Name of Policy: Documentation/Record-keeping/
Record Review

Policy Number: 3364-107-311

Approving Officer: Medical Director, Clinical Pathology
Responsible Agent: Director, Clinical Pathology
Administrative Director, Lab

Scope: Pathology Laboratory University of Toledo
Medical Center

Key words: Uniform format, documentation, requisitions, results reporting, transfusion reactions.

New policy proposal

Minor/technical revision of existing policy

(A) Policy statement

The Laboratory provides a uniform format for documentation relating to requisition, performance and reporting test results in the form of records, procedures, and policies and retains these records for the time specified by CLIA, FDA, CAP and standards.

X

Reaffirmation of existing policy

(B) Purpose of policy

To describe a system of generation, implementation, revision, and review of all records pertinent to the care of patients at UTMC.

(C) Procedure

- 1. The following records must be maintained for at least two years: Specimen requisitions, patient test results and reports (electronic computer retrieval is acceptable), accession records, quality control records, proficiency test records, quality improvement records.
- 2. Format and revisions of forms or records that will be part of the patient's permanent medical record must be reviewed and approved by the UTMC Forms Committee. These forms must be submitted for review to the Medical Records department and bear a Medical Record form number.
- 3. A designated Technologist or Supervisor reviews the following:
 - Follow-Up Work Lists:
 - a. Criticals,
 - b. Delta Checks,

Major revision of existing policy

c. Abnormals,

- d. Comm Log.
- Monthly results of reagent quality control, instrument function checks and equipment temperature monitoring.
- POCT results and QC.
- 4. The Medical Director reviews the following:
 - Special Studies, including antibody identifications and elution studies, electrophoresis reports, coagulation studies, immunofluorescence studies. Written reports, if necessary, are signed before release.
 - Transfusion reaction investigations. Results are interpreted, reported and signed by the Medical Director.

Approved by:

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Name: Amira Gohara, M.D. Title: Medical Director, Clinical

Pathology

1/10/2025

Date

Review/Revision Completed by:

Joshua Otiso, Administrative Director, Lab **Policies Superseded by This Policy:**

• Q-10

Initial effective date: 10/06/2003

Review/Revision Date: 01/04/2025

Next review date: 01/04/2027