

**UC Davis Health
Sacramento, CA
Department of Pathology & Laboratory Medicine**

TELEPHONE PRACTICES

Administrative Procedure # 820.A

I. PURPOSE

To establish standardized telephone practices throughout the Department of Pathology and Laboratory Medicine.

II. POLICY

All incoming calls to the Department of Pathology and Laboratory Medicine are answered in a professional, polite and courteous manner in order to produce efficient phone call handling practices, to elicit quality communications, to minimize telephone communications into the technical testing sections by effective screening, to ensure accurate and reliable result reporting, and to route calls to the appropriate staff member when necessary.

All incoming calls should be answered within the first three rings.

The telephone number for **Client Services** is **734-7373** and is answered 7 days a week, 24 hours a day. An automated voice service directs callers to the appropriate Client Services staff. Clients calling after regular service hours are routed to 734-0500.

The main telephone number for Clinical Laboratory **Specimen and Report Center or SARC** is **916-734-0500**, and is answered 7 days a week, 24 hours a day. The weekday, daytime telephone number for **Anatomic Pathology Administration** is **734-2525/2526**. Alternately, calls will be forwarded to Client Services at (916) 734-7373.

PROCEDURE

A. All Incoming calls **MUST** be answered in the following manner:

1. The tone of the operator must always be polite and courteous.
2. Speak slowly and clearly as to be understood by the caller.
3. State the hospital name (“UC Davis Health”) followed by section name. This is required for the following sections: Clinical Lab/Client Services, Clinical Lab (SARC or Specimen and Report Center), Anatomic Pathology (Front Office Staff/Main Desk), and Outpatient phlebotomy sites/labs. For example, Glassrock staff will answer “UC Davis Health , Glassrock Lab” (UC Davis Health + Location + Lab).
4. Technical sections will identify the department or technical section (e.g. Chemistry, Cytology); the hospital name is optional for technical sections.
5. Clearly identify yourself by name as “This is []” or “[] speaking”. It is optional

**UC Davis Health
Sacramento, CA
Department of Pathology & Laboratory Medicine**

TELEPHONE PRACTICES

Administrative Procedure # 820.A

to add “How may I help you?” or “How may I direct your call?”.

6. At any time, staff may refer calls to technical or other appropriate supervisor. Staff should only give information if they are certain it is correct. Otherwise, staff should seek help from a Specialist, Supervisor or Pathologist.
 7. Refrain from using inappropriate “slang”.
 8. Avoid use of technical acronyms except for those commonly understood by clients (e.g. CBC, UA).
- B.** Lab staff (“operator”) will routinely perform and be knowledgeable of the following phone duties:
1. Taking messages:
 - a. Message must include all pertinent information to allow the recipient to understand the nature of the call. Message will include the name of the caller, date/time of call, patient name, patient medical record number (MR#), test name, date/time of test, operator’s initials. (Research or Outreach patients may or may not have an MR#).
 - b. Operator should offer the caller the option of leaving a voicemail message, or a written message by the operator, as appropriate.
 - c. Operator may give the intended message recipient additional communication and information in the form of notes, memos or email.
 - d. Operator should tell caller when to expect a return call if known.
 2. Transferring calls:
 - a. The operator will explain that the caller will be transferred and to whom the caller will be speaking.
 - b. Perform the process to transfer call as per the phone system.
 - c. Do not perform “blind transfers”; you must speak to the person who will receive the call and inform him/her you are “transferring a call from [] regarding []” and if known, a brief description of the purpose of the call.
 3. Answering a transferred call:
 - a. Identify yourself by name and title if applicable. It is not necessary to repeat hospital name or lab section.
 - b. Acknowledge to the caller that you have been made aware of the nature of the call.
 - c. Continue the call as above.
- C.** Lab staff will be knowledgeable regarding lab tests.
1. Lab information/result inquiry:
 - a. Test status such as received, in progress (worksheet), unverified, complete,

**UC Davis Health
Sacramento, CA
Department of Pathology & Laboratory Medicine**

TELEPHONE PRACTICES

Administrative Procedure # 820.A

partial results available, assigned pathologist and assigned resident, can all be determined from the Lab Information System (LIS). Results and other information about specimens are available via the Electronic Medical Record system (EMR). Much of the status information may not be available in EMR. ***Only results that are complete, verified, or with final electronic signature on file may be reported by the Clinical Lab (SARC) or Client Services operators. Unverified results can only be reported by a CLS or Pathologist.***

- b. The operator must be knowledgeable of test requirements, how to order tests in EMR and on paper requisition forms, and which forms are used for specific tests. Test information is available in Gateway and in LIS.

