Identifier: Folder: Subfolder:

ORDERING & REPORTING PATIENT POCT: URINE DIPSTICK RESULTS

CAPT URI 0600

PURPOSE:

The purpose of this procedure is how patient results, normal and abnormal urine results, are reported by staff completing point of care testing with urine dipsticks, Roche Chemstrip 10A.

PROCEDURE:

1. Ordering POC tests: Point of care testing must have a care provider's order, included on the order set or ordered as per clinical area protocols and standard of practice.

Detailed Order Management Policy can be found @ http://shop.healthcarebc.ca/CST Documents/CSTOrdersManagementPolicy.pdf

CAPT LIS 0400 CST Orders Management Policy

Cerner:

- i. Point of care urinalysis must have a care provider's order, included on the order set or ordered as per clinical area protocols and standard of practice.
- ii. For urinalysis, a doctor's order is obtained. This would be part of the care plan/order on the in patient unit on admission or a change of situation.

For ad hoc or emergency situations, would be a doctor's order.

- iii. Complete the following steps to view order details:
 - 1. With a patient chart open, select the Orders chart view.
 - 2. Select the order for which you want to view details.
 - 3. Right-click the order and select **Order Information**. The Order Information dialog box is displayed.
 - 4. Click the **Details** tab to view the order details.
 - 5. To return to the previous window, click Exit.
- 2. Follow procedure for obtaining urine dipstick results on patients. Refer to:

a. CAPT URI 0200 Detailed Specimen Collection Urine Screening for Glucose Ketones Protein Blood et al

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Renewed by:	Ronny Garbuio	Approved on:	2019-07-15
Renewed on:	2023-03-24	Revision Date:	2025-03-24
	Documents used outside of C	MNI are uncontrolled.	

- b. CAPT_URI_0200cl1 Checklist Specimen Collection Urine Screening for Glucose Ketones Protein et al
- c. CAPT_URI_0200JA1 Quick Sheet Specimen Collection Urine Screening for Glucose Ketones Protein et al
- 3. Values for urine dipsticks: Refer: CAPT_URI_0200JA2 Urine Specimen Collection Requirements and Reference Ranges

*Note we do not do test urine on neonates and pediatrics at BCC-VCC.

a. Normal:

Reference Values

Specific Gravity:	<1.030
pH:	5.0-8.0
Leukocyte Esterase:	Negative
Nitrite:	Negative
Protein:	Negative
Glucose:	Negative
Ketones:	Negative
Bilirubin:	Negative
Blood:	Negative

b. Abnormal: Refer to urine dipstick container for colour changes indicating abnormal values

Refer to:

CAPT_URI_0500F1 Urine Dipstick Proficiency Testing Technical Document

- 4. Reporting Results: Every examination requested needs to be recorded in the patient chart. POCT results are recorded as a POCT result and incorporated into the patient's permanent medical record (Cerner).
 - a. Select the Point of Care Testing section with in IView.

	Oncorogy Assessment	
E	COVID-19 Screening	
	Measurements	Field Item V Critical High Low
	VITAL SIGNS	
	PAIN ASSESSMENT	Result Comments Rag
	Edmonton Symptom Assessment Scale	
	Peripheral IV	18-Jun-2021
	Central Line	C0:30 PDT
	Suboutaneous Catheter	a Point of Care Testing
	Unnary Catheter	Uninalysis Dipstick POC Roche Che-
	Incision/Wound/Skin/Pin Ste	♦ SG Urinalysis Dipstick P
	Chemo/Botherapy Verification	PH Urinalysis Dipstick P O
	Infusion Related Activities	O LEU Urinalysis Dipstick O
	Infusion Oheno Treatment Modifications	♦ NIT Urinalysis Dipstick P ♦
	Infusion/Chemo Adverse Reaction	PRO Urinalysis Dipistick - PRO Urinalysis Dipistick POC Roch
	NCI Toxicity Criteria	O GLU Urinalysis Dipstick Negative
	Patient Education, Oncology	Q KET Urinalysis Dipstick P., 0.3 g/L
	Prevention Education	O UBG Urinalysis Dipstick 1 g t
	Patient Self-Administered Medications	O BIL Urinalysis Dipstick P 5 g/L
	Point of Care Testing	Q BLD Urinalysis Dipstick Q
	Glucose POCT Whole Blood	Pregnancy Test Urine POC
	Current Visit Status	d Current Visit Status
	Transfer/Transport	Current Visit Status
	Shift Report/Handoff	
8	Blood Product Administration	
2	Intake And Output	
1		

b. Click on Urinalysis Dipstick POC and select the correct test strip

¹⁰ 10 PQ <u>ss</u>	02-Jul-2021 12:10 PDT		
⊿ Point of Care Testing			
Urinalysis Dipstick POC	Urinalysis D	ipstick POC Type	×
Pregnancy Test Urine POC	Roche Cher	nstrip 9	
⊿ Current Visit Status	Siemens Cli	nitek Status	
Current Visit Status	Roche Cher	nstrip 10A	
	Siemens Mu	Iltistix 10SG	

c. Select the correct value.



