

WHITING FORENSIC HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION I:	PATIENT FOCUSED FUNCTIONS
CHAPTER 2:	Assessment
PROCEDURE 2.49:	Critical Test Results
REVISED:	
Governing Body Approval:	March 9, 2018

PURPOSE: To ensure appropriate response to designated critical medical test results.

SCOPE: Medical Staff and Registered Nurses

Definitions of Critical Test Results: Critical results are those values, as determined by the WFH Medical Staff, requiring immediate attention.

I. LABORATORY

The laboratory will call STAT and critical results to the unit Head Nurse/Charge Nurse twenty four hours a day, seven days a week, including weekends and holidays. In accordance with regulatory requirements, “read-back” of all results will be required, and the full name of the nurse receiving the results will be documented by the lab. Critical results will not be faxed or left on an answering machine. Critical Result findings are communicated to WFH within 30 minutes whether they are done stat or when done routinely and are outside normal values. STAT Critical Results will be communicated within 4 hours of the blood draw. Laboratory test results for routine lab work will be communicated to WFH within 24 hours of the blood draw.

<i>LABORATORY TEST</i>	<i>CRITICAL TEST RESULTS</i>
HEMATOLOGY/COAGULATION	
Hematocrit	< 18.0%
Hemoglobin	< 7.0 g/dL
INR	> 8.0
Neutrophils, Absolute	\leq 400 /uL
Platelets	< 20,000 /uL
PTT	>90.0 sec
CHEMISTRY (BLOOD, SERUM)	
Blood Urea Nitrogen (BUN)	>99 mg/dL
Calcium, Total	< 6.5 or >14.0 mg/dL
Creatine Kinase (CK)	> 5,999 U/L
Creatinine	>7.9 mg/dL
Digoxin	>3.5 mcg/L
Dilantin	>59.9 mg/L
Glucose	< 40 or > 800 mg/dL
Lithium	>3.00 mmol/L
Magnesium	< 0.5 or > 6.8 mg/dL
Phenobarbital	>99 mg/L
Phosphorus	< 1.3 mg/dL
Potassium	< 2.6 or > 6.9 mmol/L

<i>LABORATORY TEST</i>	<i>CRITICAL TEST RESULTS</i>
Sodium	< 120 or > 160 mmol/L

II. ELECTROCARDIOGRAM (EKG)

The contracted Cardiology Services will call the unit Head Nurse/Charge Nurse within 4 hours for the following Critical result findings:

- Acute Myocardial Infarction
- Acute Ischemia
- First degree Block
- Second degree Block
- Third degree or Complete block
- Ventricular Tachycardia

III. X-RAY

The contracted Radiology Services will call the unit Head Nurse/Charge Nurse within 4 hours for the following Critical result findings:

- Fracture
- Pneumonia
- Foreign body
- Ileus
- Congestive Heart Failure

PROCEDURE:

Upon receipt of the Critical Test Results via phone from the laboratory, Cardiology Services, or Radiology Services; the Head Nurse/Charge Nurse will notify the Attending Psychiatrist or General Medical Provider within 30 minutes in person or by telephone.

The nurse will document the critical results in the medical record and the date and time the results were called in by the laboratory or cardiology/radiology service. A pre-printed label found on each unit will be

placed in the Integrated Progress Notes in the medical record. The Nurse shall fill in the name of the Attending Psychiatrist or General Medical Provider notified, with the date and time, and sign the label.

<p style="text-align: center;">CRITICAL RESULTS - DO NOT REMOVE</p> <p>Dr. Notified: _____</p> <p>Date: _____</p> <p>Time: _____</p>
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Quality Monitoring:

The Nurse Executive is responsible for ensuring that the unit Head Nurse/Charge Nurse notifies the Attending Psychiatrist or General Medical Provider within the policy standard of thirty minutes when a Critical Test Result is received. The audit data is collected monthly and included in the Nursing Department's Quarterly Report.

The WFH Medical Director is responsible for ensuring that the contracted service providers (laboratory, cardiology, and radiology) maintain adherence to the timeframes outlined in this policy.