St. James's Hospital
LabMed Directorate

General Practitioner Pathology - Laboratory Service Provision Policy
SJH:LabMed006

Owner: Laboratory Manager	**Approved by** Laboratory Clinical Director Dr. Brian O Connell
Reviewed by: Quality Manager	**Effective from:** January 2007
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This policy replaces all existing policies from June 2018 onwards and is due for review in June 2021. It will be reviewed during this time as necessary to reflect any changes in best practice, law, and substantial organisation, professional or academic change.

Distributed to: Local Health Offices (LHO) in the Dublin region, SICP, DSW, Laboratory Personnel; Posted SJH Intranet:
http://www.stjames.ie/intranet/PoliciesGuidelines/ClinicalSupportDirectorates/LabMedDirectorates/

1.0 Policy Statements
The Laboratory Medicine and Molecular Pathology (LabMed) Directorate of St James's Hospital is committed to the provision of a quality service to General Practitioners (GPs) and for their patients operating and residing, primarily, within the St. James's Hospital catchment areas.

GPs requiring access to pathology services that are outside the scope of general practice, such as, for the purpose of occupational health screening, vaccinations, specialist clinics etc., are required to enter into a service level agreement with the SJH LabMed Directorate for those eservices.

GPs requiring access to pathology services for the purpose of treating patients outside the Hospital's catchment require an application to be made to the directorate. However, GPs should use the Hospital laboratories covering their catchment area.

The St. James's Hospital catchment areas for diagnostic laboratory and phlebotomy services can be accessed on the Hospital Internet at http://www.stjames.ie/GPsHealthcareProfessionals/CatchmentAreas/

2.0 Policy Aims

2.1 To define the "catchment" areas within which St James's Hospital Laboratory will provide phlebotomy and laboratory services to General Practitioners

2.2 To direct General Practitioners using the laboratory services in the procedures and standards they are required to meet in order for the laboratory to provide a safe and effective quality service. These are outlined in the standards in Section 3 below

3.0 Standard Requirements from General Practitioners

3.1 Provision of emergency contact details (mobile phone) for reporting of "critical" results outside normal practice hours.

3.1.1 All GP practitioners requiring laboratory medicine services **must** provide contact details for reporting of "critical" results outside normal practice hours. **This is a mandatory requirement for access to the Hospital's laboratory services.**

3.1.1.1 New General Practitioners requesting access to the Laboratory services in St. James's Hospital must complete an application form (available from the Quality Manager or from the GP & External Request Forms section of the Laboratory User Guide). Sections of the form require GPs to give the emergency contact number and must commit to using Healthlink for test requesting and receiving electronic reports.

3.1.1.2 Existing GPs must also provide this emergency mobile number as a mandatory part of retaining the contract for services**.** Where a proxy agency e.g. "DubDoc" or "LukeDoc" is used by a GP Service, arrangements must be made between the relevant parties to ensure that markedly abnormal results can be telephoned directly to the agency, without complication and that follow up action will occur. This is a critical clinical risk management issue for all parties concerned

3.1.1.3 In the event that a proxy agency or the requesting GP is non contactable, then the Consultant Pathologist, based on the laboratory results, the patient's history and any other relevant clinical information, may contact the patient or next-of-kin directly, if deemed appropriate in the circumstances. The recording of the patient's phone number on the request form will assist this process, in the unlikely event that it becomes necessary. This approach is not ideal but is a patient safety issue in the event the patient's doctor is not contactable

3.2 Order Communications: GP Order Communications System –Electronic Test Ordering and Results Reporting

3.2.1 All new GPs seeking access to St. James's Hospital laboratory service **must** be registered with Healthlink (www.Healthlink.ie) for both ordering laboratory tests and receiving laboratory reports, electronically. Healthlink will be part of the new national MedLIS system and in 2019/2020 there will be a new methodology of ordering tests for laboratories that have implemented the new system. There will be full training given by the HSE in conjunction with the ICGP

3.2.2 GPs, currently using the laboratory services are required to adopt Healthlink for electronic ordering and receiving reports electronically.

