

JUVENILE COURT HEALTH SERVICES LABORATORY PROCEDURES

Subject: POINT-OF-CARE TESTING: SCOPE AND UTILIZATION OF TESTS	Original Issue Date: 11/2/2012	Policy #: E-003
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Departments Consulted:	Approved By: (Signature on File) Laboratory Supervisor (Signature on File) Laboratory Director	Approved by: (Signature on File) Health Services Administrator

PURPOSE

To describe how all point-of-care testing (POCT) sites follow the Clinical Laboratory Improvement Act (CLIA) Guidelines by providing each testing site with its authorized scope of testing and defined usage of test results.

POLICY

1. POCT includes all laboratory tests performed outside of the laboratory, but under the direction of the JCHS Laboratory Department. All such testing must be authorized by the Laboratory Director.
2. All personnel performing authorized POCT procedures must have documentation of initial training and annual competency assessment.
3. The JCHS Department of Medicine will determine whether a POCT result will be considered definitive for purposes of medical care and diagnosis, or whether it may be used as a screening tool to be followed by a confirmatory laboratory test.
4. Each POCT used by JCHS has its own procedures detailing the appropriate usage, steps, and requirements for staff performing the tests.
5. Decisions to add new POCTs must be approved by the Laboratory Director.
6. New tests must first be validated and correlated by the JCHS Laboratory Department, under the direction of the Laboratory Supervisor. Following validation and correlation studies, the Laboratory Director must review the results and provide final authorization to begin using the test at the indicated JCHS clinical sites.
7. Physicians, registered nurses, licensed vocational nurses, nurse practitioners, laboratory staff and other non-laboratory staff who are authorized may perform point-of-care testing as indicated under the California Business and Professions Code and as specified by JCHS procedures for each test.
8. Requirements for POCTs apply to all testing sites and include:

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- a. Determination of clinical appropriateness
- b. Determination of the appropriate utilization of test results in patient care (definitive / diagnostic or screening)
- c. Development, review, and approval of procedures related to:
 - i. Specimen collection, preservation, and handling
 - ii. Reference ranges, critical values, reporting methods, record maintenance, and reviews of results
 - iii. Equipment operation, calibration, and maintenance
 - iv. Training, competency testing, performance evaluation, and corrective action plans for staff authorized to perform POCTs
 - v. Reagent storage, dating, and monitoring
 - vi. Quality assurance, quality control, and proficiency testing

PROCEDURE

POCTs performed in JCHS Facilities:

Authorized Test	Defined Use of Results	Authorized Testing Staff	Sites Authorized for Use
Nova StatStrp Glucose Test	Definite/Diagnostic	RN, LVN	All Halls and Camps
Clinitek-Status Urinalysis	Definite/Diagnostic	RN, LVN, NA	All Halls and Camps
Clinitest bHCG pregnancy test	Definite/Diagnostic	RN, LVN, NA	Halls, DKC, Scott
Rapid Trichomonas test	Definite/Diagnostic	RN, LVN	Halls, DKC, Scott

See specific procedures in the JCHS Laboratory Manual for details about each test.

REFERENCE

Point-of-Care Testing Procedure Manual
 JCHS Nursing Procedure Manual
 College of American Pathologists (CAP): Standard for Laboratory Accreditation
 California Business and Professions Code: Division 2, Chapter 3, Sections 1200-1237

REVISION DATES

April 9, 2014; June 7, 2018, February 17, 2019; June 30, 2021