Live. Learn. Hope.

LabCheck

Ascend LabCheck[™] Part 1: The Basics

Clinical Education 5/2021



At the end of this presentation, the nurse will be able to:

- 1. Identify the available resources to use as guides for the workflow.
- 2. Understand the importance of checking the label and how to properly place on a tube.
- 3. know the importance and reason on proper order of lab draws.
- 4. Identify which lab tubes need to be refrigerated and spun.
- 5. Understand the importance of balancing the centrifuge.

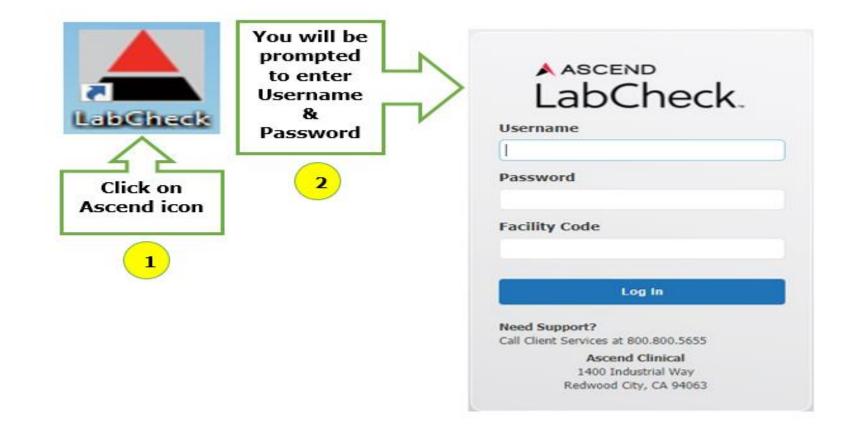
Introduction to Ascend LabCheck[™]

- Ascend is a *dialysis specific* full-service lab
- Uses smaller amounts of blood for tests
- Samples are sent to California for processing
- Results are posted within 24-36 hours from time of draw
- •NO STAT blood tests
- For patients only
- •NKC uses a different lab for employees

