Policies—North Ottawa Community Hospital

Additional Testing on Already Submitted ("Add- On" Tests)

If a physician writes orders for additional tests after specimens have already been collected or submitted to North Ottawa Community Hospital Laboratory, it may be possible to avoid an additional collection or draw. In most cases, this would apply to specimens <24 hours old, but some tests may be performed on serum that has been refrigerated for up to a week. Please call the Specimen Processing area at 616-847-5382 to request additional testing and to confirm specimen volume and type acceptability. If a problem arises after the order is taken, the laboratory will notify your office immediately.

Cancellation of Tests

Cancellation notification received prior to test set-up will be honored at no charge. Requests received following test set-up cannot be honored.

In the event the specimen is found to be unacceptable for testing, notification will be made to the collection unit and no charge will be applied.

Critical Value Notification

Lab.Admin.1.15

It is the policy of North Ottawa Community Hospital Laboratory to give immediate notification of critical laboratory values to the ordering clinician or his/her representative.

Purpose

The purpose of this critical value notification policy is to allow prompt clinical intervention of potentially life-threatening situations that are indentified by critically abnormal laboratory test values.

Laboratory Compliance Overview

North Ottawa Community Hospital Laboratory is committed to ensuring compliance with laws and regulations set by the Health Care Financing Committee (HCFA), Medicare, and Medicaid. The goal is to have compliance efforts become an integral part of doing business, thereby creating that mind set in the laboratory. Medicare will only pay for services that it determines to be "reasonable and necessary" under section 1862(a)(1) of the Medicare law. If Medicare determines that a particular service, although it would otherwise be covered, is "not reasonable and necessary" under Medicare program standards, Medicare will deny payment for that service.

In order for North Ottawa Community Hospital Laboratory to comply with the rules set forth by the government, it is essential for you, the physician, to supply **ICD-10 codes** (codes of diagnosis) and to determine if the laboratory tests you would like to order are medically necessary. If the desired tests do not have a diagnosis providing medical necessity, by Medicare standards, then your office staff will be required to provide the patient with an "Advance Beneficiary Notice" (ABN) to read and sign. This states that the service requested by the physician may not be covered by Medicare and that the patient may be responsible for the bill. By signing the ABN, the patient agrees to be personally and fully accountable for payment should Medicare deny payment for the test indicated. Another reason for an ABN to be signed is that the predetermined frequency limit for a test may have been exceeded.

Patient Identification Accuracy

North Ottawa Community Hospital must adhere to proper identification of patient specimens for good patient care, for both quality and safety reasons. The need for proper identification is specified by the College of American Pathologists (CAP) Laboratory General Checklist Commentary GEN 40700: "Specimens lacking proper identification or an accompanying requisition should not be accepted by the laboratory."

To be compliant, it is important that each specimen be properly labeled with the same demographics that appears on the paperwork. If a discrepancy has been identified upon specimen arrival at North Ottawa Community Hospital, we will contact you to make you aware of the discrepancy and cancel the test order.

Specimen Acceptance Policy

Purpose
To ensure that all specimens accepted for analysis will be properly identified and that the integrity of the specimen is of a quality that permits accurate results.

Patient Identification & Specimen Labeling Protocol

- It is the responsibility of the staff collecting the specimen to identify and draw the patient correctly and label the specimen at the point of collection.
- The collector must ask the patient to state his/her full name and his/her birth date and match that information against the requisition brought in by the patient
- **ALL** samples must be labeled at the patient's bed or chair side immediately after collection and within sight of the patient.
- Tubes are not to be labeled prior to collecting specimens. **Urine Containers may be pre-labeled** by the staff responsible prior to giving the container to the patient.
- Requests accompanying specimens collected at the physician's office should also include the date and time of collection, and initials of collector.

Minimum Labeling Requirements

A. Specimens collected by laboratory/hospital staff:
1. Patient's full legal name (last, first).
2. Date of birth.
3. Date and time of collection.
4. Initials of the person collecting the specimen

B. Off-site clinical laboratory specimens collected by non-hospital/laboratory personnel:
1. Patient's full legal name (last, first)-**no nicknames**.
2. Date of birth.
3. Date and time of collection should be included on order.
4. Initials of the person collecting the specimen should be included on order.
5. Requisition number sticker placed on each sample if available.
6. Specimens which are submitted in a specimen container with a lid (ie, sputum, stool, urine, etc.) must be labeled with the same information as above on the body of the container. **Labeling the lid is not acceptable**.

