CRITERIA FOR UNACCEPTABLE SPECIMENS

RC.CH.LOP.SH.PR.012r04

Purpose

The following list constitutes reasons for which a specimen may be considered unacceptable. If it is decided that a specimen is unacceptable, the floor or the physician should be notified and arrangements made to draw another specimen. If the physician insists that the specimen be tested, perform the test, provided the volume is adequate to do so, and note on the report as to why the result may be unreliable.

If an improperly or unlabeled specimen is received, see Clinical Pathology Procedure "Correction of Information on Specimen Labels: Proper Handling of Unlabeled/Mislabeled Specimens".

Problems related to patient preparation or condition.

Problem	Test Affected	Corrective Action
Not fasting	Glucose Tolerance Test	Notify physician of need to recollect after proper fast
Interfering Medication Parenteral Iron Solution (e.g. Iron Sucrose)	Iron	see comment in report field
Odd color serum	Variable	consult with pathologist/clinical chemist about possible interference

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Problems related to sample collection, preservation or treatment.

Problem	Test Affected	Corrective Action
Inadequate Volume	Any	Redraw
Large air bubbles	Blood Gases	Notify floor to redraw
Not iced specimen	Blood Gases Ammonia	Request redraw Request Redraw
Improper collection tube-serum	Ammonia	Draw in EDTA tube
Oxalate, EDTA	Ca, Mg, Enzymes Others possible	Consult Clinical Chemistry Vol. 21, #5, "Effects of drugs On Clinical Tests." Redraw Serum
Not Acidified	Urinary Catecholamines Metanephrine VMA	Acidify to pH 1-3; if initial pH does not exceed 7.0
Improperly timed or inadequate collection	All clearance tests Urine amylase Other urine tests requiring 24 hour collection	Obtain actual collection time or recollect

Problems related to the sample itself.

Problem	Test Affected	Corrective Action
Hemolysis >50 mg/dL	PLACA, Ammonia	Redraw
Hemolysis >200mg/dL	Acetaminophen, Lactic Acid	Redraw
Hemolysis (in vitro) >500mg/dL	ALL tests **except-Glucose, Creatinine, ETOH, BUN**	Redraw***** Creatinine, ETOH, Glucose, BUN report with comment @2HMT
Hemolysis >1000mg/dL	Glucose	Redraw*
Gross Hemolysis	Creatinine, ETOH	Report with comment @2HMT
Gross Lipemia	Variable, but affects most tests	Ultracentrifuge specimen for all tests except, Chol and Trig. Perform Chol and Trig on unspun serum

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***If it is determined that in-vivo hemolysis is occurring, testing can be performed. Refer to "Policy for the Determination of Hemolysis, Lipemia and Icterus" RC.CH.LOP.SH.PY.002**

Authorized Reviewers

Section Medical or Technical Director

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Document Control
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Master printed document stored in Chemistry Policy and Procedure Manual, Core Lab
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Automated Chemistry Policy and Procedure Manual, Stat Lab

Document History

Signature		Revision #		Related Documents Reviewed/ Updated
Prepared by: M. Landskroener, MT(ASCP)	12/05/2008	r00		
Approved by:				
			Modification	**Related Documents Reviewed/ Updated**
Reviewed by: (Signature)	**Date**	**Revision #**		
Raymond E. Karcher, PhD	12/05/2008			
Raymond E. Karcher, PhD	12/04/2009			
Vivek Kumar, PhD	12/06/2010			
John Wilson, PhD	02/03/2012			
E. Sykes, MD	02/16/2012			
Elizabeth Sykes, MD	01/30/2014			
Elizabeth Sykes, MD	01/02/2015			
Elizabeth Sykes, MD	01/28/2015	r01	Delete LDL, Triglyceride for non fasting, add comment about “invivo hemolysis.”	
Elizabeth Sykes, MD	10/20/2015			
Robin Carey-Ballough, MT(ASCP)	04/14/2017	r02	Revise Problems related to sample to align with current hemolysis procedure. Update problems with collection to current Send out requirements.	
Kenneth Simkowski, PhD	05/04/2017			
Elizabeth Sykes, MD	02/02/2018			
Peter Millward, MD	09/17/2018			
Amber Macumber MLS(ASCP)cm	04/02/2019	r03	Added Lactic Acid to hemolysis table	
Ashley Hurand MLS(ASCP)cm	11/12/2019	r04	Added Generic Name to interfering medication. Updated tests affected for problems related to the sample itself.	

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Qian Sun, PhD	11/14/2019			