

LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES HARBOR-UCLA MEDICAL CENTER

SUBJECT: LABELING OF LABORATORY SPECIMENS

POLICY NO. 320

CATEGORY: Provision of Care	EFFECTIVE DATE: 9/86
POLICY CONTACT: Holli Mason, MD	UPDATE/REVISION DATE:
REVIEWED BY COMMITTEE(S):	

PURPOSE:

To ensure the Laboratory receives specimens that are accurately and appropriately labeled. The quality of laboratory results is dependent on the quality of the specimen submitted for analysis.

The laboratory is equipped with state-of-the-art instrumentation. Clinical laboratory scientists analyze the specimens and interpret results. The technology and expertise can only be applied effectively if the specimen analyzed is appropriately labelled, and accurately identifies the patient.

Quality laboratory analysis begins with correct patient identification. Before the collection of any type of specimen, the patient must be correctly identified. Patient identification and accurate labeling is the most important step in the collection of specimens.

POLICY:

- 1. Test orders must be entered into Orchid, the Hospital Information System (HIS), prior to specimen collection.
- 2. Proper patient identification should be performed (as per Policy 452 Patient Identification) using a minimum of two patient identifiers.
- 3. All blood, body fluid, and tissue specimens submitted to the laboratory for analysis must have a requisition label generated by Orchid. The employee # of the person who collected the specimen, as well as the date and time collected must be on the label or this data must be entered electronically in the HIS.
- 4. Unlabeled or mislabeled specimens are rejected and discarded in biohazard sharps containers as soon as they are received in the Specimen Receiving/Processing Laboratory (2S-3), with the exception of irreplaceable specimens, such as Cerebral Spinal Fluid and blood cultures. Specimens that are unacceptable are to be redrawn, even if venipuncture is difficult.
- 5. If a new sample cannot be obtained without jeopardizing the patient (tissue/cerebrospinal fluid), permission to resubmit the specimen may be sought from the appropriate Section Head or Pathology

REVISED: 10/92, 6/95, 11/07, 3/13, 12/14, 4/15, 12/17, 5/22

REVIEWED: 9/89, 10/92, 6/95, 2/99, 1/02, 2/05, 1/14, 12/14, 4/15, 12/17, 5/22

APPROVED BY:

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faculty member on call. If permission for re-labeling is sought, a Situation Report form (HH358) must be completed by the individual who is re-labeling the specimen and submit to the Laboratory at the time of the request.

6. Enter a detailed report of the event into the LA County DHS Safety Intelligence (SI).

PROCEDURE:

Patient Identification and Labeling

- 1. Using the Hospital Information (Orchid) System (HIS), enter the laboratory test(s) ordered for the patient.
- 2. Retrieve computer generated label(s) checking for patient name, MRN and correct test ordered.
- 3. All specimen labeling is to be done at the patient's bedside.
- 4. Follow proper patient identification procedure (per hospital policy 452-Patient Identification):
- 5. Collect the specimen using proper collection techniques, drawing at the correct time.
- 6. Once again, re-verify that the patient identifiers on the armband match the computer-generated labels exactly.
- 7. After each label has been verified with the patient identifiers, attach the labels to the specimens.
 - a. Ensure that timed samples are labeled with the label specific for that designated draw time.
 - b. Ensure that each label is affixed to the right type of specimen, i.e. label for a "lav" top is affixed to a lavender top specimen container etc., (this information is on the upper right portion of the label).
 - c. DO NOT affix multiple labels on top of each other. If additional labels are required for a single sample and there is not enough space on the specimen container, rubber band additional labels to the specimen.
- 8. After collecting the specimen(s), log in to the HIS to complete the task by entering the date and time of collection for each requisition or legibly record date and time of collection and your employee # on each labeled specimen.

Note: It is essential to complete the task in Orchid prior to delivering the specimen to the laboratory. Failure to do this may cause delay in patient sample processing.

9. Deliver specimen to the lab as soon as possible, following any necessary handling requirements.

Reviewed and approved by:

Medical Executive Committee 05/2022

Beverley A. Petrie, M.D.

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