Policy Statement	The Laboratory is accredited by the College of American Pathologists (CAP). The College of American Pathologists is a private accreditation organization with deemed status under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) by the Centers for Medicare and Medicaid Services (CMS). The Laboratory has established a Proficiency Testing (PT) Program to meet CAP criteria. The Clinical Laboratory is committed to ensuring that all PT events are handled in the same manner as patient samples whenever possible.
Purpose	This procedure has been established to provide direction on receiving, ordering and resulting PT surveys.
Scope	This program applies to the Clinical Laboratory management.
Responsibility	Lab Management: The Lead Technologists are responsible for implementation of procedures and have pathologist-delegated authority to sign the attestation form. The Lead Technologists are also responsible for documenting evaluation report review, self-evaluation of non-graded events and completion of the CAP PT Exception Summary Response form (ERF). Quality Coordinator: Quality Coordinator or designee will receive and distribute all surveys for the Clinical Lab. Lab Associates: Associates are to process or assay the PT material within the normal workflow, utilizing standard quality control protocols and defined repeat criteria. PT material is to be handled and/or tested following standard operating procedures; special attention must be paid to the handling, processing and result reporting instructions that accompany the PT material.

Receipt of Survey	1. Quality Coordinator will receive all surveys for the Clinical Lab. 2. Quality Coordinator will label outside of each survey box with date received, due date and the event program code. 3. Quality Coordinator will ensure the integrity of the material and contact the agency if any issues are determined. 4. Quality Coordinator will send an Outlook appointment to supervisory associates of the specific testing areas to notify them of receipt. Appointment will contain received date, specimen requirements, stability requirements, due date and then be delivered to the appropriate Lab section. 5. If surveys are shared by department, the order of delivery will be as follows: a. Blood Bank/Core Lab b. Microbiology/Core Lab
Specimen Handling	Specimens should be handled according to PT program instructions. Refer to: LADM 9005 R Proficiency Testing Program section titled PT Sample Processing Notes. Ensure all PT materials are stored according to PT guidelines.
PT Order Entry	1. Sign in to Laboratory Information System (Meditech) a. All Clinical Laboratory locations will log-in using “LIVE”. b. Blood Bank will log-in using “TEST”. 2. Applications - LABORATORY *LIVE* 3. Facility – ST. AGNES HOSPITAL 4. Laboratory Information System – LABORATORY 5. Laboratory – SPECIMEN DESKTOP 6. Select “Enter/Edit Req.” on right hand side bar 7. Enter the following information in the given fields. • Patient: SURVEY(year), (Abbreviation of survey organization)_(specimen #/ID on vial)

	Example: SURVEY2010, CAP CHM-11 • Enter a New Account • Facility – LAB CENSUS • Registration Screen – REFS • Age – 99 • Sex – U • Financial Class – U • Client – LAB • Attending – NONE. • Select SAVE • ADM Priority – OTHER (OTH) • Location – LABML • Select SAVE • Admission Form – N • Plate – N • Select OK • Req number – NEW • Coll Date – T (today) • Coll Time – N (now) • Priority – R (routine) • Received – Y (yes) • Recv Date – T (today) • Recv Time – N (now) • Recv by – Ordering Tech's name will appear • Label Device – Select proper printer for label(s) • Order all applicable tests for survey • Select SAVE
Point of Care	Glucose and Hemoglobin Meters 1. Sign in to Laboratory Information System (Meditech) 2. Applications - LABORATORY *LIVE* 3. Facility – ST. AGNES HOSPITAL 4. Laboratory Information System – LABORATORY 5. Laboratory – SPECIMEN DESKTOP 6. Select "Enter/Edit Req." on right hand side bar

	7. Enter the following information in the given fields. • Patient: SURVEY(year), (Abbreviation of survey organization)_(specimen #/ID on vial) Example: SURVEY2010,CAP CHM-11 • Enter a New Account • Facility – LAB CENSUS • Registration Screen – REFS • Age – 99 • Sex – U • Financial Class – U • Client – LAB • Attending – NONE. • Select SAVE • ADM Priority – OTHER (OTH) • Location – LABML • Select SAVE • Admission Form – N • Plate – N • Select OK • Document Account Number 1. Print Patient Label • Applications - LABORATORY *LIVE* • Facility – LAB CENSUS • Laboratory Information System – REPORTS • PRINT PATIENT LABEL • Enter Account Number and select OK • Print Label
Criteria for Pathologist Review	Pathologist review should be limited to specimens that meet the criteria for Pathology review.
Alternative PT Testing	For laboratory tests that do not have commercial PT material, the lab section will establish an alternative form of assessment in conjunction with the Medical Director.
Review of Results for Clerical Errors, Method Codes, Units of	Refer to LADM 9005 R Proficiency Testing Program section titled Result Submission for specific

Measure	information.
Results Reporting	1. All survey results should be reviewed by a second technologist before submission. 2. All survey results are to be entered online or faxed into PT provider prior to the due date. 3. All survey documents and Meditech result printouts are to be placed in the appropriate survey binder. Refer to LADM 9005 R Proficiency Testing Program section titled Results Submission for specific information.
Retention of PT Material	PT material is retained, at a minimum, until results are returned and reviewed.
Survey Evaluation Review	Refer to LADM 9005 R Proficiency Testing Program section titled Survey Report Received for specific information.