TRAINING UPDATE

Lab Location: Department:

SGMC and WOMC

Date Implemented:

3.10.20

artment: Processing

Due Date:

3.31.20

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Specimen Processing Duties

Description of change(s):

This procedure was updated to reflect the changes in the specimen processing duties form:

- 1. The form is now a weekly form. We will start a new form each Sunday on dayshift.
- 2. Each shift is REQUIRED to sign off the items for their shift. Staff members will document their tech codes in the designated space as each task is completed.

3. RECORD RETENTION:

- a. At SGMC, written orders (downtime, miscellaneous test, exposures, etc) will be sent to OPL daily for filing. Please send at the end of each shift. At WOMC, written orders will be given to Wendell daily for filing.
- Computer printouts of electronic orders (add on tests, Cerner order sheets, Mercy health orders etc) will be saved for 30 days and discarded.
- c. Problem logs, dropoff logs, checklists and specimens without orders logs will be saved for 30 days and discarded.
- d. Retention will work as follows:
 - i. Save February in one drawer and March in another drawer.
 - ii. On April 1, discard the entire month of February and use the drawer to file April.
 - iii. On May 1, discard the entire month of March and use the drawer to file May.
- e. NONE of the records need to be filed by day. Please just file all records of one type together. For example, one file for add on orders, one file for specimens without orders logs, etc.

SGAH.S923 Specimen Processing Duties

Copy of version 2.0 (in review)

Effective Date 3/5/2020

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Printed By

Stephanie Codina

Organization

Adventist HealthCare

Approval and Periodic Review Signatures

Туре	Description	Date	Version	Performed By	Notes
Approval	QA approval	2/21/2020	2.0	Leslie Barrett	
Periodic review	FO approval	2/17/2020	1.0	Stephanie Codina	
Approval	Lab Director	4/4/2018	1.0	Nicolas Cacciabeve	Recorded when document uploaded to MediaLab
Periodic review	Designated Reviewer	4/4/2018	Oor.	Nicolas Cacciabeve	Recorded when document uploaded to MediaLab

Approvals and periodic reviews that occured before this document was added to the MediaLab Document Control system may not be listed.

Version History

Version	Status	Туре			Date Added	Date Effective	Date Retired
1.0	Approved and Current	First version in Document Contro	ol	5	2/25/2019	4/13/2018	Indefinite

Linked Documents

- AG.F333 Reference Lab Problem Log
- AG.F404 Specimen Processing Daily Duties Checklist

Adventist HealthCare

Site: Shady Grove Medical Center, White Oak Medical Center

Title: Specimen Processing Duties

Non-Technical SOP

Title Specimen Processing Duties			
Prepared by	Samson Khandagale, Neal Maskare	Date: 9/1/2015	
Owner	Stephanie Codina	Date: 3/12/2018	

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:	4				

TABLE OF CONTENTS

1.	PURPOSE	· C		1
2.	SCOPE			
3.	RESPONSIBILITY			1
4.	DEFINITIONS			1
5.	PROCEDURE			2
6.	RELATED DOCUMENTS			5
7.	REFERENCES			5
8.	REVISION HISTORY			5
9.	ADDENDA AND APPENDICES	S	<u> </u>	5
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	11		"LO)

1. PURPOSE

This procedure describes the basic duties and tasks performed in Specimen Processing.

2. SCOPE

This procedure applies to all staff assigned to Specimen Processing.

3. RESPONSIBILITY

All staff assigned to Specimen Processing must understand and perform the duties outlined in this procedure.

4. **DEFINITIONS**

NA

SOP ID: SGAH.S923

SOP version # 2

CONFIDENTIAL: Authorized for internal use only.

Page 1 of 5

Site: Shady Grove Medical Center, White Oak Medical Center

Title: Specimen Processing Duties

5. PROCEDURE

Step	Action
1	Specimen processing staff members are primarily responsible for receiving specimens in the laboratory and processing those specimens for in-house analysis or reference laboratory testing. Routine, ongoing duties include: A. Specimen receipt and processing B. Preparing specimens for reference lab testing C. Processing add on orders as received D. Answering the telephone and providing customer service E. Cancelling and reordering specimens that do not meet testing requirements (QNS, hemolyzed, icteric, incorrect container, etc.).
2	The specimen processing duties daily checklist will be initiated by dayshift on Sunday of each week. The checklist will be used to ensure staff members complete all tasks on schedule. All staff members are expected to share responsibilities. The tech who completed the task will document his/her tech code on the form.
3	One processing employee must always sit at the station in front of the drop off window to ensure the highest level of customer service to hospital employees dropping off specimens. A. The station in front of the drop off window should never be vacant. B. This station will NOT be used for processing send out specimens, FES, or training. C. This employee wears the processing vocera.
4	All processing staff members must communicate with the tech in charge when leaving the processing area for any period of time. This includes the coordination of lunches and breaks to ensure processing is covered at all times.

Daily Duties

Step	Action
1	Staff must wipe work surfaces and the telephone with a hospital-approved disinfectant wipe at the beginning and end of each shift.
2	The staff members sitting in front of the processing window will be responsible for managing the processing vocera badge. This person will ensure the vocera has adequate battery and processing staff are logged into the vocera system.
3	The morning shift will be responsible for filing specimen receipt logs and specimens without orders logs from the previous day in the designated areas.
4	Document temperature readings and perform centrifuge maintenance per procedure once per day.

