

Good Samaritan Health & Wellness Center
Policies and Procedures

Subject: Reporting and Tracking of Diagnostic Test Results

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Prepared by:

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5.32 Reporting and Tracking of Diagnostic Test Results

Test results must be communicated to the ordering provider or a covering provider if the ordering provider is unavailable, within a period of time that allows prompt clinical action to be taken. The ordering provider must communicate all test results, including normal results, to patients within specified time frames (see the discussion, Procedures) to ensure patients are active participants in their healthcare. This policy applies to all types of test results, such as laboratory, cardiology, radiology, and other diagnostic tests.

Key Definitions

Abnormal test result. Test result that requires the ordering provider's attention as soon as possible but is not as urgent or life-threatening as a critical result. Abnormal findings are values that are above or below the established norms for a particular test. Typically, laboratories or testing centers judge which values are considered abnormal (for example, a value considered abnormal for some patients may qualify as normal for a patient who previously had a critical test result).

Critical test result. Test result for a condition that if left untreated may be life-threatening or place the patient at serious. Patients require urgent clinical attention.

Critical tests. Tests that require immediate notification of results, whether critical, abnormal, or normal (e.g., suspected retained object during surgery).

Direct verbal communication. Communication of test results by telephone, face-to-face encounter, or report personally handed to the ordering provider.

Electronic communication. Communication of test results by e-mail, fax, electronic health records, or other electronic means.

Normal test result. Test result that fall within the normal parameters for the particular test established by the laboratory. Requires patient notification but not on an immediate basis.

Ordering or referring provider. The provider who initiated a test for a particular patient. The provider is responsible for reviewing, signing, and acting on diagnostic tests under the scope of his or her clinical practice.

Covering provider. A provider designated to act on test results on behalf of the ordering provider if the ordering provider is unavailable.

Test result. Test results include the results of laboratory tests, cardiology tests, radiology, and other diagnostic procedures.

Provider and Staff Responsibilities

Chief Executive (or his/her designee) /Medical Director

- Implement written policy on reporting test results.
- Designate covering providers (e.g., on-call clinician, primary care provider) who will be responsible for reviewing and acting on critical test results when the ordering provider is not available. Establish a chain of responsibility.
- Regularly review and reevaluate which test results qualify as critical or abnormal.
- Regularly review and reevaluate policies.
- Ensure the health center regularly.
- Ensure the health center regularly collects data on the timeliness of reporting test results and communicating results to patients.
- Ensure the health center makes necessary improvements.

Ordering provider

- Follow up on, review, and take action on ordered test results, regardless of the ordering provider's specialty or relationship to the patient.
- Document name, phone number, pager number, or other contact information on the order form for tests. Covering providers shall be (1) another provider in the same office as the ordering provider during normal operating hours; (2) provider on call after hours, reached by calling the office phone number for the after-hours call staff; or (3) the medical director, who will be called by after-hours call staff if the provider or covering provider cannot be reached.
- Document all actions taken in response to test results in the patient's medical record (see the section on Documentation)
- Communicate test results to patients within specified time frames.

Covering provider

- Must have the authority to take action on critical test results. Staff members who may serve as covering providers include primary care providers, covering providers, laboratory directors, or the medical director.
- When contacted with a critical result, is responsible for reviewing and following up on the result and communicating necessary information to the patient (e.g., come in to the health center, go to emergency department [ED]).
- Document all actions taken in response to test results in the patient's medical record.
- Communicate actions taken to the ordering provider.

Office Nurse, Lab Nurse or Administrative Support Staff

- Keep a daily log of all tests ordered (e.g., computerized or paper log). Follow the attached procedure for tracking and recall for Pap Smears and Mammograms. All other tests are to be tracked as below:

- Place a check mark (hard copy or electronic) in the log with the date that results that are returned to the health center from laboratory, imaging facility, or other outside testing center.
- Provide returned results to the ordering provider for review, signature, and follow up action.
- Flag results that are not returned within a reasonable period of time and notify ordering provider.
- Highlight results that have been communicated to the patient or document in the EHR as appropriate.

Procedures

Depending on the type of test result, ordering providers, an office nurse during office hours, a covering provider or a provider on call may receive results from laboratories or outside testing centers by either direct verbal communication or electronic communication (see specific procedures for critical, abnormal, and normal test results below).

