Unlabeled-Mislabeled Specimen Procedure

Policy Statements 2
Procedure 2
Responsibility 3
Historical Record 4

Policy Statements

It is the policy of Children's Minnesota Laboratory to ensure patient safety and maintain the integrity of laboratory testing by strictly adhering to proper specimen labeling procedures. All specimens submitted for laboratory testing must be clearly and accurately labeled at the time of collection. Specimens that are mislabeled or unlabeled pose a significant risk for patient misidentification and erroneous results, and therefore will not be accepted for testing except under specific, documented circumstances.

Procedure

A. Rejection of Specimens: Mislabeled or unlabeled specimens will be rejected upon receipt.
   1. Immediately notify care team of the error and require recollection. Inform care team that a new order will be required if recollection is needed. Continue to Part B if care team challenges rejection.
   2. Cancel testing associated with the mislabeled or unlabeled specimen using one of the following codes.
      LIS 1.3 Cancelation, Crediting and Notification of Canceled Tests
      - RSPN for unlabeled specimen. This code appends the following comment to the canceled specimen. "Specimen received unlabeled. Lab cannot accept the responsibility for the identification of this specimen and all testing has been canceled."
      - SREJ for mislabeled specimen. This code appends the following comment to the canceled specimen. "This specimen was mislabeled before being received by the laboratory. Lab cannot accept the responsibility for the identification of this specimen and all testing has been canceled."
   3. Apply LNR label to specimen containers and place in a biohazard bag. Add note that includes date, time, tech code, and where sample came from (e.g. unit, pneumatic tube station, courier) to the pocket of the biohazard bag.
   4. Store specimen.
      - Minneapolis: Unlabeled-Mislabeled bin above Processing 2 bench.
      - Saint Paul: Unlabeled-Mislabeled bin in hematology refrigerator.
   5. Specimen should be discarded seven days after being received in the lab.
   6. File a Safety Learning Report.
      Safety Learning Report

B. Exceptions: In rare and urgent cases (e.g., irreplaceable specimens or critical/emergency situations), testing may be considered if a provider approves of challenging rejection.
   TYPE AND SCREENS (TYAS/TYSKA) CANNOT BE CHALLENGED.
   1. Inform care team a provider must approve of challenge prior to relabeling.
   2. Print the Unlabeled-Mislabeled Specimen Challenge Form.
   3. Instruct care team to complete Part One of Challenge Form.
      - Care team must contact a provider to approve of challenge. Ensure date and time of notification is complete on the form and verify provider credentials prior to relabeling of specimen. Acceptable credentials are MD, NP, DO, or PA.
   4. Complete Part Two of Challenge Form.
   5. If specimen meets criteria for relabeling, continue to step 6. If specimen does not meet criteria, provide care team with the On-Call Pathologist's contact information.
      Amion
      a. The following specimen are acceptable to relabel without contacting the On-Call Pathologist. All other specimen must be approved by Pathologist.
         i. CSF from lumbar puncture.
         ii. Irretrievable surgical specimen.
         iii. Blood culture drawn prior to administration of antibiotics.
         iv. Critical testing for a patient who has reached maximum draw volume.
      b. The On-Call Pathologist will contact the laboratory with the challenge decision.
         - If the challenge is accepted, continue to step 6.

- If the challenge is rejected, continue to step 7.

6. Specimen meets criteria for relabeling or challenge is accepted by On-Call Pathologist.
   i. Care team must verify specimen and relabel the specimen in the lab.
   ii. Reorder canceled tests.
   iii. Add "LNR" comment to modifier field in Sunquest. The code appends the comment "The laboratory cannot accept the responsibility for the identification of this specimen since it was mislabeled before being sent to the lab. The specimen has been identified by the patient's caregiver and testing has been authorized." to the order.
   iv. Apply red font LNR label to original specimen container and all decant containers. These labels are kept in the processing department of the laboratory. Only use Avery 11446 labels with the template below.
   LNR Labels
   v. Process specimen.
   vi. Complete testing with "LNR" appended to each result associated with specimen.
   vii. Continue to Step 8.
7. Challenge rejected.
   i. Apply red font LNR label to specimen containers and place in a biohazard bag. Add note that includes date, time, and tech code to the pocket of the biohazard bag.
   ii. Store.
      - Minneapolis: Unlabeled-Mislabeled bin above Processing 2 bench.
      - Saint Paul: Unlabeled-Mislabeled bin in hematology refrigerator.
   iii. Specimen should be discarded seven days after being received in the lab.
   iv. Continue to step 8.
8. File Safety Learning Report.
   Safety Learning Report
9. Give completed Challenge Form to an operations supervisor.
   - Minneapolis: Mailbox outside of operations supervisor's office.
   - Saint Paul: Unlabeled-Mislabeled bin on operations supervisor's desk.
10. Operations supervisor obtains signature of the On-Call Pathologist, ensures form is complete, "LNR" comment appended to each result associated with the specimen, and SLR has been filed.
11. Upload completed Challenge Form to SharePoint.
    Specimen Challenge Forms

Responsibility

All clinical staff involved in specimen collection and handling are responsible for adhering to this policy. Laboratory personnel are responsible for enforcing specimen labeling standards and maintaining documentation.

Historical Record

Version	Author	Effective Date	Summary
1		04/03/2014	Initial Version
2	Jennifer Heimkes	11/10/2014	
3	Jennifer Heimkes	07/30/2015	
4	Marcia Loween	05/08/2023	Updated language in step 4. Added “circle one” and “if surgical” in part 1. Added responsibility and historical record section. Fixed SLR link.
5	Lab Leadership Team	05/01/2025	Reformatted. Added exception specimens, removed provider signature requirement, added requirement to document call to provider for care team, added OpS responsibility, added LNR label requirement, added storage requirement. Moved form to separate document(2.0.f1) Renamed; formerly GL 2.0 Unlabeled/Mislabeled Specimen Challenge Form and Procedure.