

ICHEM VELOCITY REVIEWING RESULTS

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 Highline Medical Center Burien, WA PSC

PURPOSE

To provide instructions for reviewing patient results prior to releasing to the LIS system.

BACKGROUND

The complete profile of patient results are stored on the IRIS workstation. It may be necessary to review results before releasing and verifying results in the computer system.

RELATED DOCUMENTS

Performing Dilutions on the iQ200 J-W-UA-1034
iQ200 Sprint Editing J-W-UA-2210


STEPS

1. All results that are normal or negative will autorelease to the computer system and autoverify.
2. Any result that needs microscopic or chemistry confirmation may appear on the worklist and prevent autorelease of the patient's results.
3. The following values may prevent autorelease and cause the user to review results prior to releasing:
 - Blood, trace amount or greater
 - Protein, 1+ or greater
 - Leukocyte esterase, 1+ or greater
 - Clarity other than clear
 - Specimens that are very turbid may interfere with results. Use alternate testing using the iChem 100 and/or manual microscopic
 - Nitrite positive
 - Bilirubin, 1+ or greater (confirm with Ictotest).
 - Patient specimens that do not have a LIS accession number
4. The following tests will cause a microscopic exam to reflex and/or be required:
 - Blood, trace amount or greater
 - Protein, 1+ or greater
 - Leukocyte esterase, 1+ or greater
 - Clarity other than clear
 - Nitrite positive

5. Any of the following tests will cause a culture to automatically reflex when the Urinalysis order is a UA R:
 - Nitrite positive
 - Leukocyte esterase 1+ or greater
 - WBC's of 5 or greater on the microscopic exam
6. The upper linearity for Specific gravity is 1.040. Results above this level should be reported at >1.040. If there is any question confirm the result using the TS meter.
7. At the Velocity workstation, click on Worklist. Find the patient and accession number. Double click on that patient. Review results.
8. Make sure all flags are resolved and cleared prior to accepting results.
9. Microscopic ranges:

Particle Type	Reporting Units	Normal Reporting Range	Abnormal Reporting Range
RBC	HPF	0-3	>182
WBC	HPF	0-5	>182
SQ EPI's	HPF	0-5	>182
Non-SQ EPI's	HPF	0-5	>100
Casts	LPF	0-2	>20
Bacteria	HPF	None	1+, 2+, 3+ or 4+
Yeast	HPF	None	Present
Sperm	HPF	None	Present
Mucus	LPF	None	Present
Crystals	HPF	None	1+, 2+, 3+ or 4+
Other, Trich, Amorph	HPF	None	Present

10. Dilutions may be necessary for very high concentrations of particles in the specimen. See Performing Dilutions work instruction.

DOCUMENT APPROVAL Purpose of Document / Reason for Change:			
Added table for Microscopic particles			
<input type="checkbox"/> No significant change to process in above revision. Per CAP, this revision does not require further Medical Director approval.			
Committee Approval Date	<input type="checkbox"/> Date: <input type="checkbox"/> N/A – revision of department-specific document which is used at only one facility	Medical Director Approval (Electronic Signature)	 8/21/15