How to Use the Online System

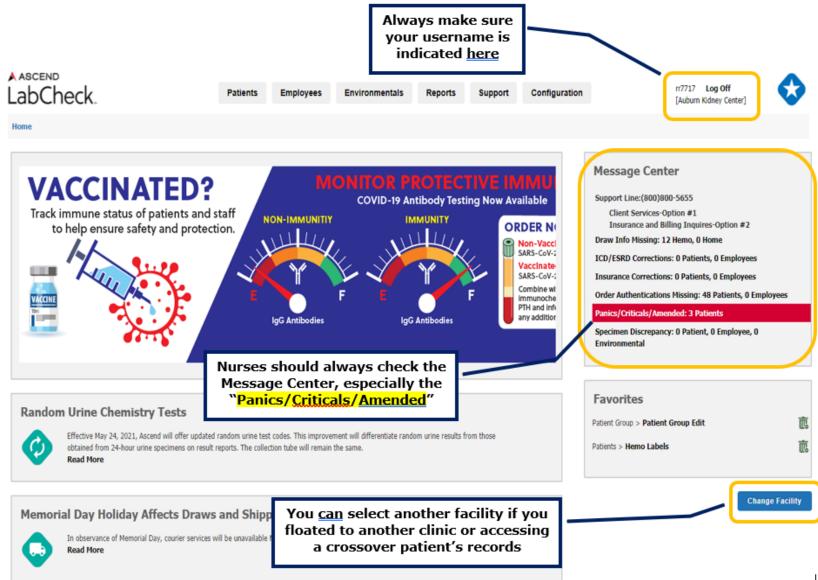


• Each pc, including the PCOW, has the Ascend Lab icon

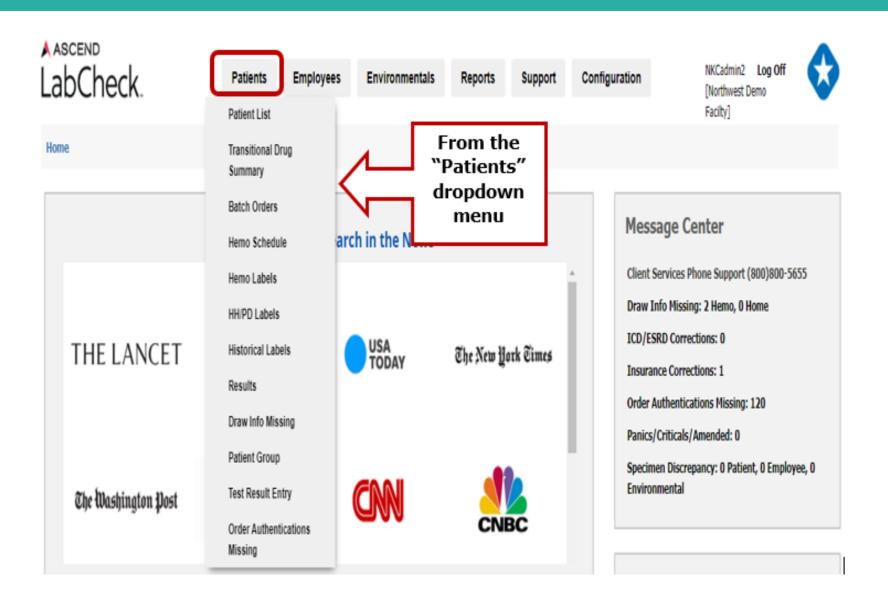


Let's Explore the Main Screen

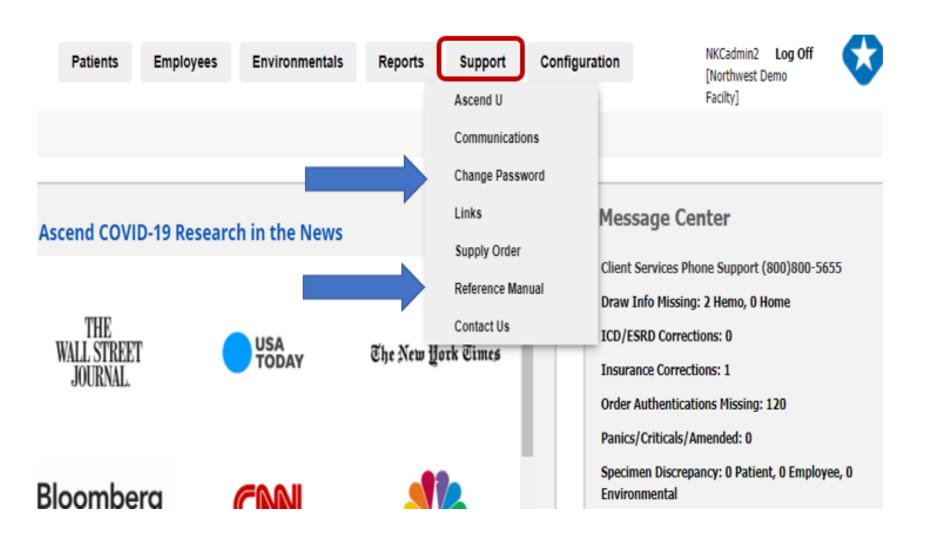




Main Screen Menu - Patients



Main Screen Menu - Support



Main Screen Menu - Support



• Reference Manual provides a list of Lab tests & information

Ex: Albumin Albumin A B C D E F G H I J K L M N O P Q R S T U V W X Y Z 24 Hour Specimen Plasma **Container** Type Green Top Tube Stability 7 days **Turnaround Time** 1 day Methodology Bromocresol Green (BCG) 3.6 - 5.4 g/dL Reference Range Transport Temp Refrigerate 2° - 8° C **CPT** Code 82040

Quick Reference Guide

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Provides step by step instructions on different procedures, especially related to nurse's workflow in using the system

ASCEND

A ASCEND LabCheck

Quick Reference Guide

VERSION 5

REV.2021.04

Some of the Workflow for Nurses

How do you add a new patient to the unit's list?