Refer caller to UC Davis Health Laboratory Test Directory for questions about test requirements and collection information.

- c. At no time should staff give information unless they are certain it is correct. Refer to CLS, Supervisor or Pathologist for guidance.

2. Outside lab tests & results (Send Outs):

- a. Refer to Client Services during their regular working hours and to Clinical Lab (SARC) after hours.

3. Technical calls:

- a. Refer questions for specific technical information about test methods or interpretation of results to the appropriate technical section specialist, Supervisor or the Pathologist.
- b. Before transferring calls, verify the Specialist, Supervisor or Pathologist is available and the correct section was chosen.

4. Lab Staff are responsible for answering general lab questions and/or referring to the appropriate staff.

a. Problem resolution:

- 1) Complaints or incidents should be referred to the appropriate technical specialist, Supervisor, team leader or lab manager.
- 2) When a Supervisor or designee is not available, the operator should give the following options:
 - i. Take a message
 - ii. Forward the caller to voice mailbox of the Supervisor
 - iii. Offer to do either of the above options in addition to a personal follow up to the Supervisor or designee

b. Lab Staff must respond to notification of hospital disaster:

- 1) Lab telephone operator must notify a CLS Specialist, CLS

**UC Davis Health
Sacramento, CA
Department of Pathology & Laboratory Medicine**

TELEPHONE PRACTICES

Administrative Procedure # 820.A

Supervisor or Manager and follow the department Disaster Procedures # 300.A and #963.A.

- c. Misdirected phone calls should be handled with professional courtesy. Help the caller when possible or transfer back to the Main Hospital Operator at (916) 734-2011. Forward repeated misdirected calls to the supervisor to follow up.
 - d. Miscellaneous inquiries:
 - 1) Questions about outside Courier Services should be directed to Client Services.
 - 2) The operator must be knowledgeable on general lab information (e.g. chain of command).
5. Personal Calls and cellular phone usage:
- a. Personal calls should be short in duration and limited to break times.
 - b. Cell phone usage:
 - 1) Cellular phones are not to be used by staff except in designated locations as described in UC Davis Health Administrative Policy 1331.
 - 2) Cell phones are not to be turned on while staff are working in the patient care areas.

REFERENCES:

- UC Davis Health Administrative Policy 1331: Use of Cellular Telephones and Other Cellular Devices.

**UC Davis Health
Sacramento, CA
Department of Pathology & Laboratory Medicine**

TELEPHONE PRACTICES

Administrative Procedure # 820.A

PROCEDURE HISTORY

Date	Written/ Revised By	Revision	Approved Date	Approved By
	L. Musek	New		
9/94	JBS	Revised	9/94	R.C. Cardiff, MD
3/96	C. White	Revised	3/96	R.C. Cardiff, MD
11/96	C. White	Revised	11/96	R. Green, MD
12/97	C. White	Annual Review	1/98	R. Green, MD
7/99	D. O'Sullivan	Annual Review	7/99	R. Green, MD
6/00	D. O'Sullivan	Annual Review	6/00	R. Green, MD
7/01	D. O'Sullivan	Annual Review	7/01	R. Green, MD
8/02	D. O'Sullivan	Annual Review	8/02	R. Green, MD
8/03	D. O'Sullivan	Annual Review	8/03	R. Green, MD
11/04	D. Wright	Annual Review	11/04	R. Green, MD
10/05	D. Wright	Annual Review	10/05	R. Green, MD
9/06	D. Wright	Revised	9/06	R. Green, MD
9/07	C. White	Reviewed	9/07	R. Green, MD
7/08	C. White	Revised	7/08	R. Green, MD
7/09	C. White	Annual Review	7/09	L. Howell, MD
06/10	C. White	Revised	06/10	L. Howell, MD
06/11	C. White	Reviewed	06/11	L. Howell, MD
09/11	C. White	Revised	09/11	L. Howell, MD
09/12	D. Richardson T. Cox	Revised: greeting, transfer etiquette, cell phone usage	09/12	L. Howell
10/14	E. Brennan	Revised: minor	10/14	L. Howell
10/16	S. Okimura	Biennial Review	10/16	L. Howell
07/20	E. Karanja	Revised: Minor edits	07/20	L.Howell Via OnBase