

TRAINING UPDATE

Lab Location: Department:

All sites Core Lab Date Distributed: 7/11/24 Due Date: 8/12/24 Implementation: Immediately

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

AHC.L20 On Call Administrators

Description of change(s):

Section 4: Added critical issue definition

Section 5.6: Changed ASAP to Immediately, added contact must Medical director and Nursing administer (and others as apprpriate)

Section 6: added reference to Temp and Humidity SOP (QA 12)

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

AHC.L20 On Call Administrators

Copy of version 6.0 (approved and current)

Last Approval or **Periodic Review Completed**

7/9/2024

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Next Periodic Review

Needed On or Before

7/9/2026

Printed By

Organization

Demetra Collier (110199)

Adventist HealthCare

Effective Date 7/9/2024

Approval and Periodic Review Signatures

Туре	Description	Date	Version	Performed By	Notes
Approval	Lab Director	7/9/2024	6.0	Nicolas Cacciabeve MD Nicolas Cacciabeve	
Approval	Laboratory System Operations Director	7/9/2024	6.0	Robert SanLuis Robert SanLuis	
Approval	Lab Director	10/23/2023	5.0	Nicolas Cacciabeve MOD Nicolas Cacciabeve	RM
Periodic review	Lab Service director	10/23/2023	4.0	Robert SanLuis Robert SanLuis	
Periodic review	Lab Service director	10/11/2021	4.0	Robert SanLuis Robert SanLuis	
Periodic review	QA review	10/6/2021	4.0	Leslie Barrett	
Approval	Lab Director	10/12/2019	4.0	Nicolas Cacciabeve	
Approval	Core lab approvals	10/2/2019	4.0	Robert SanLuis Robert SanLuis	
Approval	QA approval	9/25/2019	4.0	Leslie Barrett	
Periodic review Captured outside MediaLab	Designated Reviewer	12/14/2018	3.0	Robert SanLuis	Recorded on 12/21/2018 by Leslie Barrett (104977) when document added to MediaLab
Approval Captured outside MediaLab	Lab Director	12/14/2016	3.0	Nicolas Cacciabeve	Recorded on 12/21/2018 by Leslie Barrett (104977) when document added to MediaLab

Approvals and periodic reviews that occurred before this document was added to the MediaLab Document Control system may not be listed.

Version History

version status Type Date Added Date Effective Date Retifed	Version	Status	Type	Date Added	Date Effective	Date Retired
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6.0	Approved and Current	Major revision	7/9/2024	7/9/2024	Indefinite
5.0	Retired	Major revision	10/13/2023	10/23/2023	7/9/2024
4.0	Retired	Major revision	9/25/2019	10/12/2019	10/23/2023
3.0	Retired	First version in Document Control	12/21/2018	12/27/2016	10/12/2019



Title: On Call Administrators

Non-Technical SOP

Title	On Call Administrators	
Prepared by	Leslie Barrett	Date: 2/23/2009
Owner	Robert SanLuis	Date: 12/7/2016

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:		

TABLE OF CONTENTS

1.	PURPOSE	1
2.	SCOPE	1
	RESPONSIBILITY	
	DEFINITIONS	
5.	PROCEDURE	2
6.	RELATED DOCUMENTS	3
7.	REFERENCES	3
8.	REVISION HISTORY	4
9.	ADDENDA AND APPENDICES	4

1. PURPOSE

This procedure is intended to provide technical and administrative support to the Laboratory on weekends, holidays, and after hours.

2. SCOPE

Responsible staff is assigned to be on call in the event administrative, technical or staffing support is necessary.

3. RESPONSIBILITY

• The Laboratory Services Director is responsible for content and review of this procedure.

OP ID: AHC.L20 SOP version # 6 CONFIDENTIAL: Authorized for internal use only.

Page 1 of 4

Title: On Call Administrators

- Laboratory Directors, Managers, Supervisors, QA personnel and LIS staff is responsible for performing this procedure.
- All Laboratory staff must have knowledge of and comply with this procedure.

4. **DEFINITIONS**

Critical Issues – Any situation or circumstance that puts at immediate risk or prevents the
normal operation of the laboratory in its production of timely and accurate test results.
 Examples may include, but not be limited to, physical environment of the lab, fire,
flood, water damage, maintaining temperature/humidity ranges, equipment
operation or staffing issues.

