**Patient Safety Indicators**

**Review & Outcome Summary Report**

|  |
| --- |
| **Date** |
|  |
| **Quality Indicators Monitored** |
|  |
| **Quality Indicators Revised, Added or Discontinued** |
|  |
| **Summary Internal and/or External Changes and Occurrences Impacting Indicators** |
|  |

|  |  |  |
| --- | --- | --- |
| **Discussion of Quality Indicators: (comment on each indicator assessed)** | | |
| **Indicator 1:** | **Target:** | **% Target met:** |
|  |  |  |
| **Corrective actions initiated:** | | |
|  | | |
| **Keep Indicator?** | Yes | No |
| **Future actions planned for the indicator:** | | |
|  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Discussion of Quality Indicators: (comment on each indicator assessed)** | | | |
| **Indicator 2:** | **Target:** | | **% Target met:** |
|  |  | |  |
| **Corrective actions initiated:** | | | |
|  | | | |
| **Keep Indicator?** | Yes | | No |
| **Future actions planned for the indicator:** | | | |
|  | | | |
| **Indicator 3:** | **Target:** | | **% Target met:** |
|  |  | |  |
| **Corrective actions initiated:** | | | |
|  | | | |
| **Keep Indicator?** | Yes | | No |
| **Future actions planned for the indicator:** | | | |
|  | | | |
| **Indicator 4:** | **Target:** | | **% Target met:** |
|  |  | |  |
| **Corrective actions initiated:** | | | |
|  | | | |
| **Keep Indicator?** | Yes | | No |
| **Future actions planned for the indicator:** | | | |
|  | | | |
| **Indicator 5:** | **Target:** | | **% Target met:** |
|  |  | |  |
| **Corrective actions initiated:** | | | |
|  | | | |
| **Keep Indicator?** | Yes | | No |
| **Future actions planned for the indicator:** | | | |
|  | | | |
| **Changes being made to the Quality Plan based on this assessment** | | | |
|  | | | |
| **Patient Safety Quality Indicators Summary Report reviewed by Laboratory Director or Designee:** | | | |
| **Signature:** | | **Date:** | |
|  | |  | |
| **Comments:** | | | |
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