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| **Document Author:** | **Document Owner:** | **Acknowledgement / Required Copy Holders\*:** |
| Sandra VanVranken | Sandra VanVranken | All laboratory testing personnel, and other deemed applicable staff members and faculty |

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| **Approval\*:** |
| Laboratory Administrative Division Director  *CLIA / CAP Laboratory Medical Directors*  OSUWMC/The James Clinical Laboratories Medical Director, East Hospital Laboratory Medical Director, Morehouse Laboratory Medical Director, Spielman Laboratory Medical Director, Outpatient Care East Laboratory Medical Director, Outpatient Care Lewis Center Laboratory Medical Director, Outpatient Care Gahanna Laboratory Medical Director, Outpatient Care New Albany Laboratory Medical Director, James Molecular Laboratory Medical Director, Ackerman Laboratory Medical Director, Pathology Services at The Optometry Building  *CLIA Laboratory Director*  Outpatient Care Labs - UA and Hilliard  Histology LLC Laboratory Medical Directors at Doan, East, Morehouse, Chambers Road and Department of Pathology |

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| **\*Approval and Acknowledgements\*** |
| Refer to QPulse system and Document Details report for laboratory directors(s)’ electronic signature approval, employee acknowledgment and effective date. |

1. **POLICY:**

Each Clinical Laboratories division will determine result turn-around times for each test. The division director, manager, and/or lead medical technologist are responsible for developing, reviewing, and revising the division specific information at least annually.

In cases where there are unexpected delays in results' availability, client notification will be made by one of the following modalities, as applicable:

* electronic notification on the clinical information system
* written notification
* telephone notification

Specimens must be ordered STAT to be processed STAT.

1. **PURPOSE OF DOCUMENT:**

Laboratory test results turn-around times will be defined for each test. In addition, when result availability will not meet specified times, a plan for notification of clients will be described.

1. **SCOPE OF DOCUMENT:**

This document applies to all areas and personnel in the Clinical Laboratories.

1. **RESPONSIBILITY:**

The Medical Directors of the Clinical Laboratories are responsible for establishing the *Laboratory Testing Turn-around Times* policy. Laboratory compliance is responsible for maintaining the policy and ensuring at least biennial review.

1. **PROCESS – Turn around Times**
   1. Turn around times for Clinical Pathology Tests are available in the Test Catalog, available on the Clinical Laboratory Guide to Services Website.

<https://clinicallabs.osumc.edu/Pages/TestCatalog.aspx>

* + 1. Turn around times for send out testing are dependent on the reference laboratory performing the testing.
  1. Turnaround times for general Anatomic Pathology tests are 3-5 days.
     1. \*Turnaround time dependent on the need for ancillary studies
  2. For COVID-19 testing – please refer to the current laboratory testing guidelines available on OneSource

<https://osu.app.box.com/s/kbfinzw9c7rq9cijrvw1lyerxczqxudq>

1. **PROCESS – NOTIFICATION OF TESTING DELAYS**:

The following process is used for any testing delays, including those due to unavailable reagents, extended instrument / equipment down times, or significant quality failures (e.g. proficiency testing, quality controls, calibrations).

* 1. Testing personnel: notify manager (or designee) immediately when problems are identified which will delay testing beyond published turn-around time.
  2. Manager: notify division director(s) immediately when notification of delay by testing personnel is received.
  3. Division Director and Manager:
     1. Determine corrective action to be taken.
        1. Hold specimens until testing is available again; OR
        2. Send specimens to back up laboratory or outside reference laboratory.

\*\*\*OSUWMC labs are always the first choice to reroute samples

* + 1. Determine whether medical staff (internal and external) should be notified
    2. Notify Clinical Laboratories’ Operations Directors, Medical Director, and Customer Services’ Manager of testing delay and corrective action.
       1. Published results availability; turn-around time, when tests were typically run – e.g. daily, weekly, etc.
       2. Revised results availability; i.e. turn-around time from Reference Lab and/or anticipated testing re-start date.
  1. Customer Services: when directed
     1. Obtain pending log for the affected test(s)
     2. Notify clients by telephone of the testing delay
        1. URL Customer Service notifies outside physician locations, from which specimens for the affected test were received.
        2. UH Customer Service notifies inpatient and outpatient physician locations, from which specimens for the affected test were received.
     3. Include revised estimated results availability; i.e. turn-around time from Reference Lab and/or anticipated testing re-start date.
  2. Directors and Medical Director: as needed, distribute written notification and post electronic notification in IHIS or Atlas.

Test Availability and Turnaround Time

The following tests are performed daily with results available the same day. Priority STAT turnaround times (receipt to result) are listed below.

