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Laboratory Administration STAT Test Requests - Processing and Reporting	Origination: 1/2013 Version: 0

Policy Statement	Saint Agnes Laboratory is committed to quality patient care and provides a high level of support to our physicians and authorized providers. As such, the Laboratory provides STAT testing for many of the tests performed by the Laboratory at Saint Agnes Hospital.
Purpose	To provide guidance on the appropriate handling of STAT test requests and result reporting.
Scope	This policy applies to all Laboratory sections offering STAT or RUSH testing. Scope of service excludes STAT requests from on-site ancillary patient care areas unless an explicit phone or fax number is entered on the requisition.
Responsibility	<p>Lab Outreach and outpatient phlebotomists are responsible for sending STAT specimens to the Laboratory by hand delivery or via the pneumatic tube system or by the courier for specimens collected at specimen collection stations on the campus of Saint Agnes Hospital.</p> <p>For off-site specimen collection stations, Lab Outreach Phlebotomists are to request a STAT courier pick-up and delivery to the Laboratory.</p> <p>Long-term care facilities and home care providers are responsible for delivery of STAT specimens to the Laboratory. Physician offices are to call the Lab Office for a STAT courier pick-up.</p> <p>The Lab Assistants, Phlebotomists, Lab Office and technical associates are responsible for following the procedure for entering STAT request call or Fax contact information into the computer system at the time of test order entry.</p> <p>The responsibility for STAT test result reporting is shared based on when the testing is complete and the type of testing performed. Responsibility is further delineated below.</p>

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A. Principle

A STAT order is defined as any requisition with the STAT box marked or a STAT request from a physician or facility by verbal order or Fax (refer to the LADM 6220 R Verbal Orders and Add-on Test Requests).

STAT test requests once received into the Laboratory are to be completed within a 1 hour time frame.

Refer to Appendix A for tests available within 1 hour of receipt and the hours of availability for certain tests.

All STAT requests for testing delivered as part of a routine courier pick-up will be handled as a STAT once the specimen reaches the Lab.

In situations where a physician requests a test as STAT that is not on the Appendix A list or the appropriate personnel are not on-site to perform the testing, the Charge Tech is to direct the physician to call the hospital operator for the pathologist on-call. The pathologist will discuss the request with the physician and if the pathologist approves the request will then call the Charge Tech with instructions. This may include calling in the appropriate personnel to perform the testing.

B. STAT Transport

Any physician order or requisition marked as STAT is to be transported to the Laboratory in an expedited manner.

1. Specimen collection stations on campus (PAT Suite, Community Care and Pine Heights) are to transport STAT requests by pneumatic tube system or hand carried; for Pine Heights the specimen can be sent by courier when the courier is on the way to the Laboratory.
2. Laboratory Outreach physician office clients can request a STAT courier pickup by calling the Lab Office or calling the courier service directly.
3. Nursing homes and home care clients are responsible for the transport of STAT specimens to the Laboratory.

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C. STAT Registration

STAT requests are to be given priority on delivery to the Laboratory.

D. Order Entry and Processing

1. At the Priority field enter **S** for STAT. Continue the process of entering all of the tests on the requisition.
2. At the top of the desktop screen select the **Doctors** button:
 - a. At the Call field enter **Y**.
 - b. In the Comment field enter a message that includes the call back phone number when included on the requisition (i.e. Call results to 410-555-5555).
 - c. When a Fax number is recorded on the requisition, enter the Fax number in the explicit Fax number field, if there is a request to Fax results to 2 different locations, enter the second Fax number in the Comment field, enter a message that includes the Fax number (i.e. Fax results to 410-444-4444).
 - d. When no written phone number or Fax number is provided; enter the Fax number listed in the client information at the top left of the requisition in the Comment field.
 - e. Finalize and accept the order.

Expedite processing and delivery of the specimen(s) to the testing workstation(s).

E. STAT Results Reporting

1. The Call Menu contains functions to track patient results that need to be called or Faxed based on the information entered at Order Entry.
 - a. The Call List is a report that lists all patients by accession number that require results to be called or Faxed. This list will contain STAT and Routine requests for all Lab sections. Only patients with verified test results will appear on the list.
 - b. The Create Call Batch function will pull all call and Fax requests into the function. CDS Desktop works within this function to Fax the reports.

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- c. After STAT requests have been called or Faxed, use the Call Batch function to document that the STAT was communicated to the requester.
 - d. For MEDLAB patients - all results are to be Faxed to MEDLAB, not the nursing home, critical alert values are to be called to MEDLAB.
2. The Lab Office will handle calling or Faxing (as requested) all STAT results during the time period 9 AM – 7 PM, Monday - Friday. The Call List is to be pulled at 9 AM, 11 AM, 1 PM, 3 PM, 5 PM and 7 PM.
 3. The Core Lab Charge Tech is responsible for monitoring the Call List Monday - Friday, 7 PM, 11 PM, 2 AM, 5 AM; and all day Saturday and Sunday and holidays.
 - a. For evening and night shifts, the Call List is to be pulled at 9 PM, 11 PM, 2 AM and 5 AM. The Charge Tech will review the Call List for any accession numbers ending with an **S**.
 - b. For dayshift - weekends and holidays, the Call List is to be pulled by the Core Lab Charge Tech at 9 AM, 11 AM, 1 PM, 3 PM, 5 PM and 7 PM.
 - c. The Charge Tech can hand the Call List off to a Lab Assistant to perform the Call Batch function.
 - d. The associate is to document within the Call Batch function that the STAT results were called or Faxed. Put a check mark on the Call List for each set of patient results that are successfully called or Faxed.
 - e. See #4 below for instructions if attempts to call or Fax are unsuccessful.
 - f. When the Call List is done, date and initial the Call List and return it to the Charge Tech.
 - g. The Charge Tech is to review the Call List for appropriate documentation, date and initial it; place the document in the binder marked STAT Call List.
 - h. Lab Office associate will collect the Call Lists from binder and retain them with dayshift Call Lists.