- Ordering providers must acknowledge receipt of the results (e.g., by telephone, call back from page, through verification systems in the medical record). Voicemails and e-mails, including e-mails with read receipt, are not appropriate acknowledgement systems.
- When results are reported by telephone, the person receiving the information must read back the information to the person calling with the results. The following process should be followed:
 - The recipient of the result writes down the result and the date/time received.
 - The result is read back to the caller.
 - The caller verifies the accuracy of the result as the recipient reads it back.
 Depending on the type of test result, ordering providers may communicate results to patients in-person or by letter, or telephone (see the section on Critical results).
- Ordering providers may request that another licensed or certified staff member contact the patient with results; the name of the person contacting the patient with results should be documented.
- When the patient must take action in response to the results (e.g., change medications, schedule a visit to the health center), providers/nurses should use direct verbal communication and document that the information was received and understood by the patient. Providers must follow the patient's HIPAA permissions if a message is left on an answering machine and/or voice mail. The message should not be considered delivered until direct contact with the patient is made, e.g., the patient calls back or the appropriate staff person has talked with the patient except in the case of normal results which may be communicated by voice mail and/or answering machine if authorized to do so on patient's signed HIPAA form.
- If the patient is not competent to make medical decisions, test results will be communicated to the patient's designated guardian or representative.
- When the patient cannot be reached (e.g., phone number is disconnected), reasonable attempts should be made to contact the patient and attempts should be documented in the medical record.

Specific procedures for communicating critical, abnormal and normal tests are as follows:

- Critical results must be communicated immediately by direct verbal communication from the outside laboratory or testing center to the ordering provider, or covering provider. During normal operational hours, the RN/LPN nurse may accept the critical lab value, using appropriate techniques and immediately advise the provider or covering provider of the results.
- In cases in which the ordering provider and surrogate are not available, results must be communicated following the established chain of responsibility.
- The following steps should be taken when the ordering provider cannot or does not respond to notification of a critical test result:
 - If the ordering provider cannot or does not respond within 10 minutes, call/page the provider a second time.
 - If the ordering provider does not respond within 15 minutes of the second call, call/page the covering provider or the patient's primary care provider (if not the ordering provider).
 - If the covering provider does not respond within 15 minutes, call/page the covering provider a second time.
 - If the covering provider does not respond within 15 minutes of the second call, call/page the Chief Medical Officer.
- Critical results must *not* be communicated over voicemail, e-mail, or to administrative assistants or other unlicensed staff members.
- Critical results and necessary actions (e.g., come in to the health center, go to the ED) should also be communicated to patients immediately by direct verbal communication.
- The health center must make every attempt to contact the patient (e.g., enlisting assistance from local authorities). All communication or attempts to communicate must be documented.

Abnormal results

- Abnormal results may be communicated to the ordering provider by direct verbal communication or electronic communication. During normal operational hours, the RN/LPN nurse may accept the abnormal lab value, using appropriate documentation techniques and immediately advise the provider or covering provider of the results.
- Abnormal results must be communicated to the patient within a set timeframe but not to exceed 14 days.
- Results can be communicated to the patient by certified letter with return receipt requested or by telephone.
- The health center must make every attempt to contact the patient (e.g., enlisting assistance from local authorities). All communication or attempts to communicate must be documented.

Normal results

- Normal results may be communicated to the ordering provider by direct verbal communication or electronic communication. During normal operational hours, the RN/LPN nurse may accept the normal lab value, using appropriate documentation techniques and advise the provider or covering provider of the results.
- All communication or attempts to communicate must be documented.

Documentation

The ordering provider must document:

- Acknowledgment of receipt of results
- Actions taken related to the patient
- The provider or office nurse documents patient notification including date and time of notification if by phone and date if by letter; the means used to communicate results (e.g., phone call, letter), and person spoken to (if applicable)
- All attempts to contact the patient if the patient cannot be reached

Chain of Responsibility:

(1) Ordering Provider

(2) Covering Provider

- a. a second provider in the office during normal operating hours;
- b. provider on call after hours – reached through after hours call staff at office phone number;
- c. Medical Director – reached through after hours call staff at office phone number.