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Document Contact	Kimberly Cole: Spec, Operations
Area	Laboratory- Operations
Applicability	Dearborn, Taylor, Trenton, Wayne

Laboratory Specimen Acceptance and Rejection Criteria - Outreach

Document Type: Procedure

I. PURPOSE AND OBJECTIVE:

Specimens accepted for testing are required to comply with criteria for acceptance and rejection as described in this document. In addition, tests will be performed only when ordered by a licensed physician or allowed under state law.

II. PROCEDURE:

Criteria for acceptance and rejection for LAB SPECIMENS:

- A. Refer to the Laboratory Test Directory (LTD) for the following:
 1. Patient preparation
 2. Specimen collection
 3. Specimen storage, stability, and preservation
 4. Specimen transportation requirements
 5. Specimen processing, acceptability and rejection criteria
 6. Specimen referral
- B. **Identification**
 1. Specimens should be properly labeled when received.
 2. **Specimen containers should be clearly labeled with at least two patient-specific identifiers** such as the full patient name and date of birth. Other identifiers may be social security number or a practice specific unique identifier (requisition #, practice

ID or accession#). In situations, where warranted, the body site should be specified on the specimen container and test order.

3. System generated labels may have truncated names due to system limitations. Other identifiers must be present and match including Date of Birth (DOB), Medical Record number (MRN), and requisition number.
4. Any issues with specimen identification are handled in accordance with the following:

- a. **Unlabeled Specimens (Also referred to as No Identification (NID) specimens) or Specimen Containers without at least two patient-specific identifiers**

- i. Unlabeled blood and urine specimens **or** specimens without at least two patient-specific identifiers will not be accepted.
 - a. Create an order based on the patient information and tests on the requisition.
 - b. Order the appropriate Rainbow Tube type and Presumptive Testing as indicated in the [Presumptive/Rainbow Procedure](#).
 - c. Print the Contact Serial Number (CSN) label so that the requisition can be imaged and available for Client Services to review.
 - d. Once order is completed and label printed create a Follow-Up Task for Client Services to resolve.
 - e. Client Services resolves the follow up and orders appropriate testing if needed.
- ii. Specimens that are not readily recollected including all body fluid, tissue, and cytology specimens must be reviewed by a manager, tech in charge, or pathologist before rejection.

- b. **Labeling Discrepancies (Also referred to as Requisition/Specimen Mismatch (RSM) specimens)**

For issues where the name on requisition and specimen do not match.

- i. Create an order based on the patient information on the requisition and order the appropriate Presumptive Testing as indicated in the [Specimen Processing Laboratory Presumptive and Rainbow Testing](#) procedure.
- ii. Add a Presumptive Flag.
- iii. If the specimen/test doesn't meet the presumptive criteria:
 - a. Create a rainbow test
 - b. Add a Follow-Up Task
 - c. Place the specimen in a bag with a copy of the requisition in the designated problem holding location depending on storage requirements i.e., room

temperature or refrigerated until Client Services resolves the follow up.

- d. Once order is completed and label printed create a Follow-Up Task for Client Services to resolve
- iv. Print the CSN label so that the requisition can be imaged and available for Client Services to review.
- v. Testing will be performed and results held or specimens preserved properly (frozen serum for reference testing when required, serum/plasma removed from cells to avoid specimen degradation.) until Client Services resolves.
 - a. Each sub-department will maintain a Problem Specimen Folder which will contain results on the above listed discrepant specimens.
 - b. Specimens for areas other than Histology or Cytology will be stored in the designated problem holding rack in the refrigerator. Histology and Cytology specimens will be delivered and stored in the appropriate department. Microbiology specimens will be taken directly to Microbiology.
 - c. If a specimen does not meet minimum acceptable criteria outlined in the above policy the physician office or Patient Service Center will be notified the next morning (Monday - Friday). If the test is STAT, a Client Service Representative will notify the Patient Service center or physician office the same day.
 - d. The physician office will be contacted and requested to submit a new specimen.
 - e. If the testing requested is on a specimen which is not easily recollected a Patient Identification Discrepancy Form with an affidavit stating the nature of the problem will be faxed for the physician's /clinician's signature to proceed with testing. Only the physician's or licensed caregiver's signature is acceptable.
 - f. Once the signed Patient Identification Discrepancy Form is returned to Client Services, the Follow-Up or Presumptive Flag will be resolved.

