

Purpose:

To ensure that results which are significantly abnormal as to warrant immediate medical attention are communicated to the physician/client/pharmacist in a timely manner.

Procedures:**CRITERIA FOR PHONEABLE RESULTS**

Each region of Dynacare adheres to regional-specific limits that have been defined specifically for the community laboratory environment, and are approved by the regional Medical/Laboratory Director for use.

CRITICAL VALUES – These limits have been approved by the Medical/Laboratory Director for use. Results must be called in as soon as the results are available during lab hours.

Dynacare Manitoba Chemistry/Hematology: Summary of Critical Values

Assay	Lower Limit	Upper Limit
Amylase		1150 U/L
Calcium	< 1.65 mmol/L	> 3.25 mmol/L
Digoxin		3.5 ug/L
Glucose	< 2.8 mmol/L	Adult >30 mmol/L Child >20 mmol/L
Phenytoin/Dilantin		>130 mg/L
Potassium	2.5 mmol/L	Fax 2.5 – 3.0 mmol/L Fax 5.4 – 5.9 mmol/L Phone > 6.0 mmol/L
Sodium	<120 mmol/L	> 160 mmol/L Fax 125 – 129 mmol/L Phone < 120 mmol/L
Lithium		> 2.5 mmol/L
WBC Count		≥ 150.0 x 10 ⁹ /L
Absolute neutrophils	<0.5 x 10 ⁹ /L	>100.0 x 10 ⁹ /L
Platelet Count	≤ 20.0 x 10 ⁹ /L	No upper limit
Hemoglobin	≤ 60 g/L	0-31 days > 216 g/L >31 days >200 g/L
INR		≥ 4.5
P.T.T.		≥ 100 secs
Malaria	Positive	

A. OTHER PHONEABLE RESULTS

In addition to Critical results, Dynacare also phones results based upon physician/clinician/pharmacist requests for phoning. Other results phoned at the physician/clinician/pharmacist's request include:

1. STAT Requests

Results will be available within 4 hours of receipt of the specimen in the testing laboratory.

2. URGENT Requests

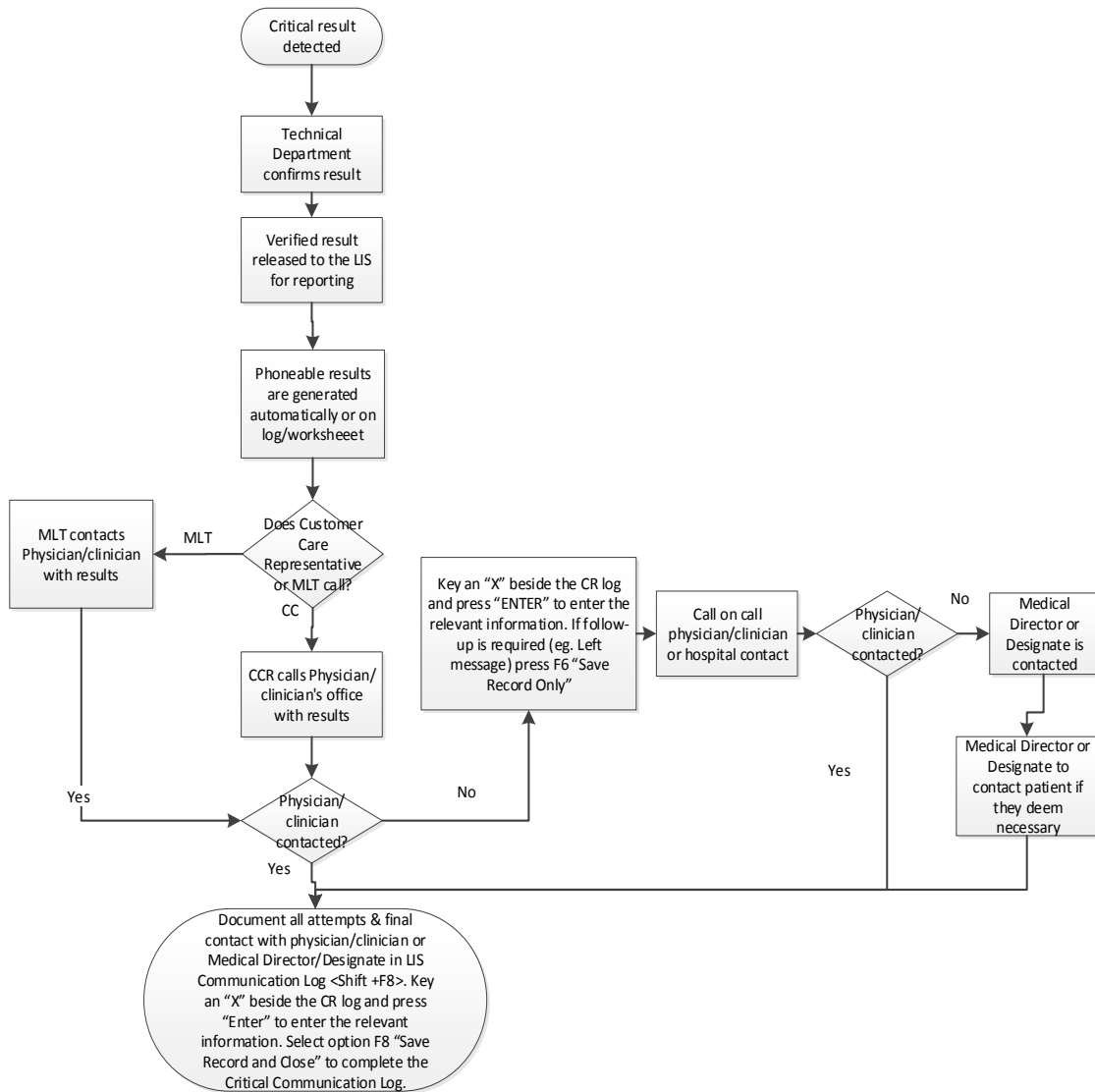
Results will be available within 6-12 hours of receipt of specimen in the testing laboratory.

