Inodaya Hospitals	**INODAYAHospitals - Kakinada**	**Documentation code: INH/AAC.Doc.No:18**
	Policy on Recall or Amendment of Lab Reports Neugenix path labs & Quality care labs	Prepared Date: 11/11/2025
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PURPOSE

The purpose of the document is to make aware the Laboratory Personnel about the procedure for issue of amendment of test results from the **laboratory Neugenix path labs & Quality care labs**

SCOPE

This policy applies to:

- All laboratory reports issued by Neugenix Path Labs & Quality Care Labs.
- All laboratory personnel including pathologists, technicians, quality managers, and administrative staff.
- Reports issued to Iodaya Hospital departments, referring consultants, and external patients.

Definitions

- **Recall of Report:** Withdrawal of a previously issued laboratory report due to significant error.
- **Amendment/Correction:** Issuance of a corrected report with documented changes.
- **Critical Error:** An error that may impact patient diagnosis or treatment.

RESPONSIBILITY

Consultant Pathologist/ Consultant Biochemist / Consultant Microbiologist

Procedure for Recall / Amendment of Laboratory Reports

Neugenix Path Labs & Quality Care Labs
(Attached to Inodaya Hospital)

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Procedure

Step 1: Identification of Error

Whenever an error in a laboratory report is detected by laboratory personnel, the reporting Pathologist, treating consultant of Neugenix Path Labs & Quality Care Labs call Inodaya Hospital, quality team member, or patient, the concerned individual shall immediately inform the Laboratory In-charge.

Step 2: Immediate Notification

Upon receiving information about the error, the Laboratory In-charge shall notify the reporting Pathologist and Quality Manager without delay and initiate verification.

Step 3: Verification of Error

The Laboratory In-charge shall verify the reported discrepancy by reviewing the test requisition form, patient identification details, analyzer logs, internal quality control records, and sample status. If required, the test shall be repeated to confirm the correct result. The Pathologist shall clinically review the findings before further action.

Step 4: Decision for Recall

After verification, the Laboratory In-charge in consultation with the Pathologist shall determine whether the error requires amendment of the report or complete recall due to potential impact on patient diagnosis or treatment.

Step 5: Communication to Inodaya Hospital

If the incorrect report has already been issued, the concerned treating consultant at Inodaya Hospital shall be informed immediately. In case of critical results, communication shall be done urgently through telephone and

documented. The details of communication, including date, time, and name of the person informed, shall be recorded.

For outpatient or external patients, the laboratory shall contact the patient directly and inform them appropriately.

Step 6: Issuance of Amended Report

The original report shall not be deleted from the Laboratory Information System. A revised report shall be issued clearly marked as "AMENDED REPORT." The amended report shall mention the reason for correction, date and time of amendment, and reference to the original report number. The corrected report shall be signed by the authorized Pathologist, and the audit trail shall be maintained in the system.

Step 7: Retrieval of Incorrect Report

Where feasible, the previously issued incorrect hard copy shall be retrieved from the concerned department of Inodaya Hospital and marked as "Cancelled." The cancelled copy shall be retained for record purposes.

Step 8: Documentation

All recall cases shall be recorded in the Report Recall/Correction Register. The documentation shall include patient details, UHID, test name, description of error, root cause, corrective action taken, preventive action initiated, and signatures of responsible authorities.

Step 9: Root Cause Analysis and CAPA

In cases of significant or repeated errors, a Root Cause Analysis shall be conducted. Based on findings, appropriate Corrective and Preventive Actions (CAPA) shall be implemented and monitored by the Quality Manager.

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Step 10: Time Frame

Critical errors shall be communicated and corrected immediately, preferably within one hour. Non-critical errors shall be corrected within 24 hours of identification.

RECORDS:

- Recall register

Document Revision History

DOCUMENT REVISION HISTORY		
Version	**Date of issue**	**Reason for Revision**
Original version - 1		
Revised version - 2		
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