

**ADMIN-23: Laboratory Testing Turnaround Times Policy**  
**Department of Clinical Laboratories**  
**The Ohio State University Wexner Medical Center**

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**1. POLICY:**

Each Clinical Laboratories division will determine result turnaround times for each test. The division director, manager, and/or lead medical technologist are responsible for developing, reviewing, and revising the division specific information at least annually.

In cases where there are unexpected delays in results' availability, client notification will be made by one of the following modalities, as applicable:

- electronic notification on the clinical information system
- written notification
- telephone notification

Specimens must be ordered STAT to be processed STAT.

**2. PURPOSE OF DOCUMENT:**

Laboratory test results turnaround times will be defined for each test. In addition, when result availability will not meet specified times, a plan for notification of clients will be described.

**3. SCOPE OF DOCUMENT:**

This document applies to all areas and personnel in the Clinical Laboratories.

**4. RESPONSIBILITY:**

The Medical Directors of the Clinical Laboratories are responsible for establishing the *Laboratory Testing Turnaround Times* policy. Laboratory compliance is responsible for maintaining the policy and ensuring at least biennial review.

**5. PROCESS – TURNAROUND TIMES**

5.1. Turnaround times for Clinical Pathology Tests are available in the Test Catalog, available on the test catalog website. <https://theohiostatelabs.testcatalog.org/>

5.1.1. Turnaround times for send out testing are dependent on the reference laboratory performing the testing.

5.2. Turnaround times for general Anatomic Pathology tests are 3-5 days.

5.2.1. \*Turnaround time dependent on the need for ancillary studies

**6. PROCESS – NOTIFICATION OF TESTING DELAYS:**

The following process is used for any testing delays, including those due to unavailable reagents, extended instrument / equipment down times, or significant quality failures (e.g., proficiency testing, quality controls, calibrations).

6.1. Testing personnel: notify manager (or designee) immediately when problems are identified which will delay testing beyond published turnaround time.

6.2. Manager: notify division director(s) immediately when notification of delay by testing personnel is received.

6.3. Division Director and Manager:

6.3.1. Determine corrective action to be taken.

6.3.1.1. Hold specimens until testing is available again, OR

6.3.1.2. Send specimens to back up laboratory or outside reference laboratory.

\*\*\*OSUWMC labs are always the first choice to reroute samples

6.3.2. Determine whether medical staff (internal and external) should be notified

6.3.3. Notify Clinical Laboratories' Operations Directors, Medical Director, and Customer Services' Manager of testing delay and corrective action.

6.3.3.1. Published results availability; turnaround time when tests were typically run – e.g., daily, weekly, etc.

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- 6.3.3.2. Revised results availability, i.e., turnaround time from Reference Lab and/or anticipated testing re-start date.
  
- 6.4. Customer Services: when directed
  - 6.4.1. Obtain outstanding list for the affected test(s)
  - 6.4.2. Notify clients by telephone of the testing delay
    - 6.4.2.1. URL Customer Service notifies outside physician locations, from which specimens for the affected test were received.
    - 6.4.2.2. UH Customer Service notifies inpatient and outpatient physician locations, from which specimens for the affected test were received.
  - 6.4.3. Include revised estimated results availability, i.e., turnaround time from Reference Lab and/or anticipated testing re-start date.
  
- 6.5. Directors and Medical Director: as needed, distribute written notification and post electronic notification in IHIS or Atlas.

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**Test Availability and Turnaround Time**

The following tests are performed daily with results available the same day. Priority STAT turnaround times (receipt to result) are listed below.

When the electronic interface between the lab system and the hospital clinical information system (IHIS) is down for an extended period of time, the labs will notify each nursing unit and will generate hard-copy interim reports as needed and will transport them to the units via the pneumatic tube system, or by messenger transport if necessary.

These times are reflective of testing performed onsite. Some testing is sent to other labs for testing, which will increase turnaround time due to courier times.

TEST	STAT	James	UH	East
ABG	30 min.		X	
Acetaminophen (Datril®, Tempra®, Tylenol®, Liquiprin®, Tenlap®)	60 min.	X		X
Affirm Testing	60 min.	X		X
Beta-Hydroxybutyrate	60 min.		X	X
Alanine Amino-transferase (ALT/ SGPT)	60 min.	X	X	X
Albumin, Quantitative, Serum	60 min.	X	X	X
Alcohol, Ethanol, Urine	60 min.	X	X	X
Alcohol, Isopropyl (Serum)	60 min.		X	
Alcohol, Methyl (Serum)	60 min.		X	
Alkaline Phosphatase (Serum)	60 min.	X	X	X
Amikacin (Amikin®)	60 min.		X	
Ammonia, Quantitative, Plasma	60 min.	X	X	X
Amylase, Serum	60 min.	X	X	X
Aspartate Aminotransferase (AST/SGOT)	60 min.	X	X	X
Beta HCG, Quantitative	60 min.	X	X	X
Bilirubin, Total and Direct or Conjugated	60 min.	X	X	X
Blood Gas (Venous)	30 min.		X	
Blood Urea Nitrogen	60 min.	X	X	X
Blood/ Body Fluid Exposure Protocol – Rapid HIV	60 min.		X	X
BNP	60 min.	X	X	X
Calcium, Total (Serum)	60 min.	X	X	X
Carbamazapine (Tegretol®)	60 min.		X	
Carbon Monoxide	30 min.		X	
Cell Count, Body Fluids (CSF, Pleural, Peritoneal, Synovial)	60 min.		X	X
CD34 enumeration (BMT1R/3R)	4 hours		X	
Chloride (Serum)	60 min.	X	X	X
Cholesterol, Total	60 min.		X	X
CO <sub>2</sub> , Total (Serum)	60 min.	X	X	X
CO <sub>2</sub> , Whole Blood	30 min.		X	
Complete Blood Count	60 min.	X	X	X
Complete Blood Count with Differential	60 min.	X	X	X
Cortisol	60 min.		X	
CPK	60 min.	X	X	X
Creatinine (Serum)	60 min.	X	X	X
CSF Glucose	60 min.		X	X
CSF Protein	60 min.		X	X
D-Dimer (High Sensitivity, Quantitative)	60 min.	X	X	X
Digoxin (Lanoxin®)	60 min.		X	X

