POLICY TITLE: Laboratory Specimen Collection, Labeling and Handling

Submitted by: Daniel Castellanos, MD
Title: Chief of Quality Improvement & Patient Safety, HWCOM

Approved by: Quality Improvement Patient Safety Committee (QIPSC)

Committee Chair: Daniel Castellanos, MD
Title: Chief of Quality Improvement & Patient Safety, HWCOM

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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 and results.

SCOPE/APPLICABILITY: This policy applies to the HWCOM Clinical Locations where faculty, staff and students 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”), Green Family Foundation NeighborhoodHELP Mobile Health Centers and NeighborhoodHELP clinical household visits. This policy excludes: The Linda Fenner 3D Mobile Mammography Center specimens are not drawn and sent to a laboratory at this location. For faculty, staff and students 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 Couriers: Lab 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 can confirm the patient’s name, date of birth with the patient, and verify the same information on the specimen label and the requisition with the patient’s active involvement.

**Patient Identifiers:** For the purposes of this policy the *Patient Identifiers* for HWCOM are: (Full name and date of birth). Medical record identification number can be utilized as a third *Patient identifier if necessary* for patients with same name or names that look alike or sound alike and have same birthdates. For additional details, see HWCOM 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 gold 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. Example: placing the wrong patient label on the specimen.

**Universal Standard Precautions:** Standard precautions are a set of infection control practices used to prevent transmission of diseases that can be acquired by contact with blood, body fluids, non-intact skin (including rashes), and mucous membranes. This is accomplished by using disposable gloves and other protective barriers as needed while performing specimens, while handling needles, body fluids. Performing hand hygiene and cleaning surfaces that may be contaminated with blood or body fluids.

**Specimen Collection and Required Tubes**
- The Laboratory websites listed below, or the laboratory guidebooks are 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 patient’s insurance carrier that will cover the cost of that specimen, and the type of specimen. This applies only to patients that are insured through an insurance carrier.

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

- Quest Diagnostics website: [www.questdiagnostics.com](http://www.questdiagnostics.com)
- LabCorp website: [www.labcorp.com](http://www.labcorp.com)
- Aurora Diagnostics website: [www.auroradx.com](http://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.

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**Policy No.: 200.02.100P**
EMR Link – www.emr-link.com. This site also helps determine the proper tube and container for each specimen.

Note: The results may deem erroneous or invalid if the incorrect specimen container is utilized or if the method of collection is incorrect.

PROCEDURE:
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 patient 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. For additional details refer to Administrative Policy: **Hand Hygiene:** Policy No: 200.02.103P
- Actively 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. Have the patient look at the patient label to ensure it is their name and date of birth prior to labeling the specimen.
- A third **Patient Identifier** can be utilized. In this case, the patient’s Medical Record Identification number can be used. In the EMR, the Patient ID # serves this purpose. The third identifier is necessary in instances of a patient name alert because two (or more patients) may have the same name, names close to being spelled the same and/or pronounced the same or same date of birth. 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 in the clinical setting is never utilized as a **Patient Identifier** for specimens.
- Draw and obtain specimens
Specimen Labeling:

- Involve the patient in the labeling process. Label the specimen in the presence of the patient after the specimen has been collected and the patient has verified that the label is correct. This assures the patient that this is their specimen. The National Patient Safety Goals (NPSG) set forth yearly as an industry gold 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 specimens.
- 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 viable and valid for processing.
- 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. Each specimen is completed and labeled individually, not in bulk.
- Do not print extra labels and keep them in your pockets or in 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 labels if needed.
- Do not begin the next patient until you have completely labeled the specimen and completed all the necessary steps so as not to confuse patient specimens.

Specimen Handling:

- Adhere to universal standard precautions when handling specimens
- Follow handling of specimens and storage as directed by the laboratory until specimens are transported to the laboratory by the laboratory courier. example: (room temperature, refrigeration).

Ensure all the lids of all specimens are tightly secured and ready for transport when placing in the biohazardous bag.
- Place the specimen in the biohazardous bag that corresponds to the correct lab. The bags are color-coded by the laboratories to avoid confusion and error 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 indicate 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 or use hand sanitizer
- The laboratory 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 provider immediately. Please follow providers recommendations and orders. Complete an incident report. See HWCOM Administrative Policy: Incident Reporting No.: 200.03.100A.

1. All clinical sites have the Clarity icon located on the desktop for ease of navigation.

   ![Clarity Icon](image)

If you do not have the icon on your desktop, please reach out to Information Technology Department to have icon deployed to your desktop.

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:

- Ask patient if they have ever fainted or had problems with a phlebotomy. If they answer yes, we have them lie down on the exam table if available and obtain the specimen while patient is lying down.
- If the patient is fainting, immediately stop phlebotomy procedure
- Initiate fall precautions so that patient does not fall and sustain an injury
- Stay with the patient, ask for help if needed and do not leave the patient unattended
- 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 their 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 in case of an emergency
- Inform the provider
- The patient should recover fully before being allowed to leave
- Instruct patient not to drive for 30 minutes after occurrence for safety
- Document reaction in the EMR and care provided
- Complete an incident report
- For family members ask them to leave the room during blood collection or at least have them sit down
• Maintain 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 at FIU Health MMC call 911 followed by calling the Florida International University Police Department by calling 305-348-5911 or from an inside campus phone extension 7-5911. See HWCOM 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 in the Laboratory
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 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 of laboratory injury. Complete an employee injury report even if your eye discomfort improves: http://hrapps.fiu.edu/injury/ Any questions call HR Employee Workers Compensation Representative, direct line 305-348-7960

Needlestick Injury:
• Inform your supervisor of the needlestick injury
• Follow steps outlined in website: https://ehs.fiu.edu/safety-programs/biological/bloodborne-pathogen/index.html
• Report Injury to Environmental Health and Safety Department 305-348-2641
• Notify Employee Workers Compensation Representative r 305 348 7960
SUPPORTING/REFERENCE DOCUMENTATION:

- College of America Pathologist lab General Checklist
- Quest Diagnostics Website: [www.questdiagnostics.com](http://www.questdiagnostics.com)
- LabCorp Website: [www.labcorp.com](http://www.labcorp.com)
- Aurora Diagnostics Website: [www.auroradx.com](http://www.auroradx.com)
- Environmental Health and Safety website: [https://ehs.fiu.edu/safety-programs/biological/bloodborne-pathogen/index.html](https://ehs.fiu.edu/safety-programs/biological/bloodborne-pathogen/index.html)

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*