Policy: 401.ADM.3.03

Holyoke Medical Center, Inc.
575 Beech Street
Holyoke, MA 01040

Laboratory

Category 3

Specimen Labeling

Purpose

To define a standard manner for properly labeling specimens to meet all regulations

Principle

It is the policy of the laboratory that all specimens be labeled in a manner that accurately identifies the specimen. A minimum of two identifiers, full name and another unique identifier is required.

Procedure

After the patient has been properly identified, and the appropriate specimen collected, the labeling of the specimen is the next important step in the specimen handling process. The accurate transfer of the identification process from the patient to the specimen is crucial to patient care.

Laboratory specimens should be labeled in the following manner:

1. Patient's first and last name; this is required.
2. A second unique identifier such as date of birth (preferred), medical record number, social security number (one of the identifiers) is required.
3. Patient's account number (if available).
4. Date and time of collection.
5. Patient location.
6. User ID of person collecting the specimen. (Initials if person doesn't have a user ID)
7. Accession number - if available
8. Every preprinted label must be checked with the patient's two identifiers ***before*** being

placed on containers. The preprinted label needs to be placed on the container so that the original name is showing.

NOTES:

- All information on the specimen label and on the requisition **MUST** match.

- When information on the label is incorrect and it might lead to a potential error in patient identification it is best practice to recollect the specimen. However, there may be circumstances when recollection is not possible or practical (e.g. for specimens that are impossible or difficult to recollect, such as cerebrospinal fluid, tissue samples, bone marrow, etc.). (See Specimen Rejection Policy (401.ADM.3.04). Any changes in the label must be approved by a pathologist and a Specimen Rejection/Patient Recall Form should be completed.

- All specimens should be labeled in ink. Insure positive patient identification **BEFORE** patient is drawn (see Phlebotomy procedure - **Positive Patient Identification**). Specimens **MUST** be labeled in the presence of the patient – **NOT** after leaving the bedside or the draw station. (Labels must be placed on the container; not on the lid/cap/bag.)

- A Blood Bank identification band must be used on all patients for whom a current or possible **Type and Screen** has been ordered. Patient Identification for these samples requires identification by **TWO** HMC staff members. Both staff members take responsibility for accurate identification and must initial the requisition as noted in the Phlebotomy Policy: 408-I- 004-03.

- Tech ID must be placed on all requisitions for specimens collected by Laboratory personnel. One requisition per patient per draw should have the tech ID circled for productivity update.

- Microtainers must be labeled minimally with patient's first and last name and a second unique identifier. Ensure specimens from twins possess a unique identifier.

- Detailed procedures for patient identification and specimen labeling are located in the Phlebotomy Manual.

References

1. CLSI, "Procedures for the Collection of Diagnostic Blood Specimens by Venipuncture"; Approved Standard - Sixth Edition, 2007. CLSI document H-3-A5.
2. National Patient Safety Goals, The Joint Commission. NPSG.01.01.01. January 1, 2012.
3. Laboratory General Checklist. College of American Pathologists. GEN.40490. GEN40491. 7.31.2012.

Approved By:		10/28/16
	John J. Szczepanek, MT (ASCP), Laboratory Manager	Date
	MD	10/31/16
	Thomas S. Gould, M.D., Medical Director	Date

Prepared By: Joan M. Poutré

Adopted or Date initiated: 12/1989

Revised and effective date: 02/1991, 05/1993, 01/1994, 12/1994, 04/1999, 03/2000, 02/2001, 02/2003, 01/2005, 01/07, 02/2008, 09/2009, 04/2010, 11/2012

Associated Procedure: Specimen Labeling, 408.I.004.2

Reviewed:

Date	Lab Manager/Designee	Date	Lab Manager/Designee

Revision History			
Version	Summary of Changes	Author	Date
15	Clarified identification and labeling; added revision history table	glik	11/13/12
16	Address removed as form of ID, added associated procedure	glik	10/28/16