## SUNY DOWNSTATE MEDICAL CENTER UNIVERSITY HOSPITAL OF BROOKLYN POLICY AND PROCEDURE

|  | No: _                | LAB- 8 |
|--|----------------------|--------|
| Subject: System for Detection of Data  Transferring/Transcription Errors | Page: _ 1 _ of _     | 1      |
| In Laboratory Information System (LIS)                                   | Original Issue Date: | 1/02   |
|  | Supersedes:          | 11/07  |
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## **POLICY:**

To detect and correct data transferring errors generated from automated instruments and/or data transcription errors from manual workstations in the Laboratory Information System.

## PROCEDURE:

- 1. Periodically, the supervisor or assistant supervisor for each laboratory will review results entered into the Laboratory Information System as defined in the laboratory section policy.

  (See each laboratory policy and procedure)
- 2. The selection of results to be reviewed will be made on a random basis as per laboratory section.
- 3. The results written on the worksheet for each manual workstation will be reviewed and compared with the results verified in the LIS system for data transcription errors.
- 4. The results printed from each instrument will be reviewed and compared with the results verified in the LIS system for data transferring errors.
- 5. The supervisor or assistant supervisor for each laboratory will verify the reviewed results by initiating the worksheets and instrument printouts.
- 6. Discrepancies will be documented in an Action Report.
- 7. A copy of all Action Report will be sent to the laboratory QA/PI committee.
- 8. A new corrected report will be generated and forwarded t the patient's chart immediately.
- 9. All other areas of reporting will be notified.
- 10. The patient's cumulative report will show the **corrected** result.
- 11. The physician in charge will be notified of the corrective action.