Clinical Sample Acceptance Procedure

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Location of copies :	1. Pathology Website http://www.barnsleyhospital.nhs.uk/pathology/pathology-general/request-and-specimen-labelling/

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1 Principle

Correct sample identification and handling is a mark of good medical practice and samples that cannot be properly identified are a risk to the patient and will **NOT** be analysed.

The responsibility for requesting laboratory investigations lies with the patient's clinician. The person responsible for taking the specimen (whether medical, nursing or phlebotomy staff) **MUST** ensure that the information on both the request and sample is legible, adequate and includes necessary labelling for biological hazard.

2 Responsibilities of Staff

The responsibility for requesting a laboratory service or test lies with an authorised and trained practitioner (normally a Clinician). It is the responsibility of the requester to ensure that the identity of the patient is confirmed and that all samples are correctly labelled and request forms are completed to agreed standards.

Medical, nursing and other healthcare professionals must be familiar with and understand the rationale of laboratory procedures and standards. There should be clear written guidelines for those who obtain blood samples from a patient on behalf of the requesting practitioner.

Before accepting a clinical specimen laboratory staff must ensure that certain minimum criteria for sample identification are met.

3 Risk assessment/Safety controls

3.1 Correct sample identification and handling

Correct sample identification and handling is a mark of good medical practice and samples that cannot be properly identified are a risk to the patient and will **NOT** be analysed. The responsibility for requesting laboratory investigations lies with the patient's clinician. The person responsible for taking the specimen (whether medical, nursing or phlebotomy staff) **MUST** ensure that the information on both the request and sample is legible, adequate and includes necessary labelling for biological hazard.

3.2 Danger of Infection

Samples from patients with blood borne virus diseases constitute a particular hazard to laboratory staff. All infectious or potentially infectious specimens and their accompanying request forms should be clearly marked with "Danger of Infection" stickers. **The range of investigations available on such specimens may be limited. Please contact the laboratory for further information.**

4 Patient preparation

Certain tests require patient consent to be given due to the nature of the testing and the consequences of the results. Any genetics testing requested must have the patient's informed consent prior to taking the sample. When electronic requests are generated, it is assumed that the requesting Clinician named on the form has discussed the consequences of the results with the patient and obtained consent. Any manual forms must be signed by the requesting Clinician to indicate that consent has been obtained. Any special considerations for the preparation of a patient or requirements for the sample are provided in the test repertoire.

5 Type of container and additives

Please refer to the user information provided for information on specific containers or additives which are required for preservation of the sample during transport.

6 Minimum standards for acceptance of clinical samples and requests

6.1 Information required on specimen

All specimens must be labelled using the **four identifiers** (1-4) highlighted in **bold** as a **minimum**. **NB. Please see section 4 of this document for Blood Transfusion specific requirements.**

1. **Patient Surname**
2. **Patient Forename**
3. **A Unique Numerical Identifier**
    - **Hospital Number**
    - **NHS number**
    - **A/E number**
    - **GUM number**
    - **Laboratory accession number for electronic requests**
4. **Date of birth**
5. Date and time
6. Ward/location
7. Signature of phlebotomist

Specimen labels electronically generated by the Anglia ICE system meet the requirements and are acceptable in all disciplines except **Blood Transfusion** where the specimen must be hand labelled.

Where multiple samples are collected as part of an investigation (e.g. GTT) **ALL** samples must be labelled in accordance with the minimum data stated above.
Specimens failing to meet these minimum criteria for identification may not be processed if laboratory staff assesses the risk of error to be too high. Where specimens failing to meet these minimum criteria for identification are processed the responsibility for these results will rest with the requesting clinician and reports will contain the following comment:

"Due to inadequate labelling of the sample/request form the responsibility for these results lies solely with the requesting clinician".

6.2 Information required on Request Form

All request forms must be completed with the information highlighted in **bold** as a **minimum.**
NB. Please see section 4 of this document for Blood Transfusion specific requirements.

1. **Patient Surname**
2. **Patient Forename**
3. **A Unique Numerical Identifier**
    - **Hospital Number**
    - **NHS number**
    - **A/E number**
    - **GUM number**
    - **Full address and postcode if unique numerical identifier cannot be provided**
4. **Date of birth**
5. **Ward / Location**
6. **Clinician / GP Details**
7. Sex (failure to provide will prevent the reporting of appropriate reference ranges)
8. Investigation required
9. Clinical Details
10. Sample type / site and times where applicable (essential for Histology and Microbiology requests)
11. Signature of requester and phlebotomist
12. Bleep number of requesting doctor is applicable or an appropriate contact phone number

Ideally, it is preferable to send requests via the Sunquest ICE ordercomms system. This is beneficial for a number of reasons; it prompts for mandatory information required by the laboratory to carry out testing and it speeds up the sample receipt process. If handwritten forms must be used it is vital that the request form is completed accurately in accordance with the clinical acceptance policy and the requesting clinician's name and location or address fully written.
Please note that abbreviations may result in the incorrect clinician or location being selected and as a consequence, the results for the patient may be sent back to another clinician. Whilst the laboratory staff make every effort to minimise errors, staff can only book samples into the system with the information they are provided with.

6.3 GUM Patients

Due to the sensitive nature of GUM requests. Patient information is anonymised. This means that patient demographics such as Date of birth, NHS number and address are not available.
GUM request forms and samples must have the GUM number, Date of birth and patient gender.

7 Specific requirements for Blood Transfusion

The labelling requirements for request forms and blood specimens are derived from BCSH and National guidelines and the Blood Transfusion Department operates a zero tolerance policy – in the event of omission, illegibility, error or crossings out the request will not be processed. Request forms and blood specimens once received by the laboratory cannot be amended.

