Memorial Hospital
UNIVERSITY OF COLORADO HEALTH

Laboratory Services
Colorado Springs, CO

LAB.QA. 63 Specimen Acceptance - Rejection Procedure

Copy of version 7.0 (approved and current)

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Organization Memorial Health System

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Updated the Specimen labeling Requirements for Blood Bank specimens. Now refers to the *Blood Bank Armbands: Recipient Identification System* policy.

Updated specimen labeling requirements for blood band to refer to policy: Blood Bank Armbands: Recipient Identification.

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Approval and Periodic Review Signatures

Type	Description	Date	Version	Performed By	Notes
Approval	Lab Director	12/29/2016	7.0	Cory Dunn	
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7.0	Approved and Current	Major revision	12/22/2016	12/29/2016	Indefinite
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4.0	Retired	Major revision	10/3/2015	10/11/2015	2/2/2016
3.1	Retired	Minor revision	8/31/2015	8/31/2015	10/11/2015
3.0	Retired	Major revision	4/23/2015	4/26/2015	8/31/2015
2.0	Retired	Major revision	2/20/2015	3/5/2015	4/26/2015
1.0	Retired	Initial version	4/3/2013	4/15/2013	3/5/2015

Linked Documents

- LAB.BBTR.558 Blood Bank Armbands Recipient Identification System 04-08-2016
- LAB.QA.106 Collection of Specimens for Laboratory and Point of Care Testing
- LAB.QA.111 Specimen Identification Exception Form
- LAB.QA. 76 Non-Conforming Event Reporting

Specimen Labeling & Acceptance/Rejection Procedure

PURPOSE

The Department of Laboratory Services at UCH-Memorial Hospital establishes and maintains a list of acceptance/rejection criteria for laboratory specimens. A process is established for the processing, rejection, notification and documentation, as well as the disposition of unacceptable specimens.

The laboratory only accepts specimens for testing from (or under the supervision of) licensed physicians, Pharmacists, Nurse Practitioners (NP) and/or Physician Assistants (PA).

This procedure provides acceptance criteria and instructions on how to reject laboratory specimens that do not meet the proper criteria. Possible exceptions should always be explored before specimen rejection decision.

LABELING CRITERIA – All labeling should be legible.

Inpatients/Outpatients - The laboratory follows labeling requirements set forth by the Hospital Policy: *Collection of Specimens for Laboratory Testing*. Patients should be identified using two separate, unique identifiers prior to collection, and specimens should be labeled at the time and in the location of the collection (e.g at the bedside).

Specimen Labeling Requirements:

- Patient's First and Last Name (or Trauma number)
- Medical Record Number
- Source and body site of specimen if not blood
- Optional: Location or Room Number
- Note: Blood Bank specimen collection must follow Memorial Hospital Blood Bank labeling policy. See the *Blood Bank Armbands: Recipient Identification System* policy. Specimens collected for non-transfusion testing, such as prenatal testing and RHIG testing ae not labeled with an armband.

Courier/Client Services - The appropriate request form must accompany all clinical specimens sent to Memorial Hospital Laboratory for analysis. Patient identification information must be listed on both the specimen and the request form and must match. The request form must be completely and legibly filled out to ensure proper processing and billing of each patient's laboratory tests. To comply with hospital and The Joint Commission (TJC) standards, 2 patient identifiers must be on all specimens submitted.

Minimum Labeling Requirements (should be on both the request form and the specimen):

- Patient's Last Name and First Name
- Date of Birth (or social security number)

Additional Labeling Requirements (may be on either the request form or the specimen):

- Tests requested
- Patient's Gender
- Date and Time of Collection, when appropriate
- Ordering Physician's Name and Address
- Source of Specimen, when appropriate
- Diagnosis / ICD10 Code
- Optional: Initials of person collecting or processing the specimen

Histology Labeling Requirements (all patient types):

- Specimen container requirements (NOT LID):
    - Patient Name (First and Last, prefer Middle Int.)
    - Medical Record and Financial Numbers (if hospital patient)
    - Specimen Site/ Description/Laterality (left, right, or bilateral if appropriate)
    - Date/Time of collection/Initials of collector
- Specimen requisition form requirements:
    - Must accompany all specimens and all information must match exactly.
    - Patient's name (first, last, and middle initial)
    - Patient's birth date and gender
    - Medical Record and Financial numbers (if hospital patient)
    - Copy of insurance forms (if courier patient)
    - Tissue site(s) list individually - take care to match exactly with specimens containers.
    - Surgeon (first and last name)
    - Additional physician(s), (first and last names)
    - Operating room number (when appropriate)
    - Clinical information - pre-operative and post-operative
    - Date & time (where appropriate) of collection
    - Other appropriate information – phone #'s if stat call back is requested.

