

;PROGRAM Standard Operating Procedure – Laboratory Services	
Title: MIC36200 – Referral of Cat A Specimens to APL	Policy Number:
Program Name: Laboratory Services	
Applicable Domain: Lab, DI and Pharmacy Services	
Additional Domain(s):	
Effective Date:	Next Review Date:
Issuing Authority: Director of Health Services	Date Approved:
Accreditation Canada Applicable Standard:	

GUIDING PRINCIPLE:

Organisms that are suspected of being Risk Group 3 (RG3) pathogens need to be referred to Alberta Precision Laboratory (APL) for identification. TDG regulations need to be followed including paperwork and packaging.

PURPOSE/RATIONALE:

To ensure microbiology Category A specimens are sent for referral testing to Alberta Precision Laboratory (APL) appropriately.

SCOPE/APPLICABILITY:

This procedure applies to Medical Laboratory Technologists (MLTs) and Medical Laboratory Assistants (MLAs) packaging Category A samples being referred to Alberta Precision Laboratory.

SAMPLE INFORMATION:

The following category A specimens need to be sent to APL for referral testing:

- Any confirmed or suspected RG3 organism

SUPPLIES:

- Alberta Precision Laboratory Reference Organism and Surveillance Requisition
- Category A box
- Category A package supplies
- APL RG3 Biosafety fax coversheet
- Shippers Declaration for Dangerous Goods
- DynaLIFE Spec.TR.E area barcode
- DynaLIFE Spec.TR.E container barcode
- Buffalo Express waybill


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PROCEDURE INSTRUCTIONS:

Step	Action
Complete collector ID information on the APL requisition:	
1	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> </div> <div style="width: 35%; border: 1px solid black; padding: 5px;"> Accession # (lab only) </div> </div> <p>1 1. Stanton location information is pre-typed on the requisition 2. The physician code and report location code need to be entered on the requisition 3. To find the physician code and the report location code: a. Open patient report in Order Entry b. Ensure Edit Mode is activated. Click on Req. by: c. The physician code is the UPIN# d. The report location code is the numbers at the beginning of the ordering provider's address</p>


Step	Action
Complete patient information on the APL requisition:	
2	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> </div> <div style="width: 35%; border: 1px solid black; padding: 5px;"> Accession # (lab only) </div> </div> <p>2 1. Place a LIS collection label on the APL requisition</p>

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Complete collection information on the APL requisition:																					
3	Accession # <i>(lab only)</i>																				
	 ALBERTA PRECISION LABORATORIES Leaders in Laboratory Medicine Reference Organism and Surveillance Requisition Complete and forward request to appropriate Provincial Laboratory for Public Health : <input type="checkbox"/> Edmonton Site: 8440-112 St T6G 2J2 Phone: 780.407.7121 Fax: 780.407.3864 <input type="checkbox"/> Calgary Site: 3030 Hospital Dr NW T2N 4W4 Phone: 403.944.1200 Fax: 403.270.2216																				
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Requestor</td> <td>Submitting Lab Name Stanton Territorial Hospital</td> <td>Copy to Stanton Lab: Fax: 867-669-4306</td> <td>Physician Code:</td> <td>Report Location:</td> </tr> <tr> <td></td> <td>Submitting Lab Address 548 Bryne Road, P.O. Box 10</td> <td>City/Town Yellowknife</td> <td>Province NT</td> <td>Postal Code X1A 2N1</td> </tr> <tr> <td></td> <td></td> <td></td> <td>Phone Number 867 767 9300 x 46691</td> <td></td> </tr> </table>	Requestor	Submitting Lab Name Stanton Territorial Hospital	Copy to Stanton Lab: Fax: 867-669-4306	Physician Code:	Report Location:		Submitting Lab Address 548 Bryne Road, P.O. Box 10	City/Town Yellowknife	Province NT	Postal Code X1A 2N1				Phone Number 867 767 9300 x 46691						
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1. Add the Stanton accession number in submitting lab specimen number 2. Complete remaining collection information																					

