TITLE: LABORATORY

LABORATORY TESTS:
All scheduled surgical cases requiring general anesthesia will have labs ordered at the discretion of the attending anesthesiologist and the surgeon.

Tests performed in physicians’ offices or performed in private laboratories approved by the Medical Director of Laboratories, within seven days of the procedure, are acceptable if there has been no significant change in the patient’s condition (e.g., the absence of any hemorrhage or acute hemolytic process). CBC’s will be considered current if done within seven days of the procedure.

OB PATIENTS:
A serology test will not be performed on OB patients unless specifically ordered. The physician shall obtain a routine serology from a laboratory approved for this purpose by the Indiana State Department of Health at the time of diagnosis. The serology test result shall be written into the patient’s chart by the attending physician if the test is not ordered from the hospital. The test report form itself, when received from an outside laboratory by the attending physician, may not be attached to the chart. It is desirable that an RH be ordered prior to the time of delivery.

AUTOPSIES:
The attending physician is responsible for obtaining the proper consent for an autopsy (see Ameripath Policy # P.S. 1.7, “Autopsies.” See also, Hospital Policies #CLN 2054, “Autopsies,” #CLN 2068, “Coroner’s Cases,” and Nursing Policy #R 009, “Care of the Patient After Death.”).

TRANSFUSION REVIEW:
Refer to The Indiana Heart Hospital Transfusion Policy. At Community East & North and Community South, the Pathology Department, in cooperation with the Medical Records Department, will report transfusion reactions quarterly to the Transfusion Committee.

Requirements for less than 24 hour blood or components must be thoroughly documented in the patient’s chart.

The reason for outpatient transfusion must be documented on the doctor’s order sheet.

USE OF OTHER LABORATORIES:

Inpatient clinical testing: All tests performed on inpatients shall be processed by the hospital’s laboratory or may be sent elsewhere for processing at the discretion of a pathologist when deemed necessary.

Outpatient clinical testing on patients admitted through ER or Outpatient Registration: All tests shall be processed by the hospital’s laboratory or may be sent elsewhere for processing at the discretion of a pathologist when deemed necessary.

Physician delivery of patient specimens to local reference laboratory: Specimens must be processed through the laboratory central office for tests requested and to bill the patient. If the test requested is not one that has been previously authorized, a pathologist’s verification is required. The test requested will include a comment that the specimen was delivered to the reference lab and will include the physician’s name. The specimen will then be released to the physician for transport. All results will be sent to the hospital laboratory for inclusion in the patient’s chart.
Tissue removed: All tissues removed, irrespective of the patient’s status, whether inpatient or outpatient, must be examined by a pathologist unless the specimen is on an exclusion list (see policy ORSPP: S-4). No specimen shall be taken from the hospital without the consent of a pathologist. Documentation will be made indicating the person and location to which the specimen is being referred. (See also DEPARTMENT OF SURGERY, Post-Operative Requirements)

Reports of tests that are not processed through the hospital laboratories will not be accepted for inclusion in the medical record and the hospital will not be liable for any charges incurred or for billing the patient.

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Board of Directors Approval: 07/11/05; 6/1/09; 2/9/15
TIHH Medical Executive Council Approval: 01/27/03; 03/27/06; 4/27/09
TIHH Board of Managers Approval: 01/27/03; 04/24/06; 5/26/09