TRAINING UPDATE

Lab Location:	SGAH & WAH	**Date Distributed:**	3/5/2013
Department:	Phlebotomy	**Due Date:**	4/1/203

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
Patient Identification   SGAH.P04, WAH.P04   v002
Description of change(s):
Section 1. Purpose clarified Section 4: add CE, Interpreter Services, ED, patient identification, revise appropriate order Section 5: 　　A.10: update Code Alert Scenarios 　　A.11: add utilization of Interpreter Services 　　B.2: add positive identification of newborns 　　C: add token number process, add Interpreter Services & documentation 　　E: add examples of names used by hospital

Document your compliance with this training update by taking the quiz in the MTS system.

Approved draft for training all sites (version 002)

Non-Technical SOP

Title	Patient Identification	
Prepared by	Samson Khandagale	Date: 4/9/2009
Owner	Samson Khandagale	Date: 4/9/2009

Laboratory Approval

Print Name and Title	Signature	Date
Refer to the electronic signature page for approval and approval dates.		

Local Issue Date: Local Effective Date:

Review:

Print Name	Signature	Date

Form revised 3/31/00

TABLE OF CONTENTS

1.   **PURPOSE**

To establish positive patient identification based on two unique identifiers before a phlebotomy procedure can be initiated. Patient identification is provided within the patients demographics in HIS and LIS.
Obtaining, processing and resulting on a blood sample collected from a wrong patient can result in serious morbidity or mortality to that patient.

2.   **SCOPE**

Applies to all Laboratory personnel obtaining patient specimens.

3.   **RESPONSIBILITY**

All staff performing phlebotomy procedures must demonstrate competency in proper patient identification.

Failure to follow the patient identification procedure will be addressed in accordance with the Counseling and Performance Management Process outlined in the employee handbook.

4.   **DEFINITIONS**

LIS – Laboratory Information System (Sunquest)

HIS – Hospital Information System

Appropriate / Acceptable Order – must contain two unique identifiers and be in-hand for a Phlebotomist to proceed to perform a phlebotomy procedure:
- Downtime Requisition with patient HIS labels; tests to be drawn must be clearly checked off or legibly written in the miscellaneous section. This process is used during computer downtime.
- LIS labels from printers in the laboratory

Form revised 3/31/00

- Bar-coded labels from HIS, also known as LIS labels from Zebra printers located on the units (SGAH only)
- Lab Requisition with HIS patient label provided in the Adventist Behavioral Unit (SGAH only)

Inappropriate Order – Verbal order

CE – Care Excellence (Cerner Millenium)

Interpreter Services – Over-the-Phone Interpreter Service for foreign language, accessible 24 hours, provided by the hospital for patients

ED – Emergency Department or Emergency Room

Patient identification – Two unique identifiers, full name and medical record number; must be correctly spelled, and must be legible. Medical record number is also associated with a barcode portion adjacent to this number. Both identifiers are indicated on the hospital issued patient identification bracelet. This bracelet is placed on the patient's wrist by hospital Registration Department personnel or the patient's nurse.

5. PROCEDURE

It is a Hospital and Laboratory requirement to identify patients via a hospital issued identification bracelet. Some patients, such as those with revolving or recurring accounts, may not have identification bracelets. Identification for these patients must be established by asking to them to state their full name and date of birth, which is then compared to information in LIS and the recurring account card that the patient has in their possession.

A. **Inpatients**:

1. Alert patient of your arrival by knocking on the door before entering the room. Introduce yourself and inform patient that you are from the Laboratory and have an order to draw some blood for Laboratory testing. Ask if you can come in. If the room is dark, let the patient know that you must turn on a light to do the collection.

2. Upon receiving patient's consent move closer to the patient and ask the patient to state his/her full name. Compare this information provided to the Hospital ID bracelet on the patient's wrist. Check to match full name and medical record number from LIS labels to patient's Hospital ID bracelet. Special attention must be paid for multiple LIS collection labels to be sure that all labels match. Area must be well lit until all Phlebotomy procedure is complete. Bed number and Patient account number are not valid for use as patient identification.

3. If patient is not able to respond due to unconsciousness or some other incapacitation then always use proper patient identification of matching armband to patient label information before proceeding.

Form revised 3/31/00

4. The patient's name must be correctly spelled out on the Hospital ID bracelet. If any information is incorrect or the Patient is not wearing an ID bracelet, notify patient's nurse or Charge Nurse of the discrepancy. Phlebotomists are NOT allowed to place a Hospital ID band on the patient; this is the nurse's responsibility.

5. Specimen collection for Blood Bank (Type & Screen, Crossmatch) always includes the use of a separate Hollister ID armband in addition to the Hospital ID band. Refer to the procedure Blood Bank Collection and Labeling for specific information.

