

Document History:

**Title: Hemostasis Testing Requests:
Approval, Handling, Transport,
Referral and Reporting**

Site(s): All Sites

Document #:	140-80-48	Version #:	08
Section Number:	Hematology	Sub-Section:	Haemostasis

Approved by: <i>(Approval on file)</i>	Dr. Ping Sun	Date:	16-APR-2025
		Effective Date:	15-MAY-2025

Details of Recent Revision

- Additional clarifications in Policy.
 - Revisions to Procedure B to better clarify applicable ordering streams.
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DISCLAIMER: Please be advised that printed versions of any policy, or policies posted on external web pages, may not be the most current version of the policy. Although we make every effort to ensure that all information is accurate and complete, policies are regularly under review and in the process of being amended and we cannot guarantee the accuracy of printed policies or policies on external web pages. At any given time the most current version of any Shared Health Inc. policy will be deemed to apply. Users should verify that any policy is the most current policy before acting on it.

- Purpose:** This procedure provides instructions to describe the steps and actions when specialized haemostasis testing is requested. This procedure also provides instructions how to handle and transport Haemostasis samples ordered on Haemostasis requisition (all sites except HSC) as well as rural reporting (HSC, HPs).
- Policy:** **Requests for specialized haemostasis testing must meet the ordering requirements set out in Procedure B except:**
- **Lupus anticoagulant testing (AKA lupus inhibitor)** does not require approval or hematologist/hematopathologist order and is processed at the HSC Hemostasis/Hematology Lab.
 - **Factor V Leiden/Factor II prothrombin variant** are also on the Hemostasis requisition however these tests also do not require approval or hematologist/hematopathologist order currently. These tests are under the Genomics discipline, and specific ordering processes should be reviewed on the LIM or via their laboratory testing locations.
 - **Antiphospholipid profile** are also on the Hemostasis requisition however these tests also do not require approval or hematologist/hematopathologist order currently. These tests are under the Immunology discipline, and specific ordering processes should be reviewed on the LIM or via their laboratory testing locations.
 - An updated Hematologist list is provided by the discipline when changes occur.
 - The Hematopathologist staff are listed on the monthly Hematology call schedules distributed to all sites.

Anti-Xa Profile: Testing is performed at HSC routine hematology/coagulation 7 days a week, Days and Evening shifts.

- **SBH:** HEPX samples are referred to HSC once per day (within 24hrs of collection) using a regularly scheduled courier wherever possible. If the requisition indicates Stat/Urgent OR if hematologist/ hematopathologist/ hemostasis laboratory staff indicates stat testing is required to the laboratory staff, the samples will be double spun/separated and referred at room temperature on a stat courier and must arrive within 4hr of collection.

DIC Profile:

- **All sites:** Phone Haemostasis Lab (204-787-2105) to inform lab that sample is being transported. If Hemostasis staff are not available, a call to 204-787-1584 is required. Send batch sheet, requisition, and sample in transport box. Plasma samples must remain frozen.
- **WRHA:** Transport samples (NaCitrates tubes) stat at room temperature (15–25 °C) in transport cooler for WRHA sites. Sample must arrive within 4hr of collection.
- **Rural:** Double spin/separate plasma, freeze at -20 or colder and send the sample to HSC for testing. Contact appropriate courier - "Urgent" transport required.

Hemostasis laboratory provides coverage days/evenings 7 days per week, with routine hours being Monday to Friday day shift. Ph 204-787-2105.
Off hours Hematology main lab Ph: 204-787-1584

Always send all collected specimens and original requisition to the Hemostasis Laboratory, even if the samples collected do not meet the minimum tube or volume requirements. Record all discrepancies with the collection on the paperwork submitted with the samples.

Materials	Reagents:	Supplies:	Equipment:
	<ul style="list-style-type: none"> n/a 	<ul style="list-style-type: none"> Transport container Haemostasis Consult Form Hemostasis Test Requisition Haemostasis Sample Referral Tracking Form for Rural Sites LIS barcode labels Transfer pipette Polypropylene tube (13x75 mm) and Screw caps 	<ul style="list-style-type: none"> LIS PC Freezer (-20°C) Centrifuge Biosafety Cabinet (if applicable)

Sample:

- Frozen platelet poor citrated plasma samples. Refer to Procedure C.
Note: Refer to LIM and requisition for sample volume and number of tubes
- Sample must arrive frozen at HSC Haemostasis Lab. Refer to Procedural Note #2.
- EDTA anticoagulated whole blood samples (if required, refer to requisition).