P	atients: Add a New Patient
1.	From Patients menu, select Patient List
2.	Click New Patient
3.	Enter Last Name. Click Check Existing Patient
4.	If no matching patients are found, click Create New Patient
	Note: If patient match occurs, follow instructions noted under READMIT A PATIENT OR ADMIT A TRANSFERRED PATIENT to readmit patient.
5.	Enter patient's demographic information in all bold face* fields. When complete, click Next
6.	To add the patient's insurance information, click Add a New Policy
	Note: Follow instructions noted under ENTER INSURANCE INFORMATION
7.	When complete, click Next
8.	To add the patient hemodialysis schedule, click New Schedule
	Note: Follow instructions noted under ENTER A PATIENT'S HEMO SCHEDULE.
9.	When complete, click Next
10.	Click Assignment of Benefits Form
	Note: AOBs are required on all new patients. Please fax completed form to Accounts Receivable.
11.	Click Open
12.	Click
13.	Click 🖾 in the upper right corner to close the AOB window.
	You are now able to select this patient to enter additional demographic, insurance, schedule and order information.

Ascend Standard Work from K-NET

Standard Work:		New Patient: New Admit					
<u>Who:</u> Nurse		Owner: Lab Team			Date Created: 11/9/17		
		<u>owner.</u> Lab ream			Revision Date: 10/30/18 LALH		
#	Ac	Key Points				Reasons	
1.	Log in to La	b Check					
2.	Select < Pati	ent> drop down					
3.	Select <pati< td=""><td>ent List></td><td></td><td></td><td></td><td></td><td></td></pati<>	ent List>					
4.	Select < Ne	w Patient>	• En	ter last	name		
5.	Select , <ex< td=""><td>isting Patient></td><td>pa • Pa fac at</td><td>tient tient act tility ina that fac</td><td>mpts to activate tive at another ctivate the patier ility and follow o reactivate</td><td></td><td></td></ex<>	isting Patient>	pa • Pa fac at	tient tient act tility ina that fac	mpts to activate tive at another ctivate the patier ility and follow o reactivate		
6.	Select <crea< td=""><td>ate a New Patient></td><td>• Fir too</td><td>st ESRD lay's da</td><td>the bolded fields date needs to b te (if patient has dialysis)</td><td>e</td><td></td></crea<>	ate a New Patient>	• Fir too	st ESRD lay's da	the bolded fields date needs to b te (if patient has dialysis)	e	
7.	Save						
8.	Assignment	of Benefits (AOB)	• Op		to Ascend Print for new cket		
9.	Schedule pa	tient/Save	• Wr	ong ent			
10.	Orders						
11.	. Edit – Prima	ry ICD	• N1	8.6 ESR	D		
12.	Select <tes< td=""><td>t Set></td><td>• Wi</td><td>abetic nen Hep</td><td>betic or non- C Warning heck "Ignore")</td><td></td><td></td></tes<>	t Set>	• Wi	abetic nen Hep	betic or non- C Warning heck "Ignore")		

Ascend Standard Work in K-NET



From the "Clinical" menu, select the "Ascend Standard Work Processes"

Corresponds to the Ascend Quick Reference Manual

Clinical

> Ascend Lab Portals/Info

- Ascend Standard Work Processes (Including Lab Corps SW)
- > Weekly Scheduling Report

> Forms/Consents

> Home Patient Referrals

 $\boldsymbol{\flat}$ Home Program Status Change Forms

Hospital Services Application

> Infection Prevention

> Medical Directors In-services

> Palliative Care

> Patient Education

CIA-POC Application

> POC Schedules

> Quality

Ascend Standard Work Processes (Including Lab Corps SW)

Lab Corps - Drawing Blood for HIT Lab Corps: Incase of Needle Stick Lab Corps - Ordering Supplies for Lab Corps Tests CALENDAR - Accessing Monthly Lab Draw CENTRIFUGE - Spinning Tubes Successfully COURIER - Lab Pick Up COURIER - Labeling & Preparing for Pick Up CRITICAL_PANIC LABS - Acknowledging LABELS - Cancel & Un-Do Lab Request LABELS - For a Cross-Over Patient LABELS - Printing In-Center LABELS - Trouble Shooting MISCELLANEOUS - Disposal of Lab Prep Bags MISCELLANEOUS - Lab Responsibilities at Close of Evening Shift MISCELLANEOUS - Reconciling the Active Patient List in Ascend NEW PATIENT - AKI Acute Kidney Injury NEW PATIENT- Inputting Patient Schedule NEW PATIENT - New Admit **NEW PATIENT or VISITOR - ABOs** ORDERS: Changing the ICD-10 Code (For Aluminum and Others) ORDERS - Communicating to Unit Coordinator_ Next Shift ORDERS - Entering a Single Order ORDERS - Rescheduling Lab Draws ORDERS - Rescheduling Lab Tests for a Non-Routine Day **ORDERS - Scheduling Exception Entries**

Page 1 of 2 (39 items) < < [1] 2 > >> All

Review of Lab Draws & Samples

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Label Verification

Verify the following information prior to collecting any specimens.



