

# OUH Laboratory Information Management System replacement

## Information for GPs

### What is happening to Laboratory IT at OUH on Monday 17 March 2025

On Monday 17 March, Blood Sciences and Microbiology services at OUH are moving to a new Laboratory Information Management System (LIMS).

There is no change to the use and functionality of GP requesting and reporting systems (ICE, Keystone, SystemOne), with Read coded results continuing to be sent to GPs. However, there will be a period of downtime for ICE around go-live and some possible service disruption. Further information about this and other changes is below.

### How GP requesting and reporting systems will be affected at go-live

ICE will be **offline** from **2pm** on **Saturday 15 March** until **9am Monday 17 March**. During this time there will be **no access** for requesting or results return.

To minimise impact on patients, if phlebotomy is provided on Saturday mornings, please ensure that all interactions are completed by **2pm** on **Saturday 15 March**.

If you have a Monday morning phlebotomy clinic, we recommend printing off the necessary labels on the Friday beforehand just in case there is an unexpected delay during go-live which means ICE downtime is extended.

### Results return delays

A new software system will inevitably take some time to bed in and it's likely that there will be some delay to results return in the first week after go-live.

Please contact the laboratory if no results are coming through at all, or if there are obvious errors in results formatting or coding. We will make every effort to minimise any service disruption but ask for your patience while we manage the transition.

### Should GPs cancel clinics or defer testing?

There is **no need** to defer any specific tests or cancel any bookings already made. However, if any non-urgent appointments (such as NHS health checks) could be avoided on Monday 17 and Tuesday 18 March, or if there are options to defer sample collection to later in the week where practical, that would be helpful to reduce the load on the laboratories. We understand that this might not be possible in all cases but encourage you to consider any measures which would limit the number of samples sent to the laboratories in the early part of the week without impacting your service.

## Tests which have already been requested

We appreciate that some tests are booked months in advance. Where tests are requested before Monday 17 March (i.e. in the existing system) and fulfilled after this date when the new system is live, there is a chance that results may not be linked to the original request. This would mean you may not see the typical 'report received' status in ICE and results will appear as if they are an unsolicited report in Keystone. While this is a possibility, results will still be returned, and there is no need to re-request these tests. Systems will be run in parallel for a time to make this process as smooth as possible.

## Changes GPs might notice

The transition to the new IT system has meant some unavoidable change. We hope that you will find some benefits through improved test mapping and clearer presentation of information. However, there are some issues that we are still working to fix, and this may take some time. The changes made have been tested by the laboratories with GP partners and reviewed by laboratory clinical staff to ensure that no additional clinical risk has been created inadvertently.

## Tuberculosis (TB) testing

A separate test request and specimen number now needs to be generated for tuberculosis (TB) testing, as in the new system it is no longer possible to combine tests under the same request.

## Antibiotic sensitivity results formatting

There is a known issue with the way antibiotic sensitivities are displayed on the summary view which makes results for multiple isolates unintelligible. Clicking through to the full report displays the results correctly.

If more than one organism is grown, the organisms are numbered and the antibiotics displayed in vertical columns aligning to the organism number.

## Summary view – sensitivity results misaligned

(DSH) - Please make routine telephone appointment to speak to your USUAL doctor

Clinical details: FOCP, VIBC, YERC Detected

- 1) Isolated: Yersinia pestis
- 2) Isolated: Vibrio cholerae
- 3) Giardia lamblia

|                 | 1) | 2) |
|-----------------|----|----|
| Amikacin        | S  |    |
| Ampicillin      | S  |    |
| Augmentin       | S  |    |
| Aztreonam       | S  |    |
| Azithromycin    | R  | S  |
| Chloramphenicol | R  |    |
| Ceftazidime     | S  |    |
| Ciprofloxacin   | R  |    |
| Cefotaxime      | R  |    |
| Doxycycline     | R  |    |

COMPLETE

## Report view – sensitivity results correctly aligned

### FAECES - ISOLATES

(DSH) - Please make routine telephone appointment to speak to your USUAL doctor

Clinical details: FOCP, VIBC, YERC Detected

#### Stool culture

- 1) Isolated: Yersinia pestis
- 2) Isolated: Vibrio cholerae
- 3) Giardia lamblia

|                 | 1) | 2) |
|-----------------|----|----|
| Amikacin        | S  |    |
| Ampicillin      | S  |    |
| Augmentin       | S  |    |
| Astreonam       | S  |    |
| Azithromycin    | R  | S  |
| Chloramphenicol | R  |    |
| Ceftazidime     |    | S  |
| Ciprofloxacin   |    | R  |
| Cefotaxime      |    | R  |
| Doxycycline     |    | R  |

Culture complete?

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## Changes to test names and Read codes

A few test names are different in the new system, but as their Read codes remain the same, these should file correctly in your system and align with previous results. We'd like to know if this does cause problems, so please let us know.

## Use of collections

We are aiming to group tests into collections before go-live so that they are presented as they are now. If this is not possible, they will be listed alphabetically at go-live and addressed in the weeks after this.

## Changes to reference intervals and units

We have made minor changes to reference intervals and units as part of a standardisation exercise, but these are unlikely to have an impact clinically. Where changes are significant, they will be communicated separately through the GP bulletin or by other means such as highlighting the change on the report itself.

## How GPs should contact the laboratory during go-live week

We recommend you use your usual routes to contact the laboratories, and we will do our best to answer queries as quickly as possible.

- Haematology: [laboratoryhaematology@ouh.nhs.uk](mailto:laboratoryhaematology@ouh.nhs.uk)
- Biochemistry: [GPLabResults@ouh.nhs.uk](mailto:GPLabResults@ouh.nhs.uk)
- Microbiology: [microbiology.admin@ouh.nhs.uk](mailto:microbiology.admin@ouh.nhs.uk)
- Immunology: [Immunologylab.enquiries@ouh.nhs.uk](mailto:Immunologylab.enquiries@ouh.nhs.uk)