Quality Control:

- Rural Haemostasis test results performed at HSC will be interpreted by the Hematopathologist assigned to coagulation testing and be reported in the LIS.
- Molecular studies related to coagulation studies will be reported separately.
- The process from request for haemostasis testing to receipt of specimen(s) by HSC Haemostasis Lab will be documented on the Haemostasis Consult Form.
- The process from request for haemostasis testing to reporting of the interpreted report will be tracked and audited.

All Quality Control records must be retained for two years. Refer to SH Laboratory Records and Material Retention Policy, 100-10-05.

**Procedure A:
Requisition (ALL
SITES)**

Step	Action:						
1	Area for Physician Information: <ul style="list-style-type: none"> Name of Physician ordering tests. Referring institution name. Referring institution patient #. Additional reports (Copy To) if required. The consulting Hematologist/Hematopathologist, if the ordering Dr is not within these specialties. 						
2	Area for Patient Information: <ul style="list-style-type: none"> Addressograph with patient demographics stamped, label affixed, or all pertinent patient information clearly hand written. 						
3	Patient History and Provisional Diagnosis: <ul style="list-style-type: none"> Patient Clinical/Family history required for interpretation by Hematopathologist. 						
4	Medications: <ul style="list-style-type: none"> List all medications. <table border="1" style="margin-left: 40px;"> <thead> <tr> <th>If:</th> <th>Then:</th> </tr> </thead> <tbody> <tr> <td>Patient is on anticoagulants,</td> <td>Type must be stated.</td> </tr> <tr> <td>Heparin Xa ordered,</td> <td>Must have type of heparin stated on requisition and time of last dose.</td> </tr> </tbody> </table>	If:	Then:	Patient is on anticoagulants,	Type must be stated.	Heparin Xa ordered,	Must have type of heparin stated on requisition and time of last dose.
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5	Date/Time of collection and phlebotomist: <ul style="list-style-type: none"> To be entered at registration. 						
6	Mode of collection: <ul style="list-style-type: none"> Venipuncture. Indwelling line. 						

Procedure B: Follow the assigned activities in the table below:

