

Laboratory Specimen Labeling Etiquette

Position Labels To Be “Scanner Friendly”



SSMHealth

Laboratory Coordinating Council

Correct Labeling of Tubes

- Label is completely vertical
- Test, test number and patient name are at the top of the tube
- Label covers label on tube
- Clear space visible to evaluate sample

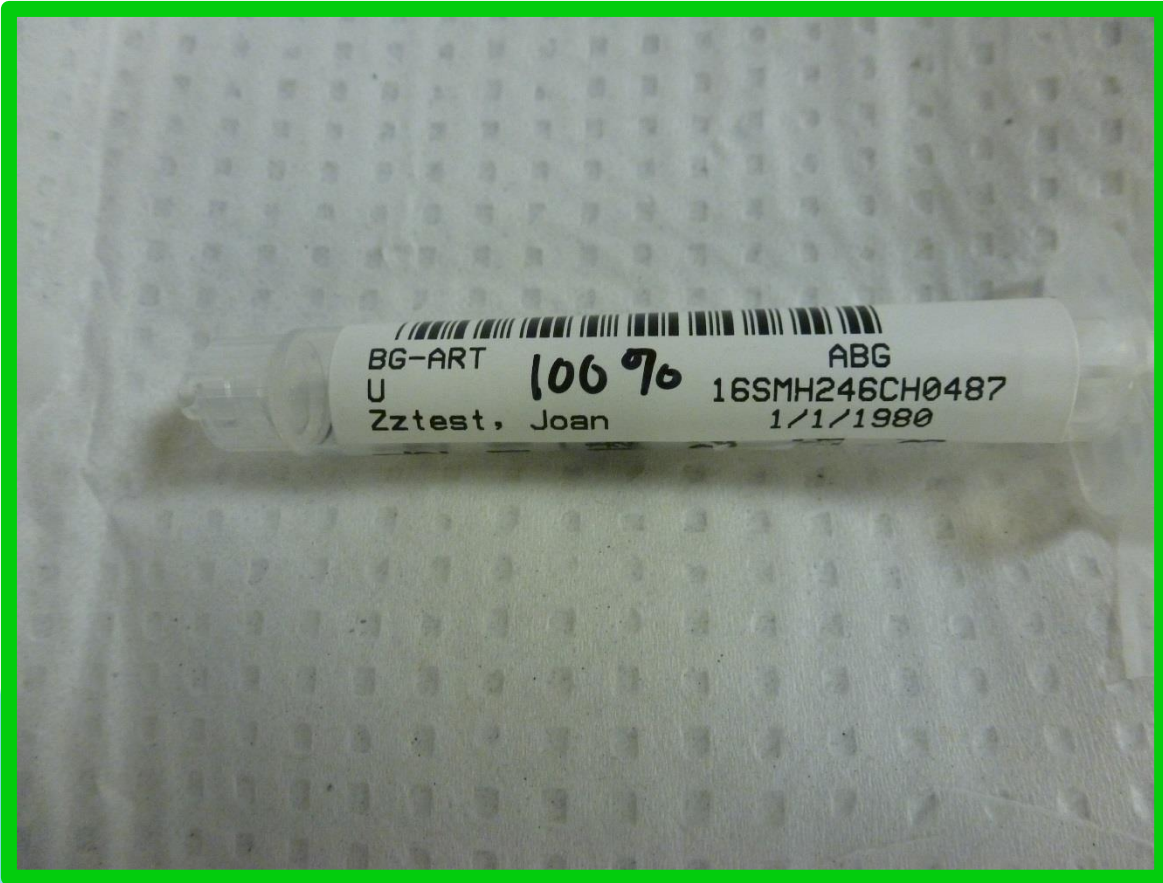


PEDIATRIC TUBES

- Test name, patient name and test number at top of tube
- Tube extender attached
- Scanner Friendly



