1. **POLICY**

 It is the policy Einstein Medical Center Hospital Laboratories to monitor the transfer of results from the instrument interface, to ORV (order result viewer) for clinical pathology and case listing for anatomic pathology, to Powerchart.

 **II. IMPLEMENTATION**

 A. Automated Entry of Results –**Einstein Medical Center Philadelphia**

 1. Semi-annually, instrument printouts are checked against results in ORV for clinical pathology and case listing for anatomic pathology, to insure correct transmission of results to Powerchart. ORV and case listing is printed and compared to Powerchart. Normal values including units, auto-calculations, corrected results, and appended comments are also reviewed in case listing and PowerChart. One outpatient and one inpatient report is reviewed and noted.

**NOTE: Where multiple sites use the same recipient system (e.g. the same installed instance of an electronic medical record system), validation need only occur for the interface (i.e. at one of the sites) and not for each individual site that is served by that single installed system**

 2. The standard is 3 patients per instrument or procedure. Choose patients with appended comments and/or modified results. This is noted on the form Result Transmission Documentation. (AD02-038 Form A), dated and initialed by the Technologist/Technician reviewing the documentation. The instrument printouts are kept in the departments.

 3. This function is performed by each individual laboratory department. The Result Transmission Documentation logs and copies of the reviewed patient reports are then forwarded to the Lab IT Manager or designee for review. The IT Manager or designee for the lab will print and review the Powerchart screen prints. A designee from Lab administration will arrange to have all the documentation sent to the Lab IT Manager for review by the end of June and January.

 4. The Lab IT Manager documents on (AD02-038 Form A), signs, and returns a copy to the department.

 B. Manual Entry of Results – **All Sections at EMCP and EP (NA for Anatomic Pathology)**

 1. Daily, the Technician/Technologist is required to check the manual entry of results at the shift end by reviewing the data entry, comparing to the completed worksheet, and initialing the printout.

 2. Semi-annually, the results on the worksheet are checked against the results in ORV, to insure correct transmission of results in Cerner. The results inquiry is printed and compared to Powerchart. Normal values, auto-calculations, corrected results, and appended comments are also reviewed in Cerner and Powerchart. One outpatient and one inpatient report is reviewed and noted (Form#)

 3. The standard is 3 patients per manual workstation entered or manual procedure by department. Choose patients with appended comments and/or modified results. This is noted on the form "Result Transmission Documentation." (Form# ), dated and initialed by the Technologist/Technician reviewing the documentation. The instrument printout, Cerner screen shots, and Powerchart screen prints are kept in the departments.

 4. This function is performed by each individual laboratory department. The “Result Transmission Documentation” logs and copies of the reviewed patient reports are then forwarded to the Lab IT Manager or designee for review.

 C. Manual Entry of Results -- Microbiology, Reference Testing

1. The Microbiology Supervisor reviews the daily Microbiology Culture Activity Review Report which includes all final and pending culture results. This should be done daily, once a week at the minimum.
2. The Microbiology supervisor documents this on Microbiology form BAC01-000 Form A.

 D. Reference Laboratory Interface – EMCP and EP (Clinical and Anatomic Pathology)

1. Semi-annual transmission from Quest Clinical Laboratory are checked against the hard copy Quest report, and compared to ORV and Powerchart. The hard copy of Quest results can be printed from Care360 (account 22627 EMCP 22560 EP, AP 22560). One outpatient and one inpatient report is reviewed and noted (AD02-038 Form A)
2. The standard is 5 patients semi-annually. Outpatients should be included. This is noted on the form "Results Transmission Documentation" (AD02-038 Form A) and given to the IT Manager or designee for review in Powerchart.

 E. Review

1. All “Result Transmission Documentation” sheets and copies of the reviewed patient reports are submitted to the Lab IT Manager for review and documented on. (AD02-038 Form A); the IT Manager will sign, date and return a copy to the Laboratory QA manager.
2. The Lab IT Manager logs all inefficiencies and errors in result transmission. If corrective action is needed, a ticket will be opened and/or the appropriate database maintenance will be performed and documented by the Lab IT manager or designee.
3. The submission of this documentation/review is logged by the Lab IT Manager.
4. The submission/review of this documentation must be done within a month time frame of the IT manager or designee receiving the information.

**Initial Approval**:

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| --- | --- | --- |
| **Date** | **Printed Name** | **Signature** |
| 4/1/2016 | Nancy A. Young, MD, FCAPMedical Director |  |
| 4/1/2016 | John HauckLaboratory IT Manager |  |
| 4/1/2016 | Jaclene Kokoszka Lab Quality Manager |  |
| 4/1/2016 | Sasha VoceLab Administrative Director |  |

**Annual Review**

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| **Date****Reviewed** | **Reviewed By** | **Revisions** |
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