

AN ENTERPRISE OF THE UNIVERSITY OF UTAH AND ITS DEPARTMENT OF PATHOLOGY

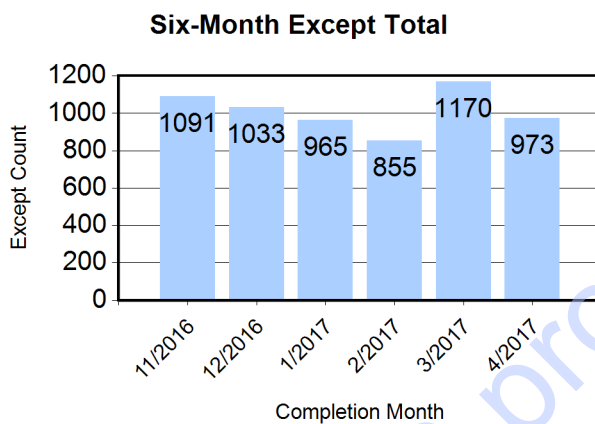
Client Exception Report Apr 1, 2017–Apr 30, 2017

Excepts Total for

Summary of Apr 1, 2017–Apr 30, 2017

Total Exceptions: 973
Tests Ordered: 203120
Exception Rate: 0.48 %

▼ Decreased from 0.53 % in Mar 2017




Reason for Exception	Mar 2017	Apr 2017	Average* for Comparable Clients
Broken	1	0	0.90
Clarify Client Information	5	3	0.00
Clarify Diagnosis	16	13	5.40
Clarify Draw Date/Time	11	20	6.10
Clarify Media	7	0	0.30
Clarify Patient Demographics	13	8	1.80
Clarify Source and/or Specimen Type	35	28	5.60
Clarify Test	122	112	10.50
Client Requested Cancellation	53	32	1.80
Consent Form Required	11	11	0.20
Contamination	7	2	0.30
Duplicate Order	75	57	6.60
Extra Specimen Submitted	21	15	1.20
Identification Discrepancy	22	25	8.90
Inappropriate Media	20	12	2.40
Inappropriate pH	0	2	0.60
Inappropriate Specimen Type	152	136	21.00
Inappropriate Temperature	15	14	0.90
Incomplete Information	62	57	22.00
Leaked in Transit	4	0	1.10
Miscellaneous	12	14	5.90
No Source	12	10	2.10
No Specimen	213	186	12.70
No Test Marked/Noted	6	7	0.00
Prioritize Testing	2	1	0.70
Quantity Not Sufficient	90	74	34.50

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Quantity Not Sufficient for Repeat Testing	4	3	2.30
Specimen Appearance	139	95	17.70
Stability Exceeded	35	31	8.10
Test Not Available	5	5	1.70
Total:	1170	973	

* Monthly average calculated from a large sample of clients with similar test volume

 Equivalent genetic test was previously performed at ARUP. As genotype does not change over time, genetic testing does not typically need to be repeated. See following pages of report for details.

ARUP proprietary report

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Client # Client Name Account Executive

[REDACTED] [REDACTED] [REDACTED]

Clarify Source and/or Specimen Type Count: 28

Accession	Patient Name	MRN	Draw Date/Time
17-095-113776	[REDACTED]	[REDACTED]	4/5/2017 2:41 PM
Performed	Held for clarification of specimen type submitted for Fluoroquinolone-Resistant Organism, Culture. Client verified specimen type as rectal.		
17-097-101994	[REDACTED]	[REDACTED]	4/7/2017 8:35 AM
Canceled	Held for clarification of specimen type submitted for Tissue Culture, Quantitative UUHSC Testing Only. Client verified specimen type as tissue from non-burn unit/potential graft patient. Inappropriate specimen type submitted. Client submitted tissue from non-potential graft patient (burn or non-burn tissues biopsies) for Tissue Culture, Quantitative UUHSC Testing Only. See ARUP's Test Directory for appropriate specimens and/or collection medium. Client notified of cancellation.		
17-097-102148	[REDACTED]	[REDACTED]	4/7/2017 8:44 AM
Canceled	Held for clarification of specimen type submitted for Tissue Culture, Quantitative UUHSC Testing Only. Client verified specimen type as tissue from non-burn unit/potential graft patient. Inappropriate specimen type submitted. Client submitted tissue from non-potential graft patient (burn or non-burn tissues biopsies) for Tissue Culture, Quantitative UUHSC Testing Only. See ARUP's Test Directory for appropriate specimens and/or collection medium. Client notified of cancellation.		
17-101-101917	[REDACTED]	[REDACTED]	4/11/2017 8:17 AM
Performed	Held for clarification of specimen type submitted for Respiratory Culture and Gram Stain. Client verified specimen type as tracheal aspirate.		
17-101-111795	[REDACTED]	[REDACTED]	4/11/2017 1:40 PM
Performed	Held for clarification of source for Creatinine, Body Fluid. Client clarified JP drain from left lower quadrant of abdomen		
17-101-112581	[REDACTED]	[REDACTED]	4/11/2017 12:04 PM
Performed	Source of specimen not provided for Anaerobe Culture and Gram Stain. Verified source as abdominal abscess.		
17-103-104824	[REDACTED]	[REDACTED]	4/13/2017 10:44 AM
Performed	Held for clarification of specimen type submitted for Leukemia/Lymphoma Phenotyping by Flow Cytometry. Client verified specimen type as Subcarinal LN Aspirate.		
17-103-120728	[REDACTED]	[REDACTED]	4/13/2017 5:15 PM
Performed	Performed at: ARUP - University Hospital Laboratory 50 N. Medical Drive Salt Lake City UT 84132		
17-107-100681	[REDACTED]	[REDACTED]	4/17/2017 5:17 AM
Performed	Held for clarification of specimen type submitted for Respiratory Culture and Gram Stain. Client verified specimen type as sputum.		

