


Annual Proficiency Testing (PT) Training 2017

Read and review the PowerPoint presentation that follows.

Several of the slides have additional information or explanation (intended to be read during an actual presentation). This is indicated by a symbol 

Use your mouse to hover over the symbol at the top left corner to see the explanation for any particular slide.

After reviewing the material, take the quiz that follows. You **must score 100 to pass** the quiz. If your score is less than 100, see your supervisor and follow the normal process to request a reset.

Note: you can refer to the presentation when taking the quiz.



Proficiency Testing in our QHLs

Guidelines for Communication and Handling of Proficiency Material

Quest Hospital Laboratories

Annual Training

Facilitated by: Quest Medical Quality
October 19, 2017



Quest
Diagnostics™



Proficiency Testing Training

Why does Quest Require PT Training?

- Laboratories continue to fail to comply with the Federal Government's regulations as cited in CLIA 493.801

Why do failures to comply continue?

- New employees are not always exposed to the CLIA regulations or similar lab accreditation standards.
- Some labs fail to include non-testing personnel in its training.
- Past local practices may not have been identified as non-compliant.
- In times of high stress, non-compliant actions may not be realized.



Annual Training

Why do we have to be trained annually?

- Quest Diagnostics regards this annual reminder as an essential aspect of employee training.

If it is important to Quest, it will be important to you.

- Quest Diagnostics includes hundreds of laboratories and we continue to commit:
 - Accidental referrals of samples to other laboratories
 - Inappropriate discussions/email about PT during active test period
 - The sending of slides / instrument print outs / submission forms outside of the performing laboratory for review
 - Improper testing of proficiency testing samples



Proficiency Testing Handling

What are the requirements?

DO NOT:

- Accept or Test PT material FROM another laboratory
- Refer any portion of a PT sample TO another laboratory
- Discuss/email about PT results during active testing

DO to the extent possible:

- Test PT samples the same as patient samples UNLESS a patient sample is referred



Who Needs this Training?

Applies to all personnel involved in handling any aspect of Proficiency Testing including employees that:

- Pick-up or Transport samples (Quest Diagnostics couriers - training limited to appropriate scenarios)
- Receive or log-in samples
- Testing samples (including loading of samples onto instruments)
- Report results of proficiency testing samples
- Refer patient samples for testing
- Communicate with clients

DO NOT ACCEPT or TEST PT
Materials from Another
Laboratory



DO NOT ACCEPT or TEST PT Materials from Another Laboratory

PT samples should be suspected if:

- “AAB”, “AAFP”, “ACCU”, “ACCUTEST”, “ACP”, “API”, “ASCP”, “ASIM”, “CAP”, “CTS”, “EXC”, “EXCEL”, “MLE”, “NY”, “PROF”, “PROFICIENCY”, “SURVEY”, “PENN”, or “WSLH” is included in the patient identification.
- The sample or requisition has any of these words AND a 2 digit number (e.g., CAP, K-O, SURVEY 08, PROFICIENCY SAMPLE- 09 or PENN-03).
- The words “Proficiency” or “CAP” or “Survey” appear on the label or requisition, or identification is similar to that used for PT.
- The specimen appears to be a commercially prepared product or has the physical characteristics compatible with the consistency of an active PT survey sample.
- You are in the process of participating in a PT survey with a similar name or sample type.

If a requisition and / or sample has any of the above terms or abbreviations



Contact your supervisor!

Quest Suspect PT Poster

Don't have one? We can fix that!

ATTENTION!
SUSPECT PROFICIENCY SAMPLES

IF THE FOLLOWING ACRONYMS APPEAR ANYWHERE
ON THE PATIENT RECORD OR IF THE PATIENT IDENTIFICATION
IS CODED AND REFLECTS ANY OF THE ACRONYMS
BELOW WITH A TWO DIGIT NUMBER
(e.g., CAP-04, K-01, NYS-02, Survey-03, Penn-05, ...)

**AAB, AAFP, ACCU, ACCUTEST, ACP,
API, ASCP, ASIM, CAP, CTS, EXC,
EXCEL, MLE, NYS, PROFICIENCY,
PROF, PENN, SURVEY, WSLH**

DO NOT:

- ACCESSION THE ORDER
- TEST THE SAMPLE
- REFER THE SAMPLE
- ENGAGE IN EXTERNAL COMMUNICATION ABOUT THE SAMPLE

How do these samples come into our laboratories?