SPECIMEN CRITERIA

Specimen Type and Source – testing can only be performed on approved specimens and/or sources. Testing can also only be performed using approved and validated test methods.

Specimen Integrity – To ensure result accuracy, specimen integrity must be considered.

- Hemolysis (especially if specimen is to be used for calcium, magnesium, phosphorus, potassium and enzymes).
- Clotted Specimens (when the test requires whole blood or plasma).
- Contamination:
    - Specimens cannot be collected from an arm with an I.V. running. If it is impossible to obtain blood from another site, then blood may be removed from a site below the I.V. and a notation made on tube (be sure the notation is visible and not covered by any labels).
    - The laboratory will not accept specimens that have gross external contamination. Specimen containers must be tightly sealed with no external spillage. Specimens should be placed in a sealed plastic biohazard bag for transportation to the laboratory.

Specimen Quantity - Insufficient quantity of specimen for the test ordered may be a cause for rejection. Refer to the specific test criteria for minimum quantities that may apply.

Specimen Handling

- The use of improper transport media or collection device may result in an unacceptable specimen. Carefully refer to the test criteria for appropriate collection materials (this includes all send out testing).
- Delays in transportation and/or processing may cause inaccurate results rendering the specimen unacceptable. Refer to the specific test criteria carefully for any time restrictions that may apply (See the laboratory test catalog). Some examples of time/processing restrictions include but are not limited to:
    - Blood gases at room temperature must be delivered to Chemistry within 30 minutes (Ammonias must be placed on ice and delivered within 30 minutes).
    - Heparin or serum vacutainer tubes must be spun within an hour of collection.
    - Specimens that must be frozen must be done so within 2 hours of collection.
    - Separator tubes must be centrifuged in such a way that the gel will create a barrier between cells and serum.

REJECTION PROTOCOL

Labeling - Specimens that do not meet labeling criteria listed above may be rejected.

The Laboratory may reject unlabeled or mislabeled specimens, to include arm-banded blood bank specimens and specimens where the patient label does not agree with the name on the requisition, and request a redraw in most cases. Possible exceptions listed below should always be explored before rejecting a specimen. All questions or concerns about rejections and exceptions should be directed to either the charge technologist and/or the appropriate pathologist. Memorial Hospital Laboratory will recognize and accept samples from known and documented aliases.

Specimens that are eligible to be relabeled may be done so by the individual who collected or was present at the collection of the specimen. This person must sign and date the *Laboratory Specimen Identification Exception Form* and the laboratory staff member must enter a comment in the LIS computer documenting that the specimen was relabeled. If no individual is willing to relabel the specimen, the test is cancelled and documented per the rejection policy.

Please note that some exceptions will require a *Planned Deviation Form* to be signed by a pathologist. These include, but are not limited to, Blood Bank specimens and Gynecological Cytology specimens. Questions and concerns over these specimens should be directed to the appropriate pathologist.

Exceptions are limited to:

- **Microtainers**: These devices are too small for both patient name and ID#. Concerns should be directed to the appropriate charge technologist.
- **Irretrievable specimens**
    - Some examples of irretrievable specimens include, but are not limited to:
        - Blood cultures collected prior to the administration of antibiotics.
        - Intraoperative cultures.
        - Arterial blood gases collected by arterial puncture (not from an IV) (analyze specimen but do not release results until labeling problem is corrected).
        - Cord blood gases collected in utero.
        - Fetal Fibronectin, Amnisure, and/or other amniotic specimens.
        - Other specimens as determined by the section supervisor or charge technologist.
    - **Note :** Most anatomical pathology specimens are considered irretrievable; every effort should be made to gain the missing elements for documentation so that testing can proceed. Any concerns related to these exceptions should be directed to a pathologist. Examples are:
        - Tissue from any source.
        - Body fluids (CSF, amniotic, pleural, peritoneal, synovial, etc.)