When the electronic interface between the lab system and the hospital clinical information system (IHIS) is down for an extended period of time, the labs will notify each nursing unit and will generate hard-copy interim reports as needed and will transport them to the units via the pneumatic tube system, or by messenger transport if necessary.

These times are reflective of testing performed onsite. Some testing is sent to other labs for testing, which will increase turnaround time due to courier times.

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| **TEST** | **STAT** | | | **James** | **UH** | | **East** | |
| ABG | 30 min. | | |  | X | |  | |
| Acetaminophen (Datril®, Tempra®, Tylenol®, Liquiprin®, | 60 min. | | | X | X | | X | |
| Tenlap®) |  | | | X | |
| Affirm Testing | 60 min | | | X |  | | X | |
| Beta-Hydroxybutyrate | 60 min. | | |  | X | | X | |
| Alanine Amino-transferase (ALT/ SGPT) | 60 min. | | | X | X | | X | |
| Albumin, Quantitative, Serum | 60 min. | | | X | X | | X | |
| Alcohol, Ethanol, Urine | 60 min. | | | X | X | | X | |
| Alcohol, Isopropyl (Serum) | 60 min. | | |  | X | |  | |
| Alcohol, Methyl (Serum) | 60 min. | | |  | X | |  | |
| Alkaline Phosphatase (Serum) | 60 min. | | | X | X | | X | |
| Amikacin (Amikin®) | 60 min. | | |  | X | |  | |
| Ammonia, Quantitative, Plasma | 60 min. | | | X | X | | X | |
| Amylase, Serum | 60 min. | | | X | X | | X | |
| Aspartate Aminotransferase (AST/SGOT) | 60 min. | | | X | X | | X | |
| Beta HCG, Quantitative | 60 min. | | | X | X | | X | |
| Bilirubin, Total and Direct or Conjugated | 60 min. | | | X | X | | X | |
| Binx Testing | 60 min. | | |  | X | | X | |
| Blood Gas (Venous) | 30 min. | | |  | X | |  | |
| Blood Urea Nitrogen | 60 min. | | | X | X | | X | |
| Blood/ Body Fluid Exposure Protocol – Rapid HIV | 60 min. | | |  | X | | X | |
| BNP | 60 min. | | | X | X | | X | |
| Calcium, Total (Serum) | 60 min. | | | X | X | | X | |
| Carbamazapine (Tegretol®) | 60 min. | | |  | X | |  | |
| Carbon Monoxide | 30 min. | | |  | X | |  | |
| Cell Count, Body Fluids (CSF, Pleural, Peritoneal, Synovial) | 60 min. | | |  | X | | X | |
| CD34 enumeration (BMT1R/3R) | 4 hours | | |  | X | |  | |
| Chloride (Serum) | 60 min. | | | X | X | | X | |
| Cholesterol, Total | 60 min. | | |  | X | | X | |
| CO2, Total (Serum) | 60 min. | | | X | X | | X | |
| CO2, Whole Blood | 30 min. | | |  | X | |  | |
| Complete Blood Count | 60 min. | | | X | X | | X | |
| Complete Blood Count with Differential | 60 min. | | | X | X | | X | |
| Cortisol | 60 min. | | |  | X | |  | |
| CPK | 60 min. | | | X | X | | X | |
| Creatinine (Serum) | 60 min. | | | X | X | | X | |
| CSF Glucose | 60 min. | | |  | X | | X | |
| CSF Protein | 60 min. | | |  | X | | X | |
| D-Dimer (High Sensitivity, Quantitative) | 60 min. | | | X | X | | X | |
| Digoxin (Lanoxin®) | 60 min. | | |  | X | | X | |
| ESR (Westergren) | 60 min. | | |  | X | | X | |
| Ethanol (Blood) | 60 min. | | | X | X | | X | |
| Ferritin | 60 min. | | |  | X | |  | |
| Fibrinogen Quantitative, Functional (Clottable) | 60 min. | | |  | X | | X | |
| Gentamicin (Garamycin®) | 60 min. | | |  | X | |  | |
| GGT | 60 min. | | |  | X | | X | |
| Glucose | 60 min. | | | X | X | | X | |
| Gram Stain, direct examination | 60 min. | | |  | X | | X | |
| HCT | 60 min. | | | X | X | | X | |
| HGB | 60 min. | | | X | X | | X | |
| Influenza A and B Antigen | 60 min. | | |  | X | | X | |
| Inorganic Phosphorus | 60 min. | | | X | X | | X | |
| INR (International Normalized Ratio) | 60 min. | | | X | X | | X | |
| Ionized Calcium | 60 min. | | |  | X | |  | |
