What are lab orders costing you?

Almost two percent1 of the 2 billion2, 3 test requisitions that laboratories receive annually lack the basic information that technologists require to perform laboratory tests. (See box) This lack of attention to detail delays therapy and costs the medical community millions of dollars each year. A Q-PROBES™ study performed by the College of American Pathologists showed that two out of every three of these requisitions fail to specify what tests physicians wanted the laboratory to perform, or even the patient diagnoses that necessitated the testing in the first place. Further, one in every six outpatients arrive at laboratory collection stations without any orders at all.

**Minimal information required on laboratory test requisitions**

* Test name or code
* ICD Diagnostic code
* Patient identification
* Physician identification

**The consequences for patients**

The CAP study found that laboratory workers sometimes delayed patient testing for upwards of an hour while they tracked down the information that they required to proceed. In one out of every thousand of these tests, their efforts were unsuccessful and laboratory personnel had to abandon testing. Worse, some hospitals reported that when they were unable to locate the ordering physicians, their staff completed vacant requisitions by “guessing” at what tests they thought the doctor might want them to perform.

**Doing the math**

According to the National Inventory of Clinical Laboratory Testing Services, over 7-8 billion laboratory tests are performed yearly. 2 A survey performed by George Washington University School of Public Health determined that on average, a laboratory requisition contains orders for four tests.3 That means that laboratories process about 2 billion requisitions each year.

Spending as little time as 10 minutes to clarify the 1.8% of orders that the Q-PROBES study showed needed clarification would require laboratories to consume over 5 million hours of clerical Full Time Equivalents (FTEs). According to payscale.com, with clerical labor values at $13/hour, this results in wasting approximately 65 million dollars annually.

**What about my hospital?**

If you think your hospital has a problem with faulty ordering, it probably does. The Q-PROBES study found that many participants had twice as many defective orders than they expected to have.

**What can you do?**

The good news is the Q-PROBES authors offered ways to reduce the number of defective orders and the time that laboratory personnel spend to correct them. Here’s what you can do:

1. Implement policies that require caregivers ordering laboratory tests to verify that requisitions are complete.
2. Implement policies that prevent laboratory and hospital personnel from collecting specimens until requisitions contain all essential information.
3. Standardize ordering practices throughout the health care community.
4. Add electronic ordering with the laboratory menu to your laboratory’s capabilities.

As a metric in your quality improvement plan, we suggest that you track the numbers of incomplete orders, locate the trouble spots, and target your remedial actions accordingly.

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