- Directly from clients (via mail, courier pick up, FedEx)
- From other Quest Diagnostics facilities
- Remote Accessioning (e.g., In Office Phlebotomy sites, remote accessioning centers)

How do we stop these samples from entering the normal workflow?

- Couriers can stop samples by:
 - Identifying bags / paperwork / samples that may be suspect PT from a client or another laboratory.
 - If there are samples in non-Quest bag; ask the client if the samples are meant for pick-up.
 - If there are samples in a Quest bag and you can see any of the terms on either the samples or the paperwork; ask the client if the samples are intended for pick-up.

Examples of suspect PT materials



How do we stop these samples from entering the normal workflow?

Specimen Processing can stop samples by:

- Identifying test orders that may be suspect PT from another laboratory

Testing Personnel can stop samples by:

- Identifying suspect PT from another laboratory by name, sample type or results

What Would You Do?

Case Scenarios: PT Received from Another Laboratory

Scenario - Receiving Laboratory

- You are receiving specimens from another laboratory which has an instrument down.
- As you are loading the specimens onto your analyzer, you identify an accession or sample as suspect PT.

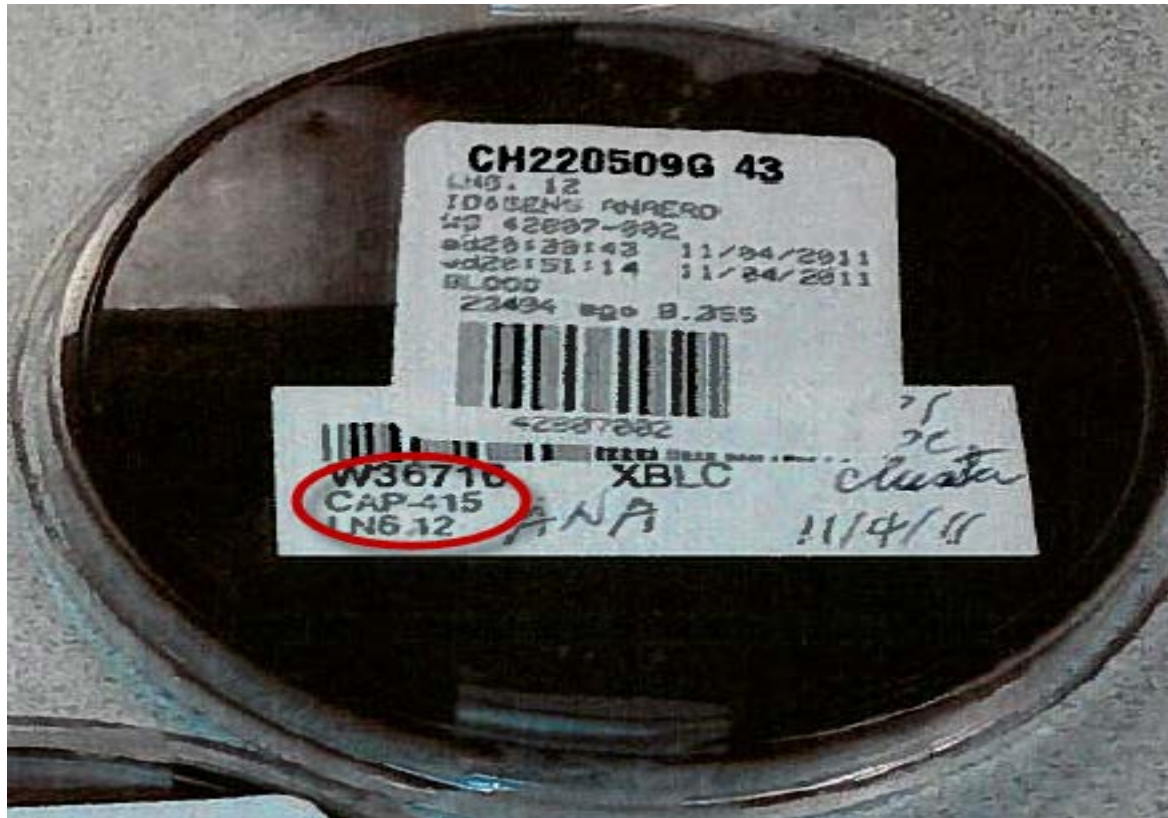


STOP!

- Pull and sequester the samples.
- Immediately notify your Supervisor!

Scenario

- You work in microbiology and your department accepts blood agar plates from other QHLs. When reviewing the bar code on a plate from the client you notice CAP-15.



