

REQUIREMENTS FOR PATHOLOGY SERVICE.

Requests, Patient Identification and Labelling.

Austin Pathology is a NATA accredited Pathology provider, adhering to the NPAAC Requirements for Medical Pathology Services (Second Edition 2018) and ISO 15189 Medical Laboratories – Requirements for Quality and Competence.

Austin Pathology will accept requests for pathology tests written on any Pathology provider referral paper. Austin Pathology will always bulk bill for ALL MBS pathology tests provided the patient has a valid Medicare number.

Accurate patient identification and specimen labelling are crucial to patient safety. Failure to comply with these requirements is a significant cause of patient morbidity and occasionally mortality.

REQUEST FORM REQUIREMENTS

To request tests, the NPAAC Requirements for Medical Pathology services requires the following information to be recorded on the referral.

- The Requesting Doctor and Provider number. Without this the result cannot be delivered and the patient may receive an invoice as Austin Pathology will be unable to bulkbill the patient.

REQUESTING DOCTOR DETAILS
Name:
Provider No:
Address:

- Three identifiers **must** be used on the request form. The identifiers **must** include the patient's full name (first and surname) and at least one of either date of birth or unique record number. Additional identifiers may be the unique accession number or patient address. This also applies to unidentifiable and unconscious patients who will need a unique medical record number and two other descriptors e.g. head injury and motorbike accident.
- Test(s) requested must be clearly indicated on the request form, including relevant clinical information (e.g. medication history, family history, fasting status, if pregnant, gestational age).
- Additionally, for a patient to be bulkbilled, the request form must be signed by the patient or guardian.

MEDICARE ASSIGNMENT FORM (Section 20A of the Health Insurance Act 1973)		
I assign my right to benefits to the approved pathology practitioner who will render the requested pathology service(s) and any eligible pathologist determinable service(s) as necessary by the practitioner.		
PRACTITIONER'S USE ONLY..... (Reason Patient Cannot Sign)	X..... Patient Signature/...../..... Date

- The request must be signed and dated by the requesting doctor.

DOCTOR'S SIGNATURE AND DATE	
 / /

- Indicate if copies of the results are to be sent to any additional clinicians by including the name and provider number of the doctor.

COPY REPORTS TO	COPY REPORTS TO
Name:	Name:
Provider:	Provider:
Address:	Address:

The patient can also receive a copy of the results, ensure this is indicated clearly by the clinician. If this is not written by the requesting doctor, the patient can elect to fill out a request for results form. Copies of the patient request for results form are located at all Austin Pathology collection centres and on the website.

www.austinpathology.org.au/patient-information

- Referral pads are available in A4 for use in clinic software to be printed by the doctor, or available in A5 size for handwritten requests. Referrals can also be pre-printed with doctor and clinic information. Please refer to www.austinpathology.org.au/doctor-services for personalised Pathology request pads.

PATIENT IDENTIFICATION

- A minimum of three identifiers are required for positive identification, of which Full Name (First and Surname) and date of birth must be used.
- The patient must be positively identified by asking patient for identity information without prompting or leading questions. Do not ask “Are you John Smith?” The patient must be asked to spell name and state date of birth and address.

SPECIMEN LABELLING REQUIREMENTS

- The specimen **must** be labelled in the presence of the patient and, if possible, the labelling should be confirmed by the patient.
- The specimen **must** be labelled with a minimum of two identifiers, full name and date of birth or unique record number, three is preferred. For ALL tests concerning blood bank THREE identifiers on the specimen is MANDATORY.

- The person collecting the specimen **must** accept responsibility for identifying the patient and for labelling the specimen by signing and dating the declaration on the request form. Failure to do this for a blood bank specimen will see the request and specimen being rejected.

I certify that I collected the accompanying specimen from the above patient whose identity was confirmed by enquiry and/or examination of their ID wristband, and that I labelled the specimen immediately following collection before leaving the patient.	
SIGNED _____	Print Name _____
Date ____/____/____	Time _____

- The time and date of collection must also be written on the specimen and must match the time and date on the request form. All specimens should be initialled by the collector. Failure to do this for a blood bank specimen will see the request and specimen being rejected.
- Any prerequisites for testing can be found in the Austin Pathology test directory. Please refer www.austinpathology.org.au/test-directory or call (03)9496 3100.
- Where patients collect their own specimens, the same labelling requirements as above apply.

SPECIMEN TRANSPORTATION

Pathology specimens must be packaged and transported in a manner that ensures the integrity of the specimen and safety of the public. For further information regarding specimen packaging and transportation, please see our online test directory, www.austinpathology.org.au/test-directory or call 03 9496 3100.

PATIENT PRIVACY

Austin Health Pathology respect patient privacy of information, and adheres to the Austin Health policy for privacy. Refer to website for privacy policy. If a patient requests a copy of their own results, a signed form must be received. This form can be obtained from the website, under patient services. <https://www.austinpathology.org.au/patient-information>

COMPLAINT PROCEDURE

Austin Pathology always seeks feedback from patients and medical professionals as an opportunity for improvement. Please refer to <https://www.austinpathology.org.au/patient-information> for feedback procedure.

REFERENCES

NPAAC Requirements for Medical Pathology Services (Second Edition 2018)

NPAAC Guidelines for Approved Pathology Collection Centres (2013)

SOP-SS-001 Specimen Collection, Requests, Patient Identification and Specimen Labelling.