ADMINISTRATIVE POLICIES AND PROCEDURES State of Tennessee Department of Correction	Index #: 113.75	Page 1 of 3
	Effective Date: June 1, 2019	
	Distribution: A	
Approved by: Tony Parker	Supersedes: 113.75 (9/1/15) PCN 17-7 (3/1/17)	
Subject: LABORATORY SERVICES		

I. AUTHORITY: TCA 4-3-603 and TCA 4-3-606.

II. PURPOSE: To ensure the availability of laboratory services necessary to provide health care to inmates.

III. APPLICATION: Wardens/Superintendents, Associate Wardens of Treatment/Deputy Superintendents, health administrators, medical contractors, privately managed facilities and health care staff.

IV. DEFINITIONS:

A. Clinical Laboratory Improvement Amendments (CLIA): Establishes quality for all laboratory testing to ensure accuracy, reliability, and timeliness of patient test results.

B. CLIA Certificate for Provider-Performed Microscopy (PPM) Procedures: Certification to perform laboratory procedures that have been specified as provider-performed and, if applicable, examinations or procedures that have been approved as waived laboratory tests by the U.S. Department of Health and Human Services.

C. CLIA Certificate of Waiver: Certification for a laboratory to perform examinations or procedures that have been approved as waived laboratory tests by the U.S. Department of Health and Human Services.

V. POLICY: Each facility shall provide the laboratory services necessary to support health care services.

VI. PROCEDURES:

A. *The Health Services Unit Manual* at each facility shall include written procedures for acquiring necessary laboratory services. The facility may use the contract laboratory's guidelines and instructions for this purpose.

B. All CLIA guidelines shall be adhered by privately managed institutions and medically contracted facilities, in obtaining appropriate certification and/or certificate of waiver for its laboratories. Deberry Special Needs Facility shall obtain a CLIA Certificate for provider-performed microscopy procedures (PPMP).

C. Each facility’s health service unit shall perform basic laboratory services consistent with the inmate population and the accessibility of health care resources.

1. On-site laboratory tests with immediate results shall include: multiple-test dipstick urinalysis, finger-stick blood glucose, fecal occult blood, and peak flow.

2. Facilities housing female inmates shall possess slides with slip covers and microscopes so that vaginal wet preps can be accomplished.

D. Each facility shall possess the capability to properly collect, safeguard, store, and transport laboratory specimens. Specific specimen requirements from the institution's contract laboratory shall be contained in the institution's *Health Service Unit Manual*.

E. A laboratory log shall be maintained for all laboratory procedures performed in-house and through contract services. The log shall include the date, time, inmate number, name of the laboratory procedure, provider name, date the specimen was sent, and the date the results were received. Each facility's health administrator shall provide laboratory data on the Monthly Statistical Report (See Policy #113.54)

F. Each facility shall maintain data, in accordance with CLIA guidelines. Basic requirements include:

1. Immunohematology reports and data to be kept for five years.

2. Pathology reports and data to be kept for ten years.

3. All other reports and logbooks to be kept for at least two years.

G. All laboratory services shall require the order of the physician or mid-level provider. Appropriate laboratory forms shall be fully completed when requesting services. All laboratory results shall be reviewed, initialed, and dated by the physician or mid-level provider within five business days of receiving the results at the institution, and then filed in health or inpatient records as appropriate.

H. Documentation:

1. Nurses shall document a narrative note indicating the date, time and type of laboratory specimen collected on the Problem Oriented Progress Note, CR-1884.

2. For venipunctures the nurse shall additionally document the size of needle used, number of needle sticks occurring to collect the specimen, part of body where the venipuncture occurred, and how the patient tolerated procedure.

VII. ACA STANDARDS: 4-4409 and 4-4413.

VIII. EXPIRATION DATE: June 1, 2022.

TENNESSEE DEPARTMENT OF CORRECTION

PROBLEM ORIENTED – PROGRESS RECORD

_____
INSTITUTION

INMATE NAME: _____ TDOC NUMBER: _____

DATE	TIME	

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