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- i. For alert values that have been documented as called, remove from call list.
4. When attempts are unsuccessful:
- a. Fax the results using the number listed in the client information at the top left of the requisition. Document the outcome in the Call Batch function and on the Call List.
 - b. When the STAT results cannot be called or Faxed based on the information in Meditech (i.e. the phone numbers were entered incorrectly); obtain a copy of the requisition and review the call/Fax request section for the contact information. Additionally, the Lab Outreach client list and the Meditech provider dictionary can be consulted for contact information, also the hospital operator.
 - c. If all attempts fail, document on the Call List the attempts made to contact the physician by phone and Fax were unsuccessful and provide date, time and initials; then place in STAT Call List binder.

F. Anatomic/Surgical Pathology RUSH Priority Requests

1. RUSH Priority Specimens

Requests for RUSH processing is limited to small tissue biopsies.

In order to get the patient report to the physician as soon as is possible; all processes related to specimen preparation, grossing, processing and microscopic review are expedited.

A contact phone number for the submitting physician must be included with the RUSH requisition for any questions concerning the specimen, patient history and for pathologist consultation.

- **RUSH Tissue Specimens submitted by 10:30 AM, Monday-Friday;** the patient diagnosis report will be available approximately 4.5 hours after the specimen's receipt in the Laboratory. A verbal report will be available at that time; the report will be available in the EMR later in the day.
- **RUSH Tissue Specimens submitted after 10:30 AM, Monday-Thurs;** a verbal report will be available by 9 AM the next morning. The EMR report will be available after the case is finalized.

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- **RUSH Tissue Specimens submitted after 10:30 AM, Friday**; a verbal report will be available by 9 AM the next morning. The EMR report will be available after the case is finalized.

2. Special Circumstances:

In cases where the tissue specimen arrives in the Laboratory after 10:30 AM and the diagnosis is needed sooner than the following morning, the physician must contact the Laboratory and consult with a pathologist. A **RUSH** request must be deemed appropriate by a pathologist; if not, the clinician will be informed and the specimen will be processed routinely.

With pathologist approval, the Histology personnel will expedite the tissue specimen onto the processors. A Histology tech will remain to ensure that the pathologist receives the RUSH slides. A pathologist will be alerted to remain to read the slides and sign out the report. The late transcriptionist is to be made aware of the RUSH to facilitate the transcription of the patient report. The pathologist will call the physician with a verbal report; with a written report will follow when the case is finalized.

For special circumstances RUSH specimens arriving after 4 PM on Friday, arrangements must be made for a pathologist to read the slides on Saturday. The pathologist will provide a verbal report to the physician via telephone. This service is only available for patients in need of the pathology diagnosis prior to an early Monday morning procedure.

G. Supporting Documents

LADM 6205 R STAT Test Result Reporting-Call Fax
LADM 6220 R Verbal Orders and Add-on Test Requests

H. References

LADM 3005 Q Supervision of Laboratory for Weekend, Holiday and Off Shifts

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Appendix A

For STAT test requests received in the Laboratory, Sunday – Saturday 7 AM – 11 PM; after 11 PM tests flagged with an asterisk (*) are not available. Requests for STAT testing outside of these guidelines will require approval by the Pathologist on-call as directed by the Charge Technologist.

Chemistry

Order panel or individual tests based on patient condition
Basic Metabolic Panel
Sodium Potassium Chloride CO ₂ BUN Glucose Creatinine Calcium

Order panel or individual tests based on patient condition
Comprehensive Metabolic Panel
BMP plus ALT AST Amylase Bilirubin, Total & Indirect Total Protein Albumin Globulin A/G Ratio Alkaline Phosphatase Glomerular Filtration Rate (GFR)

Blood Gases, Venous

Brain Natriuretic Protein (BNP)
CK
CK-MB
Myoglobin
Troponin I

Osmolality (serum/urine)

Order panel or individual tests based on patient condition
Lipid Panel
Cholesterol HDL LDL (quantitative) Triglycerides Interpretation

Ionized Calcium
Parathyroid Hormone (PTH) Intact
TSH
FSH
LH
FT4
T4

Hepatitis Panel includes: (7 am-10 pm)
Hep. B Surface Antigen-HBSAG Hep. B Core IgM-ABHBCM Hep. A Antibody IgM-ABHAVM Hepatitis C Virus Aby.-HCV

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Microbiology

CSF/Pleural/Other
Glucose Protein, Total

Gram Stain
CSF Sterile Body Fluids Wounds (7 am - 11 pm) Sputum (7 am - 11 pm) Bronch Wash (7 am - 11 pm)

Fetal Fibronectin (Amniotic Fluid)

HIV 1 & 2
Influenza A/B
Mononucleosis Test (Mono)
Occult Blood (gastric or stool)
Pregnancy (qual/quant)
Respiratory Syncytial Virus (RSV)
Strep A
Trichomonas vaginitis
Urinalysis with reflex to microscopic

Cryptococcus Antigen (CSF)
Legionella Urinary Antigen
Strep pneumoniae Urinary Antigen

Hematology/Coagulation

Complete Blood Count (CBC)
CBC with Automated Differential
Manual Differential
Platelet Count
Reticulocyte Count
Eosinophil Count
Erythrocyte Sedimentation Rate (ESR)

Prothrombin Time (PT)
Partial Thromboplastin Time (PTT)
D-Dimer

Heparin Induced Thrombocytopenia
(HIT) available (7 am - 4 pm)

CSF/Pleural/Other
Cell count & differential Crystals in synovial fluid

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