Step	Action									
Complete organism information on the APL requisition:										
4	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #92d050;">Non-enteric Organism</th> <th style="background-color: #92d050;">Enteric Organism</th> <th style="background-color: #92d050;">Submitting Laboratory Information</th> </tr> </thead> <tbody> <tr> <td> <input type="checkbox"/> Identification for unknown organism <input type="checkbox"/> Antibiotic Susceptibility specify antibiotics _____ <input type="checkbox"/> CPO confirmation Organism _____ <input type="checkbox"/> Anaerobe M RFANA <input type="checkbox"/> Listeria M RFOTH <input type="checkbox"/> Diphtheria Toxin Testing M RFOTH <input type="checkbox"/> Fungus/Yeast M RFFUNG <input type="checkbox"/> Mycobacteria M RFAFB <input type="checkbox"/> Neisseria gonorrhoeae M RFGC <input type="checkbox"/> Nocardia M RFNOC <input type="checkbox"/> Other Test Request <i>(specify)</i> _____ <input type="checkbox"/> VRE Confirmation M RFOTH </td> <td> <input type="checkbox"/> 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Step	Action							
5	Complete highlighted areas on the RG3 coversheet:							
	<div data-bbox="516 436 695 604"></div> <div data-bbox="722 457 1198 625"><p>Stanton Territorial Hospital – Microbiology Laboratory 548 Byrne Road, PO Box 10 Yellowknife, NT X1A 2N1 Phone: 867 767-9300 ext. 46691 Fax: 867 669-4141</p></div> <hr/> <div data-bbox="490 745 1188 1087"><table><tr><td>To: Alberta Precision Laboratories</td><td>From: STH Microbiology Laboratory</td></tr><tr><td>Fax: 1 (780) 407 3864</td><td>Pages: [redacted]</td></tr><tr><td>Phone: 1 (780) 407 7121</td><td>Date: [redacted]</td></tr><tr><td>Re: Transfer of Human Pathogens (L-R3-39987-22-FW-00)</td><td>CC: sth_biosafety@gov.nt.ca dynalife.consulting@dynamifedx.com david.litwin@dynamifedx.com bob.verity@dynamifedx.com specgmt.group@dynamifedx.com</td></tr></table></div> <hr/> <p>STHA Microbiology laboratory is transferring a package containing a Risk Group 3 Human pathogen to your facility</p> <p>The sample is to be directed to the [redacted] program.</p> <p>Weigh Bill number of this shipment is [redacted].</p> <p>If you do NOT receive this package within 72 hours of this notification, please inform the STHA microbiology laboratory at (867) 767 9300 ext. 46691 AND email sth_biosafety@gov.nt.ca</p> <p>Thank you</p> <p>Name of STHA employee sending sample [redacted]. Signature [redacted]</p> <p style="text-align: center;">CONFIDENTIAL WARNING</p> <p>The documents accompanying this transmission contain confidential information intended for a specific individual and purpose. The information is private, and is legally protected by law. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or taking of any action in reference to the contents of this telecopied information is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original to us by mail.</p>	To: Alberta Precision Laboratories	From: STH Microbiology Laboratory	Fax: 1 (780) 407 3864	Pages: [redacted]	Phone: 1 (780) 407 7121	Date: [redacted]	Re: Transfer of Human Pathogens (L-R3-39987-22-FW-00)
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Fax: 1 (780) 407 3864	Pages: [redacted]							
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Re: Transfer of Human Pathogens (L-R3-39987-22-FW-00)	CC: sth_biosafety@gov.nt.ca dynalife.consulting@dynamifedx.com david.litwin@dynamifedx.com bob.verity@dynamifedx.com specgmt.group@dynamifedx.com							

