Name of Policy:	**Report Format/Content Review**	THE UNIVERSITY OF TOLEDO MEDICAL CENTER
Policy Number:	3364-107-121	
Department:	Pathology-Laboratory	
Approving Officer:	Chief Operating Officer-UTMC	
Responsible Agent:	Director, Clinical Pathology Administrative Director, Laboratory	**Effective Date: 1/4/2023**
Scope:	Pathology-Laboratory	Initial Effective Date: 3/11/2011

_____ New policy proposal	X Minor/technical revision of existing policy
_____ Major revision of existing policy	_____ Reaffirmation of existing policy

(A) Policy Statement

A sampling of test results must be assessed every two years as well as during the implementation of a new report format, a new test or new reporting mechanism, or a system change.

(B) Purpose of Policy

The laboratory director reviews and approves, at least every two years, the content and format of the laboratory patient reports to ensure that they effectively communicate the patient test results and meet the needs to the hospital and medical staff.

(C) Procedure

1. Reports from each interface and its corresponding report from Epic Beaker are printed.
2. Reports from HCLL and ARUP are also printed.
3. These reports are reviewed by the medical director and signed off as acceptable or unacceptable. Anything unacceptable is corrected.
4. A reports review will also occur at the time of implementation of a new report format, a new test or new reporting mechanism, or at the time of a major system change.

Approved by:	**Review/Revision Date:** 3/01/2012 3/01/2013 2/20/2015 2/10/2017 1/19/2019 1/4/2021 1/04/2023
/s/ 01/09/2023 Amira Gohara, M.D. Professor Director, Clinical Pathology Date	
/s/ 01/10/2023 Christine Stesney-Ridenour Chief Operating Officer-UTMC Date	
Review/Revision Completed by: *Heather Byrd – Administrative Director - Lab*	**Next Review Date:** 1/4/2025
Policies Superseded by This Policy: OP-19	