Organisation name Site or unit		STANDARD OPERATING PROCEDURE Critical result reporting	
Document ID	HOS-SOP-009	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Standard operating procedure (SOP) · HOS-SOP-009 · Version 1.0 · Approved by the ASF Expert Committee

Supports: System S1 (Hospital), criterion S1.9

At a glance

- Keep the critical value list current and approved.
- The laboratory calls each critical result to the responsible clinician within the set time.
- The clinician acts and records the action and the time.
- Log every critical result on HOS-REG-002.
- Stop and get help straight away if: a critical result is reported with no clinician action recorded.

1. 1. Purpose

To make sure a dangerous result reaches the clinician quickly and is acted on, with a record (S1.9).

2. 2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out

Does not apply to	Activities covered by another document listed in section 15

3. 3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. 4. Background

A critical laboratory result that is reported late, or not acted on, can cost a life. Each one needs a named action and a time limit.

5. 5. Responsibilities

Role	Responsibility	Competence
Laboratory lead	Maintains the critical list and makes the calls	Laboratory
Responsible clinician	Receives, acts and records	Doctor or nurse in charge

6. 6. Materials and equipment

Item	Requirement	Condition
Critical values list	Approved, reviewed yearly	Checked each year
Critical result log (HOS-REG-002)	Current	Used for every call

7. 7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. 8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. 9. Procedure

Step 1. Identify.

- Check each result against the critical list.

Key point: The list is short and clear.

Step 2. Call.

- Call the responsible clinician within the set time.
- Read back the result and the patient identity.

Key point: Read back, every time.

Step 3. Act and record.

- The clinician acts and writes the action and the time on the log.

Key point: An action recorded is the closure.

Step 4. Escalate if not reached.

- If the clinician is not reached in the set time, call the duty clinical lead.

Key point: Never leave a critical result unreported.

10. 10. Decision points

- No decision points in this procedure.

11. 11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. 12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. 13. Monitoring

Measure	Target	Frequency	Owner	If not met
Critical results reported within the set time	At least 70%	Monthly	Laboratory lead	Escalate to clinical director
Critical results with action recorded	100%	Monthly	Laboratory lead	Escalate to clinical director

14. 14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility's records policy years

15. 15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. 16. Related documents

ID	Title	Use
HOS-REG-002	Critical result log	Log used in every step

17. 17. Evidence

Reference	Note

E-009	Time limits to be set by the laboratory and confirmed by the Committee; ISO 15189:2022 critical value requirements.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. 18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

No e-learning course is linked to this document yet.

19. References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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Related standard

- **Standard 33: Laboratory**