FOUNDATION HEALTH PARTNERS

POLICY

TITLE: Lab - Specimen Collection, Labeling, and Transport		
Number: 12565		**Version: 14**
Type: Administrative	**Policy Editor: Lab Director**	
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Facility: FHP		
Population (Define): All Employees		
Replaces:		
Approved by: Lab Director		

TITLE: *Lab – Specimen Collection, Labeling, and Transport*

I. Purpose/ Expected Outcome:

A. To identify the appropriate process for collection, identification and transport of laboratory specimen(s).

II. Definitions:

A. N/A

III. Policy:

A. Patient identification must be maintained using 2 identifiers throughout the collection and labeling processes.
B. Laboratory specimens must be labeled at the bedside in the presence of the patient at time of collection using a minimum of 2 identifiers.
C. Specimens submitted to Laboratory incorrectly labeled may be rejected based on established Laboratory policies and practices.

IV. Procedure/ Interventions:

A. Collection
   1. All patients must be properly identified prior to specimen collection.
   2. The laboratory, or other authorized staff, may collect specimens for proper submission to the laboratory for processing and testing. Specimens must be collected according to the instructions using proper safety precautions and specimen integrity procedures to insure maximum safety and quality results for the patient and staff.
      a. For information on specimen collection requirements, refer to "Laboratory Specimen Collection" policy manual on the intranet or call the laboratory at X5640.
      b. All blood and body fluid collection requires Universal Precautions for the safety of the patient and staff members (see policy on Universal Precautions).
      c. Do not "pre-label" specimen containers

B. Labeling
   1. All primary specimen containers housing specimens to be submitted to the laboratory for testing must be labeled at the bedside in the presence of the patient at time of collection and include the following information: Patient name (first and last); date of collection; time of collection; patient medical record number or date of birth; *specimen collected* (if other than blood) and initials of person collecting/submitting specimen.

Note: For specimens in which origin is critical to analysis (i.e. cultures for Microbiology, tissues/body fluids of surgical and cytology specimens), the site of origin and laterality (if appropriate) must be indicated on the specimen container or the requisition.

a. For Inpatients and Outpatients: the specimen container is labeled with appropriate patient information obtained directly from the patient armband and handwritten on the container. If an alternative means of identification of the specimen container is used such as a pre-printed label, the label information is re-verified just before the specimen container is labeled using two identifiers obtained directly from the patient armband.
   i. Specimens will not be collected from patients without legible arm band (exception below)
   ii. If a patient is not arm banded (newborn, burn patient, or other physical reasons excluding arm band), identification by attending nurse/physician is required without exception.

b. For Outpatients without an armband: the specimen container is labeled with appropriate patient information obtained directly from the patient and handwritten on the container. If an alternative means of identification of the specimen container is used such as a pre-printed label, the label information is re-verified just before the specimen container is labeled using two identifiers obtained directly from the patient.
   i. Outpatients without arm bands are asked active questions to tell the specimen collector their name and date of birth, etc., in order to establish positive identification.
   ii. All new admits to Denali Center will wear arm bands for the first 30 days.
   iii. Denali Center resident photographs can be used as an identifier.
   iv. See Denali Center Policy: Positive Resident identification for Denali Center.

c. Specimens for Blood Bank require special arm banding in addition to the standard hospital arm band. Refer to the Blood Bank Specimen Requirements & Collection for each ordered test for specific requirements and special arm banding procedures.

d. For Multiple Specimens: open only one specimen container at a time and complete the identification process prior to obtaining additional specimens from other locations.

e. Mislabeled and Unlabeled Specimens: In the interest of patient safety and quality of patient care, mislabeled specimens will not be processed by the laboratory. The submitting department of a mislabeled specimen will be notified by lab and advised to recollect the specimen. Time critical specimens or specimens considered irretrievable/irreplaceable may be processed at the request of the ordering physician (refer to Incompletely or Incorrectly Labeled Specimens Policy).

C. Transport
   1. Specimens must be collected properly, labeled and transported to the laboratory in sealed plastic bags or a container providing barrier protection for the specimen contained.
   2. Any needles used in collection must be removed by the person collecting the specimen. NO SPECIMENS will be accepted in the laboratory with a needle attached.
   3. Specimens submitted without proper identification and safety precautions will not be accepted/processed by the laboratory.

V. Procedural Documentation:

A. N/A

VI. Additional Information:

A. N/A

VII. References:

A. *Standards for Blood Banks and Transfusion Services*, 30th Edition, AABB, Bethesda, MD, 2016.
B. *42 CFR 493.1242 a1, a2, a3* by the U.S. Department of Health and Human Services.
C. *The Joint Commission, Patient Safety Goals. NPSG.01.01.01, 2016.*

D. *CAP Accreditation Program Common Checklist*, August 2016.

VIII. Other Related Policies/ Procedures:

A. Policy LAB01- Blood Bank Specimen Requirements and Collection for Potential Blood Use

IX. Keywords and Keyword Phrases:

A. Lab Specimen
B. Lab processing and testing
C. Specimen collection
D. Labeling
E. Patient Identification
F. Transport
G. Nursing

X. Appendix:

A. N/A