

SEND OUT TESTING VERIFICATION FOR PROFICIENCY SAMPLES

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| <input checked="" type="checkbox"/> St. Joseph Medical Center Tacoma, WA | <input checked="" type="checkbox"/> St. Clare Hospital Lakewood, WA | <input checked="" type="checkbox"/> St. Elizabeth Hospital Enumclaw, WA |
| <input checked="" type="checkbox"/> St. Francis Hospital Federal Way, WA | <input checked="" type="checkbox"/> St. Anthony Hospital Gig Harbor, WA | <input checked="" type="checkbox"/> ENUM <input checked="" type="checkbox"/> GIGL <input checked="" type="checkbox"/> PSC |

PURPOSE

To provide instruction on the steps to be followed to prevent a proficiency testing sample from being sent to any other laboratory for testing.

BACKGROUND

Sending proficiency testing samples to another lab for testing is strictly prohibited by federal regulation. Proficiency testing material is intended to challenge a lab that performs a test and is never to be referred out to a different testing lab. Severe consequences can be imposed on any laboratory violating this regulation.

STEPS

1. All specimens leaving an FHS testing location for testing at another laboratory must have the following verification checks conducted and documented by two different individuals prior to the specimens being shipped:
 - That the specimens being referred out are valid patient samples for analysis
 - That the specimens being referred out are **NOT** proficiency testing samples
2. These requirements encompass any and all specimens referred from one testing location to another testing location (including another FHS laboratory) for analysis
3. STLs documenting the shipment of samples from one FHS testing laboratory to another for analysis will be completed as usual and retained for a period of one year. The list must include the following additional documentation:
 - Attestation label or stamp must be placed on the top sheet of every STL which will be retained by the originating lab for a period of 1 year.
 - Stamp or label shall be placed on the bottom right of the sheet so as to not cover up any other information on the STL.
 - The stamp or label shall read:

TECH ID #1	TECH ID # 2
<p>“I have checked and verified that all specimens listed are patient samples and do <i>not</i> include any proficiency testing samples (CAP) for regulatory purposes.”</p>	

4. Attestation will be signed off by the person preparing the STL and reviewed and signed off by a second person **before shipment** certifying that all specimens in the batch and on the log have been checked and verified that specimens are not proficiency testing samples.

- Proficiency testing samples are registered in the Lab LIS with the patient last name of CAP A, CAP C, CAP E, CAP F or CAP J.
 - If a proficiency testing sample is found on the list bring the sample and STL to a manager, supervisor or TIC *immediately*. Do NOT ship out the sample for testing.
5. PKLs, Shipping Manifests and RQWs (all shipping logs) used for the documentation of samples sent to an outside laboratory for testing will be completed as usual and retained for a period of one year. The shipping documents must contain the following additional documentation:
- Attestation label or stamp must be placed on the top sheet of every shipping log which will be retained by the originating lab for a period of 1 year.
 - Stamp or label shall be placed on the bottom right of the sheet so as to not cover up any other information on the shipping log
 - The stamp or label shall read:

TECH ID #1	TECH ID # 2
<p>“I have checked and verified that all specimens listed are patient samples and do <i>not</i> include any proficiency testing samples (CAP) for regulatory purposes.”</p>	

6. Attestation will be signed off by the person preparing the shipping log and reviewed and signed off by a second person ***before shipment*** certifying that all specimens in the batch and on the log have been checked and verified that specimens are not proficiency testing samples.
- Proficiency testing samples all have the patient last name of CAP A, CAP C, CAP E, CAP F or CAP J.
7. If a proficiency testing sample is found on the list bring the sample and shipping log to a manager, supervisor or TIC immediately, do NOT ship out the sample for testing.

DOCUMENT APPROVAL Purpose of Document / Reason for Change:			
6/28/12 – New header/format. Slight change in Title.			
Committee Approval Date	6/28/12	Medical Director Approval (Electronic Signature)	6/29/12 <i>Linda D. Burkhardt, M., D.</i>