Step	Action:																	
1	<p>The approved ordering processes are ANY of the following:</p> <ol style="list-style-type: none"> The ordering or copyto Dr listed on the requisition is a Hematologist or Hematopathologist. The consulting Dr listed on the requisition is a hematologist or hematopathologist. The Hemostasis consult form is initiated by the ordering provider, F140-80-48A, if that individual is not a hematologist or hematopathologist. 																	
		<p>If the Hemostasis consult form F140-80-48A is initiated, the process is as follows:</p> <table border="1"> <thead> <tr> <th>Step</th> <th>Who:</th> <th>Actions:</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Requesting Physician:</td> <td> <ul style="list-style-type: none"> Complete the Haemostasis Consult form, F140-80-48A. Fax the consult form to HSC Hematopathology (fax 204-787-4030). </td> </tr> <tr> <td>2</td> <td>HSC (administrative staff):</td> <td> <ul style="list-style-type: none"> Deliver/e-mail the consult to the Hematopathologist assigned to Haemostasis/RBC Investigations. </td> </tr> <tr> <td>3</td> <td>HP (assigned to Haemostasis/ RBC Investigations):</td> <td> <ul style="list-style-type: none"> Review the request – contact the Physician as required. Make comments on the consult form – indicating appropriate tests to be performed or cancel request. Return Haemostasis Consult form to administrative staff. <p>Note: Platelet function test cannot be collected at rural sites (4hr stability). Platelet aggregation (CBW, PAGG) cannot be collected outside of HSC.</p> </td> </tr> <tr> <td>4</td> <td>HSC (administrative staff):</td> <td> <ul style="list-style-type: none"> Fax Haemostasis Consult form with Hematopathologist comments to requesting physician. Document date/time/initials. Deliver faxed Haemostasis Consult form, F140-80-48A, to HSC Haemostasis bench. </td> </tr> <tr> <td>5</td> <td>Requesting physician:</td> <td> <ul style="list-style-type: none"> Complete Haemostasis Requisition with patient demographics and Hematopathologist approved tests. Patient will attend collection with the requisition and consult form. </td> </tr> </tbody> </table>	Step	Who:	Actions:	1	Requesting Physician:	<ul style="list-style-type: none"> Complete the Haemostasis Consult form, F140-80-48A. Fax the consult form to HSC Hematopathology (fax 204-787-4030). 	2	HSC (administrative staff):	<ul style="list-style-type: none"> Deliver/e-mail the consult to the Hematopathologist assigned to Haemostasis/RBC Investigations. 	3	HP (assigned to Haemostasis/ RBC Investigations):	<ul style="list-style-type: none"> Review the request – contact the Physician as required. Make comments on the consult form – indicating appropriate tests to be performed or cancel request. Return Haemostasis Consult form to administrative staff. <p>Note: Platelet function test cannot be collected at rural sites (4hr stability). Platelet aggregation (CBW, PAGG) cannot be collected outside of HSC.</p>	4	HSC (administrative staff):	<ul style="list-style-type: none"> Fax Haemostasis Consult form with Hematopathologist comments to requesting physician. Document date/time/initials. Deliver faxed Haemostasis Consult form, F140-80-48A, to HSC Haemostasis bench. 	5
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3	<p>Phlebotomy site/ Hematology Lab: Patient will attend a phlebotomy site with requisition and consult form.</p> <table border="1"> <thead> <tr> <th>If:</th> <th>Then:</th> </tr> </thead> <tbody> <tr> <td>Lupus anticoagulant testing (lupus inhibitor) ordered,</td> <td>Proceed with collection, no approvals are required. Any Physician may order testing. No consult required.</td> </tr> <tr> <td>Factor V Leiden/ Factor II Prothrombin Variant or Antiphospholipid antibodies is ordered on R250-10-12,</td> <td>This testing is under the genomics and immunology disciplines respectively. Currently there are <i>no consults required</i>. The LIM or testing site should be reviewed/contacted if required for any clarifications.</td> </tr> <tr> <td>Patient only has the Hemostasis requisition and the ordering Dr/copyto is a Hematologist or</td> <td>Proceed with collection.</td> </tr> </tbody> </table>	If:	Then:	Lupus anticoagulant testing (lupus inhibitor) ordered,	Proceed with collection, no approvals are required. Any Physician may order testing. No consult required.	Factor V Leiden/ Factor II Prothrombin Variant or Antiphospholipid antibodies is ordered on R250-10-12,	This testing is under the genomics and immunology disciplines respectively. Currently there are <i>no consults required</i> . The LIM or testing site should be reviewed/contacted if required for any clarifications.	Patient only has the Hemostasis requisition and the ordering Dr/copyto is a Hematologist or	Proceed with collection.									
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	Hematopathologist OR is documented that the consulting Dr is a Hematologist or hematopathologist,							
	Patient only has the Hemostasis requisition and there is no indication of a hematopathologist/ Hematologist ordering the test or hematopathologist/Hematologist consult or copyto,	<p>Do not collect. Call HSC administrative staff at 204-787-2802 (alternate 204-787-4633) to enquire if a consult with a Hematopathologist took place.</p> <table border="1"> <thead> <tr> <th>If:</th> <th>Then:</th> </tr> </thead> <tbody> <tr> <td>Consult by HP with approved testing is on file,</td> <td>Admin staff will fax the approved consult to you. Proceed with collection.</td> </tr> <tr> <td>No consult/ approval by HP has been completed by the physician,</td> <td>Do not collect. Phone physician/ clinic to advise. Advise patient testing requires approvals and follow up directly with their physician will be required (if resolution not possible during patient visit) Physician is responsible to obtain an approved HP consult for testing OR obtain a Hematologist order.</td> </tr> </tbody> </table>	If:	Then:	Consult by HP with approved testing is on file,	Admin staff will fax the approved consult to you. Proceed with collection.	No consult/ approval by HP has been completed by the physician,	Do not collect. Phone physician/ clinic to advise. Advise patient testing requires approvals and follow up directly with their physician will be required (if resolution not possible during patient visit) Physician is responsible to obtain an approved HP consult for testing OR obtain a Hematologist order.
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	Patient only has the consult request,	Do not collect, call Dr/Clinic to obtain a requisition.						
	Patient has both the requisition and the consult form,	Proceed with collection.						
4	<p>Collecting Lab:</p> <ul style="list-style-type: none"> Collect, process, and store samples. Document collection date/time/initials as per requisition instructions. <ul style="list-style-type: none"> For tests to be performed at on-site, record LIS ID# on requisition. <i>Hemostasis testing must be registered on a separate LIS ID# from routine tests.</i> 							
5	<p>For tests to be performed at HSC:</p> <ul style="list-style-type: none"> Transfer specimen using Delphic LIS Test Referral. Refer to Referring Specimens to Reference Laboratories using Delphic LIS Application, 100-10-25. Send the following: <ul style="list-style-type: none"> A copy of Dispatch sheet and specimens. A copy of the Haemostasis Consult Form, F140-80-48A, if applicable. Completed Haemostasis Test Requisition, R250-10-12. <p>Note: Keep copy of all paperwork at referring site.</p>							

Procedure C: Follow the activities in the table below for non-urgent requests (plasma separation and storage).