- d. Save 🗹
- 5. CST Cerner Viewing Results Using IView

You can perform various actions and view information about a result in Interactive View. Select a command from the context, Options, or Documentation menus. Some of the common actions you might perform on a result include the following actions:

- View details about the result.
- Add or view comments associated with a result.
- View the history of the result.
- View information about an order.
- View the Interactive View legend to find out what it means when a specific indicator or icon is displayed in a result cell.

• Add, modify, or unchart a result.

If there are multiple results in a cell, a number is displayed in brackets ([]) next to the result value. This number represents the number of results documented for this date and time or date and time interval. The result displayed in the cell is determined by your site's preference setting. For example, it may be the most recently documented result or the first result documented.

If an indicator is associated with a specific result, and that is not the result displayed in the cell, the indicator is still displayed in the cell. For example, the patient may have a critical result within that time frame. In this case, the result displayed in the cell, though, may be within the normal range. The Critical indicator is still displayed in the cell, notifying you this patient has a critical result during this time frame. w of results

6. Corrected Results

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i. All documentation in Cerner can be corrected, or "uncharted" if result entered was incorrect.

Refer to CST Help Topics:

Unchart in Interactive View and I&O (IView).pdf Modify a Value in Interactive View and I&O (IView).pdf

	28-D	ec-2022	Add Result
and the second s	09:28 PST	09:25 PST	
Glucose POCT Whole Blood			View Result Details
GLU Result POC mi	mol/L	3.8 ↓	View Comments
5LU Non-numeric Result POC		h	View Flag Comments
GLU Meter Serial Number POC		123456	view hag comments
GLU Source POC		Finger	View Reference Material
GLU Testing Reason POC		Routine	View Order Info
GLU Interventions POC			View History
			view History
			Modify
			Unchart
			Change Date/Time
			Change Date/Time Add Comment
			Change Date/Time Add Comment
			Change Date/Time Add Comment Clear
			Change Date/Time Add Comment Clear View Defaulted Info

All changes are visible in an audit trail.

ii. The small delta symbol indicates that it is a Corrected Report.

N 🖬	0	9:32 PST	09:25 PST
⊿ Glucose POCT Whole Blood			
GLU Result POC	mmol/L		8.3 🗖
GLU Non-numeric Result POC			
GLU Meter Serial Number POC			123456
GLU Source POC			Finger
GLU Testing Reason POC			Routine
GLU Interventions POC			

iii. When viewing the result, one can see the Current and Original Result, and who made the correction.

		Result Details	- CSTEIGENERAL, ROUNDING -
Result H	History		
Value	Valid From	Valid Until	
8.3	28-Dec-2022 09:30 PST	Current	
3.8	28-Dec-2022 09:26 PST	28-Dec-2022 09:30 PST	
Result	Action List		
CILLE	acult POC 9.2 mmal/l		
Norma	Low A Normal Migh	11	
Norma	i Low 4 Normal High	25	
Chtical	Low 2.0 Critical High	23	
Date/T	ime Wednesday, 28-De	cember-2022 09:25 PST	
Contrib	butor System PowerChar	t	
Status	Modified		
Source	CLINICIAN		
Trend			

