

Departmental Policy
POLICY NO.: 200.02.100P

POLICY TITLE: Laboratory Specimen Collection, Labeling and Handling

Submitted by: Dr. Sergio Gonzalez- Arias, MD, PhD, FAANS, FACS
Title: Executive Associate Dean, Office of Clinical Affairs, Chair of QIPSC

Approved by: Quality Improvement Patient Safety Committee (QIPSC)

Committee Chair: Dr. Sergio Gonzalez- Arias, MD, PhD, FAANS, FACS
Title: Executive Associate Dean, Office of Clinical Affairs, Chair of QIPSC

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SUMMARY & PURPOSE: The integrity and the results of a patient specimen (blood, urine, other) can be affected if the specimen is improperly collected, mislabeled, mishandled and sent to the wrong laboratory for processing. Herbert Wertheim College of Medicine (HWCOM) establishes this policy to ensure that patient specimens are collected correctly for accurate patient testing.

SCOPE/APPLICABILITY: This policy applies to the HWCOM Clinical Locations where faculty, students and /or staff obtain patient specimens that are processed in an affiliated licensed laboratory. (Quest, LabCorp, or Aurora Laboratories). This policy does not include Point of Care Lab testing as this information is covered in a separate policy titled *Point of Care Testing*. The HWCOM clinical locations where specimens are drawn are: FIU Health Modesto Maidique, ("MMC"), FIU Health Broward, Green Family Foundation NeighborhoodHELP Mobile Health Centers. This policy *excludes*: Green Family Foundation NeighborhoodHELP Household visits, the Linda Fenner 3D Mobile Mammography Center and the Green Family Foundation NeighborhoodHELP Mobile Dental Van because specimens are not drawn at these locations. For faculty, students and staff that are obtaining specimens in an *affiliated* hospital, outpatient and diagnostic center the policies and procedures of those institutions will govern their responsibilities.

POLICY: This policy defines how to safely collect, label and handle a patient specimen with the involvement of the patient from the time of collection to the time the specimen is picked up by the courier for laboratory processing.

DEFINITION:

Specimen: A small sample or part of a sample taken for a microscopic study. (Examples blood, urine, sputum, tissue sample)

Lab Courier: Couriers pick up and deliver specimens for laboratory testing. The Couriers deliver specimens to Quest, LabCorp and Aurora Laboratories.

Patient and Specimen Identification: Correct patient identification is achieved when the healthcare worker is able to confirm the patient's name, date of birth with the patient, and verify the same information on the specimen label and the requisition with patient involvement.

Patient Identifiers: For the purposes of this policy the *Patient Identifiers* for HWCOP are: (Full name and date of birth) (Month–Day–Year). Medical record identification number can be utilized as a third patient identifier if necessary. See HWCOP Administrative Policy: *Patient Identifiers No.:* **200.02102A**

Active Communication of asking *Patient Identifiers*

Asking the patient to tell the healthcare worker their name and date of birth. (Month–Day–Year).

Passive Communication of asking *Patient Identifiers*

The healthcare worker *telling* the patient their name and date of birth.

National Patient Goal (NPSG): An Industry standard and yearly goal developed to help prevent medical errors and maintain quality and patient safety and reduce harm. NPSG goal #1 is correct use of *Patient Identifiers*.

Misidentification of Specimen: This occurs when a healthcare worker mistakes one patient for another by not following correct procedure and use of patient identifiers during specimen collection.

Specimen Collection and Required Tubes

- The Laboratory websites listed below, or the laboratory guidebooks are located in the laboratory area and assist with the identification of the correct tube, and containers to be utilized for each specimen.
- The lab where a specimen is processed depends on the *type* of the specimen and the patient's insurance carrier that will cover the cost of that specimen. This applies only to patients that have an insurance carrier.

HWCOP Laboratories

Three laboratories are utilized at the HWCOP clinical locations: (Quest laboratories, LabCorp and Aurora). Not all HWCOP Clinical locations will utilize the three laboratories.