Acceptance Protocol

A. Unlabeled Specimens Blood and Random Urine:
If an unlabeled specimen is received by the laboratory, we will contact the physician's office/provider.
   a. Blood and random urine specimens that are unlabeled/mislabeled will not be accepted.
   b. The requesting unit is notified to submit a new requisition and a new specimen.

B. In situations in which the specimen is impossible or difficult to recollect (such as cerebrospinal fluid, joint fluid, tissue biopsy, etc), the provider will be notified and informed of the unlabeled/mislabeled specimen. Two options will be provided:
1. Recollect the specimen
2. Have the responsible party come to the lab and correctly label the specimen.

- Inadequate specimens (inappropriate age of specimen, wrong collection tube type used, etc.) are not acceptable. Leaking and contaminated specimens are not acceptable.
- Should a specimen be deemed not acceptable after results have been reported, as in the case of the requesting unit discovering a mislabeling, the same protocol is followed.
- Unacceptable specimens are not returned to the requesting unit. The requesting unit is notified to submit a new requisition and a new specimen.

Integrity of Specimen
Some specimens cannot be analyzed because of improper collection or degradation in transit. Common sources of inaccurate test results causing unacceptability are:

- *Hemolysis*—Hemolysis occurs when the membrane surrounding red blood cells is disrupted and hemoglobin and other substances escape into the serum or plasma causing a pink or red discoloration. This most often occurs during collection as a result of a traumatic stick or the use of a syringe with a small bore needle being used to fill tubes. Grossly or moderately hemolyzed chemistry or serology specimens should be redrawn since hemolysis may adversely affect test results.
- *Lipemia*—Turbid or milky sera may be produced by the presence of fatty substances in the blood after a recent meal. Therefore, it is generally recommended patients fast for 12 to 14 hours before specimens are drawn. Gross lipemia is not a cause for rejection, however, the serum will be ultracentrifuged before analysis.
- Specimens collected in the wrong tube type are not acceptable.
- Improperly preserved 24-hour urine collections as well as collections that have not been refrigerated during the 24 hours are not acceptable.

Specimen Rejection
All tests are unique in their testing requirements. To avoid specimen rejection or delayed turnaround times, please check the "Specimen Required" field within each test. You will be notified of rejected or problem specimens upon receipt. Please review the following conditions prior to submitting a specimen to North Ottawa Community Hospital Laboratory:

- Full 24 hours for timed urine collection
- pH of urine
- Lack of hemolysis/lipemia
- Specimen type (plasma, serum, whole blood, etc.)
- Specimen volume
- Patient information requested
- Patient/specimen properly identified
- Specimen container (metal-free, separation gel, appropriate preservative, etc.)
- Transport medium
- Temperature (ambient, frozen, refrigerated)

STAT Testing
STAT tests may be ordered for hospital inpatients, outpatients seen at our Patient Service Centers, and specimens collected in the physician's office. When STAT specimens are collected in the physician's office, it will be necessary to call the courier. Place all STAT specimens in a red "STAT" transport bag.

STAT Results will be reported within 60 minutes for inpatients and Emergency Department patients and within 1 hour after reception of specimen for specimens collected in the physician's office. Physician office STATs will be called to the office and a copy sent via fax or remote printer upon request.

Supplies
Laboratory supplies are available to the physician's office for use in referring specimens to North Ottawa Community Hospital Laboratory. Supply requisitions should be kept on hand so that supplies can be reordered. Complete the requisition and give it to the courier. Supplies should be delivered the next day. Supplies are provided in good faith that their use will be limited to the submission of specimens to North Ottawa Community Hospital Laboratory. For immediate needs, call North Ottawa Community Hospital at 616-847-5209.