✓ Patient's identifiers
✓ Draw date
✓ Color or type of tube
✓ Label is properly placed

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ALL Pre-dialysis lab draws are taken from the arterial needle or catheter port

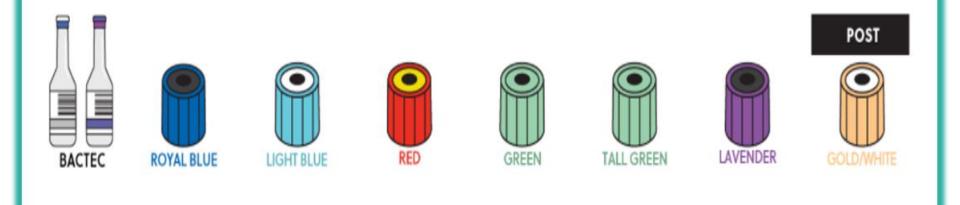
Labs are drawn prior to flushing the needle line or catheter tube with Normal Saline

If the arterial needle line or catheter port was <u>inadvertently flushed with NS prior to blood</u> <u>draw</u>, use a 10ml syringe and <u>pull 10 ml of blood</u> <u>and discard</u>, then draw the sample(s)

Order of Draw - Why it Matters?

Intro to Order of Draw

It is critical to follow the defined Order of Draw based upon Ascend's tube types. Some tubes contain additives. If these additives are transferred from one tube to another, contamination may occur and the accuracy of the results may be jeopardized.



1. Blood Culture Bottles



Before looking at the actual tubes, let's take a quick look at the Blood and Fluid Culture Bottles.



BACTEC Culture Bottles are drawn before any tubes.

Disinfect tops of bottles with a 70% Alcohol Prep Pad, then collect 10mL aseptically in each bottle.

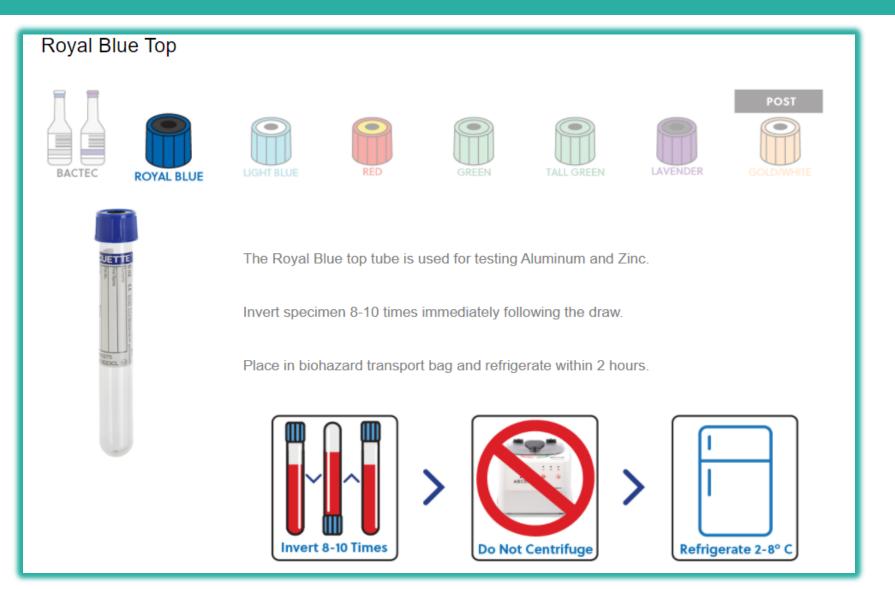
Do not use any form of iodine to disinfect.

