

**The Miriam Hospital  
Administrative Manual**

**Subject:** Critical Test  
Reporting

**File Under:** MS-23 and PS-02

**Issuing Department:**  
Department of Nursing

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**Approved By:**

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## **POLICY**

The registered nurse responsible for the care of a patient will accept a critical value from the laboratory, or any diagnostic area, or from point of care testing by the certified staff member who performed the test. The value will be communicated to the ordering or alternate practitioner (MD, DO, NP, PA) authorized to act on the value being reported. If the registered nurse responsible for the care of the patient is not available, then the RN in charge may accept the clinical value.

For point of care testing, the certified staff member, non RN, ie: CNA, CNI, who obtains the clinical value is responsible for recording and communicating the value as outlined in the Administrative Nursing policy NU-13 Bedside (Ancillary) Blood Glucose Monitoring (Point of Care Testing), notifying the registered nurse responsible for the patient. If the registered nurse obtains the value they must report it to the appropriate authorized individual as needed, as below.

## **PROCEDURE**

The registered nurse receiving/obtaining the critical test result will:

1. Document the critical test result in the medical record including date and time result is received. If the medical record is unavailable (patient at testing) at time result is received an alternate "write down" must be made for the read back and for transcription into medical record upon availability.
2. "Read Back" the patients' full name, date of birth, and test result.

3. Receive verification that the “Read Back” of patient’s full name, date of birth and critical test result is correct.
4. Call the responsible ordering or alternate practitioner (MD, DO, NP, PA), authorized to act on the test results being reported immediately upon receipt of the critical test result. The practitioner receiving critical test result is to “Read Back” the test.

Note:

- When text paging for a critical value the page should read: “critical value, call extension...”

5. If there is not response within 15 minutes after the initial call, then repeat the call.
6. If there is no immediate response after the second call, then exercise the medical chain of command, up to and including the department Chief and the Chief Medical Officer.

Note:

- All critical test results require notification to responsible practitioner (MD/LIP) within one hour. Red critical values require immediate (within one hour) corrective action. Orange and yellow require corrective action as indicated in Policy PS-01, Communications of Critical Values.
7. Document all calls in the medical record. Include the time of the call and name of the licensed independent practitioner, and the intervention ordered.