R-PO-AD-0598-00

# ERROR CORRECTION POLICY St. Joseph Medical Center Tacoma, WA St. Francis Hospital Federal Way, WA St. Anthony Hospital Gig Harbor, WA St. Flizabeth Hospital Enumclaw, WA Highline Medical Center Burien, WA □ PSC

#### **POLICY**

All laboratory results that are reported to a provider will be maintained in the permanent record with appropriate footnotes added to guide and support providers and document actions by laboratory staff. Lab results reported verbally or via an interface message that are determined to be incorrect, will remain visible in a different format, and will not be expunged from the patient chart.

### **BACKGROUND**

Providers may have acted on the reported laboratory result received verbally or via an interface message. All results that may have been acted upon must remain in the patient record in some form. NOTE: This policy does not cover errors that may have been created when Patient Access creates an admission record for the wrong patient/MRN. Those corrections are covered by the guide titled CLINICAL CHART CORRECTION IN EPIC GUIDE (Go to Fhsconnect ->Policies and Procedures->Information Management Manual->Clinical Chart Corrections in Epic Guide)

#### RELATED DOCUMENTS

Failed Patient Run Policy R-PO-CH-0808

#### **KEY POINTS**

- Decisions about whether to correct a result or not should take the Failed Patient Run policy R-PO-CH-0808, into consideration. It may be necessary to contact a pathologist to determine the best course of action.
- For results being corrected due to possible sample mislabel, mix-up, contamination, or integrity concerns investigate all possible samples or tubes collected or transported at the same time.
- All results changed via ECR to an alpha response will use the alpha response "SEE COM". Do not
  use alpha response "DELETED" or "CANCELLED" when changing an erroneous result.
- The reason for changing the result needs to be a chartable footnote, using one of the templates listed in the table "FOOTNOTING STANDARD FOR ERROR CORRECTIONS BY TECHNICAL STAFF" whenever possible.
- All actions taken to notify the provider of corrections will be footnoted as chartable documentation in the patient record.

## **ACTIONS BY CLIENT SERVICE STAFF FOR VERIFIED RESULTS**

RESULT STATUS	ACTION
Result verified on wrong patient due to ordering on incorrect patient or mislabeling sample	Use ECR to change result to "SEE COM" and append a chartable footnote using the template <b>PT ID</b> . Assure that provider has been notified of the issue and include documentation in the chartable footnote.

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# **ACTIONS BY TECHNICAL STAFF BASED ON RESULT STATUS**

RESULT STATUS	ACTION	
Result Called; Not Verified	If an incorrect result has been called, the incorrect result must be verified in Cerner with chartable footnotes documenting the verbal report. Correction of the result in ECR to "SEE COM" or to the correct value should be done as applicable.	
Result Not Called; Not Verified (Order In Process)	If the order is "In Process" in Cerner and has not been called to the provider, correct the result in ECR (if necessary) using the alpha response SEE COM or the correct value and enter a <b>chartable</b> footnote requesting a sample recollection (if needed/possible and if the sample has not already been recollected).	
Result Verified; Not Called	If the result is in a "Complete" status in Cerner, correct the result in ECR to the alpha response "SEE COM" or the correct value. Notify the provider of the correction to the results that they may have seen in the chart and attach appropriate footnotes.	
Results Verified and Called	If the result is in a "Complete" status in Cerner, correct the result in ECR to the alpha response "SEE COM". A redrawn sample will need a different accession number. Enter the correct value(s), re-notify the provider and attach appropriate footnotes.	

# FOOTNOTING STANDARD FOR ERROR CORRECTIONS BY TECHNICAL STAFF

Error Due to Sample Mislabel or Mix-Up	<ol> <li>Use chartable footnote template ERR MIXUP "Notified (care provider first and last name) at (provider location) on (date and time) that results are being amended due to probable incorrect patient to label matching. All samples from this collection time have been investigated and recollections requested if necessary by (tech ID)."</li> <li>Use separate chartable RCALL template footnote for recollection request. Footnotes must be entered before the alpha result of SEE COM or correct numeric value is verified</li> </ol>
Error Due to Sample Integrity	<ol> <li>Use chartable footnote template ERR INTEG on a single analyte (or the first analyte displaying for a panel) "Notified (care provider first and last name) at (provider location) on (date and time) that results are being amended due to probable contamination or compromise in sample integrity. All samples from this collection time have been investigated and recollections requested if necessary by (tech ID)."</li> <li>Use separate chartable RCALL template footnote for recollection request. Footnotes must be entered before the alpha result of SEE COM or correct numeric value is verified.</li> </ol>
Technical Error: For results being corrected due to Failed Patient Runs or another technical or instrument problem	<ol> <li>Use chartable footnote template ERR T "Notified (care provider first and last name) at (provider location) on (date and time) that results are being amended due to (technical error or instrument problem) by (tech ID)."</li> <li>Footnotes must be entered before the alpha result of SEE COM or correct numeric value is verified.</li> </ol>

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DOCUMENT	APPROVAL Purpose of	Document / Reason	for Change:
Approved but	not effective yet in technical	areas.	
☐ No significan	t change to process in above revis	ion. Per CAP, this revision	n 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)	( ) (FT) a CA / II K LINGSON II ID

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