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<u>Client #</u>	<u>Client Name</u>	<u>Account Executive</u>	
Clarify Test		Count: 112	
Accession	Patient Name	MRN	Draw Date/Time
17-092-100209			4/1/2017 7:41 PM
Performed	Held for clarification of additional testing needed. Body Fluid Culture and Gram Stain, and Anaerobe Culture and Gram Stain (ARUP test code 0060108,0060143) ordered at client's request. Specimen submitted for Body Fluid Culture and Gram Stain, and Anaerobe Culture and Gram Stain was held refrigerated prior to testing. See ARUP's Test Directory for appropriate specimen submission guidelines. Test results should be interpreted with caution. Assay was performed at client's request on a sub-optimal submission. Corrected from Clarify Test [NA] on 04/06/17 20:05:02 MDT by		
17-093-103080			4/3/2017 9:27 AM
Canceled	Held to clarify if specimen submitted for Tissue Culture, Quantitative UUHSC Testing Only is from a potential graft patient. Client indicated specimen is not from a potential graft patient. Inappropriate specimen type submitted. Quantitative tissue culture is only available for potential graft patients (burn and non-burn submissions). Client notified of cancellation.		
17-093-105140			4/3/2017 11:00 AM
Alternate Test Performed	Non-Invasive Prenatal Testing for Fetal Aneuploidy (Panorama) with Microdeletions ordered in error. Test (s) canceled. Non-Invasive Prenatal Testing for Fetal Aneuploidy with 22q11.2 Microdeletion (Panorama) (ARUP test code 2013142) ordered at client's request.		
17-093-109231			4/3/2017 12:44 PM
Performed	Held for clarification of additional testing.No additional testing needed; disregard per client. Corrected from Clarify Test [NA] on 04/13/17 13:41:14 MDT by Performed at: ARUP - University Hospital Laboratory 50 N. Medical Drive Salt Lake City UT 84132		
17-093-112515			4/3/2017 4:24 PM
Performed	Maternal Serum Screening, Integrated, Specimen #2 ordered in error. Maternal Serum Screening, Integrated, Specimen #1 (ARUP test code 81062) ordered at client's request on accession 17-095-102323.		
17-093-112811			4/3/2017 2:35 PM
Canceled	Inappropriate test Prenatal Carrier Screening Targeted Mutation Panel, 85 Disorders with Fragile X ordered for this male patient. Client notified of cancellation. Order for correct test 2007539 Prenatal Carrier Screening Targeted Mutation Panel, 85 Disorders was received under accession 17 096 110750.		
17-093-117245			4/3/2017 4:30 PM
Performed	Held for clarification of additional testing. No further testing needed; disregard per client. Corrected from Clarify Test [NA] on 04/13/17 14:00:53 MDT by Performed at: ARUP - University Hospital Laboratory 50 N. Medical Drive Salt Lake City UT 84132		
17-093-122346			4/3/2017 1:30 PM
Performed	Specimen received without an electronic order. Order for Wound Culture and Gram Stain transmitted by the client under acc# 17094106164.		

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Client # Client Name Account Executive

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Contamination Count: 2

Accession	Patient Name	MRN	Draw Date/Time
17-103-105232	██████████	██████████	4/13/2017 1:24 PM

Canceled Specimen submitted for Varicella-Zoster Virus Antibody, IgG, CSF and Varicella-Zoster Virus Antibody, IgM by ELISA (CSF) was compromised. Client notified of cancellation.

17-115-104842	██████████	██████████	4/25/2017 10:35 AM
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Canceled Specimen submitted for Comprehensive Metabolic Panel leaked in transit leading to possible contamination. Client notified of cancellation.

