

**HACKETTSTOWN REGIONAL MEDICAL CENTER
LABORATORY POLICY MANUAL**

GENERAL POLICIES

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Effective Date: July 2009
Cross Referenced:
Reviewed Date: 2/29/12
Revised Date: 01/1/12

Policy No: GENLAB.4.03
Origin: General Lab
Authority: Laboratory Director
Page: 1 of 2

PURPOSE

To provide an overview of the laboratory's responsibilities in obtaining the highest quality results for specimen processing.

POLICY

1. The staff of the Laboratory is responsible for the collection of venous blood specimens and for the complete labeling of the specimen at the patient's bedside.
2. The Laboratory is responsible for instructions to nursing service, physicians' offices, and the patient if the test requires special preparation or instructions.
3. The Laboratory will supply containers and preservatives for special collections.
4. Quality control materials will be run along with patient specimens as dictated by State, CAP, and JCAHO standards so as to insure the validity of results for all tests. Any aberrant QC values will be repeated and if no improvement is seen, will be reported to the lead technologist or clinical manger.
5. Quality control records are maintained and reviewed on a daily and monthly basis for trends or shifts.
6. Grossly abnormal or critical results will be repeated and verified before reporting.
7. The results of "STAT" requests will be transmitted immediately to the nursing station and/or attending physician.
8. The results of tests performed in other laboratories will be identified as such.
9. The expected or normal limits will be included with the results of all tests for which normal ranges exist.
10. If for any reason there is a delay or a delay is expected in the reporting of a test, a report stating such and an estimated time for the final report will be given to the attending RN.
11. Nursing units will be responsible for holding meals if a test is to be performed in the fasting state.
12. Maintenance will be performed as scheduled by the technologist assigned to the particular department and logged in the maintenance book for the specific instrument.

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13. Safety hazards will be noted and safety equipment and procedures are to be reviewed annually. Refrigerator and freezer temperatures will be monitored daily in accordance with Administrative Policy FA17.
14. Training programs, seminars, and workshops will be made available on a scheduled basis supplemented by special seminars that become available.
15. All laboratory tests are performed for the benefit of the patient at the request of the attending physician. No tests will be performed without the physician's written order. All requests will contain complete patient identification with patient name, identification number, age, and the name of the attending physician.
16. Results of patient testing will not be released directly to the patient without written release by the patient. Requests for copies of past test results should be referred to Medical Records.