Wake Forest Baptist Medical Center	**CP 20 - Fluid Specimen Handling and Processing**	**Dept:**	324317
		Dept Name	Central Processing
		Effective Date:	8/7/2017
		Revised Date:	
Name & Title: CLIA Laboratory Medical Director		**Contact:**	Julie H Simmons
Signature:		**Approved Date:**	

I. General Procedure Statement:

A. Purpose: To provide laboratory testing personnel with guidelines for processing fluid samples sent to the laboratory for testing.

B. Responsible Department/Scope:

i. Procedure owner/Implementer: Julie H. Simmons
ii. Procedure prepared by: Julie H. Simmons
iii. Who performs procedure: Department staff/management

C. Definitions:

Possible Types of Body Fluids:
Body Fluid – Peritoneal, Pleural, Ascites, Pericardial, etc.
Bronchial Alveolar Lavage (BAL)
Cerebral Spinal Fluid (CSF)
Synovial Fluid

D. Sections:

I. Specimen Orders (Accession rotation)
II. Processing the Specimen (SPIN rotation)

E. Protocols:

1.0 Fluid specimens will be delivered to the laboratory.
2.0 Fluid specimens should be labeled appropriately with two unique identifiers.
3.0 Fluid specimens that come down as a 'Freeze and Hold' will be electronically located in Beaker.
4.0 The 'Freeze and Hold' specimens will be frozen and kept for a minimum of 30 days.
5.0 Extra fluid specimens received and created as 'Extra' by Central Processing will be placed in the rack in the refrigerator for approximately a week.

2. Procedure: I: Fluid Specimen Orders (Accession Rotation)

Chemical Risk Assessment: Low
Biological Risk Assessment: Moderate
Protective Equipment: Gloves, Lab coat
Supplies: N/A
Reagents: N/A
Equipment: N/A
Specimen Requirements: Properly labeled

STEPS	INSTRUCTIONS	CHANGE/ APPROVAL
1.0	**Verify the specimens are labeled appropriately with two unique identifiers.**	
2.0	**Determine the Fluid Specimen Type** **1.** Body Fluid – Peritoneal, Pleural, Ascites, Pericardial, etc. 2. Bronchial Alveolar Lavage (BAL) 3. Cerebral Spinal Fluid (CSF) 4. Synovial Fluid	
3.0	**Look up the patient's orders in Order Inquiry**	
4.0	**Select the "Current" tab to view orders**	
5.0	**Determine if Cytology has been ordered on the specimen.** 5.1 If Cytology is ordered and no requisition was sent with the specimen a. Select the Cytology order in Order Inquiry b. Click on the "Order Number" hyperlink at the bottom of the screen c. Scroll down to "Reprint Inpatient Order Requisition" d. Click on the hyperlink e. Right Click f. Select Print 5.2 Do NOT select Cytology orders and complete the Beaker collection process	
6.0	**Verify which clinical lab fluid orders are associated with the specimen** 6.1 If the same test has been ordered multiple times: a. Select the order and review the Comment section on the report at the bottom of the screen. b. Determine if the order is for your current specimen and/or if the patient has multiple fluid specimens. NOTE: If specimen is a CSF, match the correct order with the designated tube. 6.2 Review all Unlisted Lab orders for tests on the fluid.	

<table>
<tr><th>STEPS</th><th>INSTRUCTIONS</th><th>CHANGE/ APPROVAL</th></tr>
<tr><td>7.0</td><td>Perform the collection process in Beaker for all Beaker Clinical Lab orders that have not been accessioned.
Note: Already accessioned orders should not appear under the “Current” tab, but are viewable under “All Labs” tab

7.1 Select the fluid orders for the specimen
Chemistry, Hematology, Microbiology, & Sendouts
7.2 Click “Collect Specimens”
7.3 Click “Print Labels”
7.4 Enter the collection information
7.5 Close the Collection screen</td><td></td></tr>
<tr><td>8.0</td><td>Receive the Chemistry, Hematology, & Sendout samples by scanning the barcodes in the Receiving activity.</td><td></td></tr>
<tr><td>9.0</td><td>Highlight all received samples and enter a Lab Comment.

<table><tr><th>Cytology Orders Placed</th><th>NO Cytology Orders placed</th></tr><tr><td>Enter “Sample sent to Cytology”
• Smart phrase .cyto converts to “Sample sent to Cytology”</td><td>Enter “No Cytology Order”
• Smart phrase .nocyto converts to “No Cytology Order</td></tr></table></td><td></td></tr>
<tr><td>10.0</td><td>Determine if a ‘Freeze and Hold’ body fluid has been received.