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Step	Action																		
Complete highlighted areas on the shipper's declaration:																			
6	<div style="border: 1px solid black; padding: 10px;"> <div style="display: flex; justify-content: space-between; align-items: center;"> <div> <p>SHIPPER'S DECLARATION FOR DANGEROUS GOODS</p> <p>Shipper Microbiology Laboratory Stanton Territorial Hospital Box 10, 548 Bryne Road 1 1 Yellowknife, NT X1A 2N1 Phone: (867) 797-9300 ext. 46691</p> </div> <div style="text-align: right;">  <p>Air Waybill No. _____ Page 1 of 1 Pages Shipper's Reference No. _____ (optional)</p> </div> </div> <hr/> <div style="display: flex; justify-content: space-between;"> <div> <p>Consignee Provincial Laboratory c/o DynaLife Dx Medical Laboratories 200-10150, 102 Street NW Edmonton, AB T5J 5E2</p> </div> <div style="text-align: right;">  </div> </div> <hr/> <p style="font-size: 8px;">Two completed and signed copies of this Declaration must be handed to the operator.</p> <div style="display: flex; justify-content: space-between;"> <div> <p>TRANSPORT DETAILS</p> <p>This shipment is within the limitations prescribed for: (delete non-applicable)</p> <p> <input type="checkbox"/> PASSENGER A <input checked="" type="checkbox"/> CARGO AIRCRAFT </p> </div> <div> <p>Airport of Departure (optional): Yellowknife, NT</p> </div> </div> <hr/> <p>Airport of Destination (optional): Hay River</p> <p style="font-size: 8px;">Shipment type: (delete non-applicable) <input type="checkbox"/> NON-RADIOACT <input checked="" type="checkbox"/> XXXXXXXXXX</p> <hr/> <p style="text-align: center;">NATURE AND QUANTITY OF DANGEROUS GOODS</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4" style="text-align: center;">Dangerous Goods Identification</th> <th rowspan="2">Quantity and Type of Packing</th> <th rowspan="2">Packing Inst.</th> <th rowspan="2">Authorization</th> </tr> <tr> <th>UN or ID No.</th> <th>Proper Shipping Name</th> <th>Class or Division (subsidiary hazard)</th> <th>Packing Group</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">UN2814</td> <td>Infectious substance, affecting humans (suspected Category A Infectious substance)</td> <td style="text-align: center;">6.2</td> <td></td> <td style="text-align: center; vertical-align: middle; font-size: 24px;">1</td> <td style="text-align: center;">620</td> <td></td> </tr> </tbody> </table> <p style="font-size: 8px; margin-top: 5px;">Packaged in Saf-T-Pak vessel inside a fibre board Saf-T-Pak box (STP-100)</p> <hr/> <p style="font-size: 8px;">Additional Handling Information CANUTEC 24 hour number: 613-996-6666</p> <hr/> <p style="font-size: 8px;">I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. I declare that all of the applicable air transport requirements have been met.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div> <p>Name of Signatory _____ Date _____</p> </div> <div style="text-align: right;"> <p style="font-size: 24px; color: red; border: 2px solid red; border-radius: 50%; width: 30px; height: 30px; display: flex; align-items: center; justify-content: center;">2</p> <p>Signature (See warning above) </p> </div> </div> </div>	Dangerous Goods Identification				Quantity and Type of Packing	Packing Inst.	Authorization	UN or ID No.	Proper Shipping Name	Class or Division (subsidiary hazard)	Packing Group	UN2814	Infectious substance, affecting humans (suspected Category A Infectious substance)	6.2		1	620	
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<ol style="list-style-type: none"> 1. Amount and type of specimen being sent <ul style="list-style-type: none"> ➤ For example, 4 x 3.0 mL SST blood collection tubes 2. Name of person sending the sample and the date being sent 3. 5 original copies of the shipper's declaration need to be made, 4 for delivery driver and one for lab records <ul style="list-style-type: none"> ➤ Photocopies are NOT acceptable, need to be original copies 																			

