

POCT Procedure Manual Point of Care Testing	Document No. POCT 3000 P Page 1 of 4
Point of Care Testing Responsibilities	Origination Date: 6/2011 Revised Date: 5/2014 Version: 1

Policy Statement	The Department of Pathology is responsible for providing oversight for Point of Care Testing (POCT). Patient care locations performing POCT are expected to adhere to the policies and procedures of the Laboratory in order to meet Maryland State, The Joint Commission (TJC) and College of American Pathologist (CAP) accreditation standards.
Purpose	To provide guidance for Point of Care Testing personnel in performing their duties.
Scope	To be used by all Point of Care Testing personnel and designees.
Responsibility	All Point of Care Testing personnel are expected to have a thorough understanding of these instructions. The POCT Lead Technologist is responsible for reviewing, revising and communicating changes to this policy.

Duties are not limited to the prescribed tasks below. Lead Technologist reserves the right to change or edit daily duties upon need.

1.0 Daily Duties

1. Check and return all phone messages
2. Check and validate POCT refrigerator and Room Temperature Isensix is operating with-in acceptable parameters
3. Ensure all computer systems are properly communicating.
4. Review glucose and hemoglobin billing reports to check for duplicate tests.
5. Using the billing report, identify and write an Occurrence Report Form (ORF) for operators that were non-compliant with established TJC, CAP or POCT policies.

POCT Procedure Manual Point of Care Testing	Document No. POCT 3000 P Page 2 of 4
Point of Care Testing Responsibilities	Origination Date: 6/2011 Revised Date: 5/2014 Version: 1

6. Generate report to ensure all >23.5 g/dL hemoglobin and >500 mg/dL glucose results have a specimen that was sent to the Core Laboratory.
7. Distribute all Patient ID ORFs to the Nurse Managers or designees.
8. Review and validate failed hemoglobin LQC high and low results with no comments.
9. Generate pending log and reconcile issues.
10. Review test and interface exceptions in Telcor and reconcile issues.
11. Input all ORFs in to the POCT database.

2.0 Weekly Duties

1. Generate report to ensure all >5.0 INRs have a specimen that was sent to the Core Laboratory.
2. Distribute all Procedure Error (PE) ORFs to the Nurse Managers or designees.
3. Supply Coagulation Clinic, Preventive Cardiology, Metabolic Institute, ED, Processing, Cardiac Cath, Lab and HemoCue units with appropriate supplies.
4. Review and validate all Biosite Triage meters quality control results.
5. Review and validate failed ACT LQC high and low results with no correction action documentation.
6. Generate and distribute ORFs for failed ACT LQC high and low results with no corrective action documented. All ORFs are to be sent to the Nurse Manager or designee of that unit.

3.0 Monthly Duties

1. Perform Quality Assurance rounds at Coagulation Clinic (PT/INR), Women's Health Center (UA & hCG), Emergency Department (Triage), Preventive Cardiology (Triage), Infusion/Transfusion (HemoCue), Anesthesia (HemoCue), Well Baby Nursery (HemoCue), Birthing Center (HemoCue) and Cardiac Cath Lab (ACT+).

St. Agnes Hospital, 900 S. Caton Avenue, Baltimore, MD 21229

POCT Procedure Manual Point of Care Testing	Document No. POCT 3000 P Page 3 of 4
Point of Care Testing Responsibilities	Origination Date: 6/2011 Revised Date: 5/2014 Version: 1

2. Perform Quality Assurance rounds for glucose meters on 3 units. This will be performed using a rotating floor schedule.
3. Perform Chart Reviews for Birthing Center (pH Nitrazine), Women's Health Center (UA and hCG) and Emergency Department (Hemaprompt).
4. Review and validate failed glucose high and low results with no comments.
5. Review and validate failed INR LQC high and low results with no correction action documentation
6. Review and validate glucose and hemoglobin critical results that do not have a comment.
7. Generate and distribute ORFs for failed glucose LQC high and low results with no comments, INR LQC high low results with no corrective action documented, and critical results that do not have a comment. All ORFs are to be sent to the Nurse Manager or designee of that unit.
8. Copy and review QC sheets for the previous month for Women's Health Center and place in appropriate binder.
9. Coordinate and perform scheduled competency assessments.

4.0 Other Duties

Other Duties include, but are not limited to:

1. Operator Training
2. Troubleshoot equipment
3. Validation of new equipment
4. Validation of new reagents
5. Ensuring inventory is properly stocked
6. Ensure all proficiency testing is completed
7. Ensure meter-to-meter and meter-to-lab correlations are performed

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POCT Procedure Manual Point of Care Testing	Document No. POCT 3000 P Page 4 of 4
Point of Care Testing Responsibilities	Origination Date: 6/2011 Revised Date: 5/2014 Version: 1

8. Ensure calibration verifications are performed on appropriate meters

9. Ensure operator lists are up to date

5.0 Related Documents:

POCT 0000 QP Quality Plan

POCT 9000 Q Occurrence Reporting System

CLIN 6005 R Proficiency Testing Handling

LADM 6001 Q Isensix Wireless Temperature Monitoring System