Supporting Diagnosis
The Department of Health and Human Services and the Office of Inspector General in guidance published August 24, 1998 require that laboratories communicate to physicians that laboratory studies must be signed in accordance with applicable state or federal law and must be accompanied by sufficient clinical information (ICD-9 code, diagnosis, sign, or symptom) to define the medical necessity of the ordered studies. Medicare will only pay for tests that meet the Medicare coverage criteria and are reasonable and necessary to treat or diagnose an individual patient. Section 1862(a)(1)(A) of the Social Security Act.

Turnaround Time (TAT)

Lab.Admin.1.8

Policy

It is the policy of North Ottawa Community Hospital Laboratory to report testing results in a timely manner, and to notify the test requester when testing is delayed. The House Supervisor should be notified of any equipment failures or any other known issue that could lead to delays in patient testing. Time of completion will be determined by the type of test, next anticipated batch analysis, and diagnostic significance based on patient clinical presentation. The laboratory medical director and laboratory manager will determine if test will be sent to a reference laboratory or held for in-house analysis. Every effort will be made to meet anticipated turn-around times

Purpose

This document describes the turn-around times defined by NOCH Laboratory for each of its tests, and describes the procedure for notifying the requester when testing is delayed.

Definition

Turnaround times are defined as the interval between receipt of order by the laboratory personnel and results reporting.

STAT Test

Results will be available within one hour. If there is a delay, the technologist shall notify the requesting physician/department directly with an estimated time of completion. Time of completion will be determined by the type of test, next anticipated batch analysis, and diagnostic significance based on patient clinical presentation. The laboratory medical director and laboratory manager/administrator will determine if test will be sent to a reference laboratory or held for in-house analysis. The technologist will be responsible for calling to notify the appropriate location, provider, or department that their STAT or Call Results are available on their printer or fax machine. This includes calls to:

- The hospital department (inpatients excluding ER), OR
- Ordering physician (for outpatients, IHCN orders, or Assisted Living Centers that do not have a staff member authorized to accept laboratory results), OR
- Other facilities as appropriate, such as Davita, Urgent Care Center, Ambulatory Care, or Skilled Nursing Facilities where the nurse caring for the patient is the authorized individual

responsible to accept critical and STAT Results. In this instance, when the Technologist calls the nurse, it is the responsibility of the nurse to contact the Physician with results.

AM Routine (4:30AM requests, inpatients only)

Results will be available by 7:00 a.m. (results print to all inpatient and ED units upon verification in lab information system). If there is a delay, the technologist shall notify the requesting department/physician directly with an estimated time of completion.

Timed Requests

Results will be available within one hour after collection.

Today/ Routine Requests

The majority of our routine test results are available within 8 hours of collection. Several of our low volume tests are batched and are generally available within 72 hours.

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Microbiology

1. Preliminary results of routine cultures are available at 24 hours, and sensitivities are usually available after 48 hours.
2. Blood cultures: Reported in 5 days. Positives are reported immediately according to the Laboratory Critical Value Policy 6.3.02.
3. Mycology: Reported in 6 weeks. Positives reported when identified.
4. Mycobacteriology: AFB smears reported within 24 hours. Cultures reported in 6 weeks. Positives are reported immediately according to Critical Value Policy 6.3.02.
5. Positive results for any of the following tests are reported immediately according to Critical Value Policy 6.3.02: CSF, body fluid smears
6. Gram stains - Ordered gram stains are performed and resulted within 8 hours. Gram stains on CSF and synovial fluids are performed and resulted immediately.

Reference laboratory Testing

Turnaround time is determined by the reference laboratory. Once the result is received by NOCH laboratory, the result will be available immediately for those reference labs that are interfaced to the LIS, otherwise results will be available within 24 hours.

Cytology

Gynecological cytology results will be available within 14 days. Uncomplicated non-gynecologic cytology results will be available within two working days.

Histology

Results require two working days unless special fixation, special stains, or consultation are indicated.
Frozen section turn-around time benchmark is 90% of frozen sections resulted in less than or equal to 20 minutes for single specimen cases.

Unlisted Tests

New Procedures are being developed throughout the year at our laboratory as well as at Mayo Medical Laboratories, therefore, some tests may not be listed in this catalog. For more information about unlisted tests, please call North Ottawa Community Hospital Specimen Processing at 616-847-5384.