	QuXAT Quality Management System		Document No:	QUXAT/SOP/10
	Title	Sample Rejection	Page No:	Page 1 of 2

## 1. PURPOSE

1.1. To ensure effective samples rejection, if necessary, as per policy of the laboratory

## 2. SCOPE

2.1. This procedure is applicable to the sample collection facility in the laboratory

## 3. REFERENCES

3.1. Quality Manual

## 4. RESPONSIBILITY

4.1. Quality Manager

4.2. Sample Collection Technician

4.3. Laboratory Director

## 5. PROCEDURE

5.1. The following criteria are used to consider a sample is unacceptable and will be rejected, as it may lead to erroneous results. The laboratory staff will notify the clinician who has requested the tests regarding the rejection of sample and request for a fresh sample

5.1.1. Incompletely filled or no specimen identity on the request form

5.1.2. Specimen without accompanying request form

5.1.3. Inappropriate specimen

5.1.4. Specimen without proper label/ inadequate labelling

5.1.5. Discrepancy in patient's identity between the request form and specimen label

5.1.6. Inappropriate specimen containers

5.1.7. Inappropriate volume of plasma/blood (Less than 5 ml of whole blood)

5.1.8. Specimens not meeting the stability, storage, cold chain requirements

5.1.9. When cold chain is not maintained at between 2-8 degree centigrade

5.1.10. Specimen is hemolyzed, lipemic or contaminated

5.1.11. Specimens in which there has been a significant time delay between specimen collection and specimen receipt (more than 24 hours), for which a proper transport tube/medium was not used


5.1.12. Requisitions which have been contaminated with a liquid specimen

## 6. RECORDS

6.1. The following records are maintained in the sample collection area in the format mentioned below, for the period defined

S. No	Record	Responsibility	Retention Period
1	Test Requisition Forms	Technician	1 Year
2	Sample Collection Register	Technician	1 Year

Issue No: 1	Issue Date: 1.1.2024	Amend No: 00	Amend Date:	Copy No: 01
Prepared/Issued by:	Quality Manager	Approved by	Laboratory Director	

	QuXAT Quality Management System		Document No:	QUXAT/SOP/10
	Title	Sample Rejection	Page No:	Page 2 of 2

S. No	Record	Responsibility	Review Period
3	Sample Storage Register	Technician	1 Year
4	Sample Rejection Register	Technician	1 Year

Issue No: 1	Issue Date: 1.1.2024	Amend No: 00	Amend Date:	Copy No: 01
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