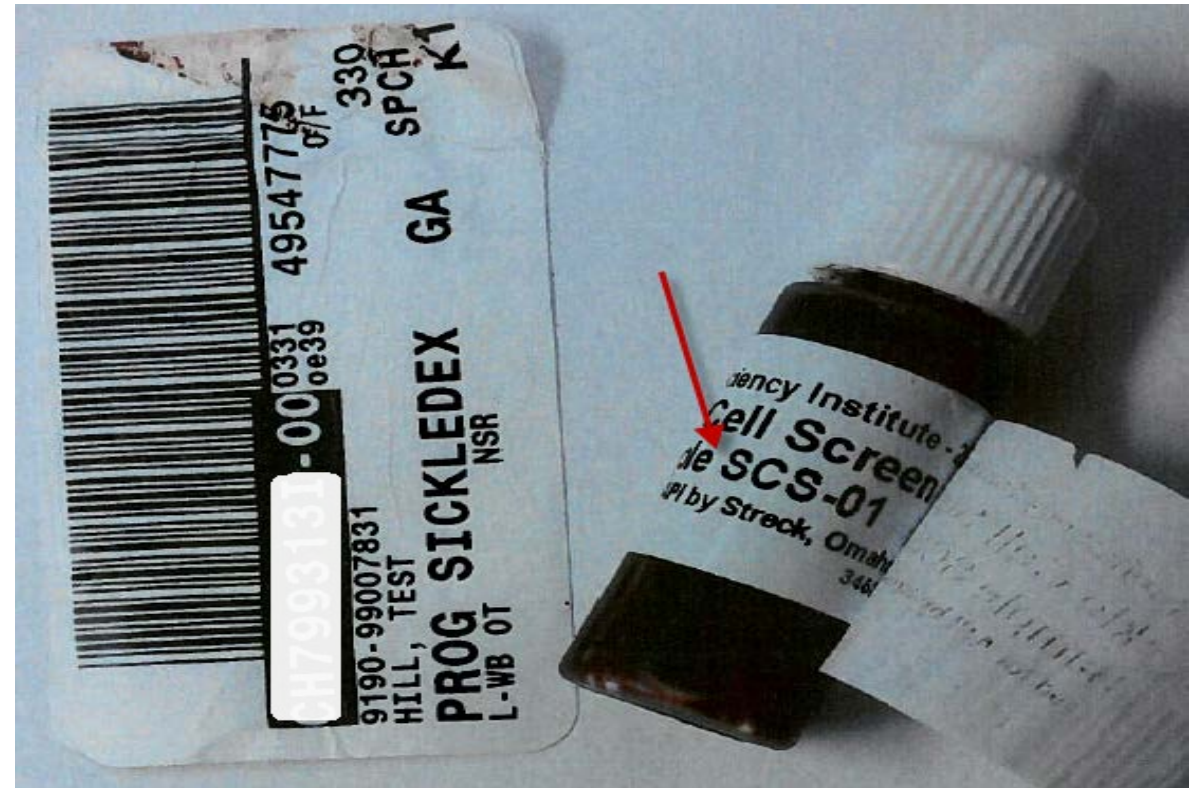
- Pull and sequester the samples.
- Immediately notify your Supervisor!

Investigation Found:

Suspicious Vial



Peeled Back Labels



Scenario

- When accessioning a sample you notice instead of a patient name, the sample is labeled as “Urinalysis UR12-2-1, For Proficiency Use Only”.



STOP!

- Pull and sequester the samples.
- Immediately notify your Supervisor!

Scenario

- When preparing a sample for testing you notice that the sample TYPE is unusual...it is not a tube...it is not a swab...it not a pour off tube....it is a small vial.



STOP!

- Pull and sequester the samples.
- Immediately notify your Supervisor!

Scenario

- When reading information on the requisition you notice the patient's name is PENN, JACK. What would you do?

PROCESS THE SAMPLE!

- While the sample has the word PENN on it, the name does not have a two digit number after it. A suspect PT sample would most likely be PENN-01 or PENN-03.

DO NOT REFER PT
Materials To Another
Laboratory

DO NOT SEND Any Portion of a PT Sample to Another Laboratory

- NEVER send any portion of a PT sample to another laboratory.
- ***If a test or instrument is down:***
 - DO NOT order the test in the LIS
 - If already ordered, CANCEL them.
 - NOTIFY your supervisor that testing on PT material will not be done.
- ***If a Standard Test Includes Reflex or Confirmatory Testing that is referred to another laboratory, the laboratory:***
 - **MUST NOT** order PT testing with that order code.
 - **SHOULD** create a unique order code for PT test so that PT samples will not accidentally be sent to another laboratory for reflex or confirmation.

