

## CHILDREN'S MINNESOTA UNLABELED-MISLABELED SPECIMEN CHALLENGE FORM

GL 2.0 Unlabeled-Mislabeled Specimen Procedure

## Part One: To be completed by Patient Care Team and Provider

Describe how labeling error occurred: \_\_\_

Staff challenging the lab policy with request to relabel must obtain approval to challenge specimen by a **provider (MD, NP, DO, PA)**.

		/ /	:		
Printed Provider Name & Credentials		Date Called	Time		
			/	1	:
Challenger's Printed Name & Credentials	Signature		Date		Time

I, the above signed, understand that inappropriate patient care may result from relying on test results obtained from an incorrectly labeled specimen.

Incident Date: _/_/ Incident Time:: _ Collection Location: Reported by: Patient Name: MRN: Birth Date: Specimen Labeling Defect:UnlabeledMislabeled Specimen Name: MRN: Birth Date: Cancelled Accession Numbers: Cancelled Accession Numbers: Specimen Meets Criteria for Relabeling: Challenger not required to contact On-Call Pathologist. Reason for Challenge: CSF Surgical BC Prior to ABX Critical, Over D.V. Specimen Does Not Meet Criteria for Relabeling: Challenger MUST contact On-Call Pathologist. Specimen Type: Reason for Challenge: Specimen Approved for Testing Per Pathologist? Yes No Reordered Accession Numbers: SLR Filed Part Three: To be completed by On-Call Pathologist. May be completed the following business day if challenge occurs after office hours. 	Part Two: To be completed by Lab staff	Name of On-Call Patholog	gist:
Specimen Labeling Defect: Unlabeled   Specimen Name: MRN:   Birth Date:   Cancelled Accession Numbers:   Cancelled Accession Numbers:   Specimen Meets Criteria for Relabeling: Challenger not required to contact On-Call Pathologist.   Reason for Challenge: CSF   Specimen Does Not Meet Criteria for Relabeling: Challenger MUST contact On-Call Pathologist.   Specimen Type: Reason for Challenge:   Cancelled Accession Numbers: Specimen Type:   Reason for Challenge: Specimen Type:   Specimen Approved for Testing Per Pathologist? Yes   SLR Filed   Part Three: To be completed by On-Call Pathologist. May be completed the following business day if challenge occurs after office hours.	Incident Date:/_/ Incident Time:	: Collection Location:	Reported by:
Specimen Name:	Patient Name:	MRN:	Birth Date:
Cancelled Accession Numbers:	Specimen Labeling Defect:  □ Unlabeled	□ Mislabeled	
<ul> <li>Specimen Meets Criteria for Relabeling: Challenger not required to contact On-Call Pathologist. Reason for Challenge: CSF Surgical BC Prior to ABX Critical, Over D.V.</li> <li>Specimen Does Not Meet Criteria for Relabeling: Challenger MUST contact On-Call Pathologist. Specimen Type:</li></ul>	Specimen Name:	MRN:	Birth Date:
Reason for Challenge:       CSF       Surgical       BC Prior to ABX       Critical, Over D.V.         Specimen Does Not Meet Criteria for Relabeling: Challenger MUST contact On-Call Pathologist.       Specimen Type:	Cancelled Accession Numbers:		
<ul> <li>Specimen Does Not Meet Criteria for Relabeling: Challenger MUST contact On-Call Pathologist.</li> <li>Specimen Type:</li></ul>	□ Specimen Meets Criteria for Relabeling: C	Challenger not required to contac	ct On-Call Pathologist.
Specimen Type:   Reason for Challenge:   Specimen Approved for Testing Per Pathologist? Yes No   Reordered Accession Numbers:   Strain   Reordered Accession Numbers:   Strain   Stra	Reason for Challenge: CSF	Surgical BC Prior to ABX	Critical, Over D.V.
Reason for Challenge:   Specimen Approved for Testing Per Pathologist?   Yes   No   Reordered Accession Numbers:   SLR Filed   Part Three: To be completed by On-Call Pathologist. May be completed the following business day if challenge occurs after office hours.   Pathologist Signature	□ Specimen Does Not Meet Criteria for Rela	abeling: Challenger MUST conta	ct On-Call Pathologist.
Specimen Approved for Testing Per Pathologist? Yes No     Reordered Accession Numbers:     SLR Filed     Part Three: To be completed by On-Call Pathologist. May be completed the following business day if challenge occurs after office hours.     Pathologist Signature	Specimen Type:		
Reordered Accession Numbers:  SLR Filed Part Three: To be completed by On-Call Pathologist. May be completed the following business day if challenge occurs after office hours. Pathologist Signature Date	Reason for Challenge:		
□ SLR Filed Part Three: To be completed by On-Call Pathologist. May be completed the following business day if challenge occurs after office hours. Pathologist Signature Date	Specimen Approved for Testing Per	Pathologist? Yes No	
Part Three: To be completed by On-Call Pathologist. May be completed the following business day if challenge occurs after office hours.	Reordered Accession Numbers:		
occurs after office hours.	□ SLR Filed		
		athologist. May be completed	the following business day if challenge
	Pathologist Signature	/ /	//
	<b>U</b>		
Explanation of Challenge Decision:	Explanation of Challenge Decision.		

## Part Four: To be completed by Laboratory Operations Supervisor

Ensure form is complete, results are accurate (if applicable), and SLR is filed. Upload form to SharePoint.