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ESR (Westergren)	60 min.		X	X
Ethanol (Blood)	60 min.	X	X	X
Ferritin	60 min.		X	
Fibrinogen Quantitative, Functional (Clottable)	60 min.		X	X
Gentamicin (Garamycin®)	60 min.		X	
GGT	60 min.		X	X
Glucose	60 min.	X	X	X
Gram Stain, direct examination	60 min.		X	X
HCT	60 min.	X	X	X
HGB	60 min.	X	X	X
Influenza A and B Antigen	60 min.		X	X
Inorganic Phosphorus	60 min.	X	X	X
INR (International Normalized Ratio)	60 min.	X	X	X
Ionized Calcium	60 min.		X	
Isopropanol	60 min.		X	
Lactic Acid	30 min.		X	X
LD (Lactate Dehydrogenase)	60 min.	X	X	X
Lidocaine	60 min.		X	
Lipase	60 min.	X	X	X
Lithium	60 min.		X	
Lytes	60 min.	X	X	X
Magnesium (Serum)	60 min.	X	X	X
Methanol	60 min.		X	
Methemoglobin	30 min.		X	
Methotrexate	60 min.	X		
Mono Test Rapid	60 min.		X	X
Occult Blood Gastric	60 min.		X	
Osmolality (Serum)	60 min.		X	X
Osmolality (Urine)	60 min.		X	X
Partial Thromboplastin Time, Activated (PTT)	60 min.	X	X	X
Pentobarbital (Nembutal®)	4 hours		X	
pH, Blood	30 min.		X	
Phenobarbital	60 min.		X	
Phenytoin	60 min.		X	
Phenytoin, Free	60 min.		X	
Platelet Count	60 min.	X	X	X
Platelet Function Screening Test	60 min.		X	
Potassium, Serum	60 min.	X	X	X
Potassium, Whole Blood	30 min.		X	
Pregnancy Test (Serum)	60 min.	X	X	X
Pregnancy Test (Urine)	60 min.	X	X	X
Protein, Total (Body Fluid)	60 min.		X	X
Prothrombin Time (PT)	60 min.	X	X	X
PSA	60 min.	X	X	X
Rapid COVID-19	60 min.		X	X
Rapid Influenza A/B	60 min.		X	X
Reticulocyte Count	60 min.	X	X	X
Rohypnol	60 min.		X	

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RPTH	40 min	James West Only	X	X
Salicylate (Aspirin)	60 min.	X		X
Sodium, Serum	60 min.	X	X	X
Sodium, Whole Blood	30 min.		X	
Specific Gravity (Urine)	60 min.	X	X	X
Stool, Occult Blood	60 min.		X	X
<i>Streptococcus pneumoniae</i> , Antigen, urine	60 min.		X	
Synovasure	60 min		X	X
Testosterone, Total (Serum)	60 min.		X	
Theophylline (aminophylline)	60 min.		X	
Thrombin Time	60 min.		X	
Tobramycin	60 min.		X	
Total Bilirubin	60 min.	X	X	X
Total Protein, Serum	60 min.	X	X	X
Triiodothyronine	60 min.		X	
hs-Troponin I	60 min.	X	X	X
TSH - 3rd Generation	60 min.	X	X	X
Type and Cross	75 min.	James West Only	X	X
Uric Acid (Serum)	60 min.	X	X	X
Urinalysis	60 min.	X	X	X
Urine 10 Drug Screen	60 min.		X	X
Urine Screen	60 min.		X	X
Valproic Acid	60 min.		X	
Vancomycin	60 min.		X	X
Volatile Screen	60 min.		X	
White Cell Count	60 min.	X	X	X

Anatomic Pathology	
Autopsy Report TATs: <ul style="list-style-type: none"> <li>• Preliminary Reports - 90% in 2 working days</li> <li>• Neuropathology Reports (with Normal Brains) - 50% in 25 working days</li> <li>• Neuropathology Reports (with abnormal Brains) - 50% in 40 working days</li> <li>• Final Reports (with Normal Brains or No Brain Examinations) - 50% in 30 working days</li> <li>• Final Reports (with Abnormal Brains or Brain-Only cases) - 50% in 45 working days</li> <li>• Final Reports Overall - 90% in 60 working days</li> </ul>	
Frozen Section (Single)	30 min.

**7. RELATED DOCUMENTS:**

- 7.1. Refer to QPulse System or Document Detail Report for related Laboratory Policies, Procedures, and Master Forms