

BV USA - SOPs for CX team

Last updated on 4th Oct 2025

- Knowledge base/FAQ/articles

OPS DASHBOARD

Important tabs -

- Subscriptions (to check the status of subscriptions)
- Blood test orders: Blood test purchases
- Any edits to a users biodata (name, address etc) - flag to backend

TAGS

BVUS_APP_TECH_ERROR	↓
BVUS_APP_USAGE	↓
BVUS_DELAYED_RESULTS	↓
BVUS_EMERGENCY	↓
BVUS_ENQUIRY	↓
BVUS_FAQ	↓
BVUS_REFUND_REQUEST	↓
BVUS_RESCHEDULING_REQUEST	↓
BVUS_RESULTS	↓

CHANNELS

[#blood-vision-us-cx](#) - general queries - Used Earlier.

Now, we can use [#support-tech-oncall-requests](#) to post general queries regarding the Blood vision.

[#junction-x-ultrahuman-cs](#) - queries to be routed to Vital

Support Guidelines/SOPs:

PRE-TEST SCENARIOS

1. Phlebotomist Not Showing Up (No-Show)

- **Action:**

1. **Empathize & Apologize:** Express sincere apologies for the major inconvenience.
2. **Gather Details:** Confirm appointment time, location (if at-home), and phlebotomist details if known.
3. **Immediate Escalation (junction-x-ultrahuman-cs using the Order ID):**
 - Contact Vital operations immediately to report the no-show.
 - Request an urgent investigation with the phlebotomy vendor.
4. **Prioritize Reschedule:** Work with Vital/the user to reschedule the appointment at the user's earliest convenience (aim for within 24-48 hours) at free of cost.
5. **Consider Service Recovery:** Offer an apology credit (policy TBD by Blood Vision) for the significant inconvenience.
6. **Internal Logging:** Document the incident thoroughly in the CRM for tracking and vendor performance review. -TBD

2. Phlebotomist Late Arrival

- **Action:**

1. **Empathize & Apologize:** Apologize for the delay and inconvenience.
2. **Gather Details:** Ascertain how late the phlebotomist was (e.g., 15 minutes vs. 1 hour).
- 3.

Assess Severity:

- **Minor Delay (e.g., 10-15 minutes):** Acknowledge it, apologize. Usually within reasonable limits for traffic/prior appointments.
 - **Significant Delay (e.g., 1 hour+):** This warrants a more significant service recovery.
4. **Service Recovery (for significant delay):**
 - Offer to reschedule at no cost if the user prefers not to wait or if the delay is excessive.
 - If a mobile draw fee was charged, consider waiving/refunding it (policy TBD).
 - Escalate to Vital to understand the cause and prevent recurrence.
 5. **Internal Logging:** Document the incident, especially if significant, for vendor performance.

3. Rescheduling (User-Initiated)

- **Policy:**
- **>24 Hours in Advance:** User can reschedule freely without penalty. Guide them through the app/link if needed.
- **<24 Hours Before Appointment:** The full appointment fee is charged to Blood Vision by Vital (and passed to the user). Clearly communicate this policy if a user attempts a late reschedule.
 - For Walk ins the patient can cancel up to any point **before their blood is drawn**. Vital doesn't refund the customer, that is up to us! If we cancel the order within Junction we are not charged the per order fee
- **Missed Appointment (First Time):** Typically allow one missed appointment without penalty. Help them promptly reschedule. Stress the importance of attending the next one. (Fee waiver for first-time courtesy - TBD).
- **Repeated Missed Appointments/No-Shows:** May need to charge the full appointment fee to cover phlebotomist costs.
- **Action:**

1. **Assist User:** If the user has trouble rescheduling via in app, we can help with rescheduling. We need to cancel the order (but not refund) which would give them an option to reschedule. Can be done via **Blood test purchases > view > request order cancellation**.

2. **Communicate Policy:** Clearly explain any applicable fees for late rescheduling or no-shows.

3. **Internal Handling (for missed appointments):** Ops team may need to issue a new lab requisition if the original was marked as a no-show. Ensure the user's testing window (before 12-month expiration) remains open. Follow up with unresponsive users.