Note: From a patient safety perspective this is the preferred mode as it eliminates potential errors associated with the manual system (5% error rate reported internationally) thus ensuring the correct results are reported on the correct patient in a timely manner. In addition, it mitigates against potential patient data breaches under the new General Data Protection Regulations, which came into force in May 2018. Such data breaches are a higher risk with manual paper based systems.

3.3 Patient Identification

The practice phlebotomy/nursing staff must have in place a system to positively identify the patient before taking specimens and labelling them. Responsibility to ensure that pre-collection requirements have been met (e.g. fasting) also lies with practice phlebotomy/nursing staff.

3.4 Criteria required for labelling samples

3.4.1 The use of printed barcode labels produced by the GP practice management system that are suited to the sample container size are the preferred labelling method as it improves the transfer of accurate and legible information.

3.4.2 All Blood samples i.e. the sample container, **must** be labelled with a minimum dataset which consists of the following:

- Patient's Full Name (Surname + Forename)
- Patient's Date of Birth.

Note: Barcoded samples produced from Healthlink will also contain the medical registration number assigned by the Hospital for that patient and the tests requested

3.4.3 Samples that fail to meet these minimum criteria will be rejected for analysis and will not be processed.

3.5 Additional specimen labelling information

The following additional information is desirable to have on the specimen, to assist in processing the request and interpreting the results.

3.5.1 Gender of the patient (this is particularly important where requested investigations have gender-related reference ranges)

3.5.2 The date of collection of the specimen (where delayed analysis may lead to erroneous results, this may be required).

3.5.3 Time of collection of the specimen. In certain cases, information relating to the timing of specimens is required, for example, in dynamic function testing, to identify peak and trough or pre- and post-treatment specimens or where diurnal variation and circadian rhythms are important for interpreting the result

3.5.4 All other (non-blood) samples must, in addition to the above, have the sample type or site, as appropriate, recorded on the sample container (e.g. MSU, Ear Swab)

Note: Barcoded samples will in addition contain the medical registration number of the patient and the tests requested

3.5.5 For certain clinics where patient's identity is protected e.g. infectious disease clinics, the laboratory will accept samples with the following patient information:

- Initials + Unique patient identifier
- DOB
- Gender
- Sample site and type (if not a blood sample)

Note: Generally, such specialist clinics are outside the scope of general practice.

3.6 Criteria Required for Request Forms.

3.6.1 The Request Form accompanying the sample/specimen must be legibly written and must include a minimum dataset which consists of:

- Patient's Full Name
- Patient's Date of Birth
- Gender
- Investigation(s) required
- Requesting Doctor's name and address and GP Code number
- Sample type/site recorded on the form (e.g. MSU, Sputum, Ear Swab*)*, if a non-blood sample
- Any patient preparation conditions, such as, fasting

3.7. Additional request form labelling information

The following additional information is desirable to have on the request form, to assist in processing the request and interpreting the results.

3.7.1 The date of collection of the specimen (where delayed analysis may lead to erroneous results, this may be required).

3.7.2 Time of collection of the specimen. In certain cases, information relating to the timing of specimens is required, for example, in dynamic function testing, to identify peak and trough or pre- and post-treatment specimens or where diurnal variation and circadian rhythms are important for interpreting the result

3.7.3 The patient's clinical details should be provided where possible (including any drug or antibiotic therapy) to help in interpretation of results

3.7.4 Non-blood samples must, in addition to the above, have the sample type or site, as appropriate, recorded on the request form (e.g. MSU, EAR SWAB)

3.7.5 Additional information that might assist with the analysis and reporting should also be included (such as patient's contact telephone number – see 3.1.1.3 above)

3.7.6 Where available a patient addressograph label and the GP practice stamp should be used on all sheets of the request form as it improves the transfer of accurate clear information

3.7.7 For certain clinics where patient's identity is protected e.g. infectious disease clinics, the laboratory will accept samples and request forms with the following information :

- Patient's Initials,
- Patient's DOB
- Unique patient identifier
- Gender
- Date sample taken
- Test examinations clearly indicated
- Requesting Doctor's name and address or GP Code number.

