



# Rancho Los Amigos National Rehabilitation Center

## DEPARTMENT OF NURSING

### OPERATING ROOM

### POLICY AND PROCEDURE

**SUBJECT:** SURGICAL SPECIMENS

**Policy No.:** OR80  
**Supersedes:** ALL  
**Revised Date:** 02/2016  
**Page:** 1 of 3

**Policy Statement:** All surgically removed specimens are sent to pathology for evaluation.

**Purpose of Procedure:**

1. To identify all tissue, implants, foreign bodies removed during surgical procedures.
2. To establish diagnosis through identification of pathological process in tissue specimens.
3. Preserve non-degradable materials which may be used as legal evidence.

**Performed By:** O.R. Nursing Staff, physicians, security personnel

**Equipment:** Specimen  
Specimen jar with appropriate fixative  
Copy of Record of Operation  
Patient's ID Label  
Pathology log book  
Surgical pathology tissue examination request

**Procedural Steps:**

1. Circulating nurse procures appropriate container and fixative agent for specimen.  
**KEY POINT:** 10% formalin is used for routine specimens. Specimen must be completely immersed in fixative solution for preservation of tissue and disinfection.
2. Scrub Nurse passes specimen off to circulating nurse.  
**KEY POINT:** Personnel must wear gloves when handling tissue.
3. Circulator places specimen in container and labels with patient's ID label, writes date, identity of tissue and exact anatomical site of tissue specimen. (Example: Synovium, right wrist.)  
**KEY POINT:** If accidental spillage occurs, outside of container, cleanse container with towel soaked in hospital approved disinfectant.
4. The surgical pathology tissue examination request must accompany specimen to laboratory.
5. Circulator checks the Surgical Pathology Tissue Examination request to determine that required information has been documented by surgeon:
  - a. Preoperative diagnosis.
  - b. Identification of tissue and anatomical site.
  - c. Type of examination requested.
  - d. Unit
  - e. Surgical Procedure**KEY POINT:** Pathologist cannot determine diagnosis without this pertinent information.

6. When multiple specimens are taken from patient, they are placed in separate containers, labeled properly and sequentially numbered.  
**KEY POINT:** Number and identity of each tissue specimen must correspond to number and description on Record of Operation.
7. Foreign bodies (IE bullet) are given in Chain-of-Custody to Pathology.
8. When procedure ends, circulating nurse transports specimens and Surgical Pathology tissue Examination request to the pathology cart. Each specimen is entered into the Pathology log book adjacent to patient's name.  
**KEY POINT:** The Pathology technician will not take a specimen that is not correctly or completely labeled.
9. The circulating nurse is ultimately responsible for proper preparation and disposition of specimens and is held accountable for this function.  
**KEY POINT:** Incomplete and incorrectly prepared and labeled specimens will be returned to the nurse responsible for correction.
10. Amputated limbs are wrapped and labeled with patient ID label. When amputation procedures are completed after 1530, notify Pathology Technician at extension 8994 for pick-up.  
**KEY POINT:** Tissue which is not immersed in formalin rapidly deteriorates. These specimens must be refrigerated at end of each working day.
11. Patient request for specimen or hardware will be documented on the Surgical Pathology tissue Examination request and Specimen label.  
**KEY POINT:** Pathologist will be notified of patient request.

Special Laboratory Examinations:

The following examinations require specialized tissue preparation and/or fixative agents:

- A. Frozen Section-
  1. Frozen Sections are scheduled with pathology ext. 8994.
  2. Scrub nurse moisten specimens with sterile saline, place in green surgical towel, and hand to circulating nurse.
  3. Circulating nurse takes Surgical Pathology tissue Examination request and delivers to the pathologist along with the specimen.
  4. Pathologist gives report directly to the physician who is working on the procedure.
  5. At the completion of surgery the circulating nurse makes a note in the Pathology log book that the frozen section specimen went to lab.
- B. Electron microscopic studies-
  1. Tissue is immersed in 4% glutaraldehyde solution.  
**KEY POINT:** This solution is provided by the laboratory and is stored in the drug refrigerator in the Post Anesthesia Care Unit.
- C. Muscle biopsies-
  1. Only a moist saline sponge is used to wrap the biopsy in the Operating Room. Tissue must be sent to the laboratory at once for addition of fixative agent by Histology Laboratory Technologist. To notify extension 8994.
- D. Liver Biopsies

1. The Pathology Laboratory is to be notified in advance for this procedure.  
**KEY POINT:** Fixative agent B-5 must be freshly constituted when added to specimen. Specimens must be promptly dispatched to laboratory for addition of fixative agent.
  
  - E. Calculi
    1. The Specimen is placed in a dry, empty container, NO FIXATIVE IS ADDED TO CONTAINER.  
**KEY POINT:** Calculi are always altered and sometimes completely dissolved by fixative agents.
  
  - F. Estrogen/Progesterone from breast biopsy
    1. Tissue is wrapped in saline soaked gauze immediately. Pathology is notified immediately that tissue is available. Do not place in any fixative.
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**Revised By:**

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**References:**

RLAMC Laboratory Manual  
Guidelines for Perioperative Practice 2015 Edition  
Essentials of Perioperative Nursing, Fifth Edition

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04/03 – Revised  
06/06 – Reviewed  
07/09 - Reviewed  
10/12 – Reviewed  
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