SYRINGES



- Label is straight on syringe
- Scanner Friendly

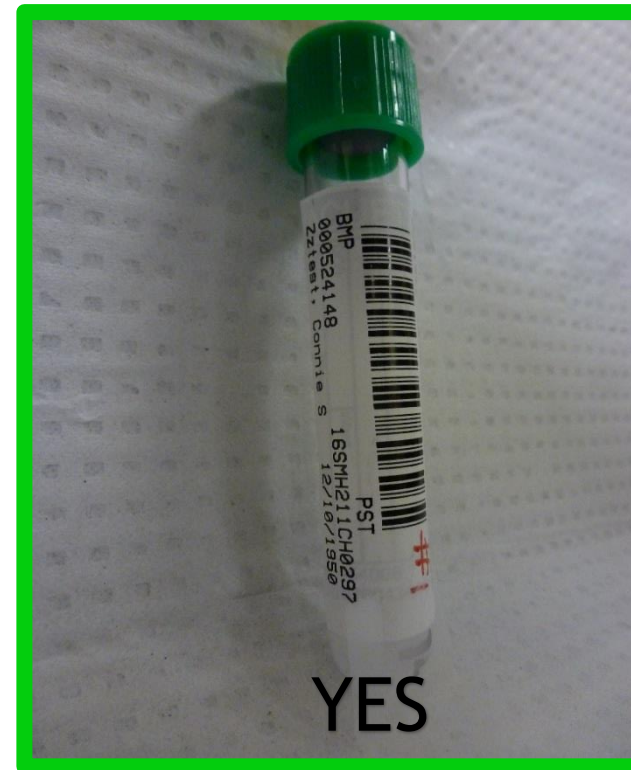
The background of the slide features abstract, overlapping geometric shapes in various shades of blue, ranging from light sky blue to deep navy blue. These shapes are primarily located on the left and right sides of the slide, framing the central text area.

The Following Slides Show Labels
That Are
NOT ACCEPTABLE

Improper Labeling Result in Delayed Testing

If Label Cannot Be Scanned:
Labels have to be reprinted before testing

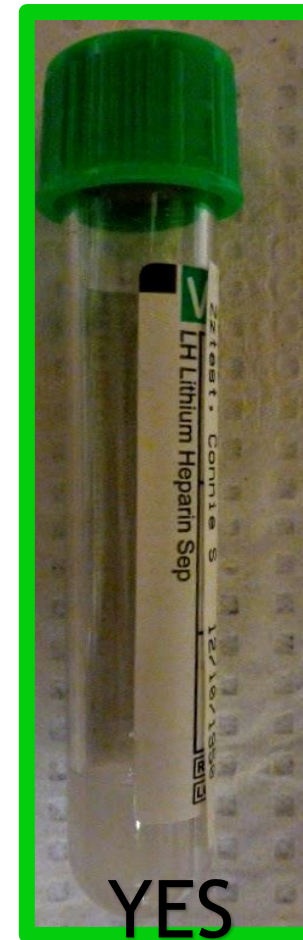
Caps are removed when testing.
If cap is removed from tube,
specimen is unlabeled



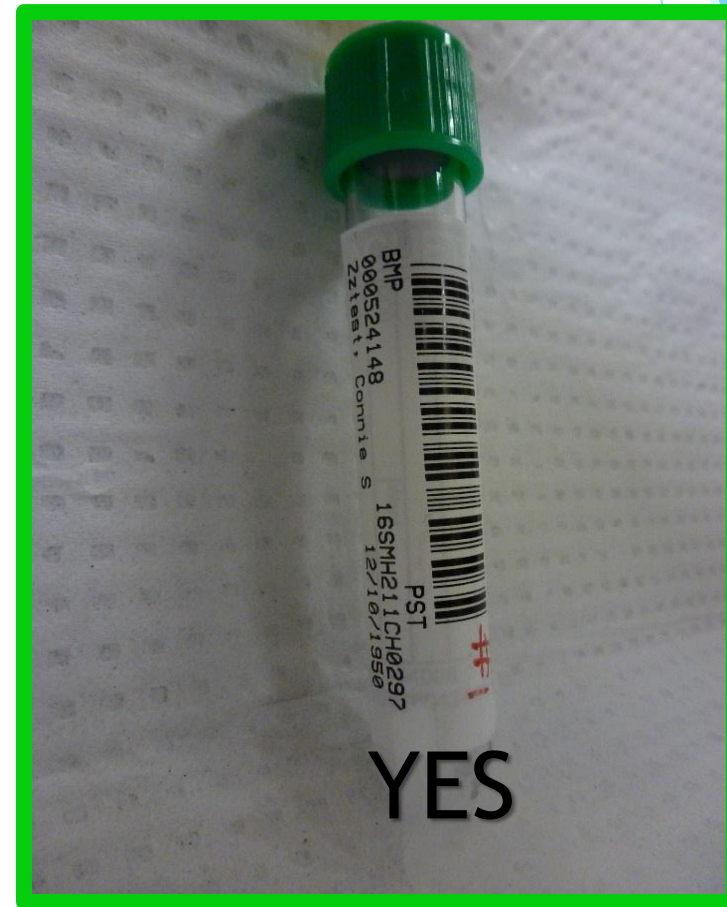
If Label Cannot Be Scanned:
Labels have to be reprinted before testing