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7	<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <p>Buffalo Express</p> <p>1 BILLING COPY</p> <p>PRESS HARD - 5 COPIES</p> </div> <div style="width: 60%;"> <p>BUFFALO PARCEL COURIER SERVICES LTD. 1000 BUFFALO DRIVE, HAY RIVER, N.W.T. X0E 0R9 PHONE: EDMONTON (780) 455-9283 HAY RIVER (867) 874-3307 CALGARY (403) 271-3887 YELLOWKNIFE (867) 873-2084 GST # 100686755RT0001 TOLL FREE 1 800 465 3168</p> <p style="text-align: right;">B 1391229</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">FROM STANTON HOSPITAL STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) 548 BYRNE RD CITY YELLOWKNIFE NT PROVINCE</td> <td colspan="2">PICK-UP COURIER</td> <td>TIME AM PM</td> <td>YR MO DAY</td> <td>CUSTOMER NO. 42</td> </tr> <tr> <td colspan="2">POSTAL CODE X1A-2N1</td> <td colspan="2">TELEPHONE NUMBER (867) 669 4111</td> <td colspan="2">DESCRIPTION OF ITEMS UN 2814 Infectious Substance affecting humans</td> <td>CARRIER TARIFF</td> </tr> <tr> <td colspan="2">TO DYNALIFE DX STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) #200, 10150 102 ST CITY EDMONTON AB PROVINCE</td> <td colspan="2">SPECIAL INSTRUCTIONS Dangerous goods as per attached Shippers declaration</td> <td colspan="2">DECLARED VALUE \$ N/A</td> <td>IMPORTANT DECLARED VALUE CHARGE</td> </tr> <tr> <td colspan="2">POSTAL CODE T5J-5E2</td> <td colspan="2">TELEPHONE NUMBER (780) 451 3702</td> <td colspan="2">SHIPPER SIGN</td> <td>OTHER</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">SHIPPER SIGNATURE PRINT</td> <td>G.S.T.</td> </tr> </table> <p style="text-align: center; font-size: small;">THIS PART IS TO BE REMOVED ONLY BY THE PICK-UP COURIER</p> </div> <div style="width: 15%; text-align: center;"> <p>PREPAID <input type="checkbox"/></p> <p>COLLECT <input checked="" type="checkbox"/></p> <p style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: x-small;">BILL OF LADING FOR NON-NEGOTIABLE SHIPMENTS</p> </div> </div>	FROM STANTON HOSPITAL STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) 548 BYRNE RD CITY YELLOWKNIFE NT PROVINCE		PICK-UP COURIER		TIME AM PM	YR MO DAY	CUSTOMER NO. 42	POSTAL CODE X1A-2N1		TELEPHONE NUMBER (867) 669 4111		DESCRIPTION OF ITEMS UN 2814 Infectious Substance affecting humans		CARRIER TARIFF	TO DYNALIFE DX STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) #200, 10150 102 ST CITY EDMONTON AB PROVINCE		SPECIAL INSTRUCTIONS Dangerous goods as per attached Shippers declaration		DECLARED VALUE \$ N/A		IMPORTANT DECLARED VALUE CHARGE	POSTAL CODE T5J-5E2		TELEPHONE NUMBER (780) 451 3702		SHIPPER SIGN		OTHER					SHIPPER SIGNATURE PRINT		G.S.T.
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Step	Action
Track the specimen using the SPEC.TR.E Specimen Tracking Engine:	
8	<div style="border: 1px solid black; padding: 10px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>DynaLIFE MEDICAL LABS</p> <p>Send Container</p> <p>Pack container</p> <p>Log in to Spec.Tr.E</p> <p>Click Activities</p> <p>Click Prepare for Pickup</p> <p>Scan Area Barcode</p> <p>Scan Container Barcode</p> <p>Click:</p> <ul style="list-style-type: none"> No Barcoded Items 3rd Party Driver <p>Enter: 3rd Party Driver Information</p> <p>Submit</p> <p>Success notification displayed</p> <p>Scan the container when it's picked up</p> <p>Contact Information DynaLIFE Helpdesk</p> </div> <div style="width: 50%;"> <p style="text-align: center;">Spec.Tr.E Quick Reference</p> <p style="text-align: center;">Spec.Tr.E Access</p> <ul style="list-style-type: none"> Double click the Spec.Tr.E desktop shortcut or launch Spec.Tr.E in Internet Explorer: http://spectre.dynalifedx.com/weblogin.aspx Log into Spec.Tr.E with your username and password <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p style="text-align: center; font-size: x-small;">External User Login</p> <p style="font-size: x-small;">UserName: <input type="text"/> Enter UserName</p> <p style="font-size: x-small;">Password: <input type="password"/> Enter Password</p> <p style="text-align: center; font-size: x-small;"><input type="button" value="Login"/> Click Login</p> </div> <div style="display: flex;"> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p style="text-align: center; font-weight: bold;">Prepare for Pickup</p> <ol style="list-style-type: none"> Click Activities Click Prepare for Pickup Scan Area Barcode Scan Container Barcode Click 3rd Party Driver Click No Barcoded Items Enter Driver Information <ul style="list-style-type: none"> Select 3rd Party Driver Enter waybill information Click Submit button </div> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p style="text-align: center; font-weight: bold;">Track Containers</p> <ol style="list-style-type: none"> Log into Spec.Tr.E Click the Reports menu Click NWT Container Tracking Select a Location Select a Container Type Select a Start Date Select an End Date Click the View Report button </div> </div> <div style="display: flex; margin-top: 10px;"> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p style="text-align: center; font-weight: bold;">Record Pickup Time</p> <ol style="list-style-type: none"> Double click the Pickup shortcut: Spectre [your location] Pickup Scan the Container barcode </div> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p style="text-align: center; font-weight: bold;">Password Tip</p> <p style="font-size: x-small;">If you forget your password, contact the DynaLIFE Helpdesk (either call or email).</p> </div> </div> <div style="margin-top: 10px; font-size: x-small;"> <p>For TB specimens 1. Put in comments: - Risk group 3 org - Courier to POC</p> <p style="text-align: right;">Specimen Processing 1(800) 661 9876 Ext. 8115 Email: ithelpdesk@dynalife.ca Phone: (780) 451-3702 ext 8146</p> </div> </div> </div> </div>
<ol style="list-style-type: none"> Follow the instructions on the quick reference sheet Barcode container labels are kept above the specimen receiving bench The area barcode is located in the core lab specimen receiving area 	