- **Specimen** – Specimens that do not meet specific test criteria may be rejected to include but not limited to:
    - Hemolysis: All adults must be redrawn. For hemolyzed baby specimens (from NICU and premature infants less than 8 pounds), consult the physician/nurse to determine whether or not a specimen can/will be redrawn.
    - Clotted Specimens: EDTA tubes for CBCs, sedimentation rates, reticulocytes and Citrated tubes for coagulation tests must be recollected.
    - Contaminated specimens must be redrawn.
        - Specimens cannot be collected from an arm with an I.V. running. If it is impossible to obtain blood from another site, then blood may be removed from a site below the I.V. and a notation made on tube.
        - Urine that is grossly bloody or contaminated with stool may be unsuitable.
        - The laboratory may not accept specimens that have gross external contamination. Specimen containers must be tightly sealed with no external spillage. Specimens should be placed in a sealed plastic biohazard bag for transportation to the laboratory.
    - **Exceptions are as follows:**
        - A physician/nurse can pursue the testing of an unacceptable specimen. In this case the results of testing must include the applicable comment to indicate that the exception may lead to a compromised result.
        - A physician requests an unusual test or a test on a specimen that is not listed as being acceptable. In this case, a pathologist must approve the testing and the methodology that will be used and a Plan Deviation Form must be filled out.

NOTIFICATION & DOCUMENTION - Required for any/all specimens that are either rejected or accepted as suboptimal.

Notification

- Any laboratory staff that identifies an unacceptable specimen that requires rejection will document the reason for rejection in the LIS.
- All laboratory staff is responsible for contacting either a licensed caregiver (inpatients/outpatients) or the off-site physician or physician's office (courier) to provide notification of the unacceptable specimen.
- Laboratory staff member must document who provided the notification, who received the notification and the date/time in the LIS.

Documentation

- When requesting a redraw due to specimen rejection and/or when reporting results on suboptimal specimens, document communication that took place using the communication log contact section for that specific order.
- Refer to the non-conforming events policy for reporting rejection or problems with sample submission.

Specimen Collection Feedback

- Mechanisms of collection feedback may include real time education, nonconforming event reporting, quality management reports and retraining/reeducation.

DISPOSITION OF REJECTED SPECIMENS

All rejected specimens will be held for a minimum of 24 hours in a Daily Specimen Rejection Bucket prior to final disposition in an appropriate biohazard trash container (AP specimens may be kept longer due to their irretrievable nature).

NOTES/LIMITATIONS

- It is acceptable for the Blood Bank to accept and process specimens from patients with listed aliases.
- Provider phone numbers are available on the intranet, MedWeb alpha link "Physicians" and in the LIS computer system. If no phone numbers are available through the intranet, contact the ordering facility and ask the staff to obtain the physician's phone number from the original laboratory requisition.
- For specific test criteria, refer to the Laboratory Test Catalog on the intranet.
- For suggestions for appropriate culture of uncommon diseases or organisms, call the Microbiology Lab at Central at 365-5686. Microbiology techs seeking additional information can refer to the current edition of the ASM Clinical Microbiology Procedures Handbook, Manual of Clinical Microbiology reference book and Appendix B below.

RELATED DOCUMENTS

Memorial Hospital Policy: Collection of Specimens for Laboratory Testing

REFERENCES

Adapted from existing North Laboratory and Central Laboratory policies.

College of American Pathologists (CAP). *Laboratory General Checklist.*07/31/2012. 325 Waukegan Road, Northfield, IL.

Murray, Patrick R., Manual Clinical Microbiology, ASM, 9th Ed, Washington, D.C. 20005, ASM Press 2007.

APPENDICES

Appendix A – Specimen Identification Exception Form
Appendix B – Additional Requirements for Microbiology Testing

APPENDIX A. SPECIMEN IDENTIFICATION EXCEPTION FORM

SPECIMEN IDENTIFICATION EXCEPTION FORM

This form is to be used by a charge technologist, lead technologist and/or supervisor/manager in the rare event that a mislabeled specimen can be relabeled for testing. For extenuating circumstances on items not listed below, pathologist must be contacted for approval.

To be completed by lab staff:

☐ Unlabeled

☐ Missing patient first name

☐ Missing patient last name

☐ Missing medical record number

☐ Mislabeled with different patient information

☐ Other _____

_____

Allowable Exceptions (please check box):

- ☐ Blood cultures collected prior to the administration of antibiotics
- ☐ Intraoperative cultures
- ☐ Arterial blood gases collected by arterial puncture (not from an IV) (analyze specimen but do not release results until labeling problem is corrected).
- ☐ Cord blood gases collected in utero
- ☐ Fetal Fibronectin, Amnisure, and/or other amniotic specimens
- ☐ Tissue from any source
- ☐ Body fluids (CSF, amniotic, pleural, peritoneal, synovial, etc.)
- ☐ Not on list - pathologist approval required

_____

To be completed by floor/office staff:

Correct Patient Information (Attach zebra or chart label below, if possible):

_____

I confirm the corrected identity of this patient.

