



Danbury Hospital
Department of Pathology & Laboratory Medicine
Technically Speaking

C. S. Guidess, Editor

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DANBURY HOSPITAL LABORATORY OFFERS LIFEPOINT INFORMATICS' LABTEST.COM TRAINING

Training for Labtest.com will occur on Wednesday, June 11 and Thursday, June 12. Presentations will be from 8am-10am on June 11 with a breakfast at 7:30 in the Gerald D. Robilotti Conference Center. All other sessions will be at the ITG trailer, 84 Locust Ave (across from the Emergency Room). Additional sessions will be at 1pm and 3pm on Wednesday, June 11 and at 8am, 10am, 1pm and 3pm on Thursday, June 12th. For additional information and to register for a class, please contact Client Service/Marketing Coordinator, Sandi Smith, at 203-739-7800.

Labtest.com is a web-based tool that enables staff to order laboratory tests, print 2D bar-coded specimen labels, check medical necessity and review patient results.

MEDICARE ANNOUNCES NEW REQUIREMENTS FOR COLLECTION OF ABNs

Effective April 1, 2008 Medicare requires the collection of an Advanced Beneficiary Notice (ABN) with the collection of Sedimentation rate (ESR) and high sensitivity C-reactive protein (hs-CRP) tests.

Please be aware that if approved diagnosis codes are not used for these tests, Medicare will not reimburse for the tests and the patient will be billed. The following website is a valuable resource for review of acceptable diagnosis codes for these and other tests: www.NGSMedicare.com. Copies of the policy are also available from Customer Service Representative, Sandi Smith, 203-739-7800.

NEW TROPONIN REFLEX TEST ALGORITHM

Troponin I can now be ordered as a “TnI Reflex” reflex test algorithm. If a “TnI Reflex” is ordered, a troponin I test will be performed first and additional cardiac biomarker testing (CK and CK-MB) will be based on the TnI result. If the TnI result is greater than 0.04 ng/mL, a total CK will be performed; this will be followed by a CK-MB test if the total CK is greater than 100 U/L (female) or >125 U/L (male). If the TnI result is less than or equal to 0.04 ng/mL, CK and CK-MB will not be performed.

REMINDER: a MINIMUM of 1 mL of whole blood in a lavender stoppered tube is required for CBC testing in the adult patient. Specimens whose volumes do not meet the 1 mL requirement will be canceled as insufficient sample (QNS) and testing will not be performed.

CO₂ vs. HCO₃⁻: A Change in Result Reporting

The result in our serum electrolyte panel formerly reported as “HCO₃” will now be reported as “CO₂”. Reporting this result as “HCO₃” has been a historic practice at Danbury Hospital because it can be useful to think of total CO₂ as an approximation of the serum bicarbonate concentration since approximately 95% of the total CO₂ in blood exists in the form of HCO₃⁻. However, these two quantities are not exactly equivalent. The total CO₂ concentration is what is actually measured by clinical chemistry analyzers as opposed to the HCO₃⁻ result derived from the pH and PCO₂ on a blood gas analysis; the difference between these two results is typically on the order of 1-2 mmol/L. Reporting total CO₂ as “HCO₃” has been a source of confusion, e.g., when a laboratory technologist phoned a result to a nursing unit and referred to the result as a total CO₂ since this is what the analyzer reports, but the nurse or unit secretary saw the result appear in Invision as a “HCO₃”.

The bicarbonate result in our blood gas and whole blood electrolyte panels will continue to be reported as “HCO₃” since these results represents the “true” bicarbonate concentration derived by the blood gas analyzer from the measured blood pH and PCO₂ results.

MILLENNIUM UPDATES

On May 21, 2008 changes to the Cerner Millennium interfaces were put in place in order to resolve the top priority issues listed below:

- Cerner results for add on orders on ED patients who were moved to Virtual Beds will populate in HMED
- Pending Cerner results will display in Invision’s results screen

In addition to these “fixes”, Cerner’s Laboratory, Radiology and Nuclear Medicine results are now interfacing to Touchworks as well as to SoftMed reports.