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Step	Action
Order a referred test in result entry screen:	
9	<ol style="list-style-type: none">1. Select Add Test2. Choose appropriate reference code: ?REFE- APL Edmonton3. Select Ok4. Add a period (.) in the results line5. Final report the test line

Step	Action
Complete Category A send-out process:	
10	<ol style="list-style-type: none">1. Print off any Vitek results for organism being referred2. Submit organism on a labelled agar plate sealed with parafilm or on a labelled C&S swab3. Photocopy all papers and staple together. Hole punch photocopy stack and place in the <i>DynaLIFE</i> and ProvLab Pending Referrals binder<ul style="list-style-type: none">➤ Ensure the report is filed under the correct tab (ProvLab, Cat A)4. Place a requisition label on the APL requisition and scan into SoftMedia5. Pack specimen up according to TDG Category A regulations<ul style="list-style-type: none">➤ Send original paperwork with specimen6. Email completed coversheet to email locations listed7. File laboratory copy of the shipper's declaration in the TDG Send Outs binder in the core laboratory specimen receiving area8. Place Category A box on the countertop in the lab assistant area with Buffalo waybill and four original copies of the Shippers Declaration forms on the top of the Cat A box

REFERENCES:

1. *Alberta Precision Laboratories Reference Organism and Surveillance Requisition, 19193 (Rev2020-07)*
2. *DynaLIFE Spec.Tr.E Quick Reference-NWT*

APPROVAL:

Date

REVISION HISTORY:

REVISION	DATE	Description of Change	REQUESTED BY
1.0	28 Apr 17	Initial Release	L. Steven
2.0	25 Feb 19	Updated to reflect use of <i>DynaLIFE</i> Spec.Tr.E specimen tracking engine	L. Steven
3.0	16 Jun 19	Updated to reflect new hospital address	L. Steven
4.0	10 Mar 20	Procedure reviewed	L. Steven
5.0	30 Jun 22	Procedure reviewed and added to NTHSSA policy template	L. Steven

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