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| **Parameter** | **Units** | **Critical Phone Limits** |
| INR | Ratio | >5.0 for all locations except General Warfarin Clinic (>8.0) |
| APTT Ratio | Ratio | >3.5 |
| Fibrinogen | g/l | <1.0 (first time result) |
| D-Dimer | ng/mL | >10,000 for samples from ED |
| Anti-Xa (Heparin) | IU/ml | >1.5 |
| New diagnoses of inherited or acquired bleeding disorders or abnormal coagulation screens suggestive of new diagnosis of bleeding disorder |  | All new diagnoses |
| Inhibitor screens  | BU | All new patients and those who had a previous negative inhibitor screen |
| Heparin Induced Thrombocytopenia Tests |  | **All Requests:** Positive ELISA and ALL HIPA results are phoned to the SJH Clinical Coagulation team on patients within SJH and to the external laboratory and/or external clinical team on patients from external agencies. |

**Notes:**

* Critical results as defined in the above table will be phoned by a medical scientist to the relevant clinical personnel.
* If the critical results cannot be communicated to the ward / clinical team / external laboratory by phone, despite repeated attempts by staff to do so; these results will then be released into EPR and Healthlink. Further attempts to make contact will be undertaken but cannot be guaranteed. Refer to Section 12 MP H 10 for action to be taken when difficulties are encountered phoning critical results.
* If GP, Out-patient or external agency results cannot be phoned, particularly outside of routine working hours, then appropriate further action will be determined post consultation with the Coagulation consultant on-call.
* All other results of tests performed in the Coagulation Laboratory will be released on EPR as soon as they have been authorised.
* While the staff in the Coagulation Laboratory will do their best to adhere to the above guidelines, it is the duty of all doctors to follow up, in a timely fashion, on the results of Coagulation investigations requested on patients under their care.
* Reference HAEM-MP-H-0010