CHECK A REQUISITION

☒ **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**   ☒ **PSC**

PURPOSE

To provide instruction on how to verify each patient encounter for accuracy at the point of registration into the LIS, at the point of collection and again during processing of samples collected elsewhere.

BACKGROUND

Each patient requisition/order entry into the LIS needs to be checked to ensure we have been complete in ordering the correct tests on the correct patient and will fulfill sending the reports to the correct ordering physician. Requisitions must also be checked to ensure the patient demographic and insurance information is complete for subsequent billing. It's imperative that this checking be accomplished at the time of registration and before any phlebotomy procedure is performed on a patient.

RELATED DOCUMENTS

R-PO-CLT1001   Account Selection to Determine Correct MRN Flow Chart
R-PR-CLT1002   Account Selection to Determine Correct MRN Policy
R-W-CLT1005   Provider Entry Free Text Doctor

STEPS
Registration in the LIS

1. Greet the patient with a smile and eye contact following AIDET principles.

2. Verify the patient has orders for their sample collection.

3. Write in the date of service (DOS) and time on requisition.

4. Check to be sure a diagnosis (DX) code is provided and follow up when possible to obtain.

5. Have patient validate their insurance information and demographics including date of birth and address by having them sign off on the face sheet, a Cerner Print Screen, or on a completed requisition.

6. Verify there is an ordering provider on the requisition and that any listed providers have full names to ensure results are delivered appropriately. Clarify if needed with the patient.

7. Choose correct Cerner Account (See related documents).

8. Enter any consulting providers on the requisition. If a consulting doctor is not in the doctor table obtain required mailing or phone information from the patient before adding the doctor as a free text.

9. Place orders in Cerner.

10. Stage requisition in rack for Phlebotomists if applicable for your site.

STEPS
Phlebotomy

1. Bring requisition back with the patient and match requisition with proper labels.

2. Verify the patient's identity using the 2 patient identifiers - ask the patient to tell **YOU** their DOB, first and last name.

3. Check to make sure patient has signed off and verified a source of demographic information such as the Healthwind face-sheet, Cerner print-screen or completed requisition for accuracy.

4. Once the patient's identity is verified, match the given patient information and Cerner labels to the requisition by using the following requisition checkpoints.
   - Patient First And Last Name
   - DOB
   - Sex/Gender
   - DOS
   - Collection Time
   - Tests Marked On Req Match Tests Ordered (Compare Requisition to Labels)

Highlight each checkpoint _on the requisition_ with a yellow highlighter as you match this information with the Cerner label(s)

- Once all the pieces above are verified proceed with phlebotomy procedure.
- Place tech ID on requisition above the date and time box when completed.
- Place tech ID on Cerner labels.

STEPS
Outpatient Processing – To verify accuracy of PAR/COE during sample labeling

1. During sample labeling, compare the printed LIS label against the requisition/order.
   - Review the label for Patient First AND Last Name spelling
   - DOB
   - Sex/Gender
   - DOS
   - Collection Time
   - Tests Marked on Req Match Tests on LIS Label
   - Ordering and consulting providers match the requisition/order form

2. Research and resolve any discrepancies before continuing to process samples.

Highlight each checkpoint _on the requisition_ with a yellow highlighter as you match against the label.

KEY POINTS:
1. Spelling of the patient name including initials, date of birth, sample collection date, and medical record number must be an exact match.

2. Tests marked on the requisition must match the tests on the Cerner labels with the correct date/time.

3. Research and resolve any discrepancies before proceeding.

DOCUMENT APPROVAL	Purpose of Document / Reason for Change:		
9/13/12 – New document.			
Committee Approval Date	☒ Date: 9/13/12 ☐ NA – revision of department-specific document which is used at only one facility	**Medical Director Approval** *(Electronic Signature)*	9/10/12 *Linda D Burkhardt, M.D.*