C. Collection Container

1. Specimens must be submitted in a clean or sterile container, as specified in the procedure.
2. Specimens should be submitted in the appropriate container. Specimens that are submitted in an inappropriate container should be tested after confirming with a technologist, manager, supervisor, tech specialist or pathologist that it is reasonable

to perform test.

D. Specimen Volume

1. Specimen volume should be adequate for the test ordered.
2. The quantity submitted should be adequate for the test ordered. If the volume submitted is questionable, the specimen must be assessed immediately by a technologist, manager, supervisor, or pathologist. If it is determined that the volume is insufficient for testing, the specimen must be rejected.

E. Temperature

1. Specimens must be submitted at the temperature specified in the test procedure or Specimen Stability List.
2. Specimens which have not been stored or transported at the appropriate temperature are not tested.

F. Preservatives

1. Specimens must be properly preserved.
2. Specimens which have not been properly preserved ordinarily are not tested. Check with technologist, tech specialist, manager or pathologist to determine possible alternative preservatives.

G. Timeliness

1. Specimens must be submitted within the time frame specified in the Specimen Stability List.
2. Specimens which have not been submitted within the time frame specified should not be tested.

H. Blood specimens

1. Hemolysis

- a. Specimens must be free of hemolysis.
- b. Hemolyzed samples should not be assayed if they are unacceptable according to the Unacceptable Specimen Protocol.

2. Lipemia

- a. Specimens should be free of obvious lipemia.
- b. When possible, lipemic specimens should be prepared using the clarification / ultracentrifuge procedures before assay. The results should be appended with a message that the specimen was clarified by ultracentrifugation. In the case of a CBC, the HGB, MCH, and MCHC should be corrected for lipemia per the procedure and the results noted that the calculation was performed.

3. Anticoagulants

- a. Anticoagulated specimens which contain clots are not acceptable.

- b. The blood volume must be within the limits specified by the manufacturer.

I. Urinalysis

1. Specimens can be stored at room temperature for up to 2 hours.
2. If the specimen cannot be tested within 2 hours, transfer urine to urine transport preservative tube or specimen may be refrigerated for up to 24 hours.
3. If the specimen is not submitted within the appropriate time frame, the test will not be performed. A new specimen should be requested.

J. Culture specimens

1. Swabs for aerobic non-Gonorrhea Culture (GC) bacterial culture

- a. Specimens must be submitted in sterile transport media at room temperature within 48 hours of collection.

2. Swabs for anaerobic culture

- a. Specimens must be submitted in Ames gel media at room temperature within 24 hours of collection.

K. Swabs or transport media for GC from any body site

Specimens must be submitted in sterile transport media at room temperature within 24 hours.

L. Bone Marrow and Body Fluid (not cerebral spinal fluid (CSF))

Specimens should be submitted unpreserved, in a sterile container within 24 hours.

M. Urine - Routine Culture

Specimens should be submitted in sterile urine transport media containing boric acid within 48 hours.

N. Urine - AFB, Virus, Parasites

Specimen must be submitted in a sterile container and refrigerated within 24 hours.

O. Sputum and Other Lower Respiratory Specimens

1. Specimens should be submitted unpreserved and in a sterile container at room temperature within two hours of the time of collection.
2. If the specimen will not be tested within two hours, it can be refrigerated for up to 24 hours.
3. Sputum specimens will be rejected if the gram stain shows a predominance of squamous epithelial cells and the specimen lacks visible areas of purulence. Any situation in which a specimen is suboptimal or is rejected must be brought to the attention of the Microbiology Manager or technical specialist.

P. Tissue Specimens for Culture

1. Specimens must be submitted unpreserved at room temperature within 4 hours of the time of collection.
2. If the specimen is more than 4 hours old, it should be covered with sterile saline and refrigerated and submitted within 24 hours.
3. **DO NOT USE FORMALIN FOR PRESERVATION.**

Q. Cerebral Spinal Fluid Specimens (CSF)

Specimens must be submitted unpreserved in a sterile container at room temperature within a half hour of the time of collection.

R. Herpes and Chlamydia Cultures

Swabs must be in an appropriate transport, refrigerated after collection and submitted within 24 hours of collection.

S. Hair, Nail and Skin for Fungus Exam

Specimens must be submitted in a clean, dry container at room temperature within 2 days of collection.

