

**CRITICAL VALUE WORK INSTRUCTION**

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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 type="checkbox"/> PSC  |

**PURPOSE**

To provide the detailed steps involved in reporting of a lab value designated as critical, once the result(s) is determined.

**BACKGROUND**

Patient safety is dependent upon prompt notification of test results that meet critical value standards. Laboratory has defined procedures to guide staff in reporting these results.

**RELATED DOCUMENTS**

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|--------------|--|
| R-PO-AD-0551 | Critical Value Policy                                    |
| M-W-CH-0597  | Critical Values – First Critical Troponin or CK-MB/INDEX |
| R-PR-AD-0630 | Documentation and Error Correction Process               |

**STEPS**

1. From the “Outstanding Test List”, determine if the result meets the critical value (CV) limit by reviewing for a critical value flag or hold in the LIS (if result is numeric or alpha) or is a CV based on the CV test list.
2. Single click to select and highlight the specimen with a critical result, double click the specimen critical result to enter result entry.
3. Determine if the patient with the CV is a hospital department patient or an outpatient and whether the location is open 24/7 or currently closed.
4. If the location is open, contact the department/nursing unit immediately, see scripting below.
5. If contact was not immediately made (Hospital or Outpatients), preliminary verify the test and continue with notification attempts using the following buttons “No Answer/Busy” or “Left a message” in the Documentation section of the Communication Log. Do **not** hold up verification pending notification.
6. If the test result is from an outpatient location, collect the patient’s home phone number before calling an outside facility/location in case it is needed especially after hours or if the provider that is calling is not at the office or has limited knowledge of the patient.

**NOTE:** Patient’s phone number is located using the actions button on the right side of the result entry screen. Select actions → chart review, then click the demographics tab on the left side of the screen.

7. Determine the phone number of an outside physician/client/facility by using phone contact information available in the lab or within the result entry screen in the Contacts section of the top panel of the result entry.

8. Open the Comm Log and make the call,
  - Critical Value comment will auto populate with “The following critical results were read back and acknowledged. Test name, value, High/Low Panic (Ref. Range for test).”
9. Announce to the recipient the following script:
  - A. ***“This is (Susan), from (St. Francis Lab)”. “I have a critical value on patient (Jane M Doe)”. “May I speak to the patient’s nurse?”***
  - B. The recipient will either be able to take the call because they have been authorized to take CV’s for their location or request someone else come to the phone. Continue with the notification taking care to provide 2 patient identifiers before release of the result.
  - C. ***“I have a Critical LOW Hematocrit on patient (name of patient) with MRN of 940-99-9999”,*** or give Date of Birth as the 2<sup>nd</sup> patient identifier if calling an outpatient location.
    - For **Hospital departments** – State whether the result is LOW or HIGH (as applicable), the name of the test and the result. ***“The Critical LOW Hematocrit is (20)”***. Tell the recipient that you will be verifying the result and will be viewable in the EMR.
    - For **Non-Hospital or Outpatient locations** – Report the result verbally as the EMR is not available to non-FHS departments, ***“The Critical LOW Hematocrit is (20)”***. You may be asked to fax the result(s) so that the receiver has a hard copy to refer to. The fax can be sent via the LIS system (see Beaker Guide-faxing and printing results section).
  - D. Ask the recipient to READ BACK the result they have recorded. ***“Could you read back the critical value you’ve written down?” Listen carefully to ensure the result(s) read back are the exact results on your instrument printout or displayed in the LIS.***
  - E. The recipient should read back the hematocrit of 20 and confirm with “that’s correct” or reconfirm with the recipient.
  - F. Ask the caller for their identity, ***“May I get your full last name and first initial for documentation please?” “Thank you”***.
  - G. Update the Contact Field with full last name and first initial and Phone number of the person notified of the critical value. Then click Accept and Final Verify the result.
  - H. **DO NOT HOLD UP VERIFICATION IF NOTIFICATION IS DELAYED-** If unable to contact the provider on initial call, complete the contact information and phone number, select the “No Answer/Busy” or “Left a Message” button in the Comm Log to document your attempt and continue to call until contact is made or follow-up with pathologist on call, PreLim Verify results. If more information is necessary to be communicated about failed attempts only add non-chartable comment in the Lab Notes “yellow box” in Comm Log.

**NOTE: Left a Message-** If you encounter an answering machine, it is fine to leave a message on the machine with your name, location, phone number you can be reached at (whenever possible, use a phone number that is a direct dial line that you will answer when the call is returned), the patient’s name and request a call back as soon as possible.

10. When the documentation and communication of CV is complete, click the “Communicated” button, click on “Accept” button and proceed to **Final Verify** results.

**KEYPOINT:** If the result has been verified before the result notification- go to Result Entry to Open a Comm Log **after** a test has been verified and add the new documentation to the Communication Log and click the “Accept” button.

11. For Outpatient locations, if notification attempts fail and you have been unable to reach the ordering or on-call doctor/caregiver within 1 hour, review of the CV result with a TIC, MT Coordinator, Supervisor/Manager is suggested to determine whether to continue call attempts after hours. Some considerations when notification attempts fail are:

- Review of the results against previously reported results
- Review sample integrity (i.e., hemolysis impact, impact to glucose or potassium results due to age of sample)
- Storage condition of the sample prior to testing (i.e., sample placed near ice pack, very low temps in outside locked box, etc)
- Possible sample contamination from IV
- Patient diagnosis and/or known condition of the patient

12. If CV still needs immediate notification and no call back from provider within 90 minutes with 2 attempts to call CV, contact a clinical pathologist on site or on-call pathologist by calling the Cellnetix 1-800-234-7224 answering service. Assist the pathologist with the details needed (call attempts to reach the provider, patient’s contact phone number, provider’s contact phone number) so that action can be taken to reach a provider and/or care for the patient.

13. On-Call pathologist may request the CV be called the next day, document in the Comm Log your call to the on-call pathologist, prelim verify the results and print the Result Screen and leave the follow-up information for the next shift to contact the provider by 10:00 AM the next day.

14. If more details are necessary, enter comments in the non-chartable section in the Comm Log in the yellow “Lab Comment” box for internal use only.