TITLE: Valid Laboratory Orders for Outpatient

PURPOSE: To clearly establish the criteria for a “Valid Laboratory Order” for services provided in an outpatient setting including testing requested by non-UVM Medical Center associated practices.

POLICY STATEMENT: Laboratory testing must be ordered by an “authorized” individual. (See Definitions). Regulatory requirements dictate that the laboratory must obtain certain information on all requests for testing. This information ensures the correct testing is performed, results go to appropriate physicians(s) and that we are able to bill correctly for the services provided.

Requests for laboratory testing will be considered valid when all the required information, as outlined in the procedure below, is supplied to the laboratory.

PROCEDURE:

1. All orders for laboratory testing should be documented in the patient’s medical record.

2. Requests for laboratory testing will be accepted from “authorized” providers who wish to utilize UVM Medical Center Laboratory Services.

3. One time orders must specify an expected date of collection if they are to be collected other than immediately. The laboratory will consider the order to be valid provided the patient presents within a window 30 days prior to, or up to 90 days after the expected date. If they present outside of this window we will contact the ordering provider to confirm that the testing is still appropriate, ensuring medical necessity.

4. Laboratory orders can be conveyed to our laboratory in several ways.
   a. Telephone Order- a quick way to place an order when an electronic or paper requisition is not available. See policy-Written Authorization of Telephone Orders for description of what follow-up documentation is required when this method of ordering is used.
   b. Electronic Order- via systems such as Prism, or Atlas. Electronic systems prompt the user for the required information.
   c. Paper Orders- Choose the appropriate UVM Medical Center Outpatient paper requisition:
      -General Outpatient Laboratory requisition
      -Cytogenetics/Flow/Bone marrow Exam Lab Requisition
      -Surgical Pathology/Non GYN-Cytology Requisition
      -Genetic & Prenatal Laboratory Requisition

   Please note: Prescription pads are strongly discouraged as a mechanism to order lab testing. The Laboratory does not consistently receive all the required information when this format is used.

5. Outpatient lab orders, regardless of conveyance, require the following information:
   a. Patient’s full name (first and last name)
   b. Patient’s date of birth
   c. Patient’s sex
d. Ordering/Billing provider (first and last name of Attending physician.) Usually the ordering and billing provider are the same individual.
   
   **Note 1:** Residents who are ordering the testing must document an attending physician (for billing purposes) on the lab order. E.g. see box at bottom of our outpatient requisition for Attending Physician information.

   **Note 2:** If the request is from a physician who is not local or does not typically use our laboratory, please provide physician’s complete address/fax#/ phone # for results and or critical values.

e. If a physician other than the ordering physician needs a copy of the results, please provide us with the name (first and last name required) and contact information.

f. Billing information: Electronic billing rules require that we submit the subscriber’s date of birth with each claim.

   - If billing patient’s insurance, fill in lines 1-5 of billing section.
   - If patient has no insurance, fill in lines 1 and 2 of billing section.
   - To bill your office, supply correct 96x or 97x account number for billing or check appropriate box.

g. ICD-9-CM code/diagnosis/clinical history-The ICD-9-CM diagnosis code indicates the reason the test is requested (diagnosis or signs/symptoms). Clinical history may help with the interpretation of the test results.

h. Specimen collection date and time.

i. Specimen type.

j. The test(s) requested to be performed.

k. If a Pap smear is requested on a Medicare patient, the submitting facility must indicate whether it is a screening (low or high risk) or a diagnostic pap test.

   Please check appropriate box on the requisition and supply corresponding ICD-9-CM diagnosis code.

l. Physician signature.

6. In the case of missing information or ambiguous orders, laboratory staff must attempt to obtain the required information prior to tests being performed.

   *The only exception to this practice is when a delay in testing would compromise patient care or the integrity of the specimen. In these cases, the testing may be performed and the information subsequently obtained.*

**MONITORING PLAN:** Tracking of invalid or incomplete orders is performed by the laboratory (using the Lab Problem forms). The data is entered into a Lab Problem Database. The Laboratory Business Systems and Client Services staff uses this information to educate their clients as to common errors, trends, etc. with laboratory orders.

**DEFINITIONS:** The “authorized” person is one who is treating the patient for a specific medical problem and who uses the results to manage the patient’s medical problem. “Authorized” persons may include non-physician practitioners, as long as they are operating within their authority under state law.

**RELATED POLICIES:**
   
   Written Authorization of Telephone Orders – intradoc-LABCOMPL100.006
   Test Ordering-intradoc-LAB200.025

**REFERENCES:** Orders-Processing of Patient Care-HIM79-intradoc
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