

PATHOLOGY AND LABORATORY MEDICINE

DEPARTMENTAL PLAN

I. MISSION, VISION & IMPERATIVES

The department incorporates the Ochsner Health System Mission – We Serve, Heal, Lead, Educate and Innovate – by providing compassionate patient care, by continuously monitoring the quality of our product and implementing identified improvements.

The laboratory department is an integrated service line throughout the Ochsner Health System. We strive for harmonization and standardization, whenever possible, of laboratory policies, procedures and processes, to provide a seamless quality service to our patients and providers no matter where they access our services across the network.

We integrate the imperatives of our organization into our Goals and Objectives, annually, with initiatives to develop our employees, maintain and grow our customer base by providing excellent service in a cost efficient environment. We serve the community by providing a clinical training site for allied health students.

II. SCOPE AND SERVICES

The laboratory is accredited by the College of American Pathologists (CAP) to provide services in the following categories:

- Hematology & Coagulation
- Urinalysis
- Chemistry & Toxicology
- Microbiology
- Blood Bank
- Immunology
- Surgical Pathology
- Phlebotomy

Test that are not available on site are sent to a CAP accredited laboratory for performance.

The laboratory utilizes the following categories of specimen processing:

- **ROUTINE** – Collected within 60 minutes of time requested and results are generally available within 5 hours of receipt. Outpatient testing routine turnaround time is 24 hours.
- **ASAP** – As Soon As Possible – Collected within 30 minutes of time requested and results are generally available within 3 hours of receipt. Outpatient testing ASAP turnaround time is 4 hours.
- **STAT** – Limited to a select menu of tests, collected within 10 minutes of time requested and results for both inpatients and outpatients is within 1 hour of receipt. See Attachment 1 for a list of STAT test availability.
- **TIMED** – Collected within 15 minutes of time ordered. Timed samples will be processed as a Routine test with a turnaround time of 4 hours after receipt.

III. PATIENT AND CUSTOMER NEEDS

The appropriateness and clinical necessity of laboratory services is determined by:

- Medical Director – a Board Certified Pathologist
- Regulatory Agency Recommendations (CMS, CAP, JCAHO)

All new service requests are reviewed by the Medical Director and cannot be implemented without the Medical Director's approval.

Laboratory services are available 24/7 for hospital patients. Our outpatient phlebotomy services are available Monday – Friday, 7am – 5:30 pm, Saturdays, 7 am – 12 pm. The outpatient venipuncture area is closed on holidays.

IV. EMPLOYEE & PERSONNEL NEEDS

Personnel qualifications and evidence of competence are determined using the following documentation:

1. Job Application
2. Evidence of Education
3. Primary Licensure Verification – if applicable
4. Orientation – Hospital and Department Specific
5. Competency Checks – Initial and Annual
6. Evaluation Process – 90 day initial, Annual

V. STAFFING

The department of Pathology and Laboratory Medicine is directed by a board certified pathologist. The administrative director is a registered medical technologist. The lab sections are staffed by phlebotomist, lab assistants, medical laboratory technicians, medical technologists and pathologists. All technical personnel must be licensed by the Louisiana State Board of Medical Examiners.

The laboratory director assess staffing needs based on the number of procedures ordered, census, the scope/complexity of test mix and the necessity for registered medical technologists in certain areas for supervision. The laboratory statistic used for budgetary purposes is a billed procedure. The laboratory is allocated man hours per billed procedure.

VI. FUNCTIONAL RELATIONSHIPS AND INTEGRATION OF SERVICES

The laboratory routinely interacts with other departments within the hospital. Interdepartmental relationships exist in the following manner:

1. Cardiopulmonary

The laboratory will monitor the QC and proficiency testing of this area as outlined in CMS and CAP regulations. A board certified pathologist will serve as their medical director. The lab will provide expertise and guidance in regulatory agency compliance.

2. Radiology

The laboratory and radiology will coordinate the timing of services to best accommodate the patient and staff for blood collection and fine needle aspirates.

3. Cath Lab

The laboratory will monitor the QC and proficiency testing of the ACT test as outlined in CMS and CAP regulations. The lab will provide expertise and guidance in regulatory agency compliance.

4. Surgery

Frozen section surgical consults and anatomic pathology services are provided on site by board certified pathologist.

5. Infection Control

The laboratory provides Infection Control with reportable positive infectious disease results, antibiogram information, reports on all positive microbiology cultures, draws and performs employee exposure work ups and provides additional testing as needed.

6. Pharmacy

The laboratory provides Pharmacy with susceptibility results; antibiogram information, INR information, and information regarding therapeutic drug administration.

