

**Document Title: Verbal Order/Add-On Policy**

Author	Effective Date:	Supersedes Procedure #
Lisa Curran	12/2001	SH.CP.AA.lgp.0077.0002
John Perry	11/2002	HH Policy XX: Compliance, sect IX

Revised By:	Date Revised	Effective Date
Heather C. Coté		HA 2/1/12 RR 10/15/12 SMA 3/1/13

Approval Signature	Approval Date
Neil Blumberg, MD	<i>Neil Blumberg</i> 10/14/12
James Corsetti, MD	<i>James Corsetti</i> 7/18/12
Julietta Fiscella, M.D.	<i>J Fiscella</i> 11/21/11

Distributed to	# of Copies	Distributed to	# of Copies
Highland*	1		
Ridgeland Road*	1		
Strong*	1		
*via e-copy			

**TITLE: Verbal Order/Add-On Policy**

**I. POLICY**

A verbal order/add on request received for laboratory testing by a provider must be followed up with a written request within 48 hours of the date requested. A request for written follow up will be attempted three times – once at the time of the initial verbal request and, if not received, twice by faxed request. The written follow up includes:

- Patient name (Last, First)
- DOB
- Date of Request
- Requested laboratory test(s)
- Diagnosis
- Provider signature

Once written follow-up is received from the ordering provider, the record follows the current storage process.

If written follow-up is not received, documentation of three attempts is written on the form. The form is filed for documentation purposes.

**HIGHLAND:**

Blood Bank Emergency verbal orders are the only verbal orders accepted. In some situations, it is appropriate for the Blood Bank to receive verbal orders such as “stay 2 units ahead”. Blood Bank may accept such orders and shall document them. Written orders are to be received at the time of product issuance. Should a provider contact the laboratory and request other testing be performed, (s)he should be notified of this policy and asked to either fax the order or send an “Add On Test” requisition via the HIS.

**IMPORTANT NOTE**

When accepting a verbal order, read back the entire order to the caller to verify accuracy of transcription.

**AUDITING AND MONITORING**

The verbal order process is audited and monitored by the Client Services supervisor and/or designated Client Services staff. The process is reviewed every four months for trends and statistics.

**II. PURPOSE**

Guidelines for accepting a verbal order/add on request for laboratory testing.

**III. RESPONSIBILITIES**

Medical Directors & Lab Managers	Supports development of this policy and revise as needed
Compliance Associate	Supports the development of this policy.
Client Service, Phlebotomy, Specimen Management and Technical Staff	Follow the policy

**V. REFERENCES**

- URMC Labs Client Services Procedure Manual:
  - Verbal OrderAdd-Ons Outpatients Procedure
  - Add On Procedure Outpatient
  - Outpatient Add On Authorization Policy
  - Fax Procedure
- NYS Medicaid Program Laboratory Manual Policy Guidelines, p4
- NYS DOH 58-1.7 Acceptance of Specimens