**Point of Care (POC) Testing**

1. The POC Testing is under the direction, authority and jurisdiction, and responsibility of the Director of the Laboratory. Centralized coordination is performed by the POC Coordinator.
2. The POC Coordinator or a Medical Technologist/Technician routinely reviews quality control and test results. The Medical Director and POC Coordinator review the overall quality control monthly. It is signed and retained for 2 years. Manuals which contain policies and procedures are reviewed every 2 years. Training and competency are coordinated by the POC Coordinator. Records are maintained in the Pathology and in CATS.
3. The POC Testing is coordinated as part of the main laboratory and all policies and procedures apply to the POC Testing as it does to the main laboratory. See separate manuals for details.
4. Persons who have been properly trained and deemed competent in POC testing may be employees of the organization, contracted staff, or employees of a contracted service.
5. All material contaminated with biological specimens must be disposed of in an appropriate biological waste container. Standard precautions are utilized when performing POC Testing.
6. Quality control must be performed and documented as outlined in the appropriate procedures. Refer to the appropriate procedure for frequency of quality control testing.
7. The following steps are to be taken if the quality control results are not within the acceptable limits:
   A. If 1 or both controls are not within the acceptable limits as outlined in the procedure, repeat the control that is out of range. If necessary, repeat with a new bottle of QC and/or strips.
   B. If the control(s) is(are) still out of range after repeating, contact the POC Coordinator at 377-3066 ext. 2198 on Monday-Friday from 8:00 a.m. to 4:30 p.m.
      At other times, contact the Pathology Department at 377-3066 and ask to speak to the supervisor in charge.
      For POC problems occurring at Women’s Hospital, contact Women’s Hospital Laboratory at 377-4925.
8. For any assistance with POC testing, please contact appropriate persons at the numbers listed above in #7.
9. Tests are performed by adequately trained staff that have demonstrated satisfactory levels of competency.
10. Employees who perform **WAIVED** POC Testing will have competency determined prior to performing initial tests, at 12 months, and on annual basis thereafter. Employees who perform **NON-WAIVED** POC Testing will have competency determined prior to initial tests, at 6 months, at 12 months, and on annual basis thereafter. This is accomplished in several ways depending on the situation (example: direct observation, QC material, written testing, etc.). Competency records are maintained by the Pathology and in CATS. Persons who would perform POC testing infrequently are not trained in POC testing.
11. Color blindness testing by Employee Health is done on all staff performing POC testing. If any deficiency is found, then POC coordinator or designee observes the person performing color sensitive testing to determine testing competency.