.
Instrument printout
Inquiry
HIS Result Display

IMPLEMENTATION OF AN INTERFACE

e. Documentation is kept in LIS offices at respective sites.

6. RELATED DOCUMENTS
Medical Director Patient Report Review (AG.F300)

7. REFERENCES
College of American Pathologists, Laboratory Accreditation Manual, Laboratory General Checklist, current version

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP IT025.001		
000	12/30/13	Section 2 & 5: Replace SMS with HIS Section 9: Revise title and checklist by removing specific systems (SMS & Sunquest) Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13.	M Sabonis	M Sabonis

Form revised 3/31/00

1	2/22/16	Section 2: add Medical Director review Section 5: add documents for review, Medical Director sign-off and interface implementation Section 6: add form Section 7: remove General CAP Checklist number Section 9: update HIS and LIS Mini Validation checklist to include Medical Director sign-off.	M Sabonis	M Sabonis

9. ADDENDA AND APPENDICES

A. HIS and LIS Mini Validation checklist (see Attachments on the document Profile)

Site:			**Date:**							
HIS and LIS Mini Validation										
	HEM	**COAG**	**Manual Entry**	**CHEM**	**UA**	**Ref Lab-Core lab**	**Ref lab-micro**	**BB**	**Micro-In house**	**Comment**
Instrument Interface										
Accession Number /Test										
Instrument/ trace file										
Interim Report										
Cumulative Reprot										
Inquiry (Print Screen)										
HIS (Print Screen)										
legend:	✓	**Denotes Ok**								
	P	**Problem: troubleshoot and attach documentation**								
Note: attach all documentation										
Reviewed by:					**Date:**					
Medical Director:					**Date:**					

Germantown Emergency Center
Shady Grove Medical Center
Washington Adventist Hospital

MEDICAL DIRECTOR PATIENT REPORT REVIEW

Year:

_____ _____

Medical Director **Date**

No Issues noted: _____

Issues Noted:	Action taken to resolve:	Date Resolved:	By:
1.			
2.			
3.			
4.			
5.			
6.			
7.			