



COLLEGE OF PHARMACY  
OF NEWFOUNDLAND AND LABRADOR

# STANDARDS OF PRACTICE

Pharmacist-Ordered Laboratory Tests

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# 1. INTRODUCTION

Standards of Practice are minimum standards that all registered pharmacy professionals are expected to meet. Regardless of position or practice environment, when a pharmacy professional performs a specific role, they must perform it to the level specified in the Standards of Practice and meet all of the standards associated with that role. These Standards describe the minimum expectations for pharmacists when ordering laboratory tests for patients and are intended to promote consistency in the provision of this service to the people of this province.

In this document,

- “critical test results” refers to test results which require prompt action by a health professional to avoid serious adverse outcomes for the patient.
- “Provincial Laboratory Formulary (PLF)” refers to the continuously updated provincial database of laboratory tests available to be ordered by clinicians, any relevant information pertaining to these tests, as well as any processes for obtaining approval of laboratory tests as required.

# 2. EXPECTATIONS

2.1 **Prior to ordering laboratory tests**, pharmacists must first meet the following requirements.

- a) Receive authorization from CPNL to order laboratory tests by:
  - i) completing an education and training program acceptable to CPNL; and
  - ii) submitting the appropriate application form in the CPNL [Registrant Portal](#).

## PLEASE NOTE

Once authorized, pharmacists are expected to maintain competence in areas related to ordering laboratory tests and should undertake professional development as required to develop and maintain knowledge and skills.

- b) Ensure that they have access to the Provincial Laboratory Information System through the provincial electronic health record, [HEALTHe NL](#), to be able to view test results.
- c) Implement a system that ensures that they, or a delegate, are accessible both during and outside of their normal working hours to receive and act upon any critical results for tests that they ordered. This may include establishing agreements, partnerships, or arrangements, such as on-call groups, with other pharmacists or health professional colleagues.

### PLEASE NOTE

When completing outpatient laboratory test requisitions, pharmacists will be expected to provide appropriate address information to allow for the mailing of paper test results as well as appropriate contact information for the emergency communication of critical values (e.g., pharmacy phone number, number for an answering/messaging service, or a cell phone number, if required).

## 3. LIMITATIONS

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- 3.1 The following limitations must be considered by authorized pharmacists when ordering a laboratory test.
- a) Pharmacists may not order laboratory tests for themselves.
  - b) Pharmacists should not order laboratory tests for a family member or someone of a “close personal or emotional relationship” unless there is no alternative. If a pharmacist does order a laboratory test in these circumstances, the reason and the relationship to the patient should be appropriately documented in the patient record.
  - c) Pharmacists must order laboratory tests only in accordance with the Newfoundland and Labrador [Provincial Laboratory Formulary](#).
  - d) Pharmacists must limit their practice in this area to those situations covered by these Standards of Practice and to those laboratory tests that are within the limits of their own competence.
  - e) Pharmacists must not order tests if they are not able or prepared to act upon the results.

## 4. PRACTICE STANDARDS

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- 4.1 When ordering, interpreting, or communicating about laboratory tests, the pharmacist must ensure the following minimum standards are met:
- a) *Physical Environment*. The location where conversations about ordering a laboratory test, or laboratory test results take place must:
    - i) take patient confidentiality into account; and
    - ii) be clean, safe, and comfortably furnished for the patient.

- b) *Informed Consent.*
- i) Informed consent should be obtained directly from the patient unless it is considered appropriate, and in the patient's best interests, to communicate with the patient's agent on their behalf.
  - ii) Prior to ordering a laboratory test, the pharmacist must provide the patient or the patient's agent with sufficient information specific to the circumstances to allow them to make an informed decision regarding the laboratory test. This should include but is not limited to information about:
    - the test being ordered, and the purpose of the test;
    - monitoring and/or follow-up plan, including how the results will be received and communicated to the patient; and
    - details of any anticipated communications within the patient's circle of care, as appropriate.
- c) *Competency and the Code of Ethics.*
- i) Pharmacists must use their professional judgement to determine whether the specific circumstance of each laboratory test is within their scope of practice, competence, and experience. This includes knowing:
    - which laboratory test to select in specific situations;
    - when a test is or is not appropriate for a given patient, considering their medications, disease states, or medical conditions;
    - how to interpret results in the context of other patient information; and
    - what actions can, and should, be taken based on results.
  - ii) There is no obligation for a pharmacist to order a laboratory test. A pharmacist shall not order a test if there is insufficient information or a gap in the pharmacist's knowledge about the test, or about how they can or should act upon the results. In these cases, the patient should be referred to their primary care physician or nurse practitioner or another appropriate health care professional.
- d) *Assessment to Determine Appropriateness for the Patient.*
- i) Prior to ordering a laboratory test for a patient, the pharmacist must conduct and document a patient assessment appropriate to the circumstances, using a combination of patient interview and a review of the patient's electronic health record and other sources, as appropriate. This can include, but is not limited to, the patient's:
    - demographic information;
    - physical characteristics and/or measurements (height, weight, etc.);

- relevant prior laboratory and/or other diagnostic test results;
- current medical conditions, medications, non-medication therapies, use of health care products/devices and treatments;
- allergies and intolerances;
- pregnancy and lactation status;
- risk factors; as well as
- any other personal circumstances, practical needs, values, preferences, or other information relevant to the assessment.