Plasma Separation and Storage (ALL SITES):	Step	Action:
	1	Register sample in LIS. Haemostasis testing must be registered on a separate lab ID from other tests.
	2	Perform "Test Referral" process in LIS to batch samples to HSC.
	3	<ul style="list-style-type: none"> Label NaCitrated tube with LIS label (patient's full name and LIS number). Place barcode on tube.
	4	Place in the centrifuge. Centrifuge sample at room temperature as per site specific coagulation sample handling that is validated ongoing for platelet poor plasma (PPP). Refrigerated centrifuges must be set to their validated platelet poor plasma temperature setting (typically room temperature setting or max temperature setting to prevent cooling). Centrifuges MUST be validated and checked for PPP at the applicable speed/time. See F140-70-55A.
	5	<ul style="list-style-type: none"> When the centrifuge stops, using a transfer pipette, carefully remove the top $\frac{3}{4}$ of plasma and dispense into a 13 x 75 mm polypropylene tube with screw cap. Do NOT disturb the buffy coat. See JA140-70-55. Label aliquot tube with LIS aliquot label (patient's full name and LIS #).
	6	Follow Step 4 again; spin aliquot tube at room temperature as per site specific coagulation sample handling.
	7	Using a transfer pipette, carefully remove the top $\frac{3}{4}$ of plasma from the tube, leaving a small amount of plasma in bottom of tube and dispense into another 13 x 75 mm polypropylene tube with screw cap. Dispense in 1.5 - 2.0 mL volumes if possible. Note: For lesser volumes of plasma, aliquot in 0.75 - 1.0 mL volume.
	8	Label the tubes with the patient's full name and LIS number. Use LIS barcode or aliquot label.
	9	Place the tubes in the -20°C freezer or colder in the send out area. Sample must be fully frozen prior to shipment (3 hours).
	10	Arrange for non-urgent transportation. Ensure samples will remain frozen in transit. Package between several ice packs, using Cool Cubes, or other suitable transport media to maintain freezing. Note: For DIC Profile, refer to Policy section.
11	Must include batch sheet and requisition with sample.	

Procedure D:
Receipt and Reporting at HSC

Step:	Action:
1	<p>HSC Central Services:</p> <p>Sample received from Delphic LIS referral site:</p> <ul style="list-style-type: none"> Review Dispatch sheet. Acknowledge sample received in LIS. Distribute sample and requisition to Haemostasis bench.
2	<p>HSC Haemostasis Bench:</p> <p>Select Enquiry/Results Search format:</p> <ul style="list-style-type: none"> Call up request and verify appropriate information from consult form and tests ordered. Retrieve filed Haemostasis Consult form. Review Haemostasis Requisition. Complete testing according to facility procedures. Print out copy of results from Enquiry/Results Search format (Results tab). Give results and associated requisitions to HP (assigned to Haemostasis/RBC Investigations). Email appropriate Hematopathologist to notify tests are complete and ready to sign out.

3	<p>Hematopathologist (assigned to Haemostasis/RBC Investigations):</p> <ul style="list-style-type: none"> Review CBC results with haemostasis work up results. <p><i>On HSUMMARY format:</i></p> <ul style="list-style-type: none"> Enter interpretation "in quotes". Enter coded comment that identifies HP, with contact information. Press Release. <p><i>On SIGNOUT format:</i></p> <ul style="list-style-type: none"> Enter request #, F12. Verify that information is correct. Enter S, F12. <p><i>On Results Search format:</i></p> <ul style="list-style-type: none"> Verify that request is complete. Return paperwork to Haemostasis bench.
4	<p>HSC Haemostasis bench:</p> <p><i>Using Results Search format:</i></p> <ul style="list-style-type: none"> Verify that request is complete. File completed paperwork in WL/Rural Lab Haemostasis folder.

Related Documents:

- Procedure:* Referring Specimens to Reference Laboratories using Delphic LIS Application [100-10-25]
Procedure: Delphic Registration Guide [40-10-0201]
Procedure: Test Referral Reference Guide, Delphic Explorer [40-10-0308]
Procedure: Packaging and Transport of Patient Samples [100-10-87, JA100-10-87A]
Procedure: Platelet Poor Plasma Coagulation Samples [JA140-70-55, F140-70-55A]
Form F140-80-48A: Haemostasis Consult form
Form F140-80-48B: Haemostasis Sample Referral Tracking form
R250-10-12: Haemostasis Test Requisition