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Specimen Rejection Protocol

Purpose:

This procedure defines criteria for rejection of compromised specimens and instructions for documentation and processing.

Laboratory personnel do not have the authority to override this policy.

Policy:

Criteria for the acceptance or rejection of specimens is based on the regulatory requirements as specified in *NYSDOH Specimen Processing Sustaining Standard of Practice 4¹*:

1. The apparent condition of the specimen indicates that it is unsatisfactory for testing or that it is inappropriate for the test requested.
2. It has been collected, labeled, preserved or otherwise handled in such a manner that it has become unsatisfactory or unreliable as a test result.
3. It is perishable and the time lapse between the collection of the specimen and its receipt by the laboratory is of such duration that the test finding may no longer be reliable.
4. The date and, in the case of tests specified by the department, the hour when the specimen was taken by the physician or other authorized person is not furnished with the specimen.

Definitions:

Irretrievable specimens: specimens which cannot be re-collected from a patient. Examples include (but are not limited to) biopsies, GC-Chlamydia swabs, tissue specimens, specimen for timed drug levels, and body fluids other than blood and urine. Procedures for handling these specimens are necessarily different from those samples that can be easily recollected (see Appendix 1).

Retrievable specimens: specimens which can be re-collected from a patient. Examples include blood specimens, urine specimens and stool specimens. Unless there are extenuating circumstances approved by a supervisor, unacceptable retrievable specimens are rejected (see Appendix 2).

Specimens Unsatisfactory for Testing are:

1. **Unacceptable Specimens:** the integrity of the specimen is considered compromised. Examples include specimens that are **grossly** hemolyzed, clotted, QNS, collected in the wrong tube, contaminated, etc.

Each department has procedures for specimen rejection based on the methodology used for testing. Unacceptable specimens will be processed at the discretion of a supervisor/charge person.

2. **Unlabeled/Mislabeled Specimens:** specimens that are not identified and labeled as stated in the hospital's *Patient Identification Policy* (ADM II-68) and *Specimen Labeling Policy* (ADM II-49).

Procedures: See Appendices 1-4 for instructions on handling unsatisfactory specimens.

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NOTES:

- Requests to process unsatisfactory specimens will be addressed by a laboratory supervisor/charge person. If specimens are accepted, the final report shall indicate the nature of the problem and, if applicable, that caution is required when interpreting the result¹.
- For situations where a retrievable specimen is accepted for testing. The supervisor/charge person must provide the reason for accepting the specimen. This is documented as an internal comment attached to the result (canned comment LSDSH).
- Interfering substances: specimens with potentially interfering substances (i.e., slight to moderate hemolysis, lipemia, high bilirubin) can be used for testing providing the appropriate canned comment describing the interference is attached to all affected results on the patient report (see department procedures).
- Prior to re-collecting specimens, check with all departments to determine if other specimens collected at the same time need to be re-collected prior to contacting the provider/patient care unit.
- Rejected specimens are clearly marked as cancelled and handled according to department procedures established by the supervisor.
- For documentation purposes, all requests are accessioned into the computer system. The request is then cancelled and the appropriate canned comment entered (see Appendix 3).
- *Specimen Discrepancy Forms* are located in the Accessioning Problem Book. Completed forms are also maintained in the Accessioning Problem Book and must be kept for seven years.
- See Blood Bank and Pathology procedures for special requirements on handling specimens.

Quality Assurance:

When an unsatisfactory specimen is accepted for testing, a Laboratory CQI form is completed and forwarded to the Quality/Compliance Supervisor. The incidents are reviewed by the Laboratory Quality Improvement Committee.

References:

1. NYS DOH NYCRR, Part 58; *Clinical Laboratory Standards of Practice, Processing SS4*.
2. *Patient Identification Policy* (ADM II-68); Saratoga Hospital Administrative Manual II.
3. *Specimen Labeling Policy* (ADM II-49); Saratoga Hospital Administrative Manual II.

Attachments:

- Appendix 1: *Processing Irretrievable Specimens*
- Appendix 2: *Processing Retrievable Specimens*
- Appendix 3: *Canned Comments*
- Appendix 4: *Specimen Discrepancy Form*

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9/6/11
Date

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Date

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Appendix 1

Processing Irretrievable Specimens

Note: Review and written approval by a supervisor/charge person is required prior to processing unsatisfactory irretrievable specimens.

