

Title: Processing Specimens	
SOP: Processing Department	Version: 1.0
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### **PURPOSE:**

The purpose of this procedure is the performance of processing fundamentals in the Processing Department.

### **SCOPE:**

**Processing Department** 

### **RESPONSIBILITY:**

All processors are responsible for reading, understanding and competently performing this procedure.

## **EQUIPMENT:**

Standard order entry equipment including barcode printer

**SUPPLIES**: N/A

#### PROCEDURE:

## **Processing Specimens Procedure**

- A) Remove the requisition from the bag.
  - a. Fully open the requisition if folded
  - b. Identify what type of requisition it is: verify (interface), scanner (web orders/PSC orders), or a manual order
  - c. Look over for any changes such as crossed out dates/times, written tests on scanners, written unit codes to add, or tests to remove because the client has crossed them out
- B) Remove the specimens from the bag
  - a. If there are room temperature or frozen specimens included on the requisition, ask the front to bring you the specimen.
- C) Check the specimen labels and make sure that the names match the requisition.
  - a. If there are any patient name discrepancies or missing names, please see the coordinator, designee or supervisor.
  - b. If there is a mismatch of unique person-specific identifier or unlabeled specimen then please see the coordinator, designee or supervisor.
  - c. If the unique identifying number is the only information on the tube, it is critical the order and sample are in the same specimen bag.
  - d. There can be a discrepancy on a patients name by 1 letter which can be accepted.

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- e. If a specimen is unlabeled, please see the coordinator, designee or supervisor.
- f. Common nicknames are accepted.

Items that are NOT considered unique person-specific identifier include:

Doctor's name

Client number

Phlebotomist

Room number

Patient phone number

### D) Document:

- a. Processor number
- b. What type and how many specimens
  - i. SST-U: Unspun SST
  - ii. SST: Spun SST
  - ii. bai. spuii ss
  - iii. RT: Red Top
  - iv. PT: Purple Top
  - v. PNK: Pink Top
  - vi. LBT: Light Blue Top
  - vii. GRY: Grey Top
  - viii. GT: Green Top
  - ix. ACD: Yellow Top
  - x. DB: Dark Blue Top with red label (serum)
  - xi. DBE: Dark Blue Top with purple label (whole blood/plasma)
  - xii. PPT: Plasma Prep Tube
  - xiii. TAN: Tan Top Tube
  - xiv. TT: Transfer Tube
    - 1. Document "SST", "RT", etc. next to the TT to indicate what type of collection tube the sample was transferred from
    - 2. WB: Whole Blood
    - 3. S: Serum
    - 4. P: Plasma
  - xv. QFT: Quantiferon Gold collection tubes
  - xvi. PBC: Lead blood collection card
  - xvii. PKU: PKU filter paper card
  - xviii. PAT: Pyruvic acid tube
    - xix. PIT: Protease inhibitor tube
    - xx. NMR: NMR Lipoprofile tube
    - xxi. BBG: Breath Bag
  - xxii. FFN: Fetal Fibronectin Tube
  - xxiii. SP: Sure Path
  - xxiv. TP: Thin Prep
  - xxv. UC: Urine Cup
  - xxvi. IPT: Urine IPT

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xxvii. SC: Sterile Cup (for any sterile cup that does not contain urine)

xxviii. U24: 24 Hour Urine

xxix. ST: Raw Stool

xxx. ST24: 24 hour stool collection
xxxi. ST72: 72 hour stool collection
xxxii. OCC: Fecal occult blood card
xxxiii. CB: Cary Blair Transport Media

xxxiv. O&P: Ova and Parasite collection bottles

xxxv. BC: Blood Culture Bottles

xxxvi. SPS: Yellow stoppered blood culture hold tube

xxxvii. Swab: Any swab for culture xxxviii. Plates: Microbiology agar plates xxxix. Slides: Slides in flats or containers

xl. PFL: Protected from light

xli. M6: M6 Universal transport media

xlii. UAPT: Urine Aptima xliii. APT: Aptima swab xliv. AFF: BD Affirm vial xlv. RMPI: Sample in RPMI xlvi. BM: Bone Marrow

