Laboratory Sample Collection

Accurate identification of samples drawn for laboratory testing is required to ensure that medical decisions are made based on correct information. Mislabeled or unlabeled specimens lead to, at best, requirement for collection of a new sample or, at worst, incorrect treatment of the patient when the error is not identified.

SUNY Upstate implemented a software solution "Collection Manager" a few years ago with improvement in the rate of mislabeled and unlabeled specimens. This software is implemented throughout almost the entirety of both campuses. There are on-going initiatives with nursing to perpetuate and enhance this improvement.

However, we continue to see mislabeled/unlabeled specimens when the specimen collection is performed by a physician (such as CSF from a lumbar puncture, etc). At this point, physicians are not trained on using Collection Manager (although this training **is** an option that could be pursued in the future). Physicians collecting specimens should coordinate with their nursing colleagues to ensure that specimen labels are available for **immediate labeling of the patient specimens at the patient bedside** to ensure accuracy.

Critical points to remember:

➢ Ensure accurate identification of the patient via wrist-band identification or similar reliable mechanism.
➢ Each specimen container should be labeled with a separate label.
➢ Each specimen label should have the badge ID of both the collector and the labeler written on it.
➢ If orders for the specific testing are not available, Collection Manager can produce generic labels with the appropriate patient identifiers.
➢ Specimens should never be sent to the laboratory without an appropriate label affixed **directly to the container** (not on a removable lid, foil covering, or the biohazard bag).
➢ Extra labels should be sent to the laboratory in the biohazard bag.
➢ Each biohazard bag should contain specimens from one patient only and should not contain specimens from multiple patients (one patient; one bag).