T. Stool

1. Specimens for culture or parasite exam should be immediately preserved in appropriate transport media and submitted within 48 hours.
2. If a preservative is not available, specimens can be refrigerated for up to 24 hours.
3. Stool Specimens which are not acceptable for examination:
 - a. Specimens for parasite exam that appear to contain barium (chalky or large amounts of amorphous material on a wet prep) or mineral oil (oily appearance), an attempt should be made to determine if the patient has ingested mineral oil or has recently undergone an upper or lower gastrointestinal (GI) x-ray study. If this is the case, the exam should not be performed since these substances inhibit the excretion of parasites. A new specimen should be requested ten days after the ingestion of mineral oil or an upper or lower GI x-ray study. Note: These specimens will be accepted for culture, although the recovery rate of bacterial pathogens is greatly reduced.
 - b. Specimens submitted on a disposable diaper are not acceptable since these diapers contain germicidal and odor inhibiting substances that may distort the morphology of protozoan trophozoites. The parent should be provided with collection and transport materials and instructed to transfer fecal material into a proper preservative or container within fifteen minutes of passage.
 - c. Specimens submitted on a non-disposable diaper are not acceptable since it is very difficult to retrieve a specimen that has been allowed to absorb into the diaper. It is also an unacceptable hazard to personnel to handle these diapers, since it is impossible to determine which areas of the diaper are contaminated with pathogens after the stool has been allowed to absorb onto it. The parent should be provided with collection and transport material and instructed to transfer fecal material into a proper preservative or container within fifteen minutes of passage.

U. Arthropods for Identification

Specimens should be submitted in a clean, dry container at room temperature.

V. Unusual Microbiology Requests

Consult the Microbiology Department for acceptable specimen criteria for specimens with unusual requests such as anthrax, bartonella, bordetella, borellia, legionella, leprospira,

mycoplasma, pneumonia, pneumocystitis, and tularemia.

W. Tissue (Biopsy) Specimens

1. Specimens must be submitted at room temperature in 10% buffered formalin.
2. Patient name, specimen type, and physicians name and number must be clearly identified on the container.
3. The requisition should include patient name, birthdate, date of specimen and type of specimen.
4. Enough formalin to cover the specimen should be present. It is preferable that there be a formalin specimen volume ratio of 20:1.
5. If the specimen is submitted in the wrong fixative, the specimen will be refixed in formalin and comment added to the report.
6. Unlabeled or improperly labeled specimens will be held sent back to the physician's office with the Unlabeled Specimen Form. If the form is completed and returned with the properly labeled specimen, the specimen will be processed.
7. If the information on the requisition is incomplete, the specimen is to be processed and the physician's office is to be contacted to obtain the required information.

X. Cytology Specimens

1. Cytology specimens are submitted either spread and fixed on one or more slides; or are submitted fresh without preservatives.
 - a. Fresh specimens must have the patient's name, birthdate, specimen date, specimen source and physician's name and number on the requisition, along with relevant clinical information.
 - b. Specimens submitted on glass slides must have the patient's name on the frosted end of the slide; include name, birthdate, specimen date and specimen source on the requisition, along with relevant clinical information.
2. Unlabeled or improperly labeled specimens will be held until the ordering physician can be contacted.
 - a. Unlabeled specimens will be sent back to the physician's office with the Unlabeled Cytology Specimen Form. If the form is completed and returned with the labeled specimen, the specimen will be processed.
 - b. If the information on the requisition is incomplete, the specimen is to be processed and the physician's office is to be contacted to obtain the required information.

Y. Avoiding Recollection and Lost Testing

In order to minimize the need for recollection, the following specimens should be tested and results held until discrepancies can be resolved:

1. CSF
2. Body Fluids

3. Tissue (Non-preserved)
4. CBC (Lavender Tube) (mislabeled only)
5. Coagulation Studies (PT, APTT) (mislabeled only)
6. Blood Cultures
7. Cultures
8. "STAT" Orders

III. REFERENCE:

[Lab Test Directory](#)

Attachments

[Patient Identification Discrepancy Form](#)

Approval Signatures

Step Description	Approver	Date
Medical Directors	Muhammad Arshad: Chief, Pathology	9/15/2023
Medical Directors	Jeremy Powers: Chief, Pathology	9/14/2023
Policy and Forms Steering Committee Approval (if needed)	Kimberly Cole: Spec, Operations	9/12/2023
Site Laboratory Leaders	Kimberly Geck: Dir, Lab Operations B	9/12/2023
	Kimberly Cole: Spec, Operations	9/12/2023