_____ _____

Printed Name & Title Signature & Date

Laboratory Staff Signature:

_____ _____

Printed Name & Title Signature & Date

_____ _____

Pathologist Name (if applicable) Signature & Date

Verbal Approval? ☐ Yes ☐ No

If verbal approval is given, pathologist must sign and date when they are in the office.

Department Supervisor/Manager Review: Signature _____Date:_____

Please give completed forms to department Supervisor/Manager who will send completed forms to Quality.

For external medical offices: please fax this form to 719-365-6828

For external medical offices: please fax this form to 719-365-6828

APPENDIX B – ADDITIONAL REQUIREMENTS FOR MICROBIOLOGY TESTING

Dry Swabs:

Bacteria can rapidly die in a dry environment. A dry swab may need to be recollected. Refer to the instructions on the packages of Culturette and anaerobic swabs for proper handling after collection, to ensure the viability of any organisms that may be present.

Transport Temperature:

Bacteria are often sensitive to temperature variations. Please check with each culture type what the appropriate temperature is best for transporting the specimen. Because improper storage or transportation temperatures may result in a lack of organism growth, specimens may be rejected.

Internal Contamination with Stool:

Urine specimens for culture that are contaminated with stool will be rejected.

Barium in Stool:

The presence of barium or similar substances in stool significantly interferes with the microscopic examination for ova and parasites. Specimens containing barium will be rejected. Patients who have received barium should not attempt ova and parasite examination for a minimum of 1 week following the treatment.

Viral History : Suspected viruses, diagnosis and patient history can be found in the hospital electronic medical record or on a paper laboratory requisition, if specimen is from outpatient/courier/client services.

Charcoal Swabs:

Charcoal interferes with microscopic examination of gram stains. Specimens received for gram stain in a charcoal transport system will be rejected.

Rotavirus:

Requires a pea-size stool sample. Rectal swabs are unacceptable. Stool scrapings on a stick that do not meet the minimum volume will be rejected.

Anaerobic Culture: Requests for anaerobic cultures collected from inappropriate sites, collected with inappropriate collection devices, or transported with time delays will be rejected. Avoid collecting specimens from mucosal surfaces that may be colonized with normal flora. Specimens should generally be from sterile,'deep' sources. Refer to the table below for some general guidelines. Also see specific sites for more detailed information.

Anaerobic Culture Suitability	
ACCEPTABLE MATERIAL	UNACCEPTABLE MATERIAL
Aspirate (by needle & syringe)	Bronchoalveolar washes
Bartholin's gland	Cervical or endocervical swabs
Bile	Endotracheal aspirate
Blood	Lochia
Bone marrow	Nasopharyngeal swab
Bronchoscopic, protected brush	Perineum
Culdocentesis	Prostatic or seminal fluid
Fallopian tube	Sputum, expectorated or induced
IUD (for Actinomyces sp.)	Stool or rectal swabs
Ovary	Throat
Placenta, via cesarean delivery	Tracheostomy aspirate
Sinus aspirate	Urethral
Surgery, tissue or swab	Urine, catheter or voided
Transtracheal aspirate	Vaginal or vulval
Urine, suprapubic aspirate	
Uterus, endometrial aspirate	

Discouraged Sources: Requests for cultures collected from inappropriate sources may or may not be processed due to the questionable microbial information that can be obtained by them. Refer to the table below.

DISCOURAGED SOURCES/SPECIMENS	
SPECIMEN TYPE	ALTERNATIVE OR COMMENT
Burns, wounds (swabs)	Submit tissue or aspirate
Colostomy discharge	Do not process
Decubiti (swabs)	Submit tissue or aspirate
Foley catheter tip	Do not process
Gangrenous lesion (swab)	Submit tissue or aspirate
Gastric aspirates of newborns	Do not process
Lochia	Do not process
Periodontal lesion (swab)	Submit tissue or aspirate
Perirectal abscess (swabs)	Submit tissue or aspirate
Varicose ulcer (swab)	Submit tissue or aspirate
Vomitus	Do not process