Note: Such specialist clinics are outside the scope of general practice

3.7.8 GPs using Healthlink must at a minimum provide the first line of the patient's address to avail of the Healthlink messaging system, without which, it cannot be transmitted

3.7.9 Certain investigations may require additional information on the specimen or request form. These are detailed in each department's section of the LabMed User Guide at www.stjames.ie (click on the Lab Services tab) or by clicking on this link **Lab User Manual**

3.8 Phlebotomy Services at St. James's Hospital

St. James's Hospital has traditionally provided a limited phlebotomy service for GP referred patients. Access to this service is by appointment only. Patients need to make a booking online or the GP can make the booking on their behalf by accessing the website GP Blood Test appointment. They can also log onto to www.stjames.ie and select ***Patients*** from top bar and then select ***GP Blood Test.***

A booking can also be made via Freephone number, which is (01) 291 4516
The appointment line will be open Mon-Fri 2pm-4pm.

Outside these hours you will be directed to call 1517 345 333
[1517 is a premium rate service charged at €2.03 per call incl VAT. Calls from mobiles will be higher]

3.9 Specimen Transport

3.9.1 The packaging used for samples for transport to the laboratory must be in accordance with current "Agrement Dangereux Routier" (ADR 2016) Safety Legislation and in accordance with SJH laboratory policy available at Laboratory Specimen Transport Policy Advice should be sought from the Laboratory if required.

3.9.2 The main safety principle of packing and labelling all specimens in such a manner so that they present no threat to those sending, transporting or receiving them must be observed

3.9.3 Samples should be sent to the laboratory as quickly as possible after they are obtained in order to avoid sample deterioration which can cause subsequent inaccurate and possibly misleading results. Of particular risk is falsely elevated potassium.

3.9.4 In the event an urgent report is required, the User must alert the laboratory by telephone and must ensure it is clearly indicated on the Request Form

3.10 Communication

3.10.1 Communication and collaboration between St. James' Hospital and GPs will be through the GP Liaison Committee.

3.10.2 Additional communication is facilitated through the SJH website and by direct contact with the laboratory.

3.10.3 The Laboratory Manager, Mr John Gibbons, can be contacted **at jgibbons@stjames.ie** for information or via Mr. Brian Kelleher, Quality Manager, at **bkelleher@stjames.ie**

Bibliography

1. Croal, B: ***The communication of critical and unexpected pathology results***, Royal College of Pathologists (UK), 2017.

2. ISO 15189 (2012): Medical Laboratories-Requirements for Quality and Competence

Document Log			
Document Title	**General Practitioner Pathology - Laboratory Service Provision Policy**		
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Document Status i.e. New, Revision, replaced etc	**Version Number**	**Revision Date**	**Description of changes**
Revision	2	January 2008	1. Reference to catchment areas changed 2. Request for GPs to provide emergency contact numbers 3. Criteria for minimum dataset on samples and request forms expanded to include patient initial, DOB and a unique patient identifier
Revision	3	January 2012	1. Revised catchment areas 2. Revised scope 3. Revised Healthlink use 4. Revised bibliography
Revision 4		January 2014	No change
Revision 5		January 2016	1. Definition changes 2. Standards in section 3 3. updated ADR regulations reference document 4. Revised communication section removed Primary Care contact. 5. Additional desirable information on specimen and request form 6. Updated link to Specimen Transport Policy
Revision 6		June 2018	1. New number assigned to reflect updated SJH PPG Register 2. Introduced the GDPR regulations in terms of safety of data through encrypted test requesting and reporting 3. Change gender as a labelling requirement from section 3.7.1 to 3.6.1. 4. New section on GP phlebotomy appointments in section 3.8 5. Section 3.10.3 Quality Manager contact details added.