1.0 PURPOSE

The purpose of this policy is to ensure information received from the necessary diagnostic services for patient care is communicated with providers.

2.0 REFERENCES AND DEFINITIONS

.1 References

a. Hawaii Revised Statutes, Section 26-14.6, Department of Public Safety; and Section 353C-2, Director of Public Safety, Powers and Duties.


.2 Definitions

a. Diagnostic services include biomedical or imaging services and results that are used to make clinical judgments. Reference laboratories, consulting specialist, hospital radiology and laboratory departments, public health facilities or the Health Care Sections, may provide the services.

b. STAT: Meaning immediately.

3.0 POLICY

.1 Contracted diagnostic services shall be registered, accredited or otherwise meet applicable state and federal law. The Corrections Health Care Administrator or designee responsible for contracted services shall ensure that federal and state requirements are met.

.2 The on-site ordering physician or nurse practitioner shall review results that indicate a medical emergency or serious emerging medical condition immediately (STAT). If there is no provider on site, the physician-on-call shall be notified by a nurse of the results of the diagnostic test that indicate immediate action is required. The ordering provider shall initial the diagnostic reports at the time of the review. For on-call orders the diagnostic report shall be initialed during the next scheduled provider’s clinic.
4.0 PROCEDURE

.1 The following diagnostic tests with immediate results that may be part of the Health Maintenance Program (that includes physical examinations) shall not require a doctor’s order. The test results shall be reviewed and signed by the responsible physician or nurse practitioner.

a. Multiple test dipstick urinalyses;

b. Finger stick blood glucose test;

c. Peak flow meters;

d. Stool blood test;

e. Pregnancy test kit

.2 The nurse shall document results from the multiple test dipstick urinalysis on Form DOC 0501, Urinalysis Report (Attachment A).

.3 Radiology testing requires a physician’s order on Form DOC 0406, Consultation Record (Attachment C).

.4 Health Information Services shall provide quality assurance by reviewing all diagnostic test results for providers’ initials prior to filing the diagnostic results in the medical record or by using any other method that indicates the record is incomplete and the diagnostic result requires a review by a provider.

.5 The Clinical Section Administrator shall develop procedures for the requisition of tests to diagnostic services and a method of receiving results. Included in the procedures shall be the timely notification to the ordering provider. At a minimum, laboratory requisition slips shall have the following information:

a. Patient identifying data and gender;

b. Referring physician;

c. Type of test ordered;

d. Collection date and time;
e. Fasting or non-fasting;

f. Specimen type;

g. Initial of person who obtained the sample.

.6 At a minimum, all specimen containers shall be labeled with the patient’s first and last names, date of birth or SID number. A regularly assigned pick up schedule shall be agreed upon between the Clinical Section and the Contractor. The contractor shall agree to pick up STAT orders twenty-four (24) hours a day, seven (7) days a week.

.7 The contracted laboratory shall supply the Medical Sections with a Laboratory User’s Guide. The guide shall reference the preparing, obtaining, storage of specimens and a laboratory contact telephone number.

.8 The contractor is required to install and maintain on site remote laboratory printers. All incoming laboratory reports, along with the patient’s chart, shall be referred to the ordering physician or nurse practitioner for review. The ordering physician or nurse practitioner shall initial the laboratory report as an indicator that the review is completed. Orders associated with the laboratory report shall be record on the progress notes.

.9 The contractor shall immediately notify the charge nurse when critical laboratory results are detected. Immediate notice shall be given to the ordering physician or nurse practitioner or the physician-on-call.

.10 Laboratory reports smaller than 8” x 11” shall be attached to Form DOC 0408, Diagnostic Study Report (Attachment B) and filed in the diagnostic index of the medical record.
5.0 SCOPE

This policy and procedure applies to all Correctional Branch facilities and their assigned personnel.

APPROVAL RECOMMENDED:

Kay A. Bannett 7/38/06
Medical Director Date

June Javarez 8/14/06
Corrections Health Care Administrator Date

Frank A. Rogers 8/10/06
Deputy Director for Corrections Date

APPROVED:

Dwaine D. White
Director

8-11-06
Date
STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

FACILITY: _______________  NAME: _______________

SSN: _______________  DOB: _______________

URINALYSIS REPORT

COLOR: _______________________________________________

APPEARANCE: _______________________________________________

LEUKOCYTES: _______________________(NEGATIVE)

NITRITE: _______________________(NEGATIVE)

UROBILINOGEN: _______________________(0.1-1.0)

PROTEIN: _______________________(NEGATIVE)

pH: _______________________(5-7.5)

BLOOD: _______________________(NEGATIVE)

SPECIFIC GRAVITY: _______________________(1.003-1.030)

KEYTONES: _______________________(NEGATIVE)

BILIRUBIN: _______________________(NEGATIVE)

GLUCOSE: _______________________(NEGATIVE)

_________________________________  DATE
TESTER'S SIGNATURE

_________________________________  DATE
PHYSICIAN'S SIGNATURE

DOC 0501 (02/93)  CONFIDENTIAL
## CONSULTATION RECORD

<table>
<thead>
<tr>
<th>Facility:</th>
<th>S.I.D:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Name:</td>
<td>Last</td>
</tr>
<tr>
<td>Consultant</td>
<td>Appointment Date</td>
</tr>
</tbody>
</table>

**REASON FOR CONSULTATION** (Complete Form Doc 0497 if a significant change in health status has occurred):

<table>
<thead>
<tr>
<th>Name of Requesting Physician</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONSULTANT'S REPORT (History, Findings, Diagnosis, Recommendations)</td>
<td></td>
</tr>
</tbody>
</table>

45 Code of Federal Regulation 164.512.(k)(5): A covered entity may disclose to a correctional institution or a law enforcement official having lawful custody of an inmate...protected health information about such inmate if the correctional institution or such law enforcement official represents that such protected health information is necessary for: ...d) the health and safety of such individuals and officers or other persons responsible for the transportation of inmates or their transfer from one institution, facility, or setting to another....For the purposes of this provision, an individual is no longer an inmate when released on parole, probation, supervised release or otherwise is no longer in lawful custody.

Original: Medical Record
Canary: Consultant's Copy

DOC 0406 (12/03)