



VETERANS ADMINISTRATION MARYLAND HEALTH CARE SYSTEM
BALTIMORE DIVISION
10 NORTH GREENE STREET
BALTIMORE, MD 21201

GEN00008.2

PATHOLOGY & LABORATORY MEDICINE SERVICE

Laboratory Requisition and Specimen Policy version 2 General Procedure # GEN00008

Effective Date: January 16, 2008

Purpose:

In order to positively identify samples, all accessioned specimens have a computer label which list patient name, social security number, accession number, patient location, date, time, and specimen type. Handwritten labels are not acceptable (only collector's name, date & time may be hand written).

Required Information on the Specimen Label:

Patient's full name and full Social Security Number
Collection date & time (Blood Bank, blood cultures, and timed specimens)
Collector's signature (Blood Bank only). Initials only accepted for blood cultures.

Required Information on the Requisition Form (computer or paper request form):

Patient's full name and full Social Security Number
Physician's Name and/or Pharmacy number (must be legible)
Specimen's Collection Date and Time (if applicable)
Test(s) requested
Specimen source
Collection date & time on SF518 (Blood Bank only)
Collector's signature (Blood Bank only). Initials only accepted from phlebotomists.

Note: The laboratory will process laboratory tests only at the request of authorized VAMHCS personnel.

Process for handling inadequate or conflicting information on the specimens and/or requisition forms (these criteria may not apply to Blood Bank and Anatomical Pathology Sections):

1. Call the physician/nurse immediately. Explain problems with the specimen or requisition form.
2. Ask them to come to the specific lab (give room number) to make corrections if necessary.



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LABORATORY PERSONNEL CANNOT MAKE CORRECTIONS. It is required that the specimen or requisition forms with missing and/or conflicting information on name or SSN **BE IDENTIFIED AND CORRECTED BY THE PERSON COLLECTING THE SPECIMEN.** Minor misspelling of the name on the specimen or on the accompanying forms.

4. Accept and process specimen if it is correctly identified by the collector.
5. If the information on name or social security number of patient is wrong in the computer, contact the Laboratory ADP Coordinator for clarification. Process the specimen but **do not release results** until the information in the computer is corrected.
6. Reject uncorrected specimens. Accession the specimen and note in the comments the reason it was rejected.
7. Do not reject "OR" specimens, CODE BLUE specimens, body fluids (other than random urine), tissue samples, and specimens difficult to collect, and outreach specimens. Call the ward to correct the conflicting information. If the ward is unable to correct the information immediately process the specimens but **DO NOT RELEASE THE RESULTS. Contact pathologist on call for verification.**
8. Color coded bags are used to facilitate location in case sample is completely unidentified.

Rejection based on sample problems:

1. Specimen leakage or spill resulting in contamination of the container/request slip.
2. Specimen unsatisfactory for the requested procedure (no preservative, not on ice, wrong tube, clotted, etc.)
3. Quantity of the specimen not sufficient for the requested procedure.

Note: Refer to the section's policy on what to do on interfering substances (i.e., hemolysis, icteric, lipemic, etc.)

Disposition of Unsatisfactory Specimens:

1. All rejected specimens should be given an accession number.
2. The ward or requesting physician is informed by phone of the reason for rejection, so that they can take immediate corrective action. The reason for the rejection is then entered in the computer along with the name of the physician or nurse notified.
3. Rejected specimens are saved until the end of the next routine workday before disposal.
4. It is important that the telephone notification be conducted with utmost courtesy. If the requesting physician objects to the specimen rejection, he/she should be referred to the Laboratory Pathologist for consultation.

Documentation:

Document any pertaining information in the section's Problem/Rejection Log and/or any conversation with provider under specimen comments in the computer system.

All mislabeled specimens should be documented in the Patient Identification Labeling Errors Log located in section of the log. Only one incident per lab section is necessary. For further information please refer to VAMHCS' SOP "Laboratory Specimen Labeling Policy" 512-113/PL-009.



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Attachments:

- A. Patient Identification Labeling Errors Log
- B. Color Coded Bags Table

References:

- 1. CAP General Checklist, Northfield IL, 2007
- 2. VAMHCS Laboratory Labeling Policy 512-113/PL-009



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Attachment A

Maryland VA Health Care System- Baltimore Campus
 Pathology and Laboratory Medicine Service

Doc.512-113/PL-009

PATIENT IDENTIFICATION LABELING ERRORS

Date & Time	Incident Code	Bag Color	Name or Initials of Collector (time out label or specimen label)	Specific Location	Tech Initials	Complete Description, Notification for Resolution (Use as many lines as necessary)

Incident Code Key

revised 11/15/2016

#1 mislabeled

#2 unlabeled

#3 missing 2nd identifier

#4 incomplete info (ex.SF518)

#5 illegible or handwritten label









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Incident	Description	Example(s)
1 - Mislabeled	1A The patient identified on the specimen label is the WRONG NAME	Patient name on label is incorrect
	1B 2 contradictory labels on 1 specimen	Specimen arrives with 2 labels of which 1 label specifies patient "A" and the second label identifies patient "B".
	1C The patient identified on the specimen label does not match the Order number or the requisition (order sheet).	Patient name 'A' on label vs. patient name 'B' on Order or the BB requisition.
	1D Incorrect specimen type submitted for the indicated test.	A stool specimen arrives in the lab with a label and order indicating that the specimen should have been urine; or Red top tube is submitted for a test requiring Lavender top.
	1E Blood Bank determines ABO on new specimen differs from patient history.	Patient record indicates type A blood, lab result shows specimen to be type O.
2 - Unlabeled	2 A specimen received in the laboratory has NO labels	Test tube contains blood, but a label is not provided.
3 - Handwritten or Requisition w/o 2 patient identifiers	3A Specimen label is Hand-written	Specimen arrives with a handwritten label.
	3B Requisition (order sheet) does not include 2 patient identifiers.	BB requisition has the patient name but no other unique identifier is provided.
4 - Incomplete specimen Information	4A Specimen label has 2 patient identifiers but add'l info required by the laboratory is missing.	The date/time of blood draw or specimen collection, or required clinical info is missing from the label or requisition.
	4B Additional info is incorrect	BB or AP paperwork has incorrect clinical information.
5 - Illegible specimen label	A specimen label that has illegible patient identifiers that cannot be read electronically or manually.	Handwritten label is illegible or print quality on machine generated label is of such poor quality that label cannot be read with confidence.








Attachment B

Biohazard Color Coded Bags for specimen transport to the laboratory (Baltimore)		
Color Code	Location:	Transport Bag
Solid Purple	ED	
Green bag	3Med (3A)	
Green Zipper Bag	3Med (3B)	
Orange bag	SICU	
Orange Zipper Bag	5B	
Red bag	LR/CLC LR2	



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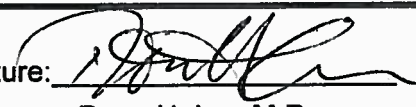
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Red Zipper Bag	LR/CLC LR1	
Yellow bag	OR	
Yellow Zipper bag	SDS	
Blue bag	CICU	
Blue Zipper bag	MICU	



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DATE ADOPTED	Author of Procedure/Policy	Chief of Service
1/16/2008	Paul D. Gruver, MT	Signature:  Dong H. Lee M.D.

Policy/Procedure(s) Retired:		Date retired:
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Review Date	Version Number	Signature of reviewer

REVISION HISTORY

Date revised	Revision #	Changes made	Signature
10/10/17	2	Added attachments A and B.	