

TITLE: PHONING PANIC VALUES AND CRITICAL TEST RESULTS

POLICY STATEMENT:

The Joint Commission requires that critical tests and critical results be reported and received by the appropriate caregivers in a timely manner. Critical tests always require rapid communication of results, whether normal or abnormal. Critical results (in the Shands Jacksonville laboratory, these are referred to as “panic values”) are test results that fall significantly outside the normal range and may represent life-threatening values and require urgent medical intervention.

The Laboratory will call panic results obtained on certain designated laboratory tests, and all results of critical tests, to the physician or nurse caring for the patient, or to the physician on call for the service or clinic.

PROCEDURE FOR IMPLEMENTATION:

1. Panic values and critical tests are specified by the medical director of the laboratory in which the test is performed.
2. The laboratory information system alerts the technologist to all defined panic value results. The technologist will be prompted by the LIS to enter the name of the person notified of the panic result. If the time of notification is different than the current time, it should be included with the last name and title of the person receiving the report. (Examples: Brown, M.D. 0100 9/24/96 Davis, RN S. Smith, RN 1345 9/24/96)
3. Panic values are listed for easy reference in all Laboratory Standard Operating Procedure (SOP) manuals, Laboratory Guidelines book, and on the Laboratory Infonet site.
4. Panic values should be called within 30 minutes of verifying the test result.
5. The Laboratory defines the following tests as critical. Report all results of these tests to the caregiver within the time limit indicated for each test.
 - Intraoperative PTH - results called to caregiver within 40 minutes after order.
 - Stroke Protocol (BMP, CBC, PT/PTT, and beta-hCG, if ordered) – results called to caregiver within 30 minutes after order.
 - Intraoperative pathology consults (frozen section) – results called to caregiver within 40 minutes after order.

6. For **INPATIENTS**, call the results to the Registered Nurse (RN) caring for the patient. If there are problems contacting this nurse, the results may be given to the Charge Nurse, the ordering physician, or an Attending physician in the unit.

7. For **OUTPATIENTS** (Faculty Clinic, Hospital Clinics, Ambulatory Office sites): During regular hours (M-F, 8am-5pm), contact the ordering physician or other medically responsible person (MD, DO, PA, ARNP, RN, Pharmacist). After hours, weekends and holidays, call the hospital operator for the resident or other medically responsible person (MD, DO, PA, ARNP, RN, Pharmacist) on call for that clinic or service. In the event that a physician or practitioner cannot be reached, notify the Laboratory manager or a supervisor, who may contact the chief of the service for the clinic where the patient was treated.

8. HEALTH CARE PROVIDERS RECEIVING PANIC VALUE OR CRITICAL TEST NOTIFICATIONS WILL BE REQUIRED TO READ THE RESULT BACK TO THE TECHNOLOGIST, IN ORDER TO VERIFY THAT THE RESULT HAS BEEN ACCURATELY TRANSCRIBED. To verify that the read-back has occurred, indicate in the LIS comment field either "RBY" (read-back: yes), or if the read-back is not obtained, indicate "RBN" (read-back: no).

- **Do not use a room number to identify a patient.**
- **Ask the patient caregiver to repeat or read-back:**
 - i. Patient's first and last name
 - ii. Medical record number (8-digits)
 - iii. Test and result
 - iv. Caregiver's name

9. **Special Instructions for Internal Medicine Primary Care Clinic:** After hours, phone the ordering physician. The ordering physician is usually a resident. If there is no response from resident, phone the attending physician. If neither physician is available, phone the result to the Internal Medicine attending on call.

- **OUTPATIENTS** (Private physicians) During regular hours contact the physician's office. The results should be given to a medically responsible person (MD, DO, PA, ARNP, RN, Medical Assistant or other person designated by the physician). After hours call the office number and a recording should give you the number for the physicians after hours service. Ask the service to have the physician call the lab for a panic value. If the physician does not respond, record this information in the comment field. Give the results to the Supervisor for follow-up the next day. A Quality/Risk report must be completed for the event.
- **OUTPATIENTS** (Homecare Agencies) Call the person or office number on the request. During regular hours they will give you the number and person to call. After hours the same number should give you a recording with instruction on contacting the person on call.

10. Special Instructions for Dialysis Center

- By request of the Nephrology Department, all lab work from the Dialysis Center marked "pre-dialysis" will be exempt from panic value calls.
- If after hours, and specimen is not marked "pre-dialysis" in the "Comments" section of the order, then contact the Nephrology Attending on call to report the panic value:

11. Emergency Department: If the patient has been released from the ED, positive culture reports and other panic values may be given to the discharge planning nurse at extension 3390. If the nurse is unavailable to take the call, leave a voice mail with all the details, but also call the Charge Nurse at extension 2438 or page at 498-0414.

12. Panic values do not need to be reported by telephone for point-of-care testing when the physician is within the vicinity of testing.