4. User Anxiety/Fear of Pain (Pre-Test)

- **Action:**

1. **Empathize & Reassure:** Acknowledge their feelings. Reassure them that phlebotomists are highly skilled and perform draws all day. Explaining the process is usually quick with only a slight pinch.

2. Provide Preparation Tips:

- Suggest good hydration the day before and morning of the test (water only if fasting) as it makes veins easier to access.
- Recommend getting a good night's sleep and trying to arrive at the appointment relaxed.

3. **Advise Communication with Phlebotomists:** Encourage the user to inform the

phlebotomist about their anxiety upon arrival.

4. **Option to Lie Down:** Inform them they can request to lie down during the draw, which labs/phlebotomists will usually accommodate to prevent fainting.

5. **Offer Resources:** If appropriate, mention that info sheets on coping with needle anxiety can be provided (if developed).

6. **Document:** Note the user's anxiety in their record if they consent, so future phlebotomists can be aware if possible.

5. User Medical Concerns (Pre-Test, e.g., "Is this test right for me with X condition?")

- **Action:**

1. **Clarify Blood Vision's Role:** Politely reinforce that Blood Vision is a wellness service, *not* a medical provider. We do not diagnose or treat conditions and cannot give medical advice.

2. **Advise Physician Consultation:** Strongly encourage the user to consult their personal physician for any specific medical concerns or to determine if the test is appropriate for their individual health situation.

3. **Provide Test Information:** Explain what the ordered Blood Vision panel covers and (if asked) what it doesn't. Do not over-promise on what the test can detect.

4. **Do Not Interpret:** Avoid interpreting how their specific medical condition might interact with the test or results.

5. **Refer to Terms of Service:** Gently remind them that our terms of service outline our role as an informational service.

DURING TEST SCENARIOS

1. Excessive Bleeding (Extreme)

- **Phlebotomist On-Site (In-Lab or Mobile):**

1. **Phlebotomist Action:** Trained to apply first aid (direct pressure). For severe, uncontrolled bleeding, they will call 911. They will notify their dispatcher/Blood Vision.

2. **Blood Vision Support (If contacted during event):** Instruct the user/caller to ensure 911 is called *immediately*. Discontinue non-essential conversation to avoid delaying emergency response.

- **User Reports After Event:**

1. **Immediate Action:** Check on the user's well-being. Confirm they received appropriate medical care.
2. **Document Thoroughly:** Record the incident in detail.
3. **Escalate Internally:** Notify medical director and operations lead for liability and follow-up.
4. **Follow-Up:** Coordinate any necessary follow-up, such as rescheduling a new draw if the first was incomplete, once the user is medically cleared.

2. Anxiety Response (e.g., Fainting, Dizziness)

• Phlebotomist On-Site:

1. **Phlebotomist Action:** Trained to handle vasovagal episodes (e.g., reclining the patient, offering water/juice, ensuring safety). Will call 911 if the situation is serious or doesn't resolve.

• User Reports to Support (During or After):

1. **If Still at Lab/With Phlebo:** Instruct them to inform lab staff/phlebotomist

immediately. 2. **If After Leaving:**

- **Express Concern:** "I'm sorry you had that experience. How are you feeling now?"
Ensure they are okay.
- **Immediate Advice:** If still unwell, advise them to sit/lie down, drink water. If very dizzy, advise not to drive.
- **Medical Check:** If they hit their head or symptoms are severe/persistent, encourage a medical check-up.
- **Reassurance:** Explain fainting can happen, especially if fasting, and is not uncommon.
- **Future Draws:** Advise them to mention this history at future appointments so they can lie down during the draw as a preventative measure.
- **Document:** Record the incident. Flag account for future phlebotomists to use supine position if possible.

3. Multiple Pricks Needed to Get Blood (User is

"Pincushion") • Action:

1. **Empathize & Apologize:** Acknowledge the discomfort and frustration. "I'm sorry that happened, it sounds very uncomfortable."

2. **If Blood Was Drawn Successfully:**

- Focus on the positive: "I'm glad they were able to get the sample eventually." ●
- Encourage prep tips for next time: hydration, warm clothes to keep veins dilated. ●
- If bruising occurs, advise using a cold pack for the first 24 hours, then warm compresses.