xlvii. BLK: Tissue Block xlviii. BF: Body Fluid

xlix. CSF: Spinal Fluid

1. FRZ: Frozen

li. PED: Pediatric tube

lii. PFL: Protected from light

- 1. May be in foil, the tip of a glove, or ideally, in an amber/brown colored tube
- E) When documenting specimen types and number, it is important to be accurate and precise
  - a. A frozen transport tube of serum from two gel barrier tubes would be documented: 1TT FRZ (2SST)
  - b. A green top tube with bone marrow would be documented: 1GT BM
  - A frozen transfer tube of plasma from 2 light blue top tubes would be documented: 1 TT FRZ (2LBT)
  - d. A frozen amber color transfer tube of whole blood would be documented: 1 TT PFL FZ WB
- F) Tubes for Ionized Calcium and Ionized Magnesium cannot be opened before testing. Make sure to keep these tubes separate when taken to the testing lab.
- G) Perform order entry according to the appropriate SOP.

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- H) Be sure to place the test labels on the appropriate specimen.
  - a. Ensure the proper specimen was sent before ordering the tests.
  - b. Ensure the specimen is within the prescribed stability time.
    - i. 5,4 in Antrim or the Directory of Services in Lablink will provide acceptable specimen criteria.
  - c. Specimens should have 2 unique person-specific identifiers on the patient label; however one of the following unique person-specific identifier is acceptable.
  - d. Unique person-specific identifiers include
    - i. accession number
    - ii. patient's first and last name,
    - iii. patient last name only, with first name initial
    - iv. Or a unique identifying number(e.g., medical record number or date of birth)
  - e. Processors will check all specimen requirements, including reference laboratories, utilizing Antrim (5,4), Lablink, or a specific reference laboratory web page.
- Antrim will produce a number of barcode stickers indicating REQ for requisition, Chem/Chemistry, HEM for hematology, MDX for Molecular and Micro for Microbiology department.
  - a. Most of the barcodes will indicate what temperature they should be stored at, FRZ for frozen, REF for refrigerated and RMT (RT) for room temperature.
- J) Labels should be placed with the original specimen name viewable and placed such that the label can be read with the cap/lid on the left hand side and read towards the bottom of the specimen.
  - a. Labels should be straight. This is what the instrument reads
  - b. Never put labels on as a "flag". It must be straight
  - c. Make sure labels are smooth
  - d. Leave a "window" so that the fill line can be viewed when possible.
- K) Place the completed specimens in the appropriate rack or tub for delivery.
  - 1. Blood and serum specimens for Chemistry should be placed in the white racks.
  - 2. Frozen specimens for Chemistry should be placed in the "Frozen Chem" styrofoam cooler.
  - 3. Urine and other miscellaneous specimens for Chemistry should be placed in the "Misc Chem" bucket.
  - 4. Specimens for Microbiology should be placed in the "Combo" or "Micro" bucket.

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- 5. Specimens for flow should be placed in the appropriate temperature "Flow" bucket and taken upstairs
- 6. Send out specimens should be placed in the assigned temperature storage until they are sent out.
- L) Every sheet of paper that accompanies a specimen will get a "Req" sticker placed on it so that it will be tied to that accession when imaged.
- M) All extra specimens will also get a "Req" sticker and placed in the rack for archiving.

#### **Colored Dots Chart:**

When BBPL receives samples which are needing to be shared by multiple departments Processing utilizes a colored dots system to help all departments involved know where the samples need to be directed.

Yellow Dot: Samples received unspun 4 hours or greater, or unknown date/time of collection. This pertains the Red Top (RT) and SST tubes

Purple Rectangle: Samples need to go to Molecular Diagnostics after core lab testing

Green Dot: After completion of all in-house testing specimen needs to be returned to Processing for sendout testing.

**REFERENCES: N/A** 

**RELATED DOCUMENTS: N/A** 

**APPENDICES: N/A** 

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