


<b>Name of Policy:</b> <b>Outpatient Lab Procedure</b> <b>Policy Number:</b> 3364-136-CBGL-09 <b>Approving Officer:</b> Medical Director, Blood Bank Program <b>Responsible Agent:</b> Director, Respiratory Care Services <b>Scope:</b> The University of Toledo Medical Center Respiratory Care Services Department		 <b>Effective date:</b> 2/3/2025 <b>Original effective date:</b> 3/2011	
Key words: Outpatient, Lab, Procedure, Blood Gas, Procedure			
<input type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input checked="" type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

In the event a blood sample from an outpatient setting comes to UTMC Blood Gas Lab for analysis, this procedure will be followed.

(B) Purpose of policy

To establish a procedure for the analysis and reporting of outpatient samples.

(C) Procedure

1. All outpatient blood samples will go to the main lab first for check-in procedure. The main lab is responsible for ensuring the patient has a current encounter number assigned so appropriate billing procedures can be followed.
2. If the blood sample comes through the outpatient lab, the lab staff will place an order in the electronic medical record (EMR). These blood samples will have the accession number sticker accompanying them. Upon arrival to the blood gas lab, a qualified Respiratory Care Practitioner (RCP) will make sure to check the “order inquiry” for received labs prior to running the sample.
3. The qualified RCP will process the sample per policy 3364-136-CBGL-06 Quality Control – Quality Management Program. The main lab will fax the blood gas results to the requesting facility if they cannot access the EMR. Critical values reporting will follow policy 3364-136-CBGL-07.

<p>Approved by:</p> <p>/s/</p> <hr/> <p>Melissa Kukiela BSRC, RRT Director, Respiratory Care Services</p> <p>2/3/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Lauren Stanoszek, MD Medical Director</p> <p>2/3/2025</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by:</i> Director, Respiratory Care Services</p>	<p><b>Policies Superseded by This Policy:</b></p> <ul style="list-style-type: none"><li>• <i>n/a</i></li></ul> <p>Initial effective date: 03/2011</p> <p>Review/Revision Date:</p> <p>04/29/2010 02/23/2011 04/11/2012 03/03/2014 03/01/2017 02/19/2019 03/15/2021 03/23/2023 02/03/2025</p> <p>Next review date: 02/3/2027</p>
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