7. Education

The laboratory provides instructors for classes. The education department may be used as a resource for developing training material for the laboratory staff.

8. Materials Management

The laboratory coordinates the procurement and delivery of supplies through the Materials Management department.

9. Health Information Management

Lab results are transferred electronically to Health Information Management.

10. Human Resources

All laboratory hiring is coordinated through Human Resources. The lab also provides personnel for the hospital orientation of new hires.

11. Quality Resources

The laboratory is a member of the Quality Management Committee. Laboratory Quality Indicators have been submitted and data is reviewed by this committee.

12. Nursing

The laboratory will monitor the QC and proficiency testing of ancillary point of care testing as outlined in CMS and CAP regulations. The lab will provide expertise and guidance in

regulatory agency compliance. The laboratory provides education at the annual Skills Fair on a pertinent topic.

VII. DEPARTMENTAL PERFORMANCE

The Laboratory has instituted a Performance Improvement Program and Committee to continuously assess and improve department performance. The committee members are:

- Medical Director
- Administrative Director
- Performance Improvement Coordinator
- Staff Pathologists
- Supervisors
- Ad hoc members as needed

Laboratory indicators of performance are outlined each year and are chosen to monitor each step of the laboratory process: Pre Analytical, Analytical and Post Analytical. The committee meets once per month to review the data. Appropriate actions are taken as indicated by performance in relation to meeting preset criteria.

Documentation that addresses laboratory regulatory/accreditation standards are met through the policies and procedures of this laboratory.

VIII. STANDARDS, GUIDELINES AND LICENSURE REQUIREMENTS

Laboratory personnel will be in compliance with all federal laws, state laws and state licensure requirements. Licensed laboratory personnel will complete department orientation, attend required in-service training and obtain continuing education requirements as outlined by Louisiana State Licensure Law.

Staffing Matrix:

Core staffing to keep the laboratory open and operating:

	DAY	EVENING	NIGHT
Phlebotomist	1	1	1
Medical Technologist	3	1	1
Med Lab Technician	1	1	1
Lab Assistant	0	0	0

Normal 24 – hour Operation

DAYSHIFT	Minimum	Average	Maximum
	0 – 60 Patients	61 – 100 Patients	101 – 120 Patients
Phlebotomist	1	3	3
Medical Technologist	3	3	3
Med Lab Technician	1	2	2
Lab Assistant	0	0	1

EVENING SHIFT	Minimum	Average	Maximum
	0 – 60 Patients	61 – 100 Patients	101 – 120 Patients
Phlebotomist	1	1	2
Medical Technologist	1	2	2
Med Lab Technician	1	1	2
Lab Assistant	0	0	0

NIGHT SHIFT	Minimum	Average	Maximum
	0 – 60 Patients	61 – 100 Patients	101 – 120 Patients
Phlebotomist	1	1	2
Medical Technologist	1	2	2
Med Lab Technician	0	0	0
Lab Assistant	0	0	0

Attachment 1

TESTS AVAILABLE STAT

Acetaminophen
Alkaline Phosphatase
Albumin
Alcohol, Medical
ALT
Ammonia
Amylase
APTT (PTT)
AST
Basic Metabolic Panel
Body Fluid, WBC and Diff
Bilirubin, Direct
Bilirubin, Total
Calcium, Total
Carbon Dioxide
CBC with screening diff and platelet
Chloride
CK, Total
CK, MB
Comprehensive Metabolic Panel
Comprehensive Drug Screen
Compliance Drug Screen
Complete Blood Count with automated differential
Creatinine
C-Reactive Protein
CSF – cell count
CSF – protein
CSF – glucose
CSF – gram stain
Digoxin
Dilantin
D-Dimer (DIC)
D-Dimer (thrombosis)
Electrolytes
Ethanol – medical
Fibrinogen
Gamma Glutamyl-Transferase
Glucose, Random
Gram Stain
HCG quantitative
Hematology Profile and individual constituents
Hemoglobin and Hematocrit
Hepatic Function Panel
HIV Rapid
Influenza A&B Antigen

Lactic Acid
LDH
Lipase
Magnesium
Monospot
Natriuretic Peptide Assay
Partial Thromboplastin Time (PTT)
Phenobarbitol
Phosphorus
Platelet Count
Potassium
Prothrombin Time (PT)
Pregnancy Test, Rapid (Urine)
Protein, Total
Reducing Substances in Stool
Renal Function Panel
Retic
RSV Antigen Detection
Salicylate
Sickle Quick
Sodium
Theophylline
Throat Screen, Strep
Troponin
Type and Screen
Crossmatch
Urea Nitrogen (BUN)
Uric Acid
Urinalysis
Vaginal Screens
Wet Prep for parasites