Do you know what tests reflex in your lab?

How do we stop PT from being referred to another laboratory?

- ***Specimen Processing can stop samples by:***
 - Identifying and stopping test orders that may be suspect proficiency testing before they are accidentally sent to another laboratory.
- ***The Supervisor can stop samples by:***
 - Making sure PT order codes do NOT contain automatic reflex codes to another laboratory.
 - Ensuring PT samples are not ordered in the LIS when a test is temporarily down.

What Would You Do?

Case Scenarios: PT Accidentally Referred to Another Laboratory

Scenario

- Your lab routinely performs Urine Drug Screening however, confirmation is not performed in your lab.
- Positive patient results generate an automatic reflex for referral to another lab for the confirmatory testing.
- When reviewing a list of specimens packaged to be sent to another laboratory for confirmation you notice UDS-04 and UDS-05.
- What would you do?



- Pull and sequester the samples.
- Immediately notify your Supervisor!



Remember!

- Do not send ANY PT sample to another lab for testing!
- PT samples can ONLY be performed in the laboratory participating in the PT event. No part of any PT survey can be sent to another lab for testing.
- Only results of PT performed in the participating lab can ever be reported.

Your lab is being evaluated on the PT results performed only by your lab.

Scenario

- Your receive notification that you have a Coagulation survey.
- The survey samples have been ordered in the LIS, and you plan to run them with other patient samples after you complete the usual daily maintenance.
 - However, after maintenance is performed, you keep getting QC failures and cannot fix the problem. Service will have to be called and pending patient samples will need to be sent to your sister hospital/lab for testing.
 - A specimen processor offers to package up the specimens, call the other lab and arrange for a stat courier.
- What would you do?



- Pull and sequester the samples.
- Immediately notify your Supervisor!

Scenario

- You are performing tests for a blood culture survey.
- One of the incubating survey samples has turned positive so you gram stain it per your procedure. The sample is positive for Gram positive cocci.
- Positive blood culture bottles are supposed to be sent to the main microbiology lab for identification.
- The “Main” laboratory is in a different location and has a separate CLIA license.

What would you do?



- Pull and sequester the samples.
- Immediately notify your Supervisor!

DO NOT COMMUNICATE
PT Information With
Another Laboratory

DO NOT COMMUNICATE PT Results or Information on Active PT

- Inter- (outside of Quest Diagnostics) or intra- (within our network of labs) laboratory communication regarding PT materials or results is **STRICTLY** prohibited until the PT provider has formally evaluated the results.
- If another laboratory initiates communication regarding PT results before the survey has been formally evaluated, the receiving laboratory must not reply or discuss the results with the initiating laboratory.
 - The laboratory staff that received the communication must immediately notify their Supervisor.
 - The supervisor must notify Quest Corporate Medical Regulatory Affairs.
- If there is a concern about the assay, reagents or run containing a PT sample, contact your Supervisor for advice.
- **DO NOT** discuss via phone, email or in person with another laboratory.

DO NOT COMMUNICATE PT Results or Information on Active PT

- If you are employed at more than one laboratory you may not participate in the same active proficiency testing at both facilities.
 - Performing the same proficiency activity at multiple laboratory facilities is a violation of CLIA and accrediting institution requirements.
 - May result in the loss of the laboratory directors' own licensure, and the licensure of both laboratory facilities.
- The employee is required to work with their supervisors at both facilities to ensure that:
 - 1) Intra- or inter-laboratory communication does not occur;
 - 2) The employee is not actively participating in the same PT surveys at both facilities; and
 - 3) The employee is participating in PT at each facility as required without overlap.

What Would You Do?

Case Scenarios: Inappropriate PT Communication

What would you do?

- You are employed at both laboratory A and laboratory B. You have already performed the current / active PT at laboratory A and are aware that laboratory B is also participating in the current / active survey event. What would you do?



- Contact your Supervisor to discuss your concerns.

Scenario

- You call a client to give them a critical value on a result. When you tell the client the patient name and value, they say “oh..that’s okay...that’s just our PT samples that we sent to you.” What would you do?



- Contact your Supervisor to discuss your concerns.

What would you do?

- You are at your workstation and you overhear another employee discussing proficiency test results. You suspect the employee may be speaking with someone from another lab. What would you do?



- Contact your Supervisor to discuss your concerns.