- 3. VERBAL/ASAP Requests** – A verbal/ASAP request may be made on any test at the physician/clinician's/ pharmacist discretion. A verbal request will not accelerate the speed of testing, however, the result(s) will be phoned to the physician/clinician/pharmacist as soon as the results become available. The physician/clinician/pharmacist must indicate one of the following phrases "Verbal", "Please Call", "Phone", "Fax", "ASAP", or "Telephone" on the requisition for the results to be phoned or faxed.

B. PHONING PROTOCOL

The flowchart below depicts the phoning process for critical results from the time they are detected on the bench until the physician/clinician/pharmacist, or failing that, the patient is contacted with the result.

Process Flow for Calling of Critical Results



1. The MLT releasing results is responsible for identifying phoneable results and ensuring that the specimen is retested in a timely manner if applicable.
2. The Customer Care Representative/MLT will phone or fax the physician/clinician's/pharmacist's office as per LIS instructions or instructions indicated on the requisition. For any verbal results, the caller must ask the recipient for a read-back for each verbal result given. All contacts and attempts to make contact must be documented as part of the patient's record in the LIS or communication logs, depending on Dynacare region.
3. If the physician/clinician/pharmacist cannot be contacted, the Customer Care Representative/MLT will follow instructions indicated on the physician/clinician's/pharmacist's answering machine or in the LIS for after-hours instructions. If the instructions indicate that the results are to be left with an on-call physician/clinician/pharmacist, the on-call physician/clinician/pharmacist will be contacted

at the numbers provided. All results left with an on-call physician/clinician/pharmacist must be followed up the next day by contacting the ordering physician/clinician/pharmacist

4. if unable to reach the ordering physician/clinician/pharmacist or designate after making at least 3 attempts within 90 minutes, or unable to leave a message for the receiving physician/clinician/pharmacist, the Customer Care Representative or MLT will attempt to reach the physician/clinician/pharmacist through hospital physician locating services, directory assistance etc.
5. If a message has been left on an answering machine for the receiving physician/clinician/pharmacist, and they have not responded within 1 hour, the Medical/Laboratory Director or Designate on call will inform the Medical director . If there is no answering machine to leave a message on, the Dynacare Medical/Laboratory Director or Designate on call will be connected
6. If all avenues are exhausted, the Customer Care Representative or MLT will contact the Medical/Laboratory Director or Designate on call within the appropriate region for follow up.
7. Medical/Laboratory Directors or Designates are permitted to determine if it is necessary to contact the patient during the night (between the hours of 11:00pm and 7:00am) to inform them of their result. However, this is completed on a case-by-case basis as Medical/Laboratory Directors are not permitted to make blanket exceptions to critical guidelines.
8. When the Medical/Laboratory Director or Designate is to be contacted, the Customer Care Representative or MLT will communicate the result(s) first by phone and then by email or fax (as directed by the Medical/Laboratory Director or Designate). The email/fax must provide the necessary details, including the patient's contact number and laboratory results; an image from the LIS is sufficient. If possible, the immediately preceding test result(s) (if available) with the date of testing/reporting are to be supplied. The Medical/Laboratory Director or Designate is then to acknowledge receipt of the result by email, fax or phone. The purpose of this process is two-fold: 1) to minimize errors in communicating results with the Medical/Laboratory Director or Designate, and, 2) to provide an electronic trail of events that can be verified.
9. The Medical/Laboratory Director or Designate will be responsible for contacting the patient, ascertaining the patient's condition, and if necessary, advising them to proceed to the nearest hospital for treatment. The Medical/Laboratory Director or Designate is responsible for ensuring contact is made or, failing this, that all attempts they make to contact the patient and physician are documented in communication logs manual or in the LIS.
10. In situations where we are unable to contact the physician due to lack of information, the issue will be forwarded to the Customer Care day time staff who will follow up with the physician's office the next day to obtain the required information for future reference. All pharmacists/physicians are obligated under the terms of the College of Physicians and Surgeons to provide follow up information to permit after hours contacts.
11. If unable to contact the patient when physician/pharmacist is not available- medical director will make a decision on whether to contact RCMP/Winnipeg police to seek patient at their physical address.