CarrisHealth™
CentraCare

**Zero Tolerance Specimen Labeling**

## ZERO TOLERANCE SPECIMEN LABELING

I Purpose: To minimize patient safety risk and maximize patient satisfaction, all specimens must be labeled correctly when collected. This positive patient identification:
- A Prevents the need for re-collection, thus minimizing the safety risk of another collection.
- B Maximizes patient quality of care and provider satisfaction of not having to collect another specimen.
- C Reduces the potential for mismatching specimen and patient in the laboratory.
- D Eliminates inefficiencies of having to track a poorly labeled specimen for proper identification.

II Scope:
- A All specimens
- B All staff who collect and submit patient specimens to the laboratory

III Specimens: All specimens

IV Materials and/or Equipment Needed: Laboratory Specimen Information Correction Report

V Procedure:
- A Verify patient identification (full name and one unique identifier of birthdate or medical record number).
- B Specimen labels require accurate and legible patient identification with a minimum of **full first and last name** and at least one unique identifier on the label (date of birth, medical record number, or social security number). **Whenever possible, label the containers for blood and other samples in the presence of the patient.**
  - 1 In-patients must be labeled at bedside.
  - 2 Ambulatory/outpatients must be kept until the specimens are labeled.
- C Specimen label must be on the specimen container (not lid).
- D Specimen label must exactly match the identification and unique identifier on the requisition.
- E The following will be rejected:
  - 1 **Unlabeled specimens**
    - a No patient identification directly on specimen.
    - b Labeling of plastic bag containing the specimen container.
    - c Labeling of specimen container lid.
  - 2 **Incomplete identification of specimen**
    - a Identification without full first and full last name.
    - b Name without at least one unique identifier.
  - 3 **Mislabeled specimens**
    - a Name or unique identifier on specimen does not exactly match name or unique identifier on requisition.
  - 4 **Miscellaneous required information per specific laboratory department missing** (refer to Laboratory Specimen Labeling Policy).
    - a Anatomical locations including left and right
    - b Specimens too long in transport

- F Upon receipt of mislabeled/unlabeled specimen:
  - 1 Laboratory will notify submitting department or client and explain what the discrepancy is and that the specimen will be rejected.
  - 2 Request new specimen with a new order/requisition.
  - 3 Cancel original order in laboratory LIS and credit charge. Document notified personnel of cancellation in LIS.
    - a In ‘Specimen Inquiry’ search for specimen LIS number. Click on the ‘Action’ button (  ) Scroll

down to 'Cancel' and click. Enter reason why.

b To cancel charges, scroll down to 'Charge Summary' and click on the 'X'. Document 'Reason' and enter 'Comment'.

4 Place specimen in the Specimen Holds/Rejected box at the appropriate storage temperature in client services.

VI Exceptions to the Policy:

A Accepting an improperly labeled specimen may be permissible when staff cannot reasonably collect specimen again or when a rejection would result in significant treatment delay.

B Department or client who submitted the specimen will be notified by phone of the labeling problem. It is the department or client's responsibility to notify the correct provider of the specimen labeling discrepancy.

C Laboratory will save the specimen and fill out the top portion of a Laboratory Specimen Information Correction Report form and fax to the department or client responsible who submitted that specimen.

D Responsible department or client will fill out the bottom portion of the faxed Laboratory Specimen Information Correction Report, sign, and fax back to Rice Laboratory.

E When form is completed and faxed back to the laboratory, staff will continue processing that specimen and will make a comment about the specimen labeling on the final report.

F Start a Correction Routing Cover Page to help complete the correction process.

G Emergency- if no patient identification is available the unidentified patient is given a numbered arm bracelet and all requisition forms and specimens are identified by that number until identification is possible.

H Steps to take if a client requests to have the identity of a received sample changed:

1 Let the client know you will be sending them a Correction Report to be filled out and that it needs to be filled out completely in order to have the report modified.

2 Fill out the details of the correction from the Rice Laboratory standpoint.

3 Fax the Correction Report to the client to be completed and signed.

4 Once the form is received back at Rice Laboratory, have the LIS specialist transfer the patient data or change the demographic information to issue a new report if needed.

5 Scan and attach a copy of the completed Correction Report to the patient sample following the scanning protocol for patient results.

6 Route the corrected report to the appropriate location following standard protocol, using the Correction Routing Cover page as a guide. If the client is a Copia user, the LIS specialist should be able to route an electronic report back to the client inbox in Copia.

VII Results that need to be erased from patient records (This procedure to be carried out by LIS staff)

A There may be circumstances where completed patient results have to be deleted from his/her permanent record. An example may be where an outreach client calls after results have been received after they discover the sample was labeled with the wrong patient's demographics. The outreach client then wishes to have all results deleted out of the patient's record.

B The following steps must be followed in order to erase results from incorrect patient's record, but keep results in our system:

1 Fill out Correction/Rejection form, fax to client and wait for fax to come back before proceeding with the following steps.

2 Fill out a Quality Improvement Form if needed with details form the situation and route appropriately.

3 Perform a result correction in Beaker.

a Access the Result Entry activity.

b Enter in the Specimen ID or search by patient name.

c Click on the Action Button ( ) and select Result Correction.

**Zero Tolerance Specimen Labeling**

d Enter a Result Correction reason and select Confirm Correction.
e Click Edit.
f Scan correction form into the results by using the Scan function. Uncheck the box so the scanned correction form does not post to the chart.
g Delete all results.
h The system automatically adds the 'Previously reported as…' statement to all of the results.
i Enter in a comment in the white Comments box.
- An example comment is "Received phone call from *client name, date, and time* stating that *specimen type* results on patient name was not on the correct patient. Moved result over to Incorrect Patient file in Copia in order to get results out of patient history. *Facility name* will collect and order on correct patient in the future if necessary.

j Click Save.
k Click Final Verify.
- You will have to Acknowledge Warnings and Confirm Final.

4 Move the incorrect order to Patient, Incorrect patient file in Copia.
5 Print label out of Copia with the name Patient, Incorrect on it. Attach to requisition and sample (if still available) that were labeled incorrectly. Initial patient labels.

B If the testing was performed at Mayo Medical Laboratories or another reference lab used by RMH Lab, call the appropriate reference lab and ask them to cancel the test that was performed under the incorrect patient. Document the person you talked to at the reference lab in the Comment as described in VII.B.i.

C Billing: All charges for the test performed under the incorrect patient must be billed back to the submitting facility.
1 Work with lab billing staff to determine what steps to take to make sure this happens correctly.

VI References:

A Joint Commission – National Patient Safety Goals (NPSG.01.01.01), January 2019
B CLIA nterpretive Guidelines 2019 - §493.1232 Std: Specimen Identification and Integrity