



12 TURNAROUND TIMES AND REPORTING

12.1 Turnaround times

TAT's are monitored as one of the departmental quality/performance indicators which are aligned to RCPATH Key Performance Indicators (KPI). RCPATH KPI is to report 80% of diagnostic cases within 7 days and , and 90% reported within 10 calendar days..

Performance is continually monitored, included in corporate reports and able to be provided to referring Trusts in accordance with Service Level Agreements.

Expected Turnaround times (from receipt to report)

| Cervical Screening | Turnaround | KPI |
|---|------------|------------------------------|
| Urgent LBC Cervical Screening samples | 1-3 days | NHSCSP 98% within 14 days |
| *Routine LBC Cervical Screening samples | 14 days | |

*In line with the NHSCSP Guidelines the turnaround times from the date the sample is taken to the patient receiving their result letter should be within 14 days.

12.2 Second Opinions

If it was necessary to refer a case for a second, specialist opinion, the slide would be sent to Manchester Laboratory.

Laboratory Address

Manchester Cytology Centre
 First Floor, Clinical Sciences Centre
 Manchester Royal Infirmary
 Oxford Road
 Manchester
 M13 9WL

12.3 Reporting of Results

12.3.1 Electronic and hard copies of reports

Results are available electronically to approved staff from the pathology computer system either via Meditech EMR or ICE reporting system.

For senders not on ICE or Meditech, copies of reports are sent to the requesting clinician.

For GP requests, results are available electronically to approved staff via the ICE reporting system and also EMIS systems.

Additional copies of reports can be issued upon request (usually by means of the request form) to specific consultants or approved locations.



12.3.2 Telephoned Reports

Where possible **this is avoided** because of the potential for mistakes, and generally reports can be accessed from the Pathology Computer System or ICE.

Where this is not possible, a qualified screener will read the completed and authorised report to the requester. If the requestor not immediately familiar, then they should provide their telephone/bleep number. This will be checked before the result can be telephoned back to them. Patient identity is confirmed by name, date of birth, address and hospital number. Reports will only be made to a requestor involved in the patients care.

If any doubts arise regarding the suitability of issuing a report in this way or uncertainty to the identity of the requester, the report will not be given.

12.3.3 Emailed Reports

In some circumstances PDF copies of reports can be emailed to secure NHS email accounts. Please contact the medical secretaries to discuss receiving a report via email.

If any doubts arise regarding the suitability of issuing a report in this way or uncertainty to the identity of the requester, the report will not be given.

12.3.4 Urgent Reports

In some circumstances a report may be required urgently. In these cases the request form must be marked "**URGENT**" and with a contact name and telephone/bleep number. You will need to carefully discriminate between routine and genuinely urgent cases. The latter disrupt normal laboratory practice with significant knock-on effects for other specimens. For urgent requests submit an extension/bleep number for reply.