

Laboratory Medicine Best Practices Network Participant Guidance Tool

CDC's Laboratory Medicine Best Practices project is pilot-testing methods for including unpublished information in reviews for making evidence-based practice recommendations. The purpose is to recognize and incorporate information that is not readily accessible. Much of this information may be in the form of internal assessments produced for organizational decisionmaking or monitoring purposes.

This guidance tool identifies and describes elements that may be included in submitting a practice assessment or study. At a minimum, an assessment or study includes at least one **laboratory practice** and at least one **finding**. A finding can include quantitative information related to outcome measures (e.g., error rate, time to treat, adverse events) or cost, and qualitative information related to implementation or feasibility. We are not interested in assessments that include protected health information of individual patients. Also, this guidance should not be construed as requiring pilot test participants to complete new or additional work. Submission of readily available information in various and multiple forms will be accepted.

Topic Area	For the current pilot test there are two practice topic areas: <ul style="list-style-type: none"> • Patient/specimen identification • Critical values reporting Examples of practices for each topic area are listed in the table below. This list is not exhaustive, so other practices are welcome.	
	Patient/Specimen Identification Practice Examples	
	Automated error reporting	Computer-generated reporting mechanism for misidentification
	Bar-coding	Identity established using electronic bar coding
	Dedicated phlebotomy teams	A single team is assigned to manage all blood collection activities
	Delta checks	Specimen identification confirmed by comparison with previous data
	Education programs	Educational interventions among healthcare staff to improve accuracy
	Incident reporting	Formal error reporting and monitoring programs
	Interdepartmental teams	Process implemented involves interdepartmental team coordination and oversight
	Lock out programs	Verification of patient/specimen identification required to provide laboratory service
Monitoring	Documentation of identification errors	

	Wristband monitoring	Verification of inpatient identification used for specimen identification
	Critical Values Reporting Practice Examples	
	Automated notification	System using mobile phones, pagers or other personal electronic devices to alert clinician
	Call Center	Notification process centralized in a unit responsible for communication of results
	Monitoring	Comparing critical values results released to those documented in information system
	Patient safety team	Process implemented involves interdepartmental team coordination and oversight
	Read back	Documented repeat of correct telephone results by recipients to person who transmits it
Practice	<p>Practices are protocols, procedures, policies, techniques, processes, systems, standards, incentives, activities, and interventions that are used to provide health care to patients.</p> <p>For each practice included in the assessment/study, whatever information is available (if applicable) related to:</p> <ol style="list-style-type: none"> 1) Content/what is involved (e.g., steps, components, processes) 2) Problem(s)/issue(s) addressed 3) How, where, when, and for how long it was implemented 4) Rationale, purpose, theoretical basis, and/or logic model 5) Staff responsible for managing and implementing it 6) Target population intended for practice impact 7) Amount of staff training related to initial and ongoing implementation 8) Resources required, and related costs 9) Problems/barriers encountered in implementing practice 	
Source	Organization name and name of assessment coordinator or lead researcher, as well as other individuals involved in designing and conducting the study, analyzing the data and developing results. Include all affiliations for all involved.	
Funding	Source(s) for assessment/study funding, which may include external sources and/or be self-financed.	
Facility/Setting	<p>Description of entities providing data to the study including:</p> <ul style="list-style-type: none"> • Location (U.S. city, state, county or Non-U.S. country and community characteristics, urban/suburban/rural) • Setting type and characteristics (e.g., # bed hospital, inpatient, outpatient, emergency room, physician office) • Percentage of each type of facility/setting that contributed data to the study, if applicable and available 	
Study Sample	Description of how the study sample was selected (all eligible, randomly or otherwise selected) and provide relevant sample size(s) and characteristics that contribute data to the findings (e.g., initial, pre-test/post-test, baseline, selected, attrition, subgroups). The sample may consist of patients, subjects, tests, samples, test results, settings,	

	facilities, etc.
Time Frame	Study time period(s) during which data were collected, including dates and duration.
Study Design	Description of study procedures, including any control or comparison groups and/or practice comparisons (e.g., baseline, another practice, status quo/previously used practice), and whether important factors that could affect the result were controlled.
Outcome Measures	Names and detailed descriptions of all outcome measures used to assess the magnitude of practice impact reported in the results, including how they were measured and data sources. Examples of targeted health care and process outcome measures include error rates, time to treat, turnaround time, patient satisfaction, length of stay, costs, inappropriate tests, adverse events, reporting rates, completion rates, and resolution rates.
Results/ Findings	All available supporting information and data that indicates each practice's impact and/or effect consistent with the outcome measures described. This includes overall results plus specific additional results, and any statistical analysis (e.g., tests of statistical significance and power). Include information related to practice cost and feasibility of implementation ("lessons learned"). If relevant and/or available, provide estimates (e.g., mean, mode, ratio) and dispersion (e.g., standard deviation, standard error, variance), and for statistical comparisons note the type of test.

If you have any questions about what information to provide, or suggestions for improving this guidance tool, please contact:

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Thank you for your support and participation!

The Laboratory Medicine Best Practices Project Team