

<b>Policy #:</b>	301 (PLH-301-05)	<b>Effective Date:</b>	9/30/2004	<b>Reviewed Date:</b>	2/4/2011
<b>Subject:</b>	LABORATORY SPECIMEN LABELING AND REJECTION POLICY				
<b>Approved by:</b> Laboratory Executive Director, Ed Hughes (electronic signature)					
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## LABORATORY SPECIMEN LABELING AND REJECTION POLICY

The laboratory must reject specimens that are received improperly or incompletely labeled by nursing or laboratory personnel. The sheer volume of specimens received in the laboratory dictates that all specimens must be labeled in such a manner as to preclude confusion or doubt of patient identification. Rejecting unacceptable labeled specimens will improve, or reduce, the number of medical errors in overall patient care. In an effort to assist the patient care staff in the proper labeling of laboratory specimens, the following protocol is provided.

### Proper Labeling Protocol:

Patient identification **MUST** be verified. Patient name **AND** hospital account number on the armband must match the request **before** the specimen is collected. For patients without an armband (clients and walk-in outpatients), verify identification by comparing to the request the name and date of birth. When possible ask patient to state their name.

The person collecting the specimen **MUST** label the specimen **AT THE BEDSIDE** immediately after collection.

All Specimens must be labeled with the following information:

- Patient Full Name (no initials or abbreviations)**
- Hospital Number (hand written required only for Transfusion Service specimens)**
- Date and time of collection (hand written)**
- Initials of the specimen collector (hand written/not CBN)**

### Causes for Specimen Rejection:

- Name and hospital number on the specimen does not match the name and hospital number on the requisition or order.
- Specimen labeled without full name, hospital number, or handwritten collector's initials.
- Specimen unlabeled.

The only data that can be corrected, added, etc. after receipt in the lab is the collection time and date. This can only be done by the person who collected the specimen.

Note: If collected using the patient identification system, the handwritten information is not required.

**In rare situations where the specimen cannot be recollected or duplicated**, i.e. certain body fluids, surgical specimens, etc.; acceptance of the specimen will be solely at the discretion of the pathologist and/or the Executive Director of Laboratory Services. This will require the completion of an affidavit signed by the submitting physician where the physician acknowledges the labeling inconsistency and assumes all liability which might arise from the acceptance of the inappropriately labeled specimen before the specimen can be accepted for testing.

Each laboratory department has its own specific policies regarding specimen acceptability issues other than labeling, such as specimen quality.

Specimens which are rejected, for any reason, will not be immediately discarded. Each laboratory department provides adequate storage for these specimens for 24 hours.

For more information on specimen labeling and transport please refer to PLH-400 (Blood Specimens Drawn by Non-Laboratory Personnel) and PLH-404 (Protocol for Labeling & Transporting Laboratory Specimens.)