- Quest Diagnostics website: www.questdiagnostics.com
- LabCorp website: www.labcorp.com
- Aurora Diagnostics website: www.auroradx.com
- Click on **Test Menu** in each Laboratory website – This menu helps determine the proper tube, container for each specimen, and types of tests that are completed at each of these laboratories.
- EMR Link – www.emr-link.com This site also helps determine the proper tube and container for each specimen.

PROCEDURE:

1. Steps for Specimen Collection:

- Enter EMR Link listed. Verify the order requested by the physician with the requisition for a MATCH.
- In EMR Link, print labels and requisition. Print only the number of labels needed for each specimen. No extra labels.

- Get all necessary equipment to complete the test being ordered (correct tubes, container, gloves, alcohol prep, gauze, Band-Aid)
- Check expiration dates on all tubes, containers. Discard if expired.
- **Do not** pre-label any tubes or specimen containers for safety
- Always Identify yourself to the patient and what tests you will be performing
- **Hand wash** your hands for at least 20 seconds with soap and water or utilize hand sanitizer. Apply Gloves.
- Ask the patient the two *Patient Identifiers*: **Patient Name and Date of Birth. (Month, Day, Year)**
- When asking patients their *Patient Identifiers* use active communication versus passive communication. Ask the patient to state his or her full name and date of birth and wait until the patient *actively* tells you his full name and date of birth. Active patient involvement is best practice.

Example: Active Communication: “Can you tell me your name and date of birth?”

Example: Passive Communication: “Mr. Smith your date of birth is September 13, 1960.”

- The patient’s name and date of birth will be checked against the label and the requisition, prior to specimen collection with the involvement of the patient. This ensures proper identification before the procedure begins.
- A third *Patient Identifier* can be utilized if there are two patients with the same name. In this case, the patient’s Medical Record Identification number can be used. In the Centricity EMR, the Patient ID # serves this purpose. The third identifier is necessary in instances of a patient name alert because two (or more patients) have the same name, names close to being spelled the same and /or pronounced the same. This third identifier also serves to clarify when patient specimens are obtained so that the specimen is properly designated to the right patient.
- Even if you have drawn specimens on this patient before, you will still utilize the patient identifiers and check the label and requisition with the patient for a correct Match. This assures the patient that this is their specimen and no one else’s.
- The patient’s room number or physical location is never utilized as a *Patient Identifier* for specimens
- Draw and obtain specimen

Specimen Labeling:

- Involve the patient in the labeling process. *Label the specimen in the presence of the patient after the specimen has been collected. This assures the patient that this is their specimen.* The National Patient Safety Goals (NPSG) set forth yearly as an industry standard emphasizes the use of *Patient Identifiers* as National Patient Safety Goal #1 in promoting quality and patient safety in all levels of patient care. Pre- labeling of specimens is discouraged to prevent labeling errors with wrong patient labels.
- Minimum label requirements: The label should contain date, time and initials of the staff member who collected the specimen. This information is vital to the laboratory who processes the specimen because if the specimen is lost they will know when it was collected and if the specimen is still valid.

- Do not collect several patient specimens and then label them all together to save time. Ideally, specimens are labeled as soon as they are collected in the presence of the patient with patient involvement.
- Do not print extra labels and keep them in your pockets or drawers as this increases the likelihood of a mislabeled specimen.
- Print only the number of labels you will need, no more, no less. You can always go back and print additional needed labels.
- Do not begin the next patient until you have completely labeled the specimen and completed all the necessary steps.

Specimen Handling:

- Adhere to universal precautions when handling specimens
- Follow handling of specimens and storage as directed by the laboratory until specimens are transported to the laboratory by the courier. example: (room temperature, refrigeration) Ensure all the lids of all specimens are secured tightly and ready for transport when placing in a biohazardous bag.
- Place the specimen in biohazardous bag that corresponds to the correct lab. The bags are color-coded by the laboratories to avoid confusion and errors in sending the specimens to the wrong laboratory. Biohazardous bags that are orange are for LabCorp, green is for Quest. In addition, Quest has a red biohazardous bag that indicates stat or emergent laboratory testing. The Aurora laboratory biohazardous bag is blue and white.
- Place the specimen in the correct Laboratory bin so that the specimen is sent to the correct laboratory for processing.
- Remove Gloves, wash hands
- The couriers will transport the specimens to the correct laboratory (Quest, LabCorp and Aurora)

Laboratory Handling:

The laboratory must establish positive identification and optimum integrity of a patient's specimen from receipt of the specimen through completion of testing and reporting of the results.