0		Resul	t Details - CST	EIGENERAL,	ROUNDING
Result Histo	ory				
Value Va	alid From	Valid Until			
8.3 28	8-Dec-2022 09:30 PS	T Current			
3.8 28	8-Dec-2022 09:26 PS	T 28-Dec-2022 09:30 PS	Г		
-					
Result A	ction List				
Result A	Performed By	Performed Date	Action Status	Comment	Proxy Persor
Result A Action Perform	Performed By Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST	Action Status Completed	Comment	Proxy Persor
Result A Action Perform VERIFY	Performed By Campbell, Lori Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST 28-Dec-2022 09:26 PST	Action Status Completed Completed	Comment	Proxy Persor
Result A Action Perform VERIFY	Performed By Campbell, Lori Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST 28-Dec-2022 09:26 PST	Action Status Completed Completed	Comment	Proxy Person
Result A Action Perform VERIFY	Performed By Campbell, Lori Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST 28-Dec-2022 09:26 PST	Action Status Completed Completed	Comment	Proxy Persor
Result A Action Perform VERIFY	Performed By Campbell, Lori Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST 28-Dec-2022 09:26 PST	Action Status Completed Completed	Comment	Proxy Persor
Result A Action Perform VERIFY	Performed By Campbell, Lori Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST 28-Dec-2022 09:26 PST	Action Status Completed Completed	Comment	Proxy Person
Result A Action Perform VERIFY	Action List Performed By Campbell, Lori Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST 28-Dec-2022 09:26 PST	Action Status Completed Completed	Comment	Proxy Person
Result A Action Perform VERIFY	Performed By Campbell, Lori Campbell, Lori	Performed Date 28-Dec-2022 09:26 PST 28-Dec-2022 09:26 PST	Action Status Completed Completed	Comment	Proxy Person

7. Uncharting documentation in IVIEW

Uncharting is used when information has been documented in error and needs to be removed from the patient's record

- 1. Navigate to the documentation field you need to modify and **right-click** on it.
- 2. Select **Unchart** from the action menu.



- The unchart window opens.
- 3. Click the drop down icon in the **Reason** field to select a reason for uncharting.
- 4. Click Sign.

P Unch	art - PrimaryRN, One - 24	602302	_				×
Unchart	Date/Time	ltem	Result	Reason			
$\overline{}$	10-Jan-2022 09:41 PST	Primary Pain Laterality	Right	Incorrect Patient			
Reason Incorrect	t Patient			3			
				4_	Sign	Can	icel

In Error will display in the documentation field with an annotation icon in the top right corner of the field.

⊿ Pain Assessment	
Pain Present	Yes actual
Question Ability to Self Rep	
Unable to Self Report Pain	
Self Report Pain	Numeric r
Numeric Rating at Rest	5
Numeric Rating With Activity	9
Numeric Pain Acceptable In	2
♦ Location	Foot
♦ Laterality	In Error
♦ Quality	Radiating

8. Critical Results - Cerner

Reporting of critical results of tests and procedures in a timel APRN/PA is a national patient safety goal. Be sure to comple provider communication.	y manner to the physician and/or ete the following form and document all
Process of Reporting	
1. Lab will call results to the unit	Terrorate, Ohlo Critical Notification
 The UC or RN will then record the results on the Critical Notification form and read the results back to the lab tech to ensure accuracy The Critical Notification form is given to the primary RN The Drimary RN will then polity the physician and 	Tate is not on official result. Inclusion cand/or nestitution canty Plans Totas
document this on the form and in the EMR (see below)	Oki Ukree Ukre
Note; A read back of this information is required to confirm patient information to ensure that the correct patient and test results are recorded prior to notifying the physician.	MAXEMUM Market Control (Market) Market Control Market Control (Market) Market Control (Market
	Collect Real Product
	Las Noder (M. Las November 1993) November 1993
Documenting in the EMR	Lishtuk da Unganina Sarah Indonesia Sarah Sarah Sar
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Documenting in the EMR 1. Choose iView 2. Click on Adult Quick View 3. Choose the Provider Notification section	And a second se Second second seco
Documenting in the EMR 1. Choose iView 2. Click on Adult Quick View 3. Choose the Provider Notification section 4. Document the Notification Reason as "Critical value repo	ringen and service
Documenting in the EMR 1. Choose iView 2. Click on Adult Quick View 3. Choose the Provider Notification section 4. Document the Notification Reason as "Critical value repo 5. Document the phone call and any new orders placed in N	rting" Notification Details.
Documenting in the EMR 1. Choose iView 2. Click on Adult Quick View 3. Choose the Provider Notification section 4. Document the Notification Reason as " <u>Critical value repo</u> 5. Document the phone call and any new orders placed in N 1. Choose id View 1. Choose iview of the phone call and any new orders placed in N	ting" lotification Details. Criced 14ph 1co Abc Criced 14ph

- 9. Follow up for results:
 - a. When abnormal urine results are obtained:

- i. Chart nurse note; data, action, response, plan (DARP) and contact most responsible physician (MRP)
- ii. It is important that POCT critical results are evaluated with clinical information.
- iii. Urine collection for urinalysis can be requested to be sent to Vancouver General Hospital chemistry department, via the laboratory for confirmation of results.
- iv. Any action taken as a result of POCT is noted in the patient's medical record.