Name of Policy: **Correction of Records and Results** **Policy Number**: 3364-107-106 **Approving Officer**: Medical Director, Clinical Pathology **Responsible Agent**: Director, Clinical Pathology Administrative Director, Lab **Scope**: Pathology Laboratory University of Toledo Medical Center	**UT TOLEDO HEALTH** **Effective date:** 01/04/2025 **Original effective date**: 08/27/1997

Key words: Erroneous results, correction, outstanding list, provider notification, documentation.

☐	New policy proposal	☐	Minor/technical revision of existing policy
☐	Major revision of existing policy	☒	Reaffirmation of existing policy

(A)   Policy statement

Specific format must be used for revision of laboratory tests once results have been finalized.

(B)   Purpose of policy

To provide documentation of a result change. To remove erroneous results from the chart. To alert health care personnel of a change in reported results.

(C)   Procedure

Correction of Results (Example: Released values are incorrect):

Result Corrections must be issued through the Outstanding list or Result Entry and Verification activity. Once the correct lab is identified, the tech will select "Result Correction" and must give a result correction reason. They will then confirm the correction and replace the incorrect values with the valid result. Once values have been updated and finalized, the new corrected result will file to the patients charts with a note that it has been corrected.

Notification of Corrected Results

1) Caregivers must be notified when changes in reported results may affect patient treatment. Any result that is corrected and has gone from a normal value to an abnormal value or has gone from an abnormal value to a normal value must be called to the patient's caregiver or RN immediately.   Documentation of notification must be put into the LIS. This documentation must include who was notified, time of notification, and date of notification.

2) If the corrected result is on a clinic patient, notify an RN at the clinic or the patient's physician and document.

3) If this is a non-clinic outpatient, notify the patient's physician and document.

NOTES:

> ❖ Results that are corrected in the Epic Beaker system will automatically show the tech entering the change and the previous result. This change will print on the patient report and will show in the patient's chart.

> ❖ Handwritten reports, charts or records must be corrected according to the Process Control policy #3364-107-303. Corrected reports to be charted must clearly state "CORRECTED REPORT".

Approved by: /s/ _____ 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:** • *OP-6* Initial effective date: 08/27/1997 Review/Revision Date: 01/04/2025 Next review date: 01/04/2027