

Lethbridge and Area CVR List

Document Number: SQMPMJ00002MULC Revision Number: 2.15

Document Type: Quick Reference Effective Date: 5/6/2022 4:00:16 PM

Location: 1. AHS Folder Structure\Document Administration\Quality Manual\07 QSE Process Management\Critical

and Notifiable Results\Critical and Notifiable Results Forms and Job Aids\SZ

Lethbridge and Area Critical Value Results (CVR)

CHEMISTRY

ANALYTE		UNITS	CRITICAL VALUE(S)
Acetaminophen		umol/L	>250
Ammonia	<17 years		>110
	≥ 17 years	umol/L	>200
Total Bilirubin	<30 days	umol/L	>300
Calcium		mmol/L	<1.65 or >3.25
Carbamazepine	Trough	umol/L	>65
Digoxin	Adult >6h post dose	nmol/L	>2.6
Ethanol	·	mmol/L	>65
Gentamicin	Trough		>1.9
	Post		>14.9
	Other		>14.9
	Interval	mg/L	>10.9
Glucose (fasting)	<30 days		< 2.0 or > 24.9
	>30 days	mmol/L	< 2.6 or > 24.9
Iron	<12 years	umol/L	> 54
Lactate (arterial/venous)		mmol/L	> 4.0
Lithium	Trough	mmol/L	≥ 1.50
Magnesium		mmol/L	<0.40 or >1.90
Phenytoin (trough)	0-3 months		>80
	>3 months	umol/L	>120
Phosphate	·	mmol/L	<0.40
Potassium	0 – 28 days		<3.0 or >6.4
	29 days – 17 years		<3.0 or >6.0
	≥18 years	mmol/L	<2.6 or >6.2
Salicylate	•	mmol/L	>2.2
Sodium		mmol/L	<120 or >155
Tobramycin	Trough		>1.9
	Post		>14.9
	Interval	mg/L	>14.9
Troponin T		ng/L	>52
Valproic Acid	Trough	umol/L	>1040
Vancomycin	Trough		≥ 25.1
	Random	mg/L	≥ 60.1

BLOOD GASES

LOOD GASES			
ANALYTE		UNIT	CRITICAL VALUE(S)
pН	Venous	N/A	<7.20 or >7.60
	Cord (Arterial/Venous)		<7.15
pCO2	Venous	mmHg	<20.0 or >70.0
HC03	Venous	mmol/L	<10.0 or >40.0
C0Hb	Venous	%	>15.0
MetHb	Venous	%	>10.0
BE	Cord (Arterial/Venous)	mmol/L	< -10
Ionized Calcium	Venous	mmol/l	<0.80 or >1.50

HEMATOLOGY/COAGULATION

ANALYTE		UNITS	CRITICAL VALUE(S)
I.N.R.		N/A	>5.0
A.P.T.T.		seconds	≥ 120
Fibrinogen		g/L	< 1.0
Hemoglobin		g/L	≤ 70
WBC	Adult	x 10 ⁹ /L	<0.6 or >99.9
	Newborn	x 10 ⁹ /L	<0.6 or >99.9
Platelet Count		x 10 ⁹ /L	< 20
Neutrophils		x 10 ⁹ /L	<0.6

	Notifiable Results	
Blasts present		
Malaria present		

TRANSFUSION MEDICINE (BLOOD BANK)

TEST	CRITICAL VALUE
DAT (Transfusion Reaction Investigation)	Positive*
Serum/Plasma Hemolysis (Transfusion Reaction Investigation)	Visible Hemolysis*
Kleihauer Betke Fetal Bleed (KBFB)	≥30 mL

^{*}When compared to Pre-Transfusion Samples

MICROBIOLOGY

SPECIMEN	CRITICAL RESULT	
Cerebrospinal Fluid (C.S.F)	All gram stain results (positive, negative and unable to test)	
	Positive culture	
Bacteria	Positive Acid fast bacilli stain (ZN, AR) or culture	
Blood Culture	Positive gram stain	
	Positive preliminary culture	
Two cultures office	Positive culture for Neisseria gonorrhoeae	
Eye cultures - other	Positive culture for Pseudomonas aeruginosa	
Eye cultures – sterile (vitreous, corneal scrapings)	Positive gram stain	
Eye cultures – Sterile (villeous, corrieal scrapings)	Positive culture	
RSV / Influenza A and/or B / COVID-19	Positive result on Inpatients and transplant patients	
Sterile Body Sites (sterile fluids and tissues)	Positive gram stain	
	Positive culture	

CRITICAL DIAGNOSES FOR SURGICAL PATHOLOGY

Cases that have immediate clinical consequences:

Crescents in greater than 50% of glomeruli in a kidney biopsy

Vasculitis and arteritis

Absence of chorionic villi or trophoblast in uterine contents when clinically expected (potential ectopic pregnancy)

Fat in an endometrial curettage

Fat in colonic endoscopic polypectomies

Transplant rejection

Malignancy in superior vena cava syndrome

Neoplasms causing paralysis

Unexpected or discrepant findings:

Significant disagreement between frozen section and final diagnosis

Unexpected malignancy including in an uncommon location or specimen type

Significant disagreement and/or change between primary pathologist and outside pathologist consultation (at either the original or consulting institution)

Infections:

Pneumocystis, fungi, or viral cytopathic changes in pulmonary biopsy specimens in immunocompromised or immunocompetent patients

Acid-fast bacilli in immunocompromised or immunocompetent patients

Fungi in biopsies of immunocompromised patients

Bacteria in bone marrow

Any invasive organism in surgical pathology specimens of immunocompromised patients

CRITICAL DIAGNOSES FOR CYTOPATHOLOGY

Unexpected or discrepant findings:

Significant disagreement between immediate interpretation and final Fine Needle Aspirate (FNA) diagnosis

Unexpected malignancy including in an uncommon location or specimen type

Significant disagreement and/or change between primary pathologist and outside pathologist consultation (at either the original or consulting institution)

Infections:

Bacteria or fungi in cerebrospinal fluid cytology in immunocompromised or immunocompetent patients

Pneumocystis, fungi, or viral cytopathic changes in bronchoalveolar lavage, bronchial washing, or brushing cytology specimens in immunocompromised or immunocompetent patients

Acid-fast bacilli in immunocompromised or immunocompetent patients

Fungi in Fine Needle Aspirate (FNA) of immunocompromised patients