Origin of Specimen	Reason for Rejection	Procedure
Patient Care Area	Specimen Unlabeled/ Mislabelled	<ul style="list-style-type: none"> Place "NAME ALERT" label on the specimen. Contact the patient care area and notify them of the discrepancy. A staff member from the unit must come down to the laboratory to make the correction. A <i>Specimen Discrepancy Form</i> must be completed and submitted to supervisor/charge person for review and approval. Copy the completed <i>Specimen Discrepancy Form</i> and submit to the testing department along with the specimen. When resulting the tests, enter the canned comment LS DIN under result comments.
Outpatients, Specimen Drop-offs	Specimen Unlabeled/ Mislabelled <i>Specimen is not perishable or provider requests specimen be returned to their office</i>	<ul style="list-style-type: none"> Place "NAME ALERT" label on the specimen and the requisition, attach a <i>Specimen Discrepancy Form</i> and return to physician's office. Make arrangements with the courier to return the specimen. Order the tests and enter canned comment LSRET in the comment section of the requisition. Notify testing department that the specimen has been returned so it can be noted on their outstanding report. When the specimen is returned, submit the completed <i>Specimen Discrepancy Form</i> to supervisor/charge person for review and approval. Copy the <i>Specimen Discrepancy Form</i> and submit to the testing department along with the specimen. Technical staff: when resulting the tests, enter the canned comment LS DIN under result comments.
	Specimen unlabeled/ Mislabelled <i>Perishable specimen</i>	<ul style="list-style-type: none"> Place "NAME ALERT" label on the specimen and the requisition. Process the specimen and hold results. Once the provider office is contacted process as stated above.
	Unsuitable Specimens <i>Provider request that specimen be processed.</i>	<ul style="list-style-type: none"> Refer request to supervisor/charge person. If physician insists that the tests be run, a <i>Specimen Discrepancy Form</i> must be completed and submitted to supervisor/charge person for review and approval. Copy the <i>Specimen Discrepancy Form</i> and submit to the testing department along with the specimen. Process specimen and enter the canned comment LSDPHY in the result section. Note: place result in the canned comment section.

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Appendix 2

Processing Retrievable Specimens

Source	Procedure
Patient Care Area (Inpatient)	<ul style="list-style-type: none"> • Contact patient care unit. • Cancel the test in the computer system using the appropriate canned comment (LCAN "Lookup"). If a comment is not available that fits the situation, refer to a supervisor/charge person. • If the specimen was collected by the laboratory, re-order the test in the computer system and dispatch a phlebotomist for the redraw. • Specimens collected by the patient care area will be reordered and collected by that unit.
Outpatients, Specimen Drop-offs, Discharged patients	<ul style="list-style-type: none"> • Contact the provider. • Order the test in the computer system and then cancel the test using the appropriate canned comment. • Complete an "Outpatient Recollection Request" (form # QA20) as per instructions on the form.
Reference Laboratory Testing	Upon receiving notification from the reference lab that a specimen is unacceptable, the technologist will follow the procedures as stated above.
Incompletely labeled specimens	Contact the patient care area/provider and request the missing information. Document in the computer system using canned comment LSDII.
Review and written approval by a supervisor/charge person is required prior to processing unsatisfactory retrievable specimens.	
Provider request that specimen be processed.	<ul style="list-style-type: none"> • Refer request to supervisor/charge person. • If physician insists that the tests be run, a <i>Specimen Discrepancy Form</i> must be completed and submitted to supervisor/charge person for review and approval. • Copy the <i>Specimen Discrepancy Form</i> and submit to the testing department along with the specimen. • Process specimen and enter the canned comment LSDPHY in the result section. Note: place result in the canned comment section.
Requisition or labeling errors identified after results released	<ul style="list-style-type: none"> • Specimen labeling errors – once the error is detected notify the physician and initiate corrective action as appropriate. • Requisition errors-requests to change patient information on a requisition must be submitted in writing by the provider on official letterhead and approved by a supervisor. The written request is maintained in the Accessioning Problem Log. • Edit the report to include notification of the change.

Mnemonic	Description
LCAN (Look-up)	<p>A list of cancelation comments is available in Meditech. To access the computer list of canned comments:</p> <ol style="list-style-type: none"> 1. In the comment section of the Meditech cancelation routine, press "F4". 2. Type "LCAN" and press "F8" for the list of canned text.
LSDIN	<p>Irretrievable specimen discrepancy documentation: Discrepancy description: [] Interpret results with caution. Name of person who identified specimen: [] Date [], time [] @Approved by supervisor: []</p>
LSRET	<p>Documentation of Irretrievable specimen- returned to provider: Discrepancy description: [] Return requested by: [] Specimen returned [today] @ []. @Approved by supervisor: []</p>
LSDREV	<p>Irretrievable specimen returned to laboratory: Specimen received [today] @ [now]. Name of person who identified specimen: [] @Reviewed by supervisor: []</p>
LSDPHY	<p>Test result: Provider requests that test be performed: Integrity of the specimen in question due to []. Interpret results with caution. Test performed at the request of Provider: [] Reason for request: [] @Approved by supervisor: []</p>
LSDII	<p>Specimen Labeling-incomplete information : [] obtained from []; [today] @ [] by [user]</p>

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Appendix 4

SPECIMEN DISCREPANCY FORM

Date: _____ Physician's office/Patient care unit: _____

Patient's Name: _____ DOB: _____

Specimen #: _____ Test _____ Specimen Type _____

LAB USE ONLY:

Reason for Rejection:

The attached specimen has failed acceptance criteria for the following reason:

- Specimen was not labeled.
- Patient identification error specimen/requisition: _____
- Unacceptable integrity: _____

Request to Process Specimen:

Request submitted by _____ Approved by Supervisor: _____
(name) (name)

Reason for request: _____

Specimen Return to Provider (outreach only):

Date/time returned to office: _____ Returned by _____

Date/time received in lab: _____ Received by: _____

To be Completed by Provider:

Signature of health care provider taking responsibility for the sample is required.

- Specimen unlabeled/Patient identification error:**

I affirm the accuracy of the corrected information provided and request that the specimen(s) be analyzed.

Name _____ Signature _____ Date: _____

- Unacceptable integrity: I request that the specimen(s) be analyzed:**

Name _____ Signature _____ Date: _____