| central peninsula hospital<br>250 Hospital Place<br>Soldotna, AK 99669 | **POLICY TITLE:**<br>Laboratory Specimens | **DEPARTMENT:** Laboratory<br>**CATEGORY:** Laboratory Services<br>**SECTION:** General Laboratory |
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| | **POLICY NUMBER:**<br>CPGH.700.080 | **EFFECTIVE DATE:** February 2024<br>**Original Date of Policy**: 7/04 |
| | **AUTHORIZED BY:**<br>Laboratory, Medical Director | **Revised:** CPGH.700.080 – 11/16; (GL-540 - 8/04, 10/07, 12/09, 6/13), 4/17, 11/18, 6/19,12/19<br>**Reviewed:** 12/19, 10/20, 4/22, 3/23, 2/24 |

**APPLIES TO:** Collecting and submitting specimens for testing to the clinical laboratory.

**RESPONSIBILITY:** All Lab staff
All staff collecting, labeling, submitting specimens for testing

**PRINCIPLE:** Quality laboratory results begin with proper collection and handling of the specimen submitted for analysis. Correct patient preparation, specimen collection, specimen labeling, specimen packaging and transportation are of vital importance. If specimens are sub-optimal, permission must be obtained prior to testing. Once client approval has been obtained, CPH will test and report these results with a disclaimer.

**MATERIALS:** Specimen containers
LIS labels or admission labels
Indelible pen/marker

**SPECIMEN:** This process pertains to all specimens submitted to the laboratory.

**PROCEDURE:** Test specific specimen requirements are found in Specimen Collection Manual or can be obtained via phone at 714-4418.

1. Test Requisition
   All specimens or patients that are sent to the Laboratory must have a test requisition form or an order placed in the HIS. This requisition is the official order from the practitioner to the laboratory to perform testing on the patient. This form can be obtained from the laboratory upon request.
   The following items are required on a requisition:
   - Name of the person ordering the testing
   - Contact information to return results to ordering physician
   - Name of the patient
   - Date of Birth of the patient
   - Sex of the patient
   - Testing that is requested
   - Specimen source for culture requests or body fluid (other than blood or semen) testing
   - ICD10 code, diagnosis, sign or symptom (primary and secondary if indicated)

2. Identify the patient according to the Patient Identification policy. Resolve any discrepancy before proceeding. Collect the appropriate specimen as indicated in the Specimen Collection Manual.

   a. Label the specimen with one of the methods below:
      1) A Computer Lab-ready label that includes

i. Patient Name
ii. Patient DOB
iii. Testing requested
iv. barcode
v. Date of testing
vi. Phlebotomist adds their initials and time of draw
vii. Do "Final Check" if possible by verbalizing the last 3 digits of the Medical Record number, comparing the patient's wristband (or outpatient requisition) to the Lab label.

2) An Admission label that includes
viii. Patient Name
ix. Patient DOB
x. Date of testing
xi. Phlebotomist adds their initials and time of draw
xii. Do "Final Check" if possible by verbalizing the last 3 digits of the Medical Record number, comparing the patient's wristband to the Lab label.

3) WRITE the patient name and date of birth. Include phlebotomist's initials, date and time of collection legibly on specimen containers in indelible, non-gel ink.

**NOTE: Minimum labeling requirement for all specimens, whether collected at CPH or off site is the patient name and date of birth.**

NOTE: If the specimen is collected outside the lab, and is received with an admission label, when the specimen is re-labeled with a Lab label by Lab personnel, the name from the original label must be left in plain view.

3. Most specimens require refrigeration, unless otherwise indicated in the Specimen Collection Manual.
4. If you are submitting specimens on an OUTPATIENT for testing and the patient will not be accompanying the specimen, you must include insurance information as requested on the requisition form under "guarantor information". There is certain testing, when ordered on a patient with Medicare that will require an ABN to be signed, please refer to the ABN section of the Specimen Collection Manual.
5. If the specimen is collected outside the lab, and is received with an admission label, when the specimen is re-labeled with a Lab label by Lab personnel, the name from the original label must be left in plain view.

**LIMITATIONS:** Specimen Rejection

All specimens must be collected, labeled and transported according to procedure. See Specimen Collection Manual. Selecting the container type, volume and special handling requirements needed for analysis before the specimen is collected is essential. If the criteria for these processes are not met, the specimen will be rejected and the test cancelled. Generally specimens received in the lab are not discarded until the physician ordering the test or responsible nursing unit is notified. Lab personnel refer to Specimen Rejection for instructions on processing rejected specimens.
Reasons for rejection include:

- Mis-labeled specimen
- Un-labeled specimen

- Insufficient volume for analysis
- Inappropriate specimen type
- Incorrect patient preparation
- Improperly labeled specimen (including un-labeled)
- Inappropriate specimen container
- Improper specimen transport
- Specimen leaked in transit
- Specimen sent in incorrect or expired media
- Incomplete or incorrect test request forms
- Test request forms without a specimen
- Specimen without a request form
- No sample type provided or indicated
- No source provided
- Exceeding time constraints for testing
- Syringe with needle attached

Rejected specimens:

- Must be cancelled in the LIS with the reason for rejection documented.
- Order will be re-entered by laboratory personnel in order to appropriately track the activities of the order and the specimen.
- The rejected specimen will be logged into Riskman for the purposes of data review and process improvement.

High Risk Specimens
Specimens that are from an invasive procedure other than venipuncture, or are not reproducible (High Risk), **will be retained until the cause for rejection can be remedied**, e.g., CSF, biopsies, blood cultures drawn before antibiotics are given.
The decision to use the specimen in question will be made by the Medical Director and/or the Administrative Laboratory Director.

**REVISION RESPONSIBILITY:** Administrative Laboratory Director and/or designee(s)

**REFERENCES:** The Impact of Specimen Rejections, Communiqué, Mayo Reference Services, Rochester, MN, July 2003.

Department of Health and Human Services, Centers for Medicare and Medicaid Services, Centers for Disease Control and Prevention. Medicare, Medicaid and CLIA Programs; Laboratory Requirements Relating to Quality Systems, 42CFR Part 493.1249 (a-b).