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Owner Jeanna Begay  
Area Administrative - Waived Testing  
Applicability Hopi Health Center  
References QSA.01.01.01, QSA.01.02.01, QSA.01.03.01 + 2 more

## Waived Testing – Handling, Testing & Reporting Proficiency Testing Policy

### PURPOSE

This procedure provides instructions to the Waived Testers in handling, testing and reporting proficiency test results.

### PROFICIENCY TESTING

Proficiency Testing (PT) serves as an external check to verify the accuracy of our laboratory's test results by providing unknown specimens to analyze. It is a valuable and important aspect of a laboratory's overall assessment of quality. Laboratories gain significant information about their performance as a result of participation in a PT program. The laboratory maintains annual enrollment in the American Proficiency Institute (API) proficiency test program for waived tests and are received at least twice a year.

### PT GUIDELINES

- The point of care testing (POCT) coordinator will notify one or more non-laboratory staff that they are assigned to perform proficiency testing samples. The POCT coordinator will notify the non-laboratory staff and/or nursing supervisor of the due date and when the results must be returned.
- All PT samples must be examined or tested in the same manner as patient specimens and tested only once.
- The non-laboratory testing personnel will **not** communicate with any other hospital or clinic

waived test site regarding the samples or the results prior to the due date for the submission of results.

- The non-laboratory testing personnel will **not** send any PT samples to another hospital or clinic waived test site. The non-laboratory testing personnel will not run any PT samples received from another hospital or clinic waived test site. The non-laboratory staff must promptly notify the laboratory supervisor if another hospital or clinic sends their PT samples to the waived test sites of this hospital.
- The non-laboratory testing personnel must keep all documents together as given to him/her by the POCT Coordinator:
  - How the PT samples were handled and tested;
  - The PT kit instructions, all worksheets, instrument printouts and logs related to testing the PT samples;
  - Certification Statement signed by the non-laboratory testing personnel and the Laboratory Director and/or designee; and
  - Submitted Result Form.
- Once the final PT evaluation report is received by the laboratory supervisor, the results will be communicated to both the POCT Coordinator, non-laboratory testing personnel and non-laboratory testing personnel's supervisor.
  - Your results will be graded (Acceptable/Unacceptable).
  - If the results are acceptable, no further action is required.
  - The PT evaluation report and documentation will be filed for two years.
  - If one or more results are unacceptable, then the POCT Coordinator will work with the non-laboratory testing personnel to perform an investigation and corrective action.
  - All results that are not graded or given a 100% due to non-consensus or lack of a peer group will be evaluated.
  - The investigation, corrective action, PT evaluation report and documentation will be filed for two years.

## PROCEDURE

### A. Assignment of PT:

1. The laboratory will ensure that the kit contains a result form and contain all samples listed on the packing slip. Missing or damaged samples must be reported to API within three days for replacement.
2. The laboratory will notify the POCT Coordinator of received shipment of proficiency test specimens. A due date will be noted on the copy of the results form to be used by the non-laboratory personnel to record his/her results.
3. Non-laboratory personnel who routinely performs waived testing should be the one performing the proficiency testing. Proficiency testing should be rotated among all non-laboratory testing personnel and analyzers (glucose meters).

B. Handling, Testing and Reporting of Proficiency Test Specimens:

**\*\*\* USE STANDARD PRECAUTIONS WHEN HANDLING ALL PT SURVEY SAMPLES. EACH SHIPMENT INCLUDES A BIOHAZARD WARNING STATEMENT EXPLAINING PROPER HANDLING. \*\*\***

1. Store samples in the refrigerator until ready to test.
2. Analyze or test the specimens in the same manner as routine patient testing.
3. **Read and follow all storage and testing instructions before testing samples.**
4. Follow the waived test procedure in this manual as a reference while performing proficiency testing.
5. Once testing is completed, sign, date and indicate sample numbers tested on the "Certification Statement".
6. Return the results forms back to the laboratory who will submit results online to API (<https://api-pt.com/>) before the due date.

## INCIDENTS INVOLVING ACCIDENTAL EXPOSURE TO INFECTIOUS PT SAMPLES OR OTHER

Incidents of personnel exposure to infectious specimens, through needle sticks, contamination of the mucous membranes through splashes or aerosolization or cuts from containers, should be reported immediately to the appropriate hospital staff as stated in the hospital's infection control policy. The non-laboratory testing personnel's supervisor will notify the laboratory and complete an incident report on iSTAR (hospital website).

### Approval Signatures

Step Description	Approver	Date
Medical Officer Pathologist	Noelle Blue Arm: Medical Officer Pathologist	02/2024
Chief Nurse Executive	Rachel Hamblin: Chief Nurse Executive	02/2024
Lab Supervisor	Kendrick Fritz: Supervisory Medical Technologist	02/2024
Director of Quality Management	Jose Burgos: Public Health Nurse Director	02/2024
Medical Technologist	Jeanna Begay	02/2024

## Applicability

Hopi Health Center

## References

QSA.01.01.01, QSA.01.02.01, QSA.01.03.01, QSA.01.04.01, QSA.01.05.01

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