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Title: Patient Identification

Owner: LESLIE BARRETT

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Non-Technical SOP

Title	Patient Identification	
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Laboratory Approval

Print Name and Title	Signature	Date
<i>Refer to the electronic signature page for approval and approval dates.</i>		
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1. PURPOSE

To define the procedure for positive patient identification prior to any phlebotomy procedure based on two unique identifiers.

2. SCOPE

All laboratory personnel must understand and adhere to this procedure when obtaining patient specimens.

3. RESPONSIBILITY

All staff members who collect patient samples must demonstrate competency in proper patient identification. Failure to follow this procedure will result in disciplinary action up to and including termination.

4. DEFINITIONS

NA

5. PROCEDURE

Step	Action
1	<p>Staff must have a valid provider order to obtain a sample from any patient. Valid orders include a written order on a prescription pad or downtime form or a computer-generated order in the hospital or laboratory computer system. Staff members are not allowed to accept verbal orders for phlebotomy.</p> <p>Note: When a lab employee is called to a code alert (such as code blue or rapid response), request patient identification labels upon arrival and complete the patient identification procedure listed above. Specimens may be collected using Cerner (armband or non-armband) labels, because there will be a short delay before lab labels print.</p>

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Step	Action
2	<p>Obtain one of the following prior to patient identification:</p> <ul style="list-style-type: none"> A. Downtime or other laboratory requisition that clearly indicate which tests to be collected and patient labels. B. LIS (Sunquest) labels from laboratory printers C. Cerner (armband or non-armband) labels <p>All patient labels/requisitions used for patient identification must contain, at a minimum,</p> <ul style="list-style-type: none"> A. Full patient name <ul style="list-style-type: none"> a. Newborns are named using the mom's first and last name and the gender of the infant (for example, Jones, GirlJane or Morris, GirlJean). b. Newborn multiples (twins, triplets, etc.) will have a letter identifier added to differentiate the baby (for example, Jones, ABoyJane or Jones, BGirlJane). c. When a patient requests an alias, the last name may be viewed as the hospital name (Shadygrove or WAH). d. When the patient's identity cannot be determined, the hospital will assign an alias (such as John Doe). B. Patient medical record number (MRN) or financial identification number (FIN) C. Patient birthdate or age
3	<p>Introduce yourself to the patient using AIDET technique (Acknowledge, Introduce, Duration, Explanation, Thank you).</p> <ul style="list-style-type: none"> A. Explain to the patient that you must identify him/her properly each time you enter the room and the process is intended to ensure the highest level of patient safety. B. For inpatients, <ul style="list-style-type: none"> a. Knock and ask for permission to enter the patient room. b. Explain to the patient that you must turn on the light to perform the identification procedure if the room is dark.
4	<p>Verify that the patient is wearing a patient identification wristband.</p> <ul style="list-style-type: none"> A. STOP and do not proceed if the patient is not wearing a wristband. B. Notify the patient's nurse (inpatient) or admitting (outpatient) and request that an identification band be placed on the wrist before proceeding. C. Laboratory staff will never place a wristband on a patient. D. Handwritten armbands are acceptable, provided they contain the patient name, medical record number, and birthdate.

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Step	Action
5	<p>Request that the patient state and spell his/her name and state his/her birthdate. Compare the name and birthdate that the patient states and/or spells to the name and birthdate on the patient wristband. Both the name and birthdate must match exactly.</p> <p>A. If a discrepancy exists, notify nursing staff or admitting to resolve the discrepancy prior to proceeding.</p> <p>B. If the patient is unable to respond because he/she is too young (i.e. nursery babies), unresponsive, or otherwise incapacitated, ask a family member for the information, if available.</p> <p>C. If no family member is present, proceed to the next step.</p> <p>NEVER use a name card on the bed or bassinette to identify a patient.</p>
6	<p>Compare the patient name and medical record number on <u>each</u> label to the name and medical record number on the patient's hospital wristband. Both must match EXACTLY. Do not proceed if discrepancies exist.</p>
7	<p>Proceed with the specimen collection procedure <i>after</i> the patient has been properly identified.</p>

Outpatient Area

Step	Action
1	<p>In an attempt to protect patient privacy, patient names will never be called in public areas to include the waiting area of the outpatient laboratory.</p>
2	<p>Each outpatient will be assigned a number when they sign in at the outpatient laboratory. The numbers run from 1-20.</p>
3	<p>Outpatients will be called into the laboratory in the order of arrival and by number.</p>
4	<p>The patient will be identified per the patient identification procedure above once in the laboratory area.</p>

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6. RELATED DOCUMENTS
 None

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
002	7/15/16	Header: Added WAH Sections 4, 5: Updated wording and format throughout SOP for clarity. Changed identification procedure to align with hospital policy. Moved interpreter data to new SOP. Footer: Version # leading zero's dropped due to new EDCS in use as of 10/7/13.	S. Codina	Dr. Cacciabeve

9. ADDENDA AND APPENDICES
 None

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