

## TRAINING UPDATE

**Lab Location:** SGAH & WAH  
**Department:** Processing

**Date Distributed:** 1/26/2015  
**Due Date:** 2/23/2015  
**Implementation:** 2/24/2015

### DESCRIPTION OF PROCEDURE

<b>Name of procedure:</b>
<b>Specimens without Orders      SGAH.S898, WAH.S897 v0</b> <b>Specimens without Orders Log   AG.F318.0</b>
<b>Description of change(s):</b>
<p>This is a NEW SOP written to define a process that was implemented several months. The SOP:</p> <ul style="list-style-type: none"><li>• Identifies which samples and info must be logged</li><li>• How often to call</li><li>• Specific steps for BB specimens</li><li>• Separate instructions for follow up on <b>irreplaceable</b> and replaceable specimens</li><li>• Review of the log on every shift</li></ul> <p>The log is being changed to include space to document resolution and tech code</p> <p><b>This SOP and FORM will be implemented on February 24, 2015</b></p>

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

**Approved draft for training (version 0)**

Non-Technical SOP

<b>Title</b>	<b>Specimens without Orders</b>	
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<b>Owner</b>	Samson Khandagale	Date: 1/15/2015

<b>Laboratory Approval</b>		
<b>Print Name and Title</b>	<b>Signature</b>	<b>Date</b>
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

<b>Review:</b>		
<b>Print Name</b>	<b>Signature</b>	<b>Date</b>

**TABLE OF CONTENTS**

1. PURPOSE..... 2  
2. SCOPE ..... 2  
3. RESPONSIBILITY..... 2  
4. DEFINITIONS..... 2  
5. PROCEDURE..... 3  
6. RELATED DOCUMENTS ..... 4  
7. REFERENCES ..... 4  
8. REVISION HISTORY..... 4  
9. ADDENDA AND APPENDICES ..... 4

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**1. PURPOSE**

This procedure outlines the process for handling specimens received in the lab without a test order (computer or manual requisition).

**2. SCOPE**

This procedure applies to all staff assigned to Specimen Processing.

**3. RESPONSIBILITY**

All staff assigned to Specimen Processing must understand and comply with this procedure.

**4. DEFINITIONS**

Rainbow – a single collection of every color / type of vacutainer tube

Irreplaceable specimen – a specimen that has been obtained by invasive means that is not easily obtained or replaced, i.e. CSF, body cavity fluids, fine needle aspirations, surgical biopsies, etc.

Replaceable specimen – a specimen that can be replaced through repeated venipuncture or non-invasive specimen collection, i.e. blood, random urine, sputum, or stool.

## 5. PROCEDURE

1. If you receive or discover a sample in the laboratory that does NOT have orders (either already placed in the computer or on a manual requisition), document the specimen on the 'Specimens without Orders Log' in specimen processing.

**Exceptions:**

- Blood samples collected as part of a 'Rainbow' by the Emergency Department are EXCLUDED from this SOP. Refer to the procedure Extra Specimens, Holding.
  - Blood samples with a green "ABO retype" label are delivered to Blood Bank (BB).
2. Record the following information:
    - a. Date and time specimen received
    - b. Patient location
    - c. Patient medical record or billing (FIN) number
    - d. Specimen type (blood, urine, etc.)
  3. Immediately call the nursing unit (or other patient location) to report that we have received a specimen without any orders. Instruct nurse to place order(s) and/or complete the task in Cerner.
  4. On the log, record the name of the person you contacted, the time, resolution and your tech code. Document legibly every call attempt, even if there is no answer.
  5. Blood Bank specimens are delivered to BB after logging and documenting the initial call. BB staff is responsible for follow up on these samples. Place all other specimen(s) in the bin labeled "Specimens without Orders".
  6. For **irreplaceable** samples:
    - a. Check in the LIS every hour for orders. If orders are present, then process the sample as described in the procedure Specimen Processing Duties and Receipt. Document the resolution on the log as 'orders received'.
    - b. If there is still no order, make another call to the unit and document each follow up call on the log. Document the resolution on the log as 'follow up call'.
    - c. If unable to obtain orders for a specimen after 2 hours or before the end of the shift, contact the Charge Nurse / Nurse Manager for instructions. Document this call (including the nurse's name) on the log. Complete a Quality Variance (QV) form to describe the circumstances, attach a copy of the log and submit to a supervisor or manager immediately.
    - d. Do NOT discard any irreplaceable samples. Retain CSF for one month and body fluids for 7 days; refer to policy Retention of Records and Materials.

7. For other replaceable samples:
  - a. Check in the LIS every hour for orders. If orders are present, then process the sample as described in the procedure Specimen Processing Duties and Receipt. Document the resolution on the log as 'orders received'.
  - b. If there is still no order, make another call to the unit and document each follow up call on the log. Document the resolution on the log as 'follow up call'.
  - c. Continue to call the unit every 2 hours, documenting every call. If unable to get orders within 8 hours of receiving the specimens, discontinue calling.
  - d. Discard the specimen the next day and document on log as 'discarded' along with date and your tech code. Complete a QV form for each discarded sample and submit to a supervisor or manager.
  
8. The Group Lead / Processing Staff must review the log each shift, follow up on any unresolved specimens and document all actions on the log. The log is filed in the daily manual requisitions folder at the end day.

**6. RELATED DOCUMENTS**

Specimens without Orders Log (AG.F318)  
 Specimen Acceptability Requirements, laboratory policy  
 Retention of Records and Materials, laboratory policy  
 Specimen Processing Duties and Receipt, processing procedure  
 Extra Specimens, Holding, processing procedure

**7. REFERENCES**

N/A

**8. REVISION HISTORY**

Version	Date	Reason for Revision	Revised By	Approved By

**9. ADDENDA AND APPENDICES**

None

