

JAMES E VAN ZANDT VA MEDICAL CENTER
ALTOONA, PENNSYLVANIA

MEDICAL CENTER MEMORANDUM (MCM) 11L-18
NOVEMBER 2012

LABELING OF SPECIMENS

1. **PURPOSE:** To provide uniform instructions for the labeling of specimens throughout all areas of the medical center, including the Community Based Outpatient Clinics (CBOC's) and Home Based Primary Care (HBPC), that are sent to Pathology and Laboratory Medicine for processing.

2. **SUMMARY OF MAJOR CHANGES:** No major changes

3. **POLICY:** Collection of all specimens will be completed in accordance with guidelines established in the Laboratory Policy and Procedure Handbook.

4. **RESPONSIBILITY:**

a. **Chief of Staff** has overall responsibility for assuring compliance with this policy and for the collection and labeling of specimens collected by staff aligned under the Chief of Staff office.

b. **Associate Director for Patient/Nursing Services** has overall responsibility for the collection and labeling of specimens collected by staff aligned under Patient/Nursing Services.

c. **Chief, Pathology and Laboratory Medicine Service** has overall responsibility for the collection and labeling of specimens collected by laboratory staff.

5. **PROCEDURES:**

a. All specimens will be labeled utilizing a printed label containing the patient's/resident's full name and full social security number.

b. All specimens collected outside the laboratory will contain the patient's/resident's full name and full social security number. In the lab, the printed label contains a bar code containing an order number, in addition to the patient's/resident's full name and full social security number.

c. Patient/resident name and full social security number will not be written directly onto the specimen container to allow for convenient disposal of the container after processing by lab personnel.

2. MCM 11L-18, Labeling of Specimens

d. All specimens, with the following exceptions, will be labeled in front of the patient/resident and after the specimen is collected. The patient/resident will be asked to state his/her full name and full social security number. The staff member will compare these with what is written on the label. The label will then be attached to the specimen container. Exceptions are:

(1) Fecal Occult Blood Test (FOBT): If the patient/resident is at the medical center, staff will complete the check of two patient identifiers, apply the labels to the specimen cards, write on the lab order number, and the patient will take the kit home to complete testing. If the FOBT kit is mailed to the patient, staff will label the cards with the patient's full name, social security number, and lab order number. The kit will contain written instructions for the patient to verify his/her full name and full social security number prior to returning the specimen to the medical center for processing. The FOBT kit must have full patient name, full social security number, and laboratory order number on it before sending to the laboratory.

(2) Depleted uranium and 24-hour urine specimens: Staff will complete the check of two patient identifiers, label the containers in the presence of the patient, and the patient will take the kit home to complete the testing. The patient will return the kit to the medical center lab on completion.

(3) Specimens obtained during procedure clinic: Specimens will be labeled with the patient's full name and full social security number. For patients under anesthesia, the patient name and full social security number will be verified prior to administration of anesthesia. The specimen is labeled using these two patient identifiers which are also found on the patient's armband and also located in the computerized patient record system (CPRS) note.

(4) For urine, stool, semen, and other specimens labeled within the laboratory area, staff will verify the patient's full name and full social security number with the patient, place the label on the container, and give the container to the patient for specimen collection.

e. **Monitoring:** Pathology and Laboratory Medicine Service monitors monthly mislabeled specimens. These are reported, along with corrective action, at the monthly Pathology and Laboratory Medicine staff meetings.

6. REFERENCES:

- a. Joint Commission Comprehensive Accreditation Manual for Hospitals
- b. 2008 Laboratory Policy and Procedure Handbook

7. RESCISSION: MCM 11L-18, Labeling of Specimens, dated December 2009

3. MCM 11L-18, Labeling of Specimens

8. **REISSUE DATE:** Three years from date of MCM.

9. **FOLLOW-UP RESPONSIBILITY:** Chief, Pathology and Laboratory Medicine Service

/s/

William H. Mills
Director

Distribution "E"