7.1 Information required on Specimen

Immediately the sample has been taken, it must be hand-written, legibly and accurately, in ball point pen to avoid smudging by the person taking the blood at the site of collection. The sample tubes should never be pre-labelled.

Please note: Addressograph labels **MUST NOT** be used to label the sample.

All samples **MUST** be labelled with the following information:

- Full Name i.e. Surname & First name (If the patient details are unknown please refer to the guidance below).
- Patient identification number (Please note that if a Hospital unit number is present this must be given priority).
- Date of Birth
- Ward/Location.
- Gender.
- Date and time of sample collection
- Signature of person taking the specimen.
- "High Risk" sticker if appropriate.

7.2 Information required on the Blood Transfusion Request Form

The request form must be fully completed by a registered medical practitioner. It is the clinician's responsibility to ensure that any special requirements, e.g. CMV negative, irradiated products, bone marrow transplant or solid organ transplant are communicated to the Blood Bank. The clinical indication for transfusion should be written in the patient's case notes (which should comply with local and national guidelines).

The details on the request form are important and could have medico-legal implications. The request form and sample should be clearly handwritten. (An addressograph label may be used on the request form for the patient identifiers but all other details/information must be handwritten). The correct request form must be used, there are three request forms as follows, Antenatal Serology (S117a), Neonatal (S117b) and Blood Transfusion Request Form (S117c)

The request form must contain the following information

- Patient details e.g. Surname, first name, gender, DOB and patient identification number. (If the patient details are unknown please refer to the guidance below).
- Ward/Location and Consultant in charge.
- Diagnosis/operation and reason for transfusion
- "High Risk" sticker if appropriate.
- Transfusion history: – ask the patient for details and check the case notes. The date, time and number of units transfused should be documented.
- Previous pregnancies
- Number and type of blood components required or batch products, including any special requirements.
- Date and time products are required
- Signature of person authorising the request
- Surname (printed) and bleep number of requesting doctor.

The request form **MUST** be signed by a medical officer responsible for the patient and ALL details must be completed.

It is important that the name of the doctor is printed legibly and the bleep number is given so that any problems that arise may be discussed with the relevant medical team. Blood Bank staff and the Clinical Haematologist are available for advice if required.

Any request forms not meeting these criteria will be rejected following QU-COM-D-14 Laboratory Acceptance Procedures

7.3 Blood Bank Requests for Unknown Patients

In situations where the identity of the patient is not known (Unconscious patient in A/E Department or Major Accident) special identity numbers are used e.g. Unknown patient 123.
Blood crossmatched and labelled for these unknown patients may be transfused to the patient even when the patient's true identity is known as long as the "Unknown details" wristband remains on the patient. If the "Unknown" wristband is removed, a new sample with the patient's details is required to provide further blood and blood products.
It is important that the sex of the patient and the approximate age is given as it may influence the selection of blood and blood products especially in the case of females of child-bearing age.

7.4 Blood Bank Requests during Computer System Failure

In situations where the computer is unavailable A/E numbers are used. Please note the full A/E number must be written on the sample and form. It is important that the sex of the patient and the approximate age is stated as it may influence the selection of blood and blood products.

8 Specific requirements for labelling post vasectomy samples

The specimen pot and specific post vasectomy sample request form, including all the patient collection information is be provided to the patient post-procedure by the Clinician. If the pot provided becomes un-useable/damaged, the patient must contact the laboratory for another. Any specimen received in another type of pot will be rejected.

- All the details on the request form must be completed. Missing information may result in the request being rejected.
- The sample pot must contain patient full name, date of birth, date and time of production on the specimen pot.
- Any mis-information provided may affect the results provided by the laboratory, therefore results are supplied on the understanding that the information provided is accurate and truthful and the specimen has been produced and collected as per the instructions on the request form.
- The specimen and attached request form must be delivered to the laboratory reception *within* 1 hour of collection. This is crucial as staff must prepare and process the sample within 4 hours of collection.

9 Specific requirements for labelling Bone Marrow Slides

Information required on specimen

1. Patient Surname
2. Unique Numerical Identifier: (Hospital number)
3. Date Taken

10 Specific requirements for Blood Gas Requests using Near Patient Testing Analysers

All Blood Gas analysers are interfaced directly to the laboratory Information System (LIMS) and the results and demographics received by the LIMS automatically register and record these results in the system prior to presenting them to the ward reporting system.

Failure to provide accurate and complete data for the patient could publish results to the wrong electronic patient record. A unit number alone is not secure as this could be mis-typed in error.

The interface is set up to trap mis-matched data and prevent this passing in to the LIMS. Therefore it is essential that the following data is keyed in to the analyser:

1. Hospital number*
2. Patient Surname
3. Patient Forename
4. Date of birth

* Where this is not available (new-borns or A/E) input the surname in both the hospital number and surname fields.

11 References

Institute of Biomedical Science Policy on Patient Sample and Request Form Identification Criteria, Version 3 (March 2016) Institute of Biomedical Science

Medical laboratories — Requirements for quality and competence (ISO 15189:2012)

12 Summary of Revision

Version	Summary of change
2	Updated format of document. Expanded information on responsibilities of staff (responsibility of the requester to ensure that the identity of the patient is confirmed); risk assessments; patient preparation; types of container; specific sections relating to standard samples, BT requests, post vasectomy samples, bone marrow slides and blood gas samples taken by near patient testing analysers; references and summary of revisions