Place in a biohazard transport bag and keep at room temperature.



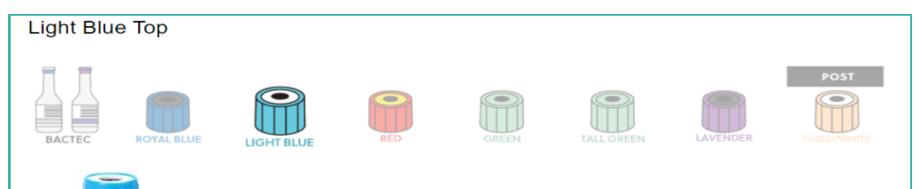
2. Royal Blue Top Tube





3. Light Blue Top





The Light Blue top tube is used for testing Prothrombin Time and may require the use of a red/grey discard tube.

Partially filling a discard tube is only required if the Light Blue top tube is the first tube to be drawn. This will clear all air out of access tubing. Do not ship discard tube.

Hold the Light Blue top tube firmly on the Vacutainer needle the entire time the tube is filling and ensure specimen reaches the nominal fill range.

Invert specimen 4 times immediately following the draw.

Place in biohazard transport bag and keep at room temperature.



4. Red Top

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Invert specimen 8-10 times immediately following the draw, stand to clot for a minimum of 30 minutes, then centrifuge.

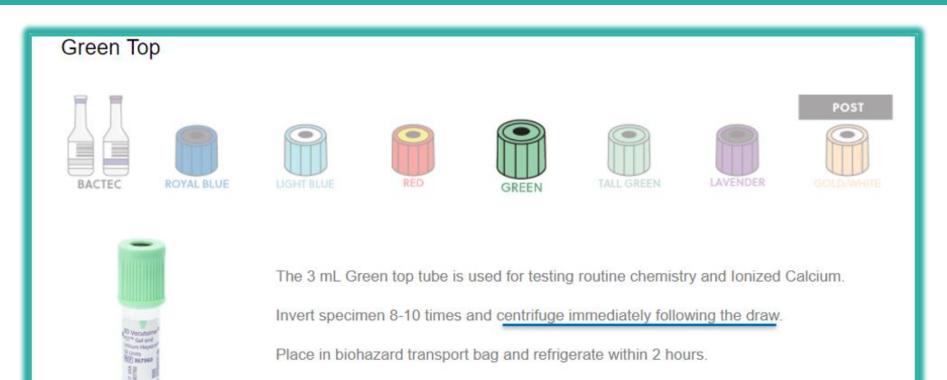
Place in biohazard transport bag and refrigerate within 2 hours.

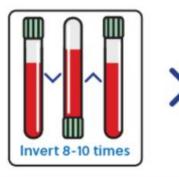


5. Green Top

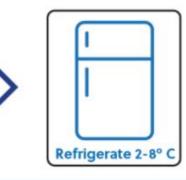
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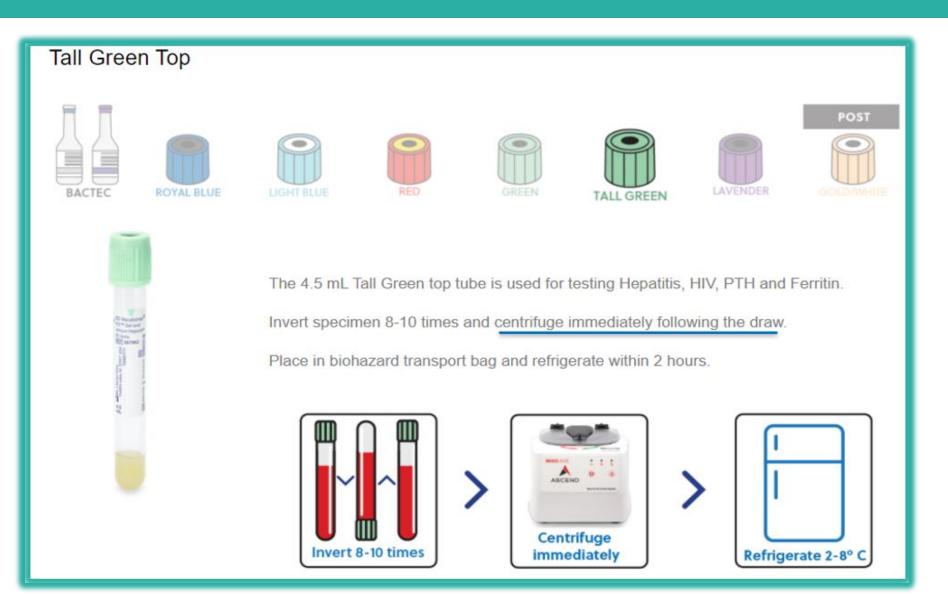