#### PLEASE NOTE

Reasonable efforts must be made to review available and relevant previous laboratory test results and only order a test if the data is not otherwise available (e.g. on the electronic health record) or if more current information is required.

- ii) Once this assessment has been completed, the pharmacist should use the information gathered to determine whether ordering the test is appropriate for the specific patient under the specific circumstances. Examples of situations where a pharmacist may determine that it is appropriate to order a test include:
  - to ensure that the patient's medication and/or dosage is appropriate to meet the patient's therapeutic needs;
  - to monitor a patient's response to their drug therapy;
  - to monitor a patient for adverse effects to their drug therapy; or
  - to screen patients with preliminary indicators for untreated health conditions.
- iii) Decisions regarding ordering laboratory tests must be based on best practices, clinical suitability, cost-effectiveness, health resource stewardship, and what is in the best interests of the patient. Testing decisions based on biased information or financial advantage may be regarded as constituting conduct deserving of sanction.

#### LABORATORY TESTING GUIDANCE

As stated in section 3.1 c), laboratory tests must always be ordered in accordance with the Newfoundland and Labrador [Provincial Laboratory Formulary](#), as well as best practices, clinical evidence and relevant policies and procedures. Pharmacists should ensure that they are familiar with and have access to this information when assessing the appropriateness of ordering a laboratory test for a given patient.

- e) *Ordering a Laboratory Test.*
- i) Once a pharmacist has decided to order a laboratory test, they must do so using:
    - the provincial [Outpatient Laboratory Requisition Form](#); or
    - in acute care in a hospital, an appropriate health authority-approved form or method; or
    - another appropriate form or method determined in collaboration with laboratory services.
  - ii) If the pharmacist deems it to be appropriate, the pharmacist can request to have the results copied to patient's primary care physician or nurse practitioner, using the appropriate section of the form.
  - iii) Once a laboratory test has been ordered, the pharmacist is expected to monitor the patient record for the result and follow-up accordingly (see section 4.1 f)).
- f) *Monitoring and Follow-Up.*
- i) Pharmacists must have a procedure or system in place for:
    - tracking tests that they have ordered;
    - ensuring that test results are retrieved, reviewed and, if necessary, acted upon in an appropriate time frame;
    - following up regarding test results that are not received within the usual expected time frame; and
    - ensuring continuity of care in instances where the pharmacist is going on short- or long-term leave or changing employment.
  - ii) As stated in section 2.1 c), pharmacists must be accessible, or have alternate arrangements in place, to receive critical test results in an appropriate time frame.
  - iii) Both electronic and physical copies of test results must be received and reviewed in a manner that maintains the patient's privacy.

#### PLEASE NOTE

NL Health Services currently sends physical paper copies of test results by mail to the health care provider who ordered the test. Pharmacists must ensure that there are policies and procedures in place to manage these patient records, in accordance with the [Standards of Pharmacy Operation – Community Pharmacy](#), when they are received.

- iv) Once a test result has been retrieved or received, the pharmacist, or their alternate, must interpret the results in the context of the specific patient and take appropriate action including, but not limited to:

- communicating with the patient or the patient's agent regarding the test results and any potential follow-up or recommended care;
  - adapt the patient's drug therapy or extend prescriptions for existing drug therapy in accordance with the [Standards of Practice – Prescribing by Pharmacists](#); or
  - communicating with other health professionals within the patient's circle of care regarding the test results and any potential follow-up or recommended care; or
  - ordering or recommending additional laboratory testing.
- v) If a test result, including a critical test result, reveals an issue outside of the pharmacist's scope of practice, competence, or experience, the pharmacist must facilitate appropriate follow-up care, to the extent possible. This may include contacting the patient's primary care physician or nurse practitioner, if available, to discuss the results and next steps, or, if the patient does not have a primary care physician or nurse practitioner, informing the patient about other available health care resources and/or advising them to obtain emergency or other appropriate medical care.
- g) *Documentation.* Documentation methods (e.g., electronic, or paper-based) should be determined based on professional judgement and collaboration with the pharmacy team.
- i) Whichever method is chosen, documentation should include details related to:
- the laboratory test ordered and the reason for ordering it;
  - the date the laboratory test was ordered;
  - the results of the laboratory test and the date they were received;
  - any decision, action, and/or recommendation taken following the test results;
  - any other follow-up plans, or information necessary to allow for continuity of care; and
  - the name(s) of any other health professionals with which the results were communicated or discussed.
- ii) All documentation must be retained as per policies and procedures in place to manage these patient records, in accordance with the appropriate [Standard of Pharmacy Operation](#).