

**FAILED PATIENT RUN RESULT VERIFICATION FORM**

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> St. Joseph Medical Center, Tacoma, WA | <input checked="" type="checkbox"/> St. Anthony Hospital Gig Harbor, WA | <input type="checkbox"/> Harrison Medical Center, Bremerton, WA  |
| <input checked="" type="checkbox"/> St. Francis Hospital, Federal Way, WA | <input checked="" type="checkbox"/> St. Elizabeth Hospital Enumclaw, WA | <input type="checkbox"/> Harrison Medical Center, Silverdale, WA |
| <input checked="" type="checkbox"/> St. Clare Hospital Lakewood, WA       | <input checked="" type="checkbox"/> Highline Medical Center Burien, WA  | <input type="checkbox"/> PSC                                     |

Date/Time: \_\_\_\_\_ Initials/Tech ID: \_\_\_\_\_

Analyte: \_\_\_\_\_ Instrument: \_\_\_\_\_

Patient Reference range: \_\_\_\_\_

Clinically acceptable repeat limits: \_\_\_\_\_

Timeframe of potentially affected patient results: Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_

*(Time of last good QC for that test up to the time that patients were no longer run.)*

Brief description of QC problem: Please note which level was out, the QC result, and the range for that control.

\_\_\_\_\_

Brief description of problem resolution:

\_\_\_\_\_

1. Use Instrument Files to pull the 5 most recently run patient samples, prior to the realization that there was a problem.
2. If the variation is clinically significant (based on the Failed Patient Run procedure Duplicate/Repeat limits or if result interpretation changed from Normal to Abnormal or vice versa), then keep back-tracking until you can identify when you think the problem occurred, i.e. to a point where results were not different based on the Duplicate/Repeat Limits. It might go all the way back to the last good QC run.
3. Please consult with department manager or pathologists if you are unsure of how to determine if the variation is clinically significant.
4. **Prior to correcting any results**, please notify the MTC or Dept. Manager or Pathologist.  
**Note:** Sample stability and integrity should be considered. Correcting results for tests outside stability requires close scrutiny.
5. If the variation is clinically significant then corrected results must be reported, the patients' locations notified, and notification documented as quickly as possible.
6. Document actions in the relevant QC file including a comment that a look back was done.

Recheck Accn#/Specimen ID#	Original Result	Repeated Result	Variation Acceptable Y/N

Lookback performed and no patients were run for this test during the timeframe since the last acceptable QC run.

**Please attach all instrument patient printouts/reruns together and submit the documents to MTC/Manager.**

Comments: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Recheck Accn#/Specimen ID#	Original Result	Repeated Result	Variation Acceptable Y/N

Note: Second page if more than 5 specimens are rechecked

**Please attach all instrument patient printouts/reruns together and submit the documents to MTC/Manager.**

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_