IRIS VELOCITY QUALITY CONTROL

☒ St. Joseph Medical Center Tacoma, WA ☒ St. Clare Hospital Lakewood, WA ☐ St. Elizabeth Hospital Enumclaw, WA
☒ St. Francis Hospital Federal Way, WA ☒ St. Anthony Hospital Gig Harbor, WA ☐ PSC

PURPOSE

To provide instructions to run quality control for the IRIS Urinalysis analyzer

RELATED DOCUMENTS

J-W-UA-1032 Quality Control Microscopic iQ200

SUPPLIES

- CA/CB/CC IRIS Urine controls, store at 2-8˚C, open stability 15 days
- Patient sample rack
- 16 X 100 tubes, glass

STEPS

1. Perform quality control once per day and with a new lot or shipment of strips.
2. Check the maintenance log for the current lot in use.
3. If a new lot of reagent is used, remove product insert from box. Initial and date and give insert to UA manager or coordinator to enter into Cerner using QCM function. Lot number and expiration date along with any updates will be entered into Cerner. Limits are defined by the manufacturer.
4. Attach an assigned Quality Control Cerner barcode label onto 3 tubes, one for each control, placing barcode near the top of the tube.
5. Remove control set from the refrigerator. Check stability and expiration date.
6. Pour slightly more than 2mls of each control into the corresponding labeled tube. Do not shake bottles.
7. Return remaining capped control bottles into the refrigerator. Allow aliquots to warm to room temperature. Use controls within 1 hour of pouring into tubes.
8. Run controls as you would a patient, in a patient rack, using the IrisSpec CA, CB and CC controls.
9. Position rack on the sample transport module (right side of instrument).
10. Press START. The analyzer will detect the rack and position numbers.
    To cancel the control analysis, press the STOP key.
11. Discard aliquots after a single use. Do not pour back into original bottles.

12. When control testing is completed, the results will print.

13 . Compare results with the acceptable range for the urine control CA/CB/CC product insert found in the maintenance manual and review results in Cerner. All QC must be acceptable prior to reporting any patient results.

14. If the control is within the acceptable ranges, accept the accession number in Cerner, add comments as needed and document on the maintenance log that QC has been completed. Results will transmit to Cerner and will be reviewed by coordinator for accuracy and trends daily.

15. If any result is out of range, repeat testing using fresh CA/CB controls. If results continue to be out of range:
    - Check stability and expiration of QC
    - Make sure bottles were not shaken
    - Improper storage can result in negative readings especially in the Bilirubin results
    - Look for any color change or degration of reagent
    - Pull lot and repeat testing with a new lot
    - Do not report any patient results unless QC values are within range.

16. When no barcode is available for the QC, use **EDIT ID** at the workstation, type in the accession number, accept twice and the results will transmit to Cerner.

DOCUMENT APPROVAL **Purpose of Document / Reason for Change:**			
Added CC control			
☐ *No significant change to process in above revision. Per CAP, this revision does not require further Medical Director approval.*			
Committee Approval Date	☐ Date: ☐ N/A – revision of department-specific document which is used at only one facility	**Medical Director Approval** *(Electronic Signature)*	8/23/15 Katie Wilkinson, MD