6. If patient is already arm-banded with a Blood Bank Hollister band, the phlebotomist must take the steps to verify the **date and time** of the last collection to ensure patient will not be stuck again un-necessarily. When in doubt it is the responsibility of the phlebotomist to contact the Blood Bank prior to proceeding.

7. NEVER draw blood from an inpatient that is not wearing a hospital ID band. Handwritten ID bracelet by the nurse is acceptable, provided the following information is written on the ID bracelet legibly: Last and first name, DOB and Medical Record number. This information must match LIS order/ label.

8. The phlebotomist can either remain in the patient's room or at the Nurses station while correction is made. If the correction takes longer than 5 minutes the phlebotomist may leave the unit to collect other patients, but must return to collect the patient within 15-20 minutes.

9. After correction is made, return to the patient's room and start process at step 1 again.

10. During a Hospital Code Alert scenario (example: Code Blue or a call placed for Rapid Response) and as soon as you were paged to attend the code:
    - ask Nurse for HIS (SGAH-CE or WAH-SMS) patient labels
    - perform positive patient identification
    - draw appropriate tubes and label the tubes in the patient's room
    - write time of collection and your tech code on the labels
    - Hand-carry all the tubes to the Lab and alert the Specimen Processor of the urgency to process the specimens.

    Notes:
    - It may take a few minutes for the orders to transmit to the LIS.
    - Specimens will be processed as STAT orders.

11. Patients who require Interpreter Services: (for hearing-impaired patients or non English speaking patients)
    - A sign is usually posted in the patient's room or on the door stating, "Patient requires Interpreter Service".
    - Phlebotomist must go to the Nurses station and ask to activate the "Interpreter Service"; an estimated time will be given.
    - Only proceed to perform Phlebotomy after the service has been activated. **Note**: The translator may be present on the unit, or available by Interpreter Phone Service activation. Proceed to give clear, simple directions on the Phlebotomy procedure, via the phone service or translator.

Form revised 3/31/00

- Once the procedure is understood by the patient, and a verbal consent received from the patient, proceed with the phlebotomy procedure.
- During all times follow directions from the patient's nurse. After the completion of procedure, notify nurse & return to the lab. Documentation of the activation of the Interpreter Service is not required in LIS.

B. Inpatient- Pediatric/ Nursery:

1. Pediatric patient identification is conducted in the same manner as adult by utilizing the hospital ID band to verify patient full name and medical record number. The patient or parent/guardian will be asked to state the patient's name, if ages appropriate also verify date of birth as identifier for pediatric patients.

2. Newborns, in the Nursery or on the Mother-Baby Unit, are identified by the hospital issued ID bracelet located on the ankle of the patient. Two-part positive patient ID must be established before any draw is performed.

   Note: The information attached to the bassinette CANNOT be used to identify the newborn and is NOT acceptable to collect a specimen, if no patient identification band is on the newborn.

3. Multiple Siblings:

   If phlebotomy is required on multiple siblings, twins, triplets, etc; patient identification is performed one patient at a time by utilizing the patient's name, medical record number and the specific identifier of "A", "B" or "C" located on the patients ankle/ arm band and corresponding with the requisition. For nursery patients the parent, guardian or nurse may verify correct name. For Pediatric patients, the identification of multiple siblings is conducted as per standardized patient identification protocol.

C. Outpatients:

1. Outpatients are serviced by a token system:
   - When the patient signs in, they are issued a token number.
   - The token number issued is written on the front of the Registration face sheet. Token numbers run from 1-20.
   - Outpatient must be called from the waiting room by the number issued to the patient after orders are transcribed in LIS and Phlebotomist is ready to perform the phlebotomy procedure.
   - Do **NOT** call patients by their names at any time.

2. Receive the token number from the patient and ask the patient to have a seat in the Phlebotomy chair. Double check that the token number matches the number on the registration face sheet.

3. Perform positive patient identification protocol:

Form revised 3/31/00

- Ask patient to state full name and date of birth, match this information to patient's Hospital ID bracelet, LIS labels, registration face sheet and Lab requisition, before starting any procedure.
- Recurring account outpatients do not obtain a Hospital ID bracelet; therefore ask the patient to state their first and last name, and date of birth. Match this information to the patient registration form and the LIS orders/labels, before starting any procedure.

Note:

- A state issued/approved Photo ID is an acceptable and approved form of identification that may be utilized.
- Interpreter Services, a hospital phone based service may be utilized for patients who are hearing-impaired or unable to speak English. Refer to the Interpreter Services packet located with the phones at the front desk. Document on the back of the registration face sheet that Interpreter Service was activated to ensure accurate information was conveyed.
- If English is not the primary language and an Interpreter Service is unable to communicate difficult instructions in a patient-friendly manner, or Interpreter Service is unavailable, or the patient requests an in person interpreter, then hospital allows for an interpreter be present to ensure all pertinent information has been communicated and understood by the patient. If any information is found to be inaccurate at anytime, then the test ordering process and collection process must be discontinued until all information has been corrected. Document on the back of the registration face sheet that Interpreter Service was activated to ensure that accurate information was conveyed and understood by the patient.