SOP ID: SGAH.S923 SOP version # 2 CONFIDENTIAL: Authorized for internal use only.

Page 2 of 5

Step	Action	
5	All staff will pull pending logs for nurse collected samples for each site (hospital, ARH, ABH) at the times outlined in the procedure.	
6	Processing staff will prepare specimens for shipment to the sister hospital (SGMC or WOMC) as indicated by current procedure and courier pickup times. All shipments should be prepared in advance of the scheduled courier pickup time.	
7	Staff will address and document critical value reports faxed from the reference laboratory per procedure. A. Client services will manage critical and priority calls during normal business hours. B. Processing will call critical values after hours and document calls in callback.	
8	 The reference lab will fax problem logs for all specimens that cannot be immediately processed. A. Specimen processors will regularly (at least every hour) check the fax machine for problem logs. B. The processors will troubleshoot the specimen issues and address during the same shift to expedite testing. C. If a test is cancelled by the reference laboratory, a. The processor will notify the patient care area or physician. b. The test will be cancelled in the LIS with proper documentation of who was notified and the time/date of notification. D. Information requests or clarifications will be documented on the form and faxed back to the reference laboratory using the fax number listed on the form. E. Retain the problem logs in the designated area. F. Contact the tech in charge or supervisor for issues that cannot be easily resolved. 	
9	Review the Quest unreceived reports per procedure.	
10	Prepare newborn metabolic screens for shipment to the State of Maryland Reference Laboratory for testing. NMS should be packaged daily (Monday through Saturday) in advance of the courier pickup.	
11	Prepare reference lab batches for send out prior to each courier run.	
12	Track all specimens per procedure at the end of each shift.	
13	SGMC Only: Cytology will bring an AP Tracking Log to the laboratory each evening. This log lists all specimens that were received in AP. Processing staff will review each order to ensure there are no pending laboratory orders on the specimens. This must be done in a timely manner to ensure the laboratory obtains specimens before they are processed for anatomic pathology testing.	

SOP ID: SGAH.S923 SOP version # 2 CONFIDENTIAL: Authorized for internal use only.
Page 3 of 5

Site: Shady Grove Medical Center, White Oak Medical Center

Title: Specimen Processing Duties

Step	Action
14	Staff members will clean the refrigerators and freezers as assigned. This includes discarding unnecessary items and wiping the inside and outside of the refrigerator/freezer with a hospital-approved disinfectant wipe.
15	Inventory and restock supplies. Reorder from the Chantilly Supplies Department (703-802-6900 extension 67500) as needed.

Weekly Duties

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Step	Action		
1	Review the overdue log for sendout specimens and resolve issues. A. Fix ordering issues. B. Inquire into the status of results. C. Cancel tests that have been rejected by the reference laboratory. This includes notifying the ordering provider and cancelling in Sunquest.		
2	Discard microbiology specimens that are more than 30 days old.		
3	Group lead must review centrifuge, refrigerator, and freezer logs.		

Record Retention

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Step	Action
1	The following records are maintained in the processing department for 1 month in designated folders/binders. Discard records after 1 month. • Microbiology and general lab sendout paperwork (ROB and FES) • Quest unreceived reports • Completed courier logs • Problem Logs • Specimen Processing Daily Duties Checklist • Specimens without Orders logs • Specimen Drop Off logs
2	 The following are stored in the Outpatient Laboratory Area for 1 month and then sent to offsite storage for 11 years using retention code LAB310. Daily Requisitions (all manual requisitions and outpatient lab requisitions) Downtime requisitions Chromosome / Bone Marrow / Products of Conception (POC) orders Note: All requisitions and non-interface reference lab result reports are saved for 11 years (Iron Mountain). These must be kept separate from other logs / reports listed above.

Adventist HealthCare

Site: Shady Grove Medical Center, White Oak Medical Center

Title: Specimen Processing Duties

RELATED DOCUMENTS 6.

Specimen Processing Daily Duties Checklist (AG.F404)

Specimen Receipt and Processing procedure

Vocera Communication

Centrifuge Functional Quality Control, Core Lab (AG.F365)

Centrifuge Use, Maintenance and Function Checks

Temperature and Humidity Quality Control

Room Temperature Log (Non-Technical) (AG.F172)

Manual Temperature Log (AG.F364)

Pending Log for Nurse Collected Specimens

Callback

Reference Lab Problem Log (AG.F333)

Chantilly Unreceived Log

Newborn Metabolic Screening

FES, Processing Microbiology Orders

Tracking Specimens between Sites

Overdue Logs for Sendout Specimens

Fluid Processing – Non Urine

Retention of Records and Materials

7. REFERENCES

8. REVISION HISTORY

None	RENCES	CORY		
Version	Date	Reason for Revision	Revised By	Approved By
0	3/12/18	Updated owner Header: Added WAH Section 5: Created a checklist, resdesigned the SOP to match the new checklist. Section 6: Updated documents	SCodina	NCacciabeve
1	2/17/20	Header: Changed WAH to WOMC Section 5: Updated procedure to match updated form. Changed record retention—problem logs, dropoff logs, checklists, and specimens without orders logs changed to 30-day retention. Removed reference lab results; they are not coming to processing.	SCodina	NCacciabeve

9. ADDENDA AND APPENDICES

None

SOP ID: SGAH.S923 SOP version # 2

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