

LABORATORY STANDARD OPERATING PROCEDURES MANUAL	<b>INFORMATION REQUIRED FOR A STANDING ORDER</b>
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**I. PURPOSE:**

In order to be in compliance with the Office of Inspector General's Compliance Plan for Laboratories, when sending standing orders for a patient to this laboratory certain information is required. We require this information to be reviewed and renewed at the very least every six (6) months.

**II. THE FOLLOWING INFORMATION IS REQUIRED:**

- Date ordered, (date you are sending order to lab)
- Patient's name
- Patient's Date of Birth
- Diagnosis or clinical symptoms
- What test is ordered
- How often the test is to be performed
  - At least define as best you can the time frame. In cases such as any kind of medication therapy--anticoagulant therapy, cyclosporin, etc., if necessary state frequency based on medication change or last level value.
- What time period, **up to 6 months**, (In other words, please do not write CBC every Tuesday. Please say for 2 months or what ever time frame the test is needed. (For example: please do CBC 1 time a week for 3 months.) Please make sure this does not extend past 6 months. **ALL STANDING ORDERS MUST BE REDONE EVERY 6 MONTHS.**
- How testing is to be billed: (to the physician, nursing home, or facility, to the patient, to insurance, or to Medicare/Medicaid)
- Physician signature or stamp. (If using stamp, please stamp all copies of the requisition.
- Faxing information. Please include any faxing information if the report needs to be faxed to any other physician other than the primary.
- Any reporting information that we must have in order that reports are received by every physician/provider/nursing home that will need the report.

**II. UPDATING STANDING ORDERS:**

Each order that is older than 6 months will be reviewed and a new order will be requested. If your order is no longer needed, it is deleted from our Standing Order files. Standing orders that are older than 6 months are considered expired and cannot be used for test ordering on patients. If new orders are not received, the physician's office or Nursing Home must be notified before the test can be performed.

**III. Please call the laboratory with any questions or concerns.**

WRITTEN BY:     **Kay Shaw, MT(ASCP)SBB**          DATE:     **2-98**    

APPROVED BY:     **Martin F. Belli, M.D.**          DATE:     **2-98**    

REVISED BY:     **Kay Shaw, MT(ASCP)SBB**          DATE:     **4-99, 5-2002, 6-2004, 2-2006**    

APPROVED BY:     **Martin F. Belli, M.D.**          DATE:     **4-99, 5-2002, 6-2004, 2-2006**    

***See original policy in the Laboratory for all documented annual reviews.***

REFERENCE:

OIG Model Compliance Plan for Clinical Labs, (March, 1997), Federal Register, Vol. 62, No. 41.

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Laboratory Standard Operating Procedures Manual, Laboratory Collection Manual