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INCOMPLETE LABORATORY REQUEST FORMS: THE EXTENT AT A TERTIARY CARE HOSPITAL

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BACKGROUND

According to the data available, most laboratory errors occur in the pre-analytical phase of testing procedure. Incomplete / incorrect data in laboratory request forms is an important source of preanalytical errors.

METHOD

A retrospective descriptive study was performed on all request forms received in the day-time laboratory of the Department of Chemical Pathology, Lady Ridgeway Hospital for Children. They were analysed during a period of one month, from 25th April 2016 to 24th May 2016. The forms were scrutinized for the presence of specific parameters. Data were entered into an excel sheet and percentage of occurrence was calculated for each parameter.

RESULTS

A total of 5093 request forms were analysed. Clinical history of the patient (82.5%) and the absence of the type of sample (blood/urine/CSF) (75%) were the most incomplete parameters. Proper identification of requesting medical officers was not mentioned in 16% of request forms. Seven percent of requests were made not using a standard "Health 359" request form. Incomplete ward information was found on 3% of forms. Two percent of request forms were illegible. Less than 1% of requests were found to have sample collected into inappropriate container, mismatching data in the request form and the label, missing patient identification and hospital number.

CONCLUSION

The most common missing parameter in the request forms was clinical data of the patient. The facts that should be taken into account when requesting tests are, providing complete patient identification, ward information and requesting doctors' identification. This will help to improve the efficiency of the service provided by the laboratory. In order to improve certain areas in test requesting, it was decided to introduce new request forms in a user-friendly manner and to perform a re-audit to assess the improvement.