6. Tall Green





7. Lavender Top

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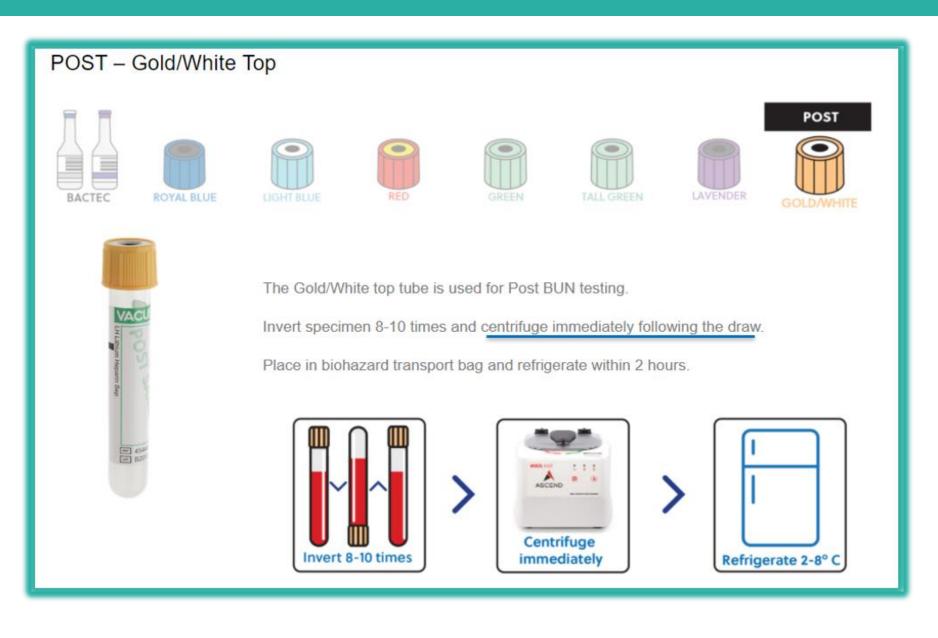
The Lavender top tube is used for testing Hematology, A1c, Fluid Cell Count and some Reflex testing.

Invert specimen 8-10 times immediately following the draw.

Place in biohazard transport bag and refrigerate within 2 hours.



Post: Gold/White Top



Which Tubes are Refrigerated?

Specimen Temperature Requirements

Ascend accepts refrigerated and room temperature specimens. Keeping the specimens at the correct storage temperature helps to insure the stability of the specimen and the accuracy of the results. Refer to Specimen Handling Posters and Reference Manual for specific test temperature requirements.





Spin Them Like a Record





Balance tubes and centrifuge

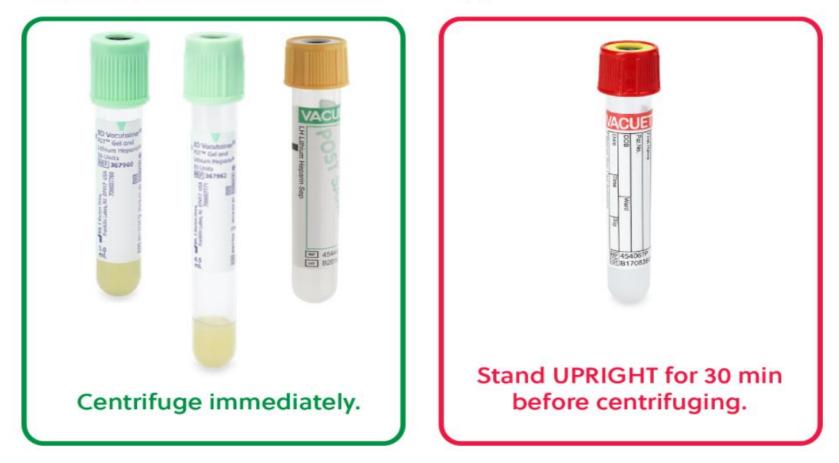


Are You Gel-in?