Label covers clear space on tube.
Cannot evaluate sample integrity



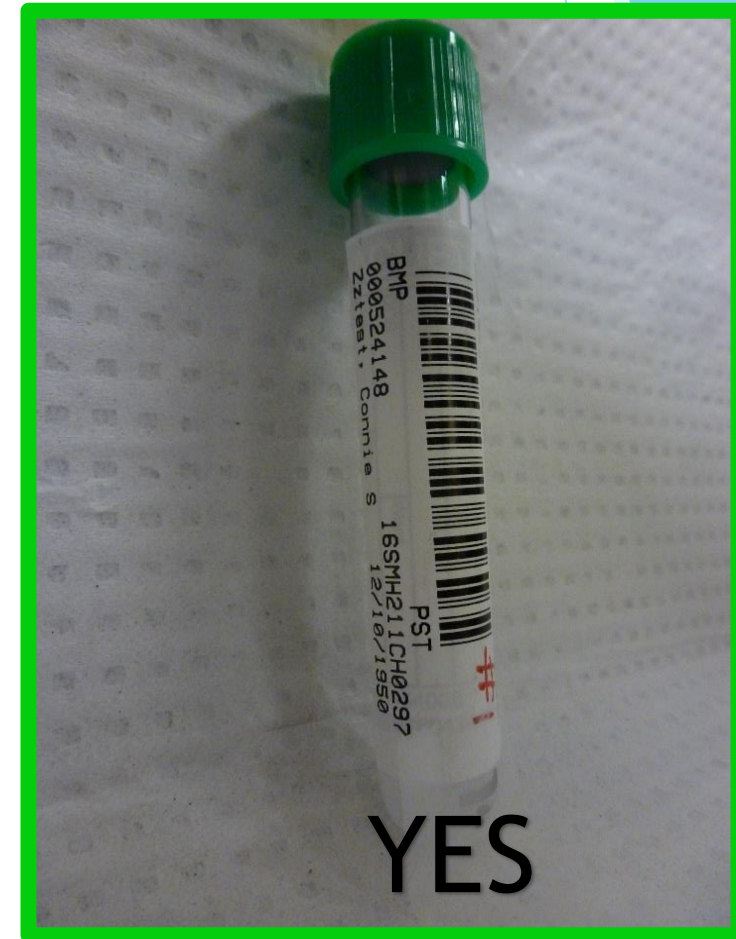
Label is Upside Down
Analyzer Cannot Read Label



Spiral Label

Cannot be Scanned

Analyzer Cannot Read Label



Look Closely at The Label



- This label was misaligned in the printer
- Patient name was cut off.
- There are not two patient identifiers on this tube only the test name

!PATIENT HAS TO BE REDRAWN!

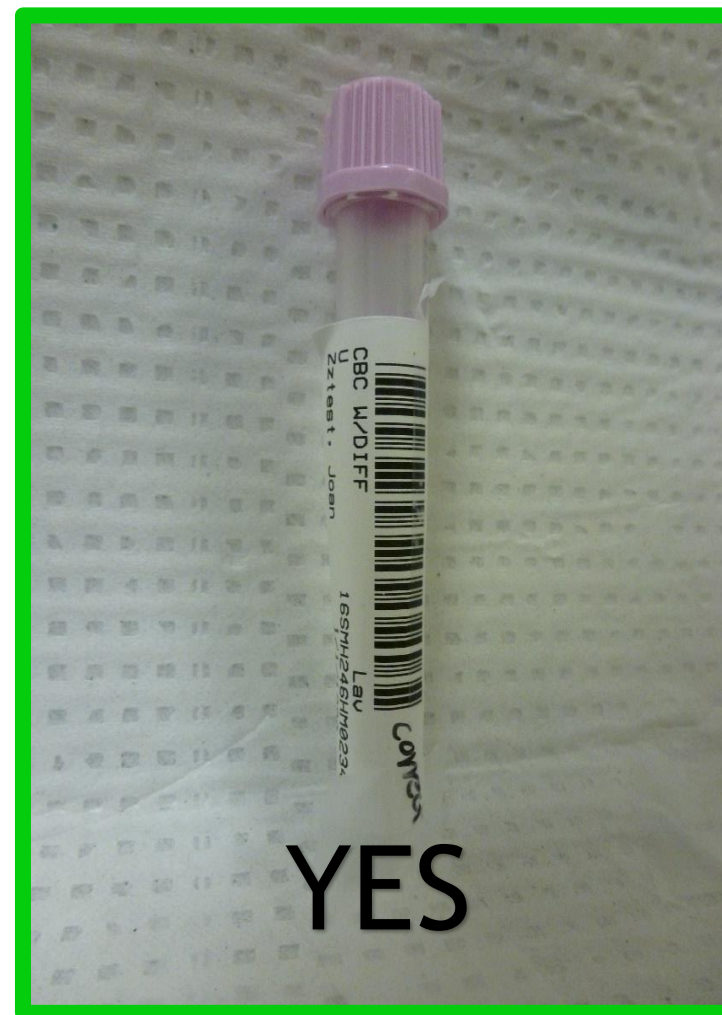
Spiral Label Unable to Scan



Extender on Tube Label with Name/Test on Top



