
 <b>OSPITAL NG PARAÑAQUE</b> 		Document Code: <b>OSPAR- ANCI- LAB-2022-12</b>
<b>ANCILLARY DIVISION APPROVAL MATRIX</b>  Policy Title: <b>POLICY AND PROCEDURE ON THE RECEIPT, PERFORMANCE AND REPORTING OF RESULTS</b>		Issue Date:
		Section / Department <b>LABORATORY SECTION</b>
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## General Policy and Procedure

### OBJECTIVES:

Layout the procedures for effective deliverance of quality services.

### COVERAGE:



This policy shall cover the Laboratory section, Nursing and the Medical Division.

### RESPONSIBILITIES:

- I. It shall be the responsibility of the Head of this Section to monitor the effectiveness of this policy; to ensure that all the results of examinations processed within or outside are validated and accurate; to employ methods that will enhance the quality of procedures and the release of results to the clientele's satisfaction; to report to the Hospital Director from time to time as required.
- II. It shall be the responsibility of the Heads of the Medical and Nursing Divisions to enforce all their staff to abide with the rules and guidelines incorporated into this policy; to enforce clearance of all patients in all clinical areas of the hospital.

### POLICY:

- I. This policy shall enhance the quality of standards of the routine procedures done within as they are recommended and universally accepted.
- II. This policy shall likewise ensure timeliness and accuracy of all results issued; to maintain all its equipment in their best conditions at all times contributing to the efficiency of this Section

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## GUIDELINES ON SPECIMEN RECEPTION, COLLECTION, PROCESSING AND SECURITY

### INTRODUCTION

The Quality of results released by any Laboratory is dependent on the pre-analytical phase which is mostly concerned with patient preparation, specimen collection and reception. Much emphasis is given on proper collection to ensure the accuracy of results released. This document shall discuss guidelines on patient preparation, specimen collection and handling, specimen reception and rejection and security of specimens inside the Laboratory.

### I. RECEIVING OF LABORATORY REQUESTS

#### RECEPTION AREA

- i. Receives and screens all requests submitted to the Laboratory. Records the requests in the appropriate logbook.
- ii. Requests must contain the following patient data:
  - a) Name of the patient including Middle name
  - b) Age
  - c) Sex
  - d) Birthday
  - e) Contact Number
  - f) Clinic or Walkin Patient's
  - g) Clinical Diagnosis



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## ANCILLARY DIVISION APPROVAL MATRIX

Policy Title:

### **POLICY AND PROCEDURE ON THE RECEIPT, PERFORMANCE AND REPORTING OF RESULTS**

Section / Department  
**LABORATORY SECTION**

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- h) Requesting Physician
  - i) Address
  - j) Occupation
  - k) Examination Requested
  - l) Time when specimen is to be collected
  - m) Special Precautions
  - n) If it is a STAT or routine examination
- iii. Issues appropriate specimen containers for various Laboratory examinations.
  - iv. Responsible for the initial screening on the appropriateness of submitted specimens.
  - v. Responsible for the delivery of specimens to the respective section for processing.
  - vi. Responsible for patient's instructions on tests requiring **patient preparation** prior to extraction.



## II. PATIENT PREPARATION

The Laboratory request contains instructions on the appropriate number of hours of fasting that is needed for certain examinations. However, the laboratory receptionist or Medical Technologist should still give verbal instructions to patients. He/she must ensure that the patient understands these instructions.

## III. SPECIMEN COLLECTION

### A. BLOOD



1. Only authorized personnel are allowed to take blood from patients.
2. Proper patient identification must be strictly observed. The universal identifier should be used. Name of Patient and Birthday.

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3. Any discrepancy in the data given by the patient and the request must be resolved prior to extraction.
4. In cases when the patient is incoherent, the relatives should identify the patient. When there is no relative on hand, the nurse-on-duty shall identify him.
5. For difficult extractions, Laboratory phlebotomists are allowed 2 or 3 trials. If still unsuccessful, advise the patient to rest for a while or to come back anytime.
6. Newborns or babies (months old) are extracted by the Physician's on duty.
7. The test tube should contain the following:
  - a. Patient's complete name
  - b. Birthday
  - c. Date and time of extraction
  - d. Phlebotomist name
8. When a patient or relative refuses extraction, the phlebotomist should let the patient/relative sign at the back of the request. For clinic patients, the Physician should be informed of the refusal.
9. For more detailed information on blood collection, please refer to the General SOP of the department.

## B. URINE

1. The Laboratory Receptionist shall give the appropriate specimen container to the patient.
2. Patients are instructed to label the container prior to collection with his complete name.
3. Patients should be advised to clean their hands before and after collection.
4. The Receptionist shall then instruct the patient that when he starts to urinate, he should not immediately collect it but start collection during the middle part of the urine stream.

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- The patient should be advised to submit the specimen immediately after collection.



### C. STOOL

- The Laboratory Receptionist shall give the appropriate specimen container to the patient.
- Patients are instructed to label the container prior to collection with his complete name.
- Patients should be advised to clean their hands before and after collection.
- The patient is advised to collect a pea-size amount of stool for examination.
- The patient should be advised to submit the specimen immediately after collection.

Note: For more detailed information on specimen collection please refer to the individual section's SOP and technical manual.