The laboratory will reject a specimen that is received with any of the following conditions:

- No label, lacks patient identification
- If the label and the requisition do not match
- Incorrect specimen tube, incorrect container
- No date, time, or initials of the staff member obtaining the specimen
- Specimen container is cracked or open
- Insufficient volume to run the specimen

If the laboratory calls with any of the above conditions notify the leader of your location and the provider. Please follow providers recommendations and orders. Complete an incident report. See HWCAM Administrative Policy: *Incident Reporting No.:* **200.03.100A**.

Safety Precautions for patients and or family members who state they tend to faint at the sight of blood or when they have their blood drawn:

- If the patient appears to be fainting immediately stop phlebotomy procedure
- Initiate fall precautions so that patient does not fall out of chair and have further injury
- If the patient is in a chair and can respond to your vocal commands have them put their head between their legs and breathe slow deep breaths
- You can also lower the patient to a lying position and raise feet 8-12 inches
- Loosen any tight clothing that may be restricting blood flow (neckties, belts, jacket)
- Apply cold compresses or washcloth to head and neck
- Use ammonia inhalants with caution and ensure you know where they are located in case of an emergency
- Stay with the patient and *do not* leave the patient unattended
- The patient should recover fully before being allowed to leave
- Instruct patient not to drive for 30 minutes after occurrence for safety
- Complete an incident report
- For family members ask them to leave the room during blood collection or at least have them sit down
- Keep eye contact and verbal communication with both the patient and any of the family members during blood collection. Look for signs of fainting, pallor, or decreased responses to verbal communication
- For any emergency call 911 see HWCOP Administrative Policy: *Responding to a Medical Emergency No.: 200.02.100A*

Instructions: In the Event an Employee has Eye Exposure with Blood or Other Body Fluids

Injured person:

- Call for help from those nearby
- Immediately make your way to the eye wash station
- Turn on eyewash or open eyewash bottles and keep flushing both eyes for minimum 15 minutes
- Seek medical attention. Eyewashes are first aid only
- Call 911 if necessary

Instructions:

- “Hold your eyelids open” while the water flows over each eye
- “Roll your eyes all around” so the water touches all of the surfaces and gets under the lids
- “Wash both eyes” even if you think you only contaminated one. Remove contact lenses.
- “Don’t rub your eyes”

Reporting Employee Eye Exposure to Blood or Other Body Fluids:

- Notify your Director of Operations. Complete an employee injury report: <http://hrapps.fiu.edu/injury/> Any questions call HR Employee Injuries Representative, direct line 305-348-7960

SUPPORTING/REFERENCE DOCUMENTATION:

- College of America Pathologist lab General Checklist
- http://www.jointcommission.org/standards_information/npsgs.aspx.
2017 National Patient Safety Goals Patient Identifiers
- Quest Diagnostics Website: www.questdiagnostics.com
- LabCorp Website: www.labcorp.com
- Aurora Diagnostics Website: www.auroradx.com
- Employee Injury Report: <http://hrapps.fiu.edu/injury/>
- <https://safetysite.org/knowledge-center-items/emergency-showers-and-eye-wash-stations-where-when-and-how/>

RELATED POLICIES, PROCEDURES, AND ASSOCIATED FORMS:

- HWCOM Administrative Policy: *Incident Reporting* No.: **200.03.100A**
- HWCOM Administrative Policy: *Responding to a Medical Emergency* No.: **200.02.100A**
- HWCOM Administrative Policy: *Patient Identifiers* No.: **200.02102A**