10.1 Receive the ‘Freeze and Hold’ body fluid.
10.2 Open the Specimen Storage in Beaker.
10.3 Scan the label into the correct Fluid rack in Beaker.
10.4 Write the Beaker Fluid Rack location on the label, i.e. A1,A2, etc.
10.5 Place in storage or give to ‘Spin’ to place in rack in freezer.</td><td></td></tr>
<tr><td>11.0</td><td>Place all labels and requisitions in the biohazard bag with the specimen</td><td></td></tr>
<tr><td>12.0</td><td>Place samples for the Spin person to pick up</td><td></td></tr>
</table>

2. Procedure: II: Specimen Aliquoting and Distribution (SPIN Rotation)

Chemical Risk Assessment: Low
Biological Risk Assessment: High
Protective Equipment: Gloves, gown, Protective Shield

Supplies: N/A
Reagents: N/A
Equipment: Centrifuge
Specimen Requirements: Properly labeled

<table>
<tr><th>STEPS</th><th>INSTRUCTIONS</th><th>CHANGE/ APPROVAL</th></tr>
<tr><td>1.0</td><td>Determine if the fluid has been sufficiently aliquoted by the collecting location.

1.1 If sufficiently aliquoted, then deliver specimen, labels, and requisitions, as applicable, to the appropriate lab section for testing.
1.2 If not sufficiently aliquoted, then go to step 2.</td><td></td></tr>
<tr><td>2.0</td><td>If not sufficiently aliquoted by the collection location:

2.1Label the appropriate tube type for each section / test
<table>
<tr><th>Lab Section</th><th>Label</th><th>Minimum volume</th></tr>
<tr><td>Microbiology</td><td>Deliver labels with sample in the original container after aliquots for other sections have been removed using sterile technique</td><td></td></tr>
<tr><td>Chemistry</td><td>Label with Beaker label</td><td>Non-additive Chemistry Tube; 0.5ml</td></tr>
<tr><td>Hematology</td><td>Label with Beaker label</td><td>Non-additive Chemistry Tube; 0.5ml</td></tr>
<tr><td>Sendouts</td><td>Provide Sendouts with labels.</td><td>Sendouts will return labeled containers with minimum volume requirements.

NOTE: Give Extra body fluid “freeze” samples to Accession to scan into Beaker and placed into rack.</td></tr>
<tr><td>Cytology</td><td>Label with taglets containing patient name and MRN

Keep requisition with aliquot</td><td>Original container or sterile cup: 0.5ml, prefer as much as possible</td></tr>
</table>
Note: If insufficient volume for minimum volumes listed, testing priority by the Ordering Provider may be required. Work with the lab sections to determine if a smaller volume is acceptable.</td><td></td></tr>
</table>

<table>
<tr><th>STEPS</th><th>INSTRUCTIONS</th><th>CHANGE/ APPROVAL</th></tr>
<tr><td>3.0</td><td>Create aliquots for all testing under the biosafety cabinet using sterile technique.
<table>
<tr><th>Large volume fluids</th><th>Small volume fluids</th></tr>
<tr><td>a. Create an extra aliquot in sterile cup or non-additive chemistry tube
b. Label with the fluid type
c. Store in the extra rack or hold bin of the Spin refrigerator</td><td>a. Store the remaining volume in the extra rack or hold bin of the Spin refrigerator
• Exception: If the original container is sent to Micro, they will retain the remaining sample</td></tr>
</table></td><td></td></tr>
<tr><td>4.0</td><td>Initial the label of each aliquot you created</td><td></td></tr>
<tr><td>5.0</td><td>Deliver labeled aliquots, additional labels, and requisitions, as applicable, to the appropriate testing sections
Note: Cytology requisition must accompany Cytology aliquot</td><td></td></tr>
</table>

3. Review/Revised/implemented:

All procedures must be reviewed every two years.
All new procedures and procedures that have major revisions must be signed by the CLIA Director.
All reviewed procedures and procedures with minor revisions can be signed by the designated section medical director or designee.

4. Related Procedures: NA

5. References: NA

6. Attachments: NA

7. Revised/Reviewed Dates and Signatures:

See Document Change Control

Document Change Control			
Title: CP 20 Fluid Specimen Handling and Processing			
Previous title:			
Written date		Written by:	
Approved date		Approved by	
Approved date		Approved by	
Approved date		Approved by	
Approved date		Approved by	
Effective date in use	Prior to 8/2019	In use by	Refer to archive history

Revisions

Revised Date	By	MD Date	By	MD Date	By	MD Date	By	Effective Date	By
12/1/19	JHS								
Reviewed Date	By	Revisions: Updated to reflect using Beaker racks for electronic recording of storage of freeze and hold fluids instead of log sheets.							
1/3/2020	CF								
Revised Date	By	MD Date	By	MD Date	By	Review Date	By	Effective Date	By
Validate Date	By	Revisions:							
Revised Date	By	MD Date	By	MD Date	By	Review Date	By	Effective Date	By
Validate Date	By	Revisions:							
Revised Date	By	MD Date	By	MD Date	By	Review Date	By	Effective Date	By
Validate Date	By	Revisions:							

Locations		Out of Use: Date:		By	
		Reason			

Reviews: Record date/initials

Date	Initials	Date	Initials	Date	Initials	Date	Initials