

Cellular Pathology Specimen Labelling

Introduction

Accurate labelling of specimens and accompanying laboratory request forms is essential for safe and effective patient care.

This procedure describes the requirements for accurately identifying the patient from whom the specimen was taken, and the person and location where the result should be sent.

This procedure describes the process followed if a specimen or request form received in Cellular Pathology Reception is not adequately or appropriately labelled.

The Departmental procedure must be read in conjunction with the Cardiff and Vale Policy on the Labelling of specimens submitted to Medical Laboratories [LP-LAB-LabelSpec].

Clinical Reference/Purpose

Accurate labelling of specimens and accompanying laboratory request forms is important for safe and effective patient care.

Scope

All surgical specimens received by the laboratory including tissue, fluids, blocks and slides.

References:

EP-LAB-BS EN ISO 15189:2012 Medical Laboratories - Requirements for Quality and Competence

5.4.6 Sample Reception

EP-LAB-BS EN ISO 15189:2022 Medical Laboratories - Requirements for Quality and Competence

7.2.6 Sample receipt

UHB Policy on the Labelling of Specimens Submitted to Medical Laboratories

Laboratory Medicine Procedure on the Labelling of Specimens Submitted to Medical Laboratories [LP-LAB-LabelSpec]

Related Documents

Directorate Health and Safety Manual [MP-LAB-SafePol]

Procedure for Reporting Incidents [LP-CPY-IncidRep]

Specimen Analysis Authorisation Record [LF-CPY-AnalysisAgree]

Procedure for Specimen reception [LP-CPY-SpecRecep]

Patient Entry for Non-conformant Requests [LI-CPY-LIMSPatEntNC]

Responsibility

The responsibility for requesting a laboratory investigation lies with an authorised practitioner (normally a clinician). It is the responsibility of the requester to ensure that specimen containers are correctly labelled and request forms completed to an acceptable standard (see below).

Definitions

For the purposes of this document, a specimen means the quantity of tissue, fluid, or other sample submitted for testing, together with its container and the request form.

Inappropriate labelling describes any situation where the information provided on the specimen container or request form is incorrect or not adequate for the purposes of the laboratory investigation requested. This includes the following categories:

- *Unlabelled specimens* have an absence of labelling on either the container or the request form, or have no request form.
- *Mislabeled specimens* have a mismatch between the patient information on the specimen container and the accompanying form, or between the information supplied and information from another source (e.g. a previous specimen from the same patient, or data on PMS).
- *Inadequately labelled specimens* have insufficient information on the tube or request form for either the proper identification of the patient or the specimen, or for the correct performance, interpretation and communication of the analysis.

Request Form

General

Specimens will not be processed by the laboratory without an appropriate request form unless they are 'precious' samples such as muscle biopsies where a delay would be detrimental to the diagnostic result.

Laboratories require a minimum data set before a specimen can be registered to ensure safe and accurate retrieval of data. Three patient identifiers are required. It is the requesting clinician's responsibility to enter these details legibly on the appropriate form.

Minimum Data Set

An addressograph label should be used whenever possible.

The following information is essential for patient identification:

1. Patient's NHS number and/or hospital number, AND
2. Patient's name (surname and first name – not initial), AND EITHER
3. Patient's address (minimum first line), including postcode, if known, OR
4. Patient's date of birth
(If the patient is from a communal address, the date of birth is required).

For Oral Pathology samples the following information is essential for patient identification:

1. Patient's name, AND
2. Patient's address, AND
3. Patient's date of birth

For all samples the following is essential for prompt and accurate reporting:

- Surname and initial of the clinician with overall responsibility for the patient (usually a Consultant or GP)
- Ward / Department and Hospital, or other address to which the report should be sent
- Relevant clinical information

Addressograph Labels

Addressographs must only be used for specimens taken from the person whose details are on them. They must not be modified or altered for use for other people's specimens, e.g. partners or siblings. The only exception to this is for certain requests regarding fetuses, when the mother's addressograph may be used with the fetal origin of the specimen clearly stated.

