University of Missouri Health System	Document Owner: Kyle Hammerton	Last Approved Date: 11/29/2021
	Content Expert: Rachel Mullins	

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

I. Policy Statement

- a. To ensure that critical values are reported to the responsible caregiver and the appropriate action in reporting and confirming receipt of the critical value is taken.
- b. This procedure applies to all testing personnel at MU Health Care (MUHC) Pathology Laboratories.
- c. This applies to results received by the laboratory from outside reference laboratories

II. Definitions

- a. LIS Laboratory Information System
- b. EMR Electronic Medical Record
- c. Critical Values Results that, if left untreated could be imminently life threatening or place the patient at serious risk. These results are defined and reviewed by the Executive Committee of the Medical Staff (ECOMS) and the laboratory medical director with the section directors.
- d. Significant values are infectious in nature or conditions of particular significance, which may possibly require medical attention.

III. Process/Content

- a. Testing personnel will examine the testing conditions and perform a history check.
 - i. Verify there are no errors regarding specimen integrity or labeling
 - 1. Check for possible contamination
 - 2. Ensure optimal tube fill and correct collection container
 - 3. Perform clot check for hematology and coagulation testing
 - 4. If there is more than one label on the tube, check to see if labels match
 - 5. Check previous results, if available, for consistency.

- ii. Verify there are no clerical errors, and ensure all manual entry test have been recorded accurately.
- iii. Verify that there are no analytical errors
 - 1. Review instrument results for any abnormal assay flags
 - 2. For hematology assays, perform slide review to verify results or refer to Result Reporting Hematology

b. Inpatient Procedure

- i. Testing personnel will phone the results within 1 hour from the time the critical result is obtained to the requesting physician or nurse care provider. If unable to notify via phone, A miSecure message to the requesting physician can be sent with the message, "Critical Value, please call (Laboratory) at (Phone number xxx-xxxx).
- ii. If you do not get a response or cannot reach anyone within 10 minutes, please call the hospital operator and ask for the provider on call for the unit.
 - 1. The on call list is also on Citrix receiver
 - 2. The provider taking care of the patient is also included on the banner bar in PowerChart

TEST, LABSEVEN 🔺				
	ZTEST, LABSEVEN 51 Years Female DOB: 05/17/1966	FIN: 26723855 CR EMERGENCY PATIENT ADMIT: 08/13/2015 11:16 DISCH: 08/14/201	5 17:23	
	Code Status: No Electronic Code Status Order For This Visit	MRN:01-53-58-31-9 Most Recent Weight (kg):100 kg		
	Allergies: Allergies Not Recorded	MU Healthe:Never Invited Physician Contact: <no contac<="" primary="" th=""><th></th></no>		

- 3. Document any failed attempts to notify the patient's provider
- iii. Testing personnel will document the following elements in the LIS.
 - 1. The particular analyte exceeding the critical value
 - 2. Name and title of person taking results (first and last) plus Registered Nurse (RN) or Medical Doctor (MD)
 - 3. The date and time (only required if not documented in real time) results were called,
 - 4. Results were read back and verified
- iv. You may use result canned comments to meet these documentation requirements. Enter "Call" and Press F9. A text comment will populate, and you will be prompted to fill in the blanks with the above elements. Note: Some other system specific results tools may also provide documentation assistance, i.e., Cellavision, CareSphere, etc.
- v. Results are released and charted in the EMR via the Order Comment by the instrument or testing personnel.

vi. The Supervisor or designee reviews the critical results to assure that all critical values are called and documented appropriately.

c. Outpatient Procedure, MUHC provider

- i. Testing personnel will phone the results immediately within 1 hour from the time the critical result is obtained to the requesting physician or nurse care provider. A miSecure message can be sent to the requesting physician with the message, "Critical Value, please call <u>(Laboratory)</u>, at <u>(Phone number xxx-xxxx</u>).
- ii. If you receive no response within 10 minutes see the "Outpatient Procedure No Response" below.
- iii. Testing personnel will document the following elements in the LIS:
 - 1. The particular analyte exceeding the critical value
 - 2. Name and title of person taking results (first and last) plus Registered Nurse (RN) or Medical Doctor (MD)
 - 3. The date and time (only required if not documented in real time) results were called,
 - 4. Results were read back and verified
- iv. Document any failed attempts to notify the patient's responsible licensed provider.
- v. You may use result canned comments to meet these documentation requirements. Enter "Call" and Press F9. A text comment will populate, and you will be prompted to fill in the blanks with the above elements. Note: Some other system specific results tools may also provide documentation assistance, i.e., Cellavision, CareSphere, etc.
- vi. Results are released and charted in the EMR/Order Comment by the instrument or testing personnel.
- vii. The Supervisor or designee reviews the critical results to assure that all critical values are called and documented appropriately.

d. Outpatient Procedure, MUHC provider, No Response or after 5PM

- If testing personnel have received no response within 15 minutes, or it is after 5 PM, identify the on-call provider for the respective service (for example: Family and Community Medicine) as listed in the MUHC Call Schedule or inquire with the hospital operator. Send a miSecure message to the on-call provider.
- ii. If testing personnel receive no response within 15 minutes, then call the House Manager for further assistance.

- iii. The house manager will identify other providers of service in the following sequence: attending physician on call, the Director of the Division or Department Head.
- iv. Once you are able to communicate the results to the provider, document all required information (Elements 1-4) in the EMR/Result Comment as previously outlined.
 - 1. Note: Refer to paragraph f. for all delayed or failed attempts to reach provider.
 - Entering a Result comment will create a corrected report.
 Continue with corrected report in order to enter updated result comment.
- v. Results are released and charted in the EMR by the instrument or testing personnel.
- vi. The Supervisor or designee reviews the critical results to assure that all critical values are called and documented appropriately.

e. Outpatient procedure - Non-MUHC provider

- i. Review the available lab test information, identify the phone number for the critical call-back and contact the provider.
- ii. If there is no phone number listed for the outside provider or institution, identify the medical practice location or outside facility and associated phone numbers.
- iii. Communicate the results to the provider or office person and document all required call elements (1. through 4.) in the EMR/Result Comment as previously outlined.
- iv. If testing personnel is not able to identify a provider within 15 minutes (no response or irregular business hours), document the:
 - 1. Time, date and attempt to notify provider in the EMR/Order Comment
 - 2. Release the test results.
 - 3. Complete QAOR

Regular Business Hours: No further action required – STOP. **Irregular Business**:

- 1. Technologist will print screen of test results.
- Place on centralized location for follow up Huddle Board/Command Center for follow up be technologist on next regularly scheduled business hours.

- Next regularly scheduled business hours, shift will make 2 additional attempts to contact the provider or outside facility and follow the previously mentioned instructions of communication and documentation.
 - a. If contact is made with provider, results will be communication and documented in the Result Comment.
 No further action required - STOP.
 - b. If failure to contact provider, the technologist will enter documentation stating 2 additional unsuccessful attempts were made with the details of the additional attempts documented. No further action required – STOP.
 - c. Enter QAOR.

f. Delayed or failed attempts to reach Provider during the same day:

- i. All communication to providers that occurs later than one hour from the time of the test result availability is considered to be delayed.
- ii. Please complete a QA-OR for all delayed communication or ultimate failure to contact a provider.
- iii. The Supervisor or designee reviews the critical results to assure that all critical values are called and documented appropriately.
- g. Significant results
 - i. Significant results and or findings will be called to the ordering provider or care team within 24 hours of result discovery.
- h. Please review Critical Values and Significant result list

IV. Attachments

a. Laboratory - Critical and Significant Results - List