If…	Then….
Identification is established	Proceed with Phlebotomy procedure
Discrepancy is noted	**Stop**! Inform the patient of the discrepancy. Return the paperwork to the patient and ask them to return to the Registration Department and have discrepancy rectified and return for blood work. Escort the patient to the front desk area and if necessary accompany patient to the hospital Registration Department and speak with a Representative.

4. Double check all information. Label all tubes drawn in the presence of the patient and place them in the specimen zip lock bag with a biohazard logo.

5. Escort the patient back to the waiting lounge or to the hallway leading out of the Laboratory area. Thank patient for using our services.

6. Receive specimens in LIS and deliver specimens to the Processing area.

Form revised 3/31/00

D. **Outpatient Pediatric and Newborn Patient Identification:**

1. <u>Pediatric patient identification</u> is conducted in the same manner as an adult by asking the patient, parent/ guardian present to state the patient's full name and date of birth. Match this information to patient's Hospital ID bracelet and LIS orders/labels, before starting any procedure.

   Recurring account outpatients do not obtain a Hospital ID bracelet; therefore ask the patient to state their first and last name, and date of birth. Match this information to the patient registration form and the LIS orders/labels, before starting any procedure.

2. <u>Newborn patient identification</u> is conducted by having the Parent or Guardian state the patient's full name and date of birth. Match this information to the hospital issued ID bracelet, outpatient registration face sheet, LIS labels and lab requisition(s).

3. Multiple Siblings:

   If phlebotomy is required on multiple pediatric siblings, twins, triplets, etc; patient identification is performed one patient at a time by having the patient, parent, or guardian state the full name of the patient and date of birth. All information must correspond with the registration face sheet and laboratory labels/requisitions. For newborn patients, the parent or guardian must verify correct name and date of birth.

E. **Unidentified Emergency Patients**:

   Follow Hospital policy for unidentified patients. Unidentified patient must have a temporary but clear designation until identification is established. This identification must be used to label each specimen that was drawn.
   The hospital may use "John Doe" or "Jane Doe" and "Shady Grove Hospital" or "WAH Hospital" depending on where the Emergency Unidentified Patient is located.

F. **Emergency Department (ED) Patients**: (WAH)

1. ED patients will have a yellow/white ID bracelet with last and first name legibly written. Collect SMS/HIS labels from Unit Secretary/Nurse and ask patient to state first and last name. As a second identifier ask for date of birth, compare this information to the SMS/HIS label before performing any phlebotomy procedures.

2. Specimen collection for Blood Bank (Type & Screen, Crossmatch) always includes the use of a separate Hollister ID armband in addition to the Hospital ID band. Refer to the procedure Blood Bank Collection and Labeling for specific information.

If…	Then…
..you are called to go ED for STAT blood draws while you are in the Lab:	• Ask caller for Medical record number/first name, last name of patient. • Use program OER to review all blood orders and to convert 'Nurse to collect' orders to 'Lab to collect' orders.

Form revised 3/31/00

	• Reschedule all Accession numbers to the current time using appropriate code. • Generate LIS labels and proceed to the patient in ED. Notify Nurse of your arrival. • Perform positive patient identification and draw blood specimens. Hand-deliver to specimen processing.
..you are paged by Lab pager or overhead page by telephone operator to go to ED for STAT/Immediate blood draws, when you are on another unit:	• Note time when you were paged and proceed to ED. • Collect appropriate requisitions and HIS/SMS labels from the unit secretary/ Nurse. • Perform positive patient identification and draw appropriate blood specimens. Hand-deliver to specimen processing.

6.　RELATED DOCUMENTS

Your Employee Handbook, Quest Diagnostics Nichols Institute, Chantilly, current edition.

7.　REFERENCES

None

8.　REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP P001.001		
000	7/23/2010	Section 3: update disciplinary action Section 5: remove requirement to spell name Section 6: add Handbook	L. Barrett	Dr. Cacciabeve
001	2/18/2013	Section 1. Purpose clarified Section 4: add CE, Interpreter Services, ED, patient identification, revise appropriate order Section 5: A.10: update Code Alert Scenarios A.11: add utilization of Interpreter Services B.2: add positive identification of newborns C: add token number process, add Interpreter Services & documentation E: add examples of names used by hospital	S Khandagale	Dr. Cacciabeve

9.　ADDENDA AND APPENDICES

None

Form revised 3/31/00