Saratoga Hospital Laboratory 211 Church Street, Saratoga Springs, NY 12866

Saratoga Hematology-Oncology Laboratory 3 Care Lane, Saratoga Springs, NY 12866 Saratoga Hospital Lab-Wilton 3040 Route 50 North Saratoga Springs, NY 12866

Clerical Error Detection

Purpose:

This procedure provides instruction for assessing correct requisition entry into the Meditech system for patient identification, laboratory tests, ordering provider, as well as provider signature and diagnosis documentation on the script.

Scope:

This document applies to Saratoga Hospital Laboratory and its ancillary sites.

Policy:

The laboratory has a process that verifies that test requests are correctly ordered and patients are not charged for tests that were not ordered or were not able to be completed. The physician is notified whenever a test request must be canceled. Appropriate follow-up is completed for all requisitions that are missing documentation.

Procedure:

Ordering tests from a physician's requisition:

- 1. Requests for laboratory tests must follow the requirements as outlined in the *Outpatient Laboratory Test Orders Policy*. Requisitions submitted by the physician must be legible and complete. Lab personnel must contact the physician's office and clarify any questionable tests orders. Questionable orders are defined as the following:
 - Handwriting is not legible.
 - Vague or unfamiliar test requests.
 - Tests requests that do not appear to match the diagnosis.

Note: It is inappropriate to "Guess" what tests are listed on the requisition or to ask the patient what tests are on the requisition.

- 2. Tests are ordered in the Meditech computer system and the appropriate specimen labels are generated. The following labels placed on the requisition.
 - A specimen label for each test.
 - A label containing the name of the ordering provider.

Secondary Review of Laboratory Orders:

- All outpatient requisitions are reviewed by a technologist or phlebotomist to ensure that all tests have been correctly ordered in the Meditech computer system. Each requisition is reviewed to ensure the following:
 - The patient name on the aliquot label matches the patient name on the requisition.
 - The name of the provider matches the name listed on the aliquot on the requisition
 - The tests ordered on the requisition match the aliquots on the requisition.
 - All tests ordered on the requisition are ordered in the computer system.
 Note: It may be necessary to view the requisition in Meditech to view all tests ordered.
 - The provider's signature is on the requisition.
 - Appropriate diagnosis is documented on the requisition.
- 2. The responsibility to review requisitions is as follows:
 - Requisitions processed by the accessioning department [i.e. SDOs, Rubins, nursing homes, etc] will be reviewed by the assigned phlebotomy staff.
 - Outpatient walk-ins will be reviewed by the phlebotomists collecting the specimen.
- 3. The reviewer will initial the labels to indicate that the review is complete.

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All discrepancies are resolved by the person reviewing the order, or if indicated, referred to the appropriate supervisor. Document the problem on the "tech check error log" for quality assurance follow-up. Any discrepancies related to physician signature and diagnosis must be referred to the clerical office staff for follow-up.

Review of "Outstanding Tests" Computer Logs:

- 1. A Meditech "Outstanding Specimen" report will be generated by each shift and all outstanding specimens that have been received by the laboratory must be accounted for.
- 2. All specimens that cannot be accounted for will be referred to the appropriate supervisor for resolution. It is the responsibility of the supervisor to ensure that tests not completed are not billed to the patient and that the physician has been notified.
- On a monthly basis, the laboratory Information Systems specialist will generate an "Outstanding Specimen" Meditech report for each department [January through the end of the previous month] to ensure that all specimens have been resulted. Any issues will be referred to the Administrative Director and be included on the Information Systems monthly Quality Assurance report.

Related Procedures:

- Outpatient Laboratory Test Orders
- Standing Orders
- Accessioning Procedures
- Procedure for Processing Outpatient Laboratory Tests
- Canceling/Deleting an Unacceptable Specimen

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