Labelling the Specimen Container

Each specimen container (NOT the lid or cap) must be labelled with:

1. Patient's name (surname and first name – not initial)
2. Patient's date of birth
3. Patient's hospital number or NHS number (if available)

An addressograph is the preferred method of labelling.

High Risk Specimens

Procedures (especially Infection Prevention and Control Procedures) and National Guidelines relevant to the infectious agent (e.g. MRSA, TSE) should be followed.

Reference to the high-risk nature of the specimen should be apparent in the clinical history.

Patient confidentiality should be preserved by ensuring that the identity of patients is kept confidential in its packaging while being transported to the laboratory.

Forms and sample containers must be kept separated and not placed into the same plastic bag/compartment.

Procedure for Handling Inappropriately Labelled Specimens

Feedback to Requestors

If the specimen is of internal origin contact will be made (whenever possible) with the sender and if appropriate, he/she will come to the laboratory.

If the specimen has been sent from a GP, telephone contact will be made and the specimen returned with a written description of the problem and the requirements to make it acceptable

Unlabelled Specimens

All unlabelled specimens will need to have the patient's identity confirmed by the person responsible for collecting the specimen and that person will have to sign a laboratory record confirming this [LF-CPY-AnalysisAgree], thereby accepting responsibility for the identity of the specimen.

Mislabeled Specimens

All specimens with different patient's details on the request form and the container will need to have the patient's identity confirmed by the person responsible for collecting the specimen and that person will have to sign a laboratory record confirming this [LF-CPY-AnalysisAgree], thereby accepting responsibility for the identity of the specimen.

Inadequately Labelled Specimens

Where specimen labelling falls short of the full requirements of patient identification, a member of laboratory staff will attempt to contact the requesting clinician (if that person can be identified from the form) offer the opportunity to come to the laboratory and complete the labelling. The person completing or correcting the labelling must be the person who took the specimen, must be able to satisfy themselves of the identity of the specimen and must sign a laboratory record confirming this [LF-CPY-AnalysisAgree], thus accepting responsibility for the identity of the specimen.

Recording of Labelling Incidents

Unlabelled and mislabelled specimens/request forms will be treated as clinical incidents and dealt with according to the UHB Incident, Hazard and Near Miss Reporting Policy and be recorded on e-Datix.

Any case which is awaiting confirmation of correct labelling must be registered on LIMS with the appropriate request issue test set. Histology cases must then be retained on reception until resolved in the box marked 'HRI cases'. If sample is to be returned it must be tracked on LIMS as 'Returned to Sender'.

- Write 'HRI' on top of request form
- Attach and complete an analysis agreement form
- Register the case on LIMS, adding an HRI test set. If there is a patient mismatch or unlabelled specimen then register as an anonymous patient. See [LI-CPY-LIMSPatEntNC]
- Establish contact with the clinician or source missing information from Clinical Portal, specimen container, operation list or endoscopy report
- The specimen and request form may be held by reception staff whilst an investigation takes place to correct the problem or a clinician contacted to update a request form or attend the laboratory to identify a specimen and complete the analysis agreement form
- Once the issue is rectified, authorise the HRI test set on LIMS. See [LI-CPY-LIMSPatEntNC]
- Update patient details if case has been registered as anonymous

Cytology specimens are not easily identifiable and may need to be repeated. Labelling errors may result in these specimens being discarded and the specimen recorded on LIMS with NRI test set and a Datix incident report raised. If the issue can be resolved then the same process is followed as for Histology samples. Cases are kept in the Cytology fridge whilst awaiting resolution.

A weekly LIMS list is run to search for HRI/NRI specimens and these are reviewed by location of origin.

When repeated labelling incidents can be identified as originating from a single Unit or Practice, an appropriate Consultant, General Practitioner or Practice Manager will be informed.