

The labelling of samples and request cards for pathology investigation

This guidance should be read in conjunction with the Trust policy on Specimen Labelling & Transportation

1. Introduction

The Leeds Teaching Hospitals NHS Trust policy and guidance applies to all clinical areas of the LTH Trust, Leeds Community and Mental Health Trust, Bradford Hospitals Trust, General Practice surgeries in Leeds and Bradford areas and other external customers.

2. Background

The current frequency with which the various laboratories within Pathology receive samples which are either unlabelled or incorrectly labelled is estimated at over 50 per day.

The situation results in ambiguous or erroneous identification of patients and represents a serious and repeated risk to patients' health and in extremes can result in misdiagnosis, mistreatment, morbidity and mortality.

It is essential to have clear, unambiguous guidelines for correct labelling and to be clear that the responsibility for deciding to accept an unsatisfactorily labelled specimen is that of the senior laboratory manager.

3. Guidelines for the correct labelling of specimens and request forms for pathology investigations - local rules

3.1 Hospital Patients

3.1.1 Specimens

All specimen containers must be clearly labelled by hand in CAPITAL LETTERS (*Printed labels will **NOT** be accepted*) with the following information:

- FORENAME
- SURNAME
- DATE OF BIRTH
- HOSPITAL NUMBER/CASUALTY NUMBER
- WARD/LOCATION
- DATE OF COLLECTION (and time for serial specimens)

3.1.2 Request forms

Request forms must be filled in with clear and legible writing (*use printed labels whenever possible on request forms*) stating the following information:

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Appendix A

- FORENAME
- SURNAME
- HOSPITAL No./CASUALTY No.
- NHS Number (if available)
- DATE OF BIRTH
- SEX
- ADDRESS
- HOSPITAL
- WARD/LOCATION
- DESCRIPTION OF SAMPLE
- CONSULTANT
- RELEVANT CLINICAL DETAILS
- DATE (and time for serial samples)
- INVESTIGATIONS REQUIRED
- DOCTOR OR DEPUTY SIGNATURE
- CURRENT DRUG DOSE DETAILS FOR ALL REQUESTS FOR DRUG ANALYSIS (Therapeutic or Toxicology)

Ward/Location and Consultant details must be added if this information is not provided on the printed labels, if included on the label they must be checked.

3.2 **GP and other sources**

3.2.1 Specimens

All specimen containers must be clearly labelled by hand in CAPITAL LETTERS (printed labels will not be accepted on specimens) with the following information:

- FORENAME
- SURNAME
- DATE OF BIRTH
- GP NAME
- DATE OF COLLECTION (and time for serial specimens)

3.2.2 Request forms

Request forms must be filled in with clear and legible writing stating the following information: (or where applicable the relevant tick boxes must be ticked).

- FORENAME
- SURNAME
- NHS NUMBER (If available)
- DATE OF BIRTH
- SEX
- ADDRESS
- GP NAME & PRACTICE ADDRESS
- DESCRIPTION OF SAMPLE
- RELEVANT CLINICAL DETAILS
- DATE (and time for serial samples)
- INVESTIGATIONS REQUIRED
- DOCTOR OR DEPUTY SIGNATURE
- CURRENT DRUG DOSE DETAILS FOR ALL REQUESTS FOR DRUG

These requirements represent good clinical practice and are in accordance with the guidelines of the Health Services Advisory Committee 1986 'Safety in Health Service Laboratories: the labelling, transport and reception of specimens'

4. **Responsibilities**

4.1

IMPORTANT

It is the responsibility of the requesting Doctor to ensure that specimens and request forms are correctly labelled.

Incorrectly or unlabelled specimens WILL NOT be processed by the Laboratory and will be considered as a RISK INCIDENT. Details will be forwarded to the Health and Safety Co-ordinator to identify problem areas.

4.2 Final decision on whether to accept a specimen or not will lie with the head of the laboratory.

4.3 **Sample Collection**

It is the responsibility of the person (doctor, nurse or phlebotomist) taking the sample from the patient to ensure that the specimen container is correctly identified:

4.4 **Transportation of Specimens**

It is the responsibility of the person transporting the specimen to ensure that it arrives promptly and undamaged at its destination. All specimens will be transported in accordance with The Carriage of Dangerous Goods by Road Regulations 1996 (CDG Road) and The Carriage of Dangerous Goods (Amendment) Regulations 1999 (CDG(Amendement))

4.5 THE LABORATORY RESPONSIBILITY BEGINS WHEN THE SPECIMEN ARRIVES AT PATHOLOGY. THE PATHOLOGY DEPARTMENT CAN ONLY ACT UPON THE INFORMATION PROVIDED AND UPON THE ACCURACY OF THAT INFORMATION.

5. **Rules for the acceptance of specimens**

5.1 Requesting doctors are responsible for ensuring the proper identification of patients on both request forms and specimens. Full details as above must be provided.

- 5.2** Samples bearing no identification will not be accepted. The sender will be informed.
- 5.3** Samples bearing identification different to that on the request will not be accepted. The sender will be informed.
- 5.4** Each department in Pathology will define its own criteria for acceptance of a sample or request form which contain incomplete details.(Please see the attached departmental instructions). If there is any doubt over the identity the specimen will not be accepted. The final decision rests with the head of the laboratory.
- 5.5** When a request is not accepted a report will be issued containing a statement of the reason for rejection.
- 5.6** When a specimen, which is not positively identified, is accepted because of exceptional circumstances, a qualifying comment will be clearly stated on the report. The report must be used by the requesting doctor in full recognition of the qualifying comment.
- 6. Monitoring**
- 6.1** All incidents will be monitored and if there are more than occasional errors from any location (e.g. three times in one year), the appropriate Divisional Director will be notified and requested to take action.
- 6.2** Periodic reports will be presented to the Divisional Directors as part of an ongoing risk management process.