

AUTOVERIFICATION POLICY

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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"/> Highline Medical Center Burien, WA <input type="checkbox"/> PSC |

PURPOSE: To describe the requirements for auto-verifying patient results.

DEFINITION: Auto-verification is the process where, based on analyzer specific parameters, the results transmitted from an analyzer to the Lab Information System are verified without operator intervention if:

- The result is not critical and is not delta flagged
- The procedures for the accession number and workcenter/testing site do not have a critical or delta flag.

POLICY:

- Activation and deactivation - performed only by LIS Support Staff under the direction of the Laboratory Science and Technology Manager or Site Manager.
- Validation - The laboratory will validate and document the auto-verification process before activation, annually and after any change of equipment, tests or parameters.
- Documentation – testing, changes in equipment, parameters and tests are to be completed at the direction of the Laboratory Science and Technology Manager or Site Manager utilizing the auto-verification form.
- Documentation review – Laboratory Science and Technology Manager or Site Manager
- Go-live approval – Laboratory Science and Technology Manager and Laboratory Medical Director
- Documentation storage – Laboratory Administrative area of the Lab department, retained for a minimum of 2 years.

The following safeguards must be taken by testing personnel:

- Routine maintenance must be performed in accordance with the approved schedule.
- Reagent levels must be checked at the beginning of each shift.
- QC must be run and verified BEFORE patient specimens are placed on the analyzer.
- WCPs must be checked frequently to assure that all tests are reported in a timely manner.
- Specimens must be checked for integrity (volume and appearance) BEFORE placing them on the analyzer. Refer to analyzer specific parameters for appropriate action to be taken.
- Instrument printouts and/or displays must be reviewed for conditions that prevent a specimen from being run and/or auto-verified including: result flags, instrument logs, instrument error codes.
- Lab staff will review any data that fall outside of set parameters.
- Dilution factors must be manually entered into the instrument so the correct result will be calculated.