| Isopropanol | 60 min. | | |  | X | |  | |
| Lactic Acid | 30 min. | | |  | X | | X | |
| LD (Lactate Dehydrogenase) | 60 min. | | | X | X | | X | |
| Lidocaine | 60 min. | | |  | X | |  | |
| Lipase | 60 min. | | | X | X | | X | |
| Lithium | 60 min. | | |  | X | | X | |
| Lytes | 60 min. | | | X | X | | X | |
| Magnesium (Serum) | 60 min. | | | X | X | | X | |
| Methanol | 60 min. | | |  | X | |  | |
| Methemoglobin | 30 min. | | |  | X | |  | |
| Methotrexate | 60 min. | | |  | X | |  | |
| Mono Test Rapid | 60 min. | | |  | X | | X | |
| Occult Blood Gastric | 60 min. | | |  | X | |  | |
| Osmolality (Serum) | 60 min. | | |  | X | | X | |
| Osmolality (Urine) | 60 min. | | |  | X | | X | |
| Partial Thromboplastin Time, Activated (PTT) | 60 min. | | | X | X | | X | |
| Pentobarbital (Nembutal®) | 4 hours | | |  | X | |  | |
| pH, Blood | 30 min. | | |  | X | |  | |
| Phenobarbital | 60 min. | | |  | X | |  | |
| Phenytoin | 60 min. | | |  | X | | X | |
| Phenytoin, Free | 60 min. | | |  | X | |  | |
| Platelet Count | 60 min. | | | X | X | | X | |
| Platelet Function Screening Test | 60 min. | | |  | X | |  | |
| Potassium, Serum | 60 min. | | | X | X | | X | |
| Potassium, Whole Blood | 30 min. | | |  | X | |  | |
| Pregnancy Test (Serum) | 60 min. | | | X | X | | X | |
| Pregnancy Test (Urine) | 60 min. | | | X | X | | X | |
| Protein, Total (Body Fluid) | 60 min. | | |  | X | | X | |
| Prothrombin Time (PT) | 60 min. | | | X | X | | X | |
| PSA | 60 min. | | | X | X | | X | |
| Reticulocyte Count | 60 min. | | | X | X | | X | |
| Rohypnol | 60 min. | | |  | X | |  | |
| RPTH | 40 min | | |  | X | | X | |
| Salicylate (Aspirin) | | 60 min. | X | | | X | | X | |
| Sodium, Serum | | 60 min. | X | | | X | | X | |
| Sodium, Whole Blood | | 30 min. |  | | | X | | X | |
| Specific Gravity (Urine) | | 60 min. | X | | | X | | X | |
| Stool, Occult Blood | | 60 min. |  | | | X | | X | |
| *Streptococcus pneumoniae*, Antigen, urine | | 60 min. |  | | | X | |  | |
| Testosterone, Total (Serum) | | 60 min. |  | | | X | |  | |
| Theophylline (aminophylline) | | 60 min. |  | | | X | |  | |
| Thrombin Time | | 60 min. |  | | | X | |  | |
| Tobramycin | | 60 min. |  | | | X | |  | |
| Total Bilirubin | | 60 min. | X | | | X | | X | |
| Total Protein, Serum | | 60 min. | X | | | X | | X | |
| Triiodothyronine | | 60 min. |  | | | X | |  | |
| Troponin-I | | 60 min. | X | | | X | | X | |
| TSH - 3rd Generation | | 60 min. | X | | | X | | X | |
| Type and Cross | | 75 min. |  | | | X | | X | |
| Uric Acid (Serum) | | 60 min. | X | | | X | | X | |
| Urinalysis | | 60 min. | X | | | X | | X | |
| Urine 10 Drug Screen | | 60 min. |  | | | X | | X | |
| Urine Screen | | 60 min. |  | | | X | | X | |
| Valproic Acid | | 60 min. |  | | | X | | X | |
| Vancomycin | | 60 min. |  | | | X | | X | |
| Volatile Screen | | 60 min. |  | | | X | |  | |
| White Cell Count | | 60 min. | X | | | X | | X | |

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| Anatomic Pathology |  |
| Autopsy Report TATs:   * Preliminary Reports - 90% in 2 working days * Neuropathology Reports (with Normal Brains) - 50% in 25 working days * Neuropathology Reports (with abnormal Brains) - 50% in 40 working days * Final Reports (with Normal Brains or No Brain Examinations) - 50% in 30 working days * Final Reports (with Abnormal Brains or Brain-Only cases) - 50% in 45 working days * Final Reports Overall - 90% in 60 working days |  |
| Frozen Section (Single) | 30 min. |

1. **Related Documents:**
   1. Refer to QPulse System or Document Detail Report for related Laboratory Policies, Procedures, and Master Forms