### IV. CRITERIA FOR REJECTION OF SPECIMENS

- Incomplete patient data on the request
- Discrepancy between the patient data and specimen label
- Specimens without labels or with improper labels
- Specimens with insufficient quantity
- Blood specimens sent are in an anti coagulated tube with clot/ hemolyzed.
- Specimens in inappropriate containers

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**G.** Specimens with leak

## **V. SPECIMEN PROCESSING**

Specimens shall be processed for examination in accordance with the technical guidelines of each section. Please refer to the individual section's technical manual.

## **VI. SPECIMEN HANDLING**

- A.** Appropriate containers should be used when transporting specimens from the wards to the Laboratory and from the Laboratory reception area to the individual sections.
- B.** The phlebotomist should use the assigned warding box when transporting blood collected from patients at the ward to the various sections of the Laboratory.
- C.** The receptionist must ensure that specimens received in bottles are properly closed. She should use the assigned receptacle when bringing the specimens to the different sections of the laboratory.
- D.** When moving tubes from one area to another, the use of a test tube rack should strictly be followed.
- E.** When transporting specimens to reference laboratories or for outsourced tests, specimens should be placed in individual specimen bags.
- F.** The required temperature must be observed during transport.

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- G.** If the patient's relative is bringing the specimen to an outside lab, appropriate instruction must be given.
- H.** The safety of the one transporting the specimen and the one receiving the specimen must always be prioritized.



## **VII. SECURITY OF SPECIMENS**

As per stated in the Bio safety and Bio security Policy of the Department the following measures are implemented to ensure the security of specimens under the care of the Laboratory:

- A.** Only authorized personnel should enter the laboratory working area. Non-laboratory personnel can only enter the said area with a permit from authorized personnel.
- B.** Specimens should be processed and examined only in designated sections or areas.
- C.** There must be proper documentation for specimens brought out of the Laboratory for referral.
- D.** No specimen shall be released to unauthorized personnel.

### **PROCEDURE:**

#### **A. REQUEST FOR ROUTINE EXAMINATION**

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### **Admitted Patients**

- a. All requests **MUST** be signed by the requesting doctor and/or Nurse in compliance to written or verbal orders by the same doctor. This shall contain the following data legibly written: Name of patient, Birth date, Area of request, Age/Sex, Specific examination/s and Clinical diagnosis. If and when their quest is for a later day, date and time **MUST** be indicated.
- b. All repeat examinations **MUST** bear the word “REPEAT” to avoid confusion and duplication.
- c. Each different test **MUST** be written in separate requests.
- d. All specimens **MUST** be properly labeled with the patient’s name prior to submission with the fully accomplished request. These specimens **MUST** be submitted by the Nursing staff not later than one (1) hour from the time of collection.
- e. All requests for routine examinations to be done the following day **MUST** be submitted to this section not later than 3 PM of the same day of doctor’s instruction.
- f. All issuances and releases shall be recorded into separate logbook.



### **Out-Patient**

- a. All requests shall fulfill the same requirements as that of admitted ones.
- b. Time for collection shall be the same but the specimens shall be submitted to this area not later than 10 AM to include urine and stool. However, stool specimens may be given some allowance until 3 PM.
- c. Fasting Serum chemistries tests shall have cut-off time for extraction of not later than 9 AM.



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- d. Results of tests done before 11 AM can be claimed at 4 PM . However, those tests processed beyond cut-off maybe released the following day to the patient.
- e. All issuances and releases shall be recorded as those of the previous.
- f. Referral shall be made to the medical social service or Malasakit Center in cases of limited capacities to pay



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## B. REQUESTS FOR STAT EXAMINATIONS

- Phoned in requests by the Nurse on duty may be accepted by this section from the ER and in cases of admitted patients.
- Staff shall proceed to do extraction at the called in area and shall secure accomplished requests prior to processing. All official results of admitted cases shall be released to the staff and those at the ER and OPD to their relatives as soon as available.
- All tests labeled as such shall be acted upon in the order of their arrival at this section and release procedures shall be the same.
- Referral shall be made by this section to the medical social service or Malasakit Center in cases of limited capacities to

## C. REQUESTS FOR HISTOPATHOLOGY EXAMINATIONS

- All surgical specimens must be properly labeled on the specimen bottle with the fixative solution. Requests **MUST** be properly accomplished to avoid confusion and **incidences** of interchange. Any specimen improperly labeled or requests that are improperly filled up shall be **REJECTED** by the section.
- All specimens **MUST** be submitted by a hospital staff together with the patient and/or relative at all times.
- All payments shall be done at the Cashier Section. Charges are made according to the size of the specimen.
- Results shall be released within 14 working days from the accession date of specimen except for difficult cases that need to be passed around.
- Results are made in triplicate copies. The first is for the patient's copy, the second to the medical records section and the third is left at this section for documentation and future reference.

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**D. REQUEST FOR SEND OUT EXAMINATION**

- a. All requests **MUST** be legibly written and examinations specified.
- b. All tests **MUST** be paid in full prior to phlebotomy or collection of any specimen.
- c. Tests shall be done **ONLY** in accredited and approved laboratories by the **HEAD** of this section and the **HOSPITAL DIRECTOR**.
- d. Release of results of hematology examinations shall be not later than two (2) working days; miscellaneous examinations shall be released within seven (7) working days; special blood chemistry examinations shall also be released not later than the two (2) working days..
- e. All results shall be documented and recorded in a separate logbook for future reference pay.

