

- b. The individual performing the EKG will document on the tracings (all copies of the EKG tracing with the interpretation): who was contacted, what time reported, along with their initials, date.

Example: Dr. Jones / 1045/ RBR /Aug 5, 2007

- c. In the event the appropriate care provider cannot be contacted directly, notify the RN in charge of that client's care and document on the EKG tracings must include: contact person, time contact person notified, and brief narrative of circumstance.

Example: M. Jones, RN / 1035/ will page physician /RBR /Aug 5, 2007

3. **Radiology:** The contracted radiology service will call any results identified as 'Critical Value Results' to the ordering physician or nurse responsible for the client.
4. Upon receipt of a Critical Value Result and/or results of a Critical Test by an RN/LPN, the information must be communicated to the physician within one hour.
 - a. The nurse who receives the critical value result and/or critical test results must document on the SH 920 Notification of Critical Value Test and/or Results form, read it back for validation, record the full name of the caller, date, time and sign as a "Read Back" value.
 - b. Notify the ordering physician or the OD, document any orders received, read back to the physician for validation, record the name of the physician, date, time and sign as a "Read Back" order.
 - c. Complete SH 920 Notification of Critical Value Test and/or Results and place form in Lab Section of the medical record.
 - d. If unable to contact the ordering physician or OD within 15 minutes, contact Searcy Security for assistance.
 - e. If unable to contact the ordering physician or OD after 30 minutes, notify the Medical Director/Clinical Director.
5. Physician will document in the medical record as appropriate.

Critical Value Results for Lab

Note: Call results equal to and less than or equal to and greater than indicated limits

Test	Units	Reference range	Low Limit	High Limit
Digoxin	ng/ml	0.9 – 2		2.5
Dilantin	mcg/ml	10 – 20		40
Phenobarbital	mcg/ml	15 – 40		60
Tegretol	mcg/ml	4 – 12		20
Valproic Acid	mcg/ml	50 – 120		200
Calcium	mg/dl	8.5 – 10.8	7	13
Potassium	mEq/L	3.5 – 5.5	2.5	6.5
Sodium	mEq/L	135 – 148	120	160
Lithium	mEq/L	0.6 – 1.4		2
WBC	$\times 10^3/\text{mcl}$	4 – 10.5	1	30
Hemoglobin	gm/dl	M: 12.5 – 17 F: 11.5 – 15	7	18.5
Hematocrit	%	M: 36 – 50 F: 33 – 44	18	52
Platelets	$\times 10^3/\text{mcl}$	140 – 415	30	650
INR	ratio			5
Glucose	mg/dl	65-109	40	500
Ethosuximide	mcg/ml	40 – 100		200

Additionally, any drug level reported in Toxic range

Critical Value Results for EKGs:

****ACUTE MI****

****BIFASCICULAR BLOCK****

Complete heart block /3rd degree heart block

2nd degree A-V block (Mobitz 2)

Bigeminy

ST elevation

Ventricular tachycardia

Supraventricular Tachycardia (SVT)

Bradycardia or Heart rate < 40

Tachycardia or Heart rate > 140

Critical Value Results for Radiology:

The following medical conditions are designated as critical value reporting guidelines with the contracted Radiology Service:

Any fracture

Chest Pathology (i.e. foreign bodies, pneumonia, pneumothorax, mass, etc.)

Abdominal pathology (i.e. foreign bodies, bowel obstruction, free air, dilated bowel, etc.)

Any findings the Radiologist considers critical

Distributed:

Critical Value Results for Lab

Note: Call results equal to and less than or equal to and greater than indicated limits

Test	Units	Reference range	Low Limit	High Limit
Digoxin	ng/ml	0.9 – 2		2.5
Dilantin	mcg/ml	10 – 20		40
Phenobarbital	mcg/ml	15 – 40		60
Tegretol	mcg/ml	4 – 12		20
Valproic Acid	mcg/ml	50 – 120		200
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Lithium	mEq/L	0.6 – 1.4		2
WBC	x10 ³ /mcl	4 – 10.5	1	30
Hemoglobin	gm/dl	M: 12.5 – 17 F: 11.5 – 15	7	18.5
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Critical Value Results for Radiology:

The following medical conditions are designated as critical value reporting guidelines by the contracted Radiology Service:

Any fracture

Chest Pathology (i.e. foreign bodies, pneumonia, pneumothorax, lung mass, etc.)

Abdominal pathology (i.e. foreign bodies, bowel obstruction, free air, dilated bowel, etc.)

Any findings the Radiologist considers critical

1. Upon receipt of a critical value result by the RN/LPN, the information must be communicated to the physician within one hour.
 - a. The nurse who receives the critical value result must document on the **SH 920 Notification of Critical Value Test And/Or Results** form, read it back for validation, record the full name of the caller, date, time and sign as a "Read Back" value.
 - b. Notify the ordering physician or the OD, document any orders received, read back to the physician for validation, record the name of the physician, date, time and sign as a "Read Back" order.
 - c. Complete **SH 920 Notification of Critical Value Test And/Or Results** and place form in Lab Section of the chart.
 - d. If unable to contact the ordering physician or OD within 15 minutes, contact Security for assistance.
 - e. If unable to contact the ordering physician or OD after 30 minutes, notify the Medical Director/Clinical Director.
 2. Don't forget to make entry on the Physician Order Sheet as appropriate for your client.
- SH 920 (rev 6/09) (Back form)