3. If Blood Was NOT Drawn / User Lost Confidence:

- Offer a reschedule with a different phlebotomist or at a different lab location.
- Offer to try and assign a more experienced mobile phlebotomist if possible. ●
- Reassure them it's not their "fault" – some veins are trickier.
- Document the difficult draw in their file for future reference.

4. **Internal Review:** Note if a particular lab location frequently has issues with difficult draws (via complaint patterns) to guide future lab recommendations.

4. Uncooperative User or Phlebotomist

● If Phlebotomist is Rude/Unprofessional:

1. **Empathize:** "I'm very sorry you had a bad experience; that's not what we want for our users."
2. **Gather Details:** Location, date/time, specific nature of the unprofessional conduct.
3. **Reassure Action:** Inform the user that Blood Vision will follow up with the lab management/phlebotomy service (via Vital).
4. **Offer Alternatives:** Suggest trying a different location for future draws if they are open to it.
5. **Service Recovery (for egregious incidents):** Consider offering a free at-home draw next time or an account credit (pending supervisor approval).
6. **Internal Escalation:** Log the complaint in the quality tracker to Vital. Multiple complaints about a site/person will be escalated for corrective action.

● If User is Uncooperative/Abusive (Phlebotomist reports or support observes):

1. **Phlebotomist Discretion:** Phlebotomists have the right to refuse service if their safety is threatened or if the user is overly disruptive, preventing a safe draw.

2. Support Action:

- Maintain professionalism.
- Attempt to de-escalate if the interaction is with support.
- Document the incident thoroughly.
- If behavior is egregious, management may need to decide on future service eligibility.

POST-TEST SCENARIOS

1. Bruising at Draw Site

- **Action:**

1. **Acknowledge & Normalize:** Explain that bruising can sometimes occur after a blood draw if a vein leaks a little.
2. **Gather Information:** Ask if it's just discoloration or if there's significant swelling or a hard lump.
3. **Provide Care Advice:**
 - **Simple Bruise:** Suggest applying warm compresses after the first 24 hours; it should fade.
 - **Significant Swelling/Pain (possible hematoma):** Advise applying a cold pack for the first 24 hours, then switch to warm compresses. This typically resolves on its own.
4. **When to Seek Medical Advice:** If pain is severe, swelling is very large or spreading, or if they have concerns, encourage them to see their doctor.

2. Continued Pain at Draw Site

- **Action:**

1. **Empathize & Gather Details:** "I'm sorry to hear you're still having pain. Can you describe it?"
2. **Assess Severity:**
 - **Mild Soreness:** This can be normal for a day or two. Advise rest for the arm.
 - **Significant/Persistent Pain:** Encourage medical evaluation to rule out any complications.
3. **Check for Infection Signs (Rare):** Ask if there's redness, warmth, significant swelling, or discharge at the site. If yes, strongly advise seeing a doctor immediately as these could be signs of infection.
4. **Document:** Record the user's report.

3. Secondary Bleeding (After Leaving Lab/Phlebotomist)

- **Action:**

1. **Advise Immediate Action:**

- Instruct the user to apply firm, direct pressure to the site with a clean cloth or bandage for 5-10 minutes.
- Suggest elevating the arm if possible.

2. **When to Seek Medical Attention:** If bleeding is significant (soaking through bandages quickly) or doesn't stop after applying pressure, advise them to seek medical attention promptly.

3. **Review Post-Draw Care:** Remind them of standard advice (keep bandage on for 30-60 mins, avoid heavy lifting).

4. Report Delays / Missing Reports

- **Expected Turnaround:** Standard panels ~5-10 business days; comprehensive/specialized tests possibly 2+ weeks. Users are notified by email/app when ready.
- **Action (If results are beyond the expected window and not received):**

1. **Apologize for Delay:** Acknowledge their anticipation.

2. **Internal Check (Step 1):** Support checks internally (via Vital access to lab interface using the the request/partner token) to see if results have been received from the lab but not pushed to the user's account (potential IT issue).

- If results are in the lab interface: Escalate to our tech team to import them. Consider manually providing results to the user in the interim if feasible and secure.