DO TREAT PT In The
Same Manner as Patient
Samples

DO TEST PT Samples the Same as Patient Samples

- If PT samples cannot be tested with an actual patient run (e.g., rarely ordered tests, short stability PT materials), the reason for the special run containing only PT samples ***must be documented.***
- An instrument must not be specially calibrated immediately prior to running PT samples.
- Repeat testing can only be performed when required by the test SOP and must meet the same repeat requirements used for patient testing.
- Photomicrographs or other prepared reference materials must be given to a single technologist. ***Consensus identification by a group of technologists is not appropriate.*** (Note: Consultation regarding unusual findings may be done according to the existing written protocol used for actual patient specimens.)

What Would You Do?

Case Scenarios: Treat PT the Same as Patients


DO TEST PT Samples the Same as Patient Samples

Does your lab use PT photomicrographs for training, competency, and / or microscopic consistency?


Quest Diagnostics policy requires that labs wait until the PT results are formally evaluated before distributing the PT materials for any other alternate use.

EXCEPTIONS To Treating PT the Same as Patient Samples


Slides for Pathologist Review

- **For a patient:** When a slide requires pathologist review AND the pathologist reads the slide at a site outside of your laboratory, the slide is sent out for review as appropriate.
- **For a proficiency testing sample:**  The pathologist must review the slide within the four walls of your laboratory.

Reflex and Confirmatory Testing

- **For a patient:** When a test requires a reflex or confirmation to an outside laboratory, it is sent out for testing as appropriate.
- **For a proficiency testing sample:**  Do not refer any part of a proficiency sample, or data for review, to another laboratory even if you would normally do so for patients. This includes sending to another Quest Diagnostics laboratory.

What would you do?

- You laboratory performs Malarial evaluations. Presumptive positive smears are given to the pathologist (Laboratory Director or Clinical Consultant) for review. Your lab does not have a pathologist on site everyday. Usually the courier picks up differential slides for review and Malarial smears and delivers them to the designated pathologist at another laboratory. How would you treat the Malarial smear if it was a proficiency test?
-  **STOP!** It is prohibited to refer (or send) PT to another lab for review prior to formal evaluation by the PT provider.
- The smear may be evaluated by a pathologist per your procedure, as long as the evaluation occurs in your lab.

What would you do?

- You just received a new survey that includes CBC testing. You alternate instruments each day and today you are running patient s on Instrument A. You think Instrument B gives better results than Instrument A. Which instrument would you use for PT testing?
- **Instrument A**
- **Reminder:** PT samples must be examined, handled and tested along with the laboratory's regular workload, by the same testing personnel, using the laboratory's routine methods.

POCT Considerations

Only one survey may be ordered for each type of POCT performed.

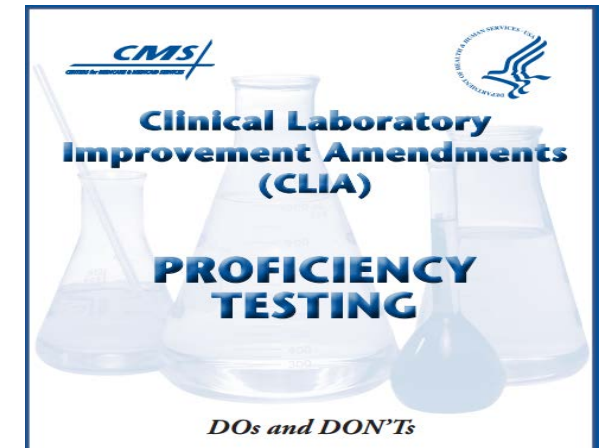
- Any testing of additional instruments may only be performed after the survey evaluation report has been generated from the survey provider.
- If additional proficiency testing is needed, extra surveys may be ordered from a different CLIA approved proficiency testing provider. (e.g., blood gases are tested on i-Stats at 5 different locations within the hospital. The laboratory may order only one CAP-AQ survey for the hospital.)

Proficiency testing must be performed by the personnel that routinely perform the testing (e.g., nursing, respiratory therapy).

Results must be faxed or sent electronically directly to CAP (or other survey provider) ***from the physical location (facility) that performs the testing.***

Proficiency Testing: Resources

- Local QA Department
- Medical Operations and Quality
- www.cms.hhs.gov/clia 493.801
- CLIA Brochure #8: <https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/downloads/cliabrochure8.pdf>
- <https://www.cms.gov/regulations-and-guidance/legislation/clia/cytologyproficiencytesting.html>



NEXT STEPS....

- Review the presentation.
- Take the Quiz and sign the Verification form.
- If you have any questions, please contact your Supervisor or your MQA Partner.