5. PROCEDURE

A. General Information

- 1. A pathologist is available 24 hours a day, 7 days per week. After working hours or on holidays and weekends, one pathologist will be designated "on call". The on call pathologist is contacted in the event of a frozen section, a critical problem needing physician intervention or advice, or at the request of a staff physician.
- 2. The Laboratory Administrator on call staff includes Laboratory Directors, Managers, Supervisors and QA specialists.
- 3. Laboratory Information Service (LIS) staff is on call after working hours, weekends and on holidays to resolve computer related issues.
- 4. On call personnel are required to be available via telephone. Calls should be answered within 10 minutes; response should never exceed 30 minutes.
- 5. On call staff may be required to report to the laboratory.
- 6. **Critical issues significantly impacting patient care** should be communicated to the following Immediately (Site appropriate):
 - Medical Director(s) (**REQUIRED**)
 - Direct Report VP WOMC (as appropriate)
 - Direct Report VP SGMC (as appropriate)
 - Direct Report FWMC (as appropriate)
 - CMO SGMC (as appropriate)
 - CMO WOMC (as appropriate)
 - Nurse Administrator (Tech-In-Charge can be delegated as needed) (REQUIRED)

Note: Lab Admin On-Call staff must maintain contacts in their phones.

B. Process

1. The Pathology Assistant will provide an updated call schedule every Tuesday by 1500. This schedule is e-mailed to all staff taking administrative/LIS call and others, as required.

OP ID: AHC.L20 SOP version # 6 CONFIDENTIAL: Authorized for internal use only.

Page 2 of 4

Title: On Call Administrators

2. The schedule is posted by the Laboratory Supervisors in areas accessible to staff. In addition, the On-Call ADMIN contact will be entered on the Humanity message board. This duty may be delegated as appropriate.

3. On call is assigned for various areas of the laboratory:

Pathologist –

Evenings, nights and weekends, rotation begins on Wednesday

Physician Assistants -

Saturday and Sunday, all shifts

Lab Information Service (LIS) –

Monday through the following Sunday

Laboratory Administrator, (all sites) –

Monday (0700) through the following Monday (0700)

- 4. Staff calling out must contact the Admin On-Call at least 4 hours prior to start of their shift when possible. Staff called out must inform the Admin On-Call the reason for the callout. Staff must also call and inform the Tech-In-Charge onsite.
- 5. The Group Lead or Tech in Charge determines when the appropriate ADMIN or LIS On-Call personnel needs to be notified based on the current onsite situation(s).
- 6. A phone call must be placed to the On Call Administrators designated phone number first. If after two attempts with no answer or an answering machine picks up, the caller is to Text the Admin On -Call and inform the onsite Tech-In-Charge or onsite Supervisor of the situation.

Note: A response to a Text/Message is expected within 10 minutes and no later than 30 minutes (only in extenuating circumstances).

7. All supervisors are to have effective staffing in place to include designated On-Call Team Members assigned to provide critical coverage when needed. The purpose of the administrator on call is to manage physician or administrative concerns, not to make <u>major</u> staffing adjustments.

6. RELATED DOCUMENTS

Temperature and Humidity Quality Control (AHC.QA12)

7. REFERENCES

None

OP ID: AHC.L20 SOP version # 6

Title: On Call Administrators

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP L025.01	•	
000	3/23/2011	Update owner Sections 3,5: Update position titles	L. Barrett	L. Loffredo
001	8/27/2013	Section 5: Update posting process, add tech in charge, update alternate number process	L. Barrett	L. Loffredo
002	12/7/2016	Update owner, clarified title Header: Add other sites Footer: Version # leading zero's dropped due to new EDCS in use as of 10/7/13	L. Barrett	R. SanLuis
3	9/20/2019	Header: changed WAH to WOMC Section 5: added critical reporting contacts, updated schedule posting	L. Barrett	R. SanLuis
4	10/10/23	Header: Changed site to All Laboratories Section 5A.4: Removed reference to "pagers" Section 5A.6 Added nurse administrator Section 5B.2 added on call entered into Humanity Section 5B.3 added 0700 to 0700 Section 5B.4/5 added this new section and added reference to Admin and LIS on call Section 5B added that supervisors must have on call staff in place. Updated formatting to current practice.	R SanLuis D Collier	R SanLuis
5	7/8/24	Section 4: Added critical issue definition Section 5.6: changes ASAP to Immediately, added contact Medical Director and Nursing Adminiatrator required, and others as appropriate Section 6: added related document Footer: changed SOP prefix to AHC	R SanLuis D Collier	R SanLuis

9. ADDENDA AND APPENDICES

None

OP ID: AHC.L20 SOP version # 6