Example:

Order Details

Order ID: 2341aa05-b710-4c09-9b8e-304ae5a058d7

COMPLETED ABNORMAL

Ainsley Buster	04/07/2003	Guest	Client
Email ainsleybuster@gmail.com	Sex Female	Ordering Provider Leo Damasco	Provider NPI 1134326366
Address 705 Fleisher rd, Galesburg, IL	Phone +13093359405	Referring Physician -	Collection method ↑ Walk-in
Client User ID 11ea3b40-da03-4711-b018-...			

Overview Events Results

Status

Completed

Last updated: September 18, 2025 at 11:41pm GMT+5:30

Lab Turnaround Time

Expected: by September 21, 2025 at 5:30am GMT+5:30

Latest Expected: by September 23, 2025 at 5:30am GMT+5:30

Actual: September 18, 2025 at 11:41pm GMT+5:30

3. **Lab Check (Step 2 - If not in interface):** Contact the lab (via Vital) by flagging them on [#junction-x-ultrahuman-cs](#) to investigate the status. The test might be delayed or require a re-run. Obtain an ETA from the lab.
Example from Junction Dash:

Order Details

Order ID: e59b96b5-57b6-436a-9040-63231409e2fa

PARTIAL RESULTS ABNORMAL

windeurlett1@yahoo.com	Female	Leo Damasco	1134326366
Address 24491 Park Granada, ...	Phone +18186872520	Referring Physician -	Collection method ↑ Walk-in
Client User ID 34c8a22d-d5d5-4dc6-b76e-...			

Overview Events Results

Status

Partial results

Last updated: September 22, 2025 at 12:35am GMT+5:30

Lab Turnaround Time

Expected: by September 29, 2025 at 5:30am GMT+5:30

Latest Expected: by October 2, 2025 at 5:30am GMT+5:30

Actual: pending

Example flagged thread: [here](#)

4. Communicate with User:

- Provide an honest update. If the cause is known (e.g., "One of your test markers needed a confirmatory run, so it's taking a bit longer"), explain it.
- Give a new estimated date for results.
- Reassure them Blood Vision is actively monitoring it.

5. **If Sample Lost/Lab Error (True Failure):** Arrange a redraw quickly at no cost to the user. Prioritize their next appointment.

5. Refund-Related Concerns

- **General Policy Recap:**
- **Cancellation >24h before draw, within 24h of purchase:** Full refund.
- **Cancellation >24h before draw, after 24h of purchase (up to 60 days):** Full refund
- **No show at lab or at-home:** 1st time waiver (no-fee), next time charge \$50 administrative fee
- **After Blood Has Been Drawn:** No refund (service rendered).
- **Unhappy with Results/Changed Mind:** Generally no refund. Offer to clarify results, perhaps a discount on a future test if value is the concern.
- **Memberships (if any):** Not refundable once started; no proration for unused months/tests.
- **Action:**

1. **Empathize:** Understand the user's concern.

2. **Clarify Policy:** Gently explain the applicable refund policy based on their specific situation (timing of cancellation, sample status). Refer to Terms of Service.

3. **Address Misrepresentation Claims:** If a user claims the service was misrepresented (e.g., "thought a doctor consult was included"), explain the misunderstanding. As a one-time exception, consider arranging a call with a clinician (unofficial, case-by-case). A refund is still not standard.

4. Service Failures (Grounds for Free Re-test/Recollection):

- Sample unusable/results inconclusive due to lab error (hemolyzed, delayed sample).
- Phlebotomist failed to collect enough sample/kit compromised.
- User paid out-of-pocket due to Blood Vision error.
- Strong dispute of result accuracy (one courtesy re-test of a specific marker, once per user/issue ideally).

5. Exceptional Refunds (for service failure where user doesn't want redraw):

Case-by-case basis, requires supervisor approval (policy TBD for amount). Empower support leads for this.

6. **Document:** Thoroughly document all refund discussions and decisions.

Refunds should ideally be processed as Manual refunds. However, if the user is too very irate and wants it to the source payment made, then we can make an exception and process a stripe refund (subject to approval by lead)

- Can we set up a phone line for customer support?
 - We do not have a phone line for direct customer support. We suggest you communicate with Junction through slack for any inquiries you need help with. Our lab account phone number appears on the requisition and if a patient were to call that number, our team will respond on your behalf but this is not used as a customer support line specifically.