Tubes Containing Gel

All tubes containing gel must be centrifuged within 2 hours of collection and immediately placed in the refrigerator in preparation for shipping. Green, Tall Green, and Gold/White top tubes can be centrifuged immediately after the draw while Red top tubes require a minimum of 30 minutes to clot before centrifuging.



Keep 'Em Balanced



Balancing a Drucker 755 – 24 Place

The Drucker 755 – 24 place swing bucket centrifuge will hold up to 24 tubes and must contain a balanced load to work properly. The 755 is designed to detect serious out-of-balance situations and will safely terminate a run if unbalanced.



Otherwise, you may have a mess to clean up or clotted tubes!

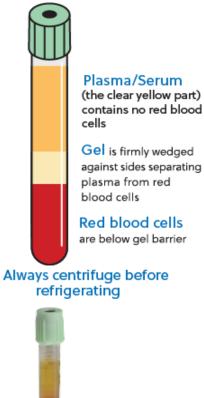
Did you spin them correctly?

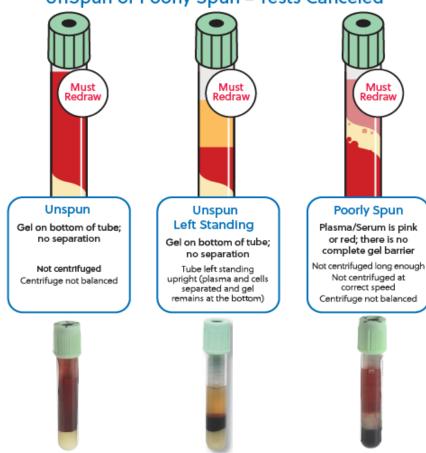


Properly Centrifuged Tubes

A properly centrifuged tube will have the plasma or serum separated by a gel barrier from the red blood cells. Ascend cannot process tubes if received unspun or poorly spun. Visually inspect each tube prior to storing in the refrigerator.

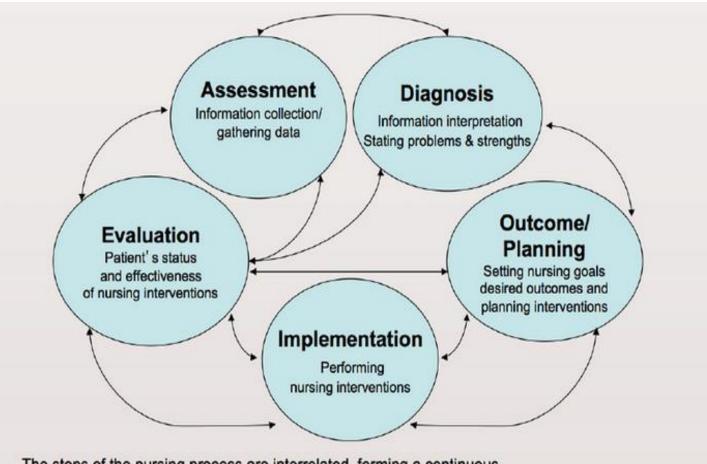
Properly Centrifuged





UnSpun or Poorly Spun = Tests Canceled

Remember The Nursing Process!



The steps of the nursing process are interrelated, forming a continuous circle of thought and action that is both dynamic and cyclic (Doenges & Moorhouse, 2008 a+b)

References



- Ascend (1). (2021). Retrieved from Ascend University: <u>https://ascend-u.aclab.com/</u>
- Ascend (2). (2021). Retrieved from Ascend LabCheck: <u>https://labcheck5.com/app/</u>
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- Doenges, M., & Moorhouse, M. (2008). *Application of Nursing Process and Nursing Diagnosis* (Fifth ed.).
- K-NET. (2021). Retrieved from Ascend Standard Work Processes: <u>https://knet.nwkidney.org/intra/ascendstandardworkprocessesincludi</u> <u>nglabcorpssw/1510064235055</u>





