Wake Forest Baptist Medical Center	**CP 15** **Spin Procedures**	**Dept:**	**324317** **Central Processing**
		Effective Date:	**10/2000**
		Revised Date:	**9/16/19**
		Contact:	**Julie H Simmons**
CLIA Medical Director Signature: See paper copy in the Central Processing procedure manual		**Approved Date:**	

1. **General Procedure Statement:** To obtain a standard process for the Spin Rotation

   A. **Purpose:** To provide guidelines for Central Processing staff to process patient samples in a consistent manner in order to produce a quality specimen for testing

   B. **Responsible Department/Scope:**
   - **i.** Procedure owner/Implementer: Central Processing Lab
   - **ii.** Procedure prepared by: Julie H Simmons
   - iii. Who performs procedure: Central Processing staff

2. Procedure:

1. The person in spin should rotate through the accessioning area to pick up pre-sorted samples in racks. The spin person has been provided a cart in order to carry the workload and distribute to the various lab sections.

a. Review tests to be performed
b. Note any special handling requirements. Some samples may not require centrifugation. (Refer to the charts for details)

2. Centrifuge Samples
   a. Routine Samples:
      - Placed in a centrifuge carrier for the large centrifuges
      - Place cover on carrier to minimize aerosols in the event of leakage or breakage of any tubes
      - Spin all fluids (including urines) that are to be tested in Chemistry
   b. STAT samples
      - Spin using designated centrifuges
   c. Spin samples at 5000 rpm for 5 minutes with the lid locked
   d. Remove samples when centrifuge comes to a complete stop and the lid can be opened.

3. Hematology will check samples for clots

4. Aliquot Samples.
   a. Initial aliquot verifying ID of primary tube with aliquot label as this is the last opportunity to assure the ID of the sample with the primary tube.

5. Distribute Samples:
   a. All STAT Samples should be placed in the front of the rack for the Automation line.
   b. Automation line Samples
      a. All Chemistry samples are racked on the Chemistry automation line with the exception of the tests listed in the spin.
      b. Baby samples, short samples and other samples should be placed after spinning in the designated Chemistry tray in Chemistry.
   c. Extra samples are ordered in LIS and placed on the automation line for tracking and storage except for 2-b above which will be tracked and assigned a storage manually.
   d. Tests that are not performed at WFBMC should be delivered to Send Out area. Chemistry personnel should be notified on 2nd, 3rd , weekends and holidays when sample is in send out. Chemistry personnel will direct CP personnel to perform any processing needed to the sample.

6. Urine samples:

Chemistry samples

a. the person accessioning a 24 hour urine is responsible for measuring the volume and recording it on requisition with their initials

Refer to Section g (Determining Total Volume of Urines) to determine volume.

b. Spin should pour off and label an aliquot off in a 10ml conical tube, labeled and placed in the extra rack in the spin refrigerator.

c. Acid, as a preservative for a 24hour urine collection should be added to only an orange acid resistant jug. Any collection that does not require preservative, use appropriate jug form the store room (item# 15-044407)

d. 24 hour urine jugs are not provided for WFUP clinics. Jugs are provided for inpatient locations and OPD clinics. Acid is provided to all locations.

e. An instruction sheet for collection 24 hour urine is provided with each jug that acid is added.

Urinalysis samples

a. Pour-up an aliquot in a conical centrifuge tube
b. Label tube with an LIS Barcode and deliver to urinalysis
c. Retain all ED urine samples and place in spin refrigerator

Microbiology samples

a. Tube staff should identify urine for culture only and deliver to microbiology immediately.
b. If other testes are ordered in addition to micro deliver to STAT container. Urine for cultures must be expedited as urine cultures must be set up within two hours of collection.
c. Accession should order the appropriate test and place barcode labels in the outer pocket of the bag and send to spin with a print screen or a paper order for the culture.
d. Spin staff will aliquot the tubes appropriate for testing and forward the remaining urine sample in the original container with requisition to micro.

7. Determining Total Volume of Urines

With a Matching container:

a. Choose a matching container from the containers available
b. Place the empty container on the scale. PRESS and HOLD the tare button until the scale reads "00". Return the empty container.
c. Place the patient container on the scale and record the Total volume on the document that came with it or record patient information on a blank sheet of paper and record volume if nothing came with urine.
   Note: 1 gram – 1 ml
d. Place document with information in the routine accession box.

With a Unique container:

a. PRESS and HOLD the tare button on the scale until it reads "0".
b. Place the patient container on the scale and record the total volume on the provided/or created document.
c. Label a urine collection cup with patient information and fill the cup from the 24 hour container.
d. Empty the 24 hour container down the sink and follow with water to completely cleanse the sink.
e. Weigh the empty 24 hour container.
f. Subtract the weight of the empty container from the total weight of the filled container. The result is the Total volume of urine.
g. Write the Total Volume on the document AND on the lid of the urine cup.
h. Place document with information in the routine accession box.

3. Review/Revision/Implementation:

All procedures must be reviewed at least every 2 years.

- All new procedures and procedures that have major revisions must be signed by the CLIA Laboratory Medical Director.

- All reviewed procedures and procedures with minor revisions can be signed by the designated section medical director.

4. Related Procedures: NA

5. References: NA

6. Attachments: NA

7. Revised/Reviewed Dates and Signatures:

Review/Revision Date: 3/2015 Signature: Tami Bradley

Review/Revision Date: 8/11/16 Signature: Jennifer Hausmann

Review/Revision Date: 12/6/18 Signature: Jennifer Hausmann

Review/Revision Date: _____ Signature: _____

Review/Revision Date: _____ Signature: _____

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