Duplicate Order Count: 57

Accession	Patient Name	MRN	Draw Date/Time
17-084-105513	██████████	██████████	3/25/2017 5:32 PM

Performed Per client, the NG is a duplicate of NG-17-9746. Approved cancellation.

17-090-104566	██████████	██████████	3/31/2017 10:38 AM
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Canceled Held for clarification of possible duplicate order for Urine Culture. Client confirmed order is a duplicate. Client notified of cancellation.

17-092-102824	██████████	██████████	4/2/2017 3:16 PM
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Canceled Held for clarification of possible duplicate order for Oligoclonal Bands in CSF and Serum. Confirmed order is a duplicate. Client notified of cancellation.

17-093-120508	██████████	██████████	4/3/2017 7:03 PM
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Canceled B-Cell CD20 Expression is a component of Leukemia/Lymphoma Phenotyping by Flow Cytometry. Client notified of cancellation of B-Cell CD20 Expression.

17-093-125153	██████████	██████████	4/4/2017 12:23 AM
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Canceled Protein Electrophoresis, Serum is a component of Monoclonal Protein Detection, Quantitation, Characterization, SPEP, IFE, IgA, IgG, IgM, FLC. Client notified of cancellation of Protein Electrophoresis, Serum. Corrected from Duplicateorder [NA] on 04/14/17 9:27:57 MDT by ██████████
 Performed at: ARUP - University Hospital Laboratory 50 N. Medical Drive Salt Lake City UT 84132

17-094-103882	██████████	██████████	4/4/2017 10:17 AM
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Canceled Held for clarification of possible duplicate order for Urine Culture. Client confirmed order is a duplicate. Client notified of cancellation. Corrected from Duplicateorder [NA] on 04/14/17 10:04:09 MDT by ██████████
 Performed at: ARUP - University Hospital Laboratory 50 N. Medical Drive Salt Lake City UT 84132

17-094-111555	██████████	██████████	4/4/2017 1:50 PM
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Canceled Duplicate submission for Clostridium difficile toxin B gene (tcdB) by PCR; a minimum of fourteen days is required between testing after a positive result is obtained. Client notified of cancellation.

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<u>Client #</u>	<u>Client Name</u>	<u>Account Executive</u>	
Duplicate Order		Count: 57	
Accession	Patient Name	MRN	Draw Date/Time
17-094-113291			4/4/2017 7:33 PM
Canceled	Held for clarification of possible duplicate order for Oligoclonal Bands in CSF and Serum. Client confirmed order is a duplicate. Client notified of cancellation.		
17-094-117987			4/4/2017 11:03 AM
Canceled	Held for clarification of possible duplicate order for Urine Culture. Client confirmed order is a duplicate. Client notified of cancellation.		
17-095-120460			4/5/2017 6:30 PM
Performed	spoke with [redacted] who said that NG request 17-095-120460 is a duplicate and that we can cancel		
17-096-103812			4/6/2017 10:30 AM
 Canceled	Held for clarification of possible duplicate order for Prothrombin (F2) G20210A Mutation. Client confirmed order is a duplicate. Client notified of cancellation.		
17-096-106477			4/6/2017 12:00 PM
Performed	Cancelled testing Per UH clinical Lab,.		
17-096-110308			4/6/2017 1:00 PM
Canceled	Protein Electrophoresis with Reflex to Immunofixation Electrophoresis Monoclonal Protein Detection, Quantitation & Characterization, IgA, IgG, & IgM, Serum is a component of Monoclonal Protein Detection, Quantitation, Characterization, SPEP, IFE, IgA, IgG, IgM, FLC. Client notified of cancellation of Protein Electrophoresis with Reflex to Immunofixation Electrophoresis Monoclonal Protein Detection, Quantitation & Characterization, IgA, IgG, & IgM, Serum. Corrected from Duplicateorder [NA] on 04/25/17 9:03:09 MDT by [redacted] Performed at: ARUP - University Hospital Laboratory 50 N. Medical Drive Salt Lake City UT 84132		
17-097-103450			4/7/2017 10:45 AM
Performed	Held for clarification of possible duplicate order for Hepatitis C Virus (HCV) Genotype with Reflex to HCV High-Resolution Genotype by Sequencing. Confirmed order is not a duplicate; testing performed as requested.		
17-097-103517			4/7/2017 10:45 AM
Alternate Test Performed	Held for clarification of possible duplicate order for Hepatitis C Virus (HCV) Genotype with Reflex to HCV High-Resolution Genotype by Sequencing. Confirmed order is a duplicate. Testing cancelled.		
17-097-106868			4/7/2017 11:56 AM
Canceled	Duplicate submission for Clostridium difficile toxin B gene (tcdB) by PCR; a minimum of fourteen days is required between testing after a positive result is obtained. Client notified of cancellation.		

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