

RESULT REPORTING

Purpose:

The purpose of this procedure is to ensure the quality of technical services provided by the staff at sites performing rapid HIV testing staff by establishing a standard for result reporting and reviewing.

Responsibility:

It is the responsibility of certified staff at all sites performing rapid HIV testing under RWJMS to:

- Properly identify patients and maintain the identity of the source patient throughout the testing process.
- Sign off on all testing performed by them.
- Report and document any aberrations to the Rapid HIV Testing Support Program.

It is the responsibility of the on-site coordinator or designee to:

- Review all patient and quality control testing results weekly and document their review.
- Forward all testing logs to the Rapid HIV Testing Support on a monthly basis.
- Investigate and report back to the Rapid HIV Testing Support Program coordinator all problems and questions as they occur.
- Implement corrective action plans as required.

It is the responsibility of the Rapid HIV Testing Support Program staff to:

- Review quality control, proficiency test results and patient logs.
- Assist the laboratory directors in identifying significant reporting, QC or PT issues.
- Train, recertify and monitor competency of staff.

Procedure:

Patient Identification

1. Confirm the identity of the patient verbally with the patient and/or someone accompanying the patient.
2. Label any specimen collection containers while still at the patient's side. The single use test devices must be labeled so as to uniquely identify the patient.
3. Identifying numbers are used, not the patient's name.

Reporting

1. All testing results must be documented on the appropriate Test Log and reported to the HIV Testing Support Program, appropriate State and/or CDC departments.
2. Quality Control and Proficiency testing
 - A. The results of all quality control and proficiency testing performed will be documented on the Test Log.
 - B. All reagent lot numbers and expiration dates will be documented on the Test Log.
 - C. All temperature monitoring or any other information regarding quality control shall be documented on the Test Log.
 - D. All testing personnel will initial the Test Log for any testing performed. A legible signature or printed name is required at least once per Test Log sheet.
3. Patient/Client test results
 - A. All patient testing results must be documented in both the Test Log and the patient chart maintained at the site.

- B. Once properly recorded on the paper Test Log and on paper or electronic State or CDC reporting systems, the result, along with the required additional information, should be entered onto the Rapid HIV Test Result Form and then may be transferred by the testing staff to the clinical record.
- C. All negative results will be shared verbally with the patient and recorded in the Medical record/chart. As per current NJDHSS/DHAS policy, negative results are not directly provided to the client in writing at the time of testing.
- D. All preliminary positive results will be shared with the patient. The staff will refer to the Rapid-2-Rapid HIV Testing Policy for follow-up procedures.
- E. Once the result has been properly recorded on the paper Test Log and on paper or electronic State or CDC reporting systems, the result may be transmitted to the site's clinical record using the Rapid HIV Test Result Form. If the Rapid HIV Test Result Form is used, a copy must be maintained in the client's record, or if the HIV test was requested individually, rather than through the testing site's standing order, the result shall be transmitted to the requester using the Rapid HIV Test Result Form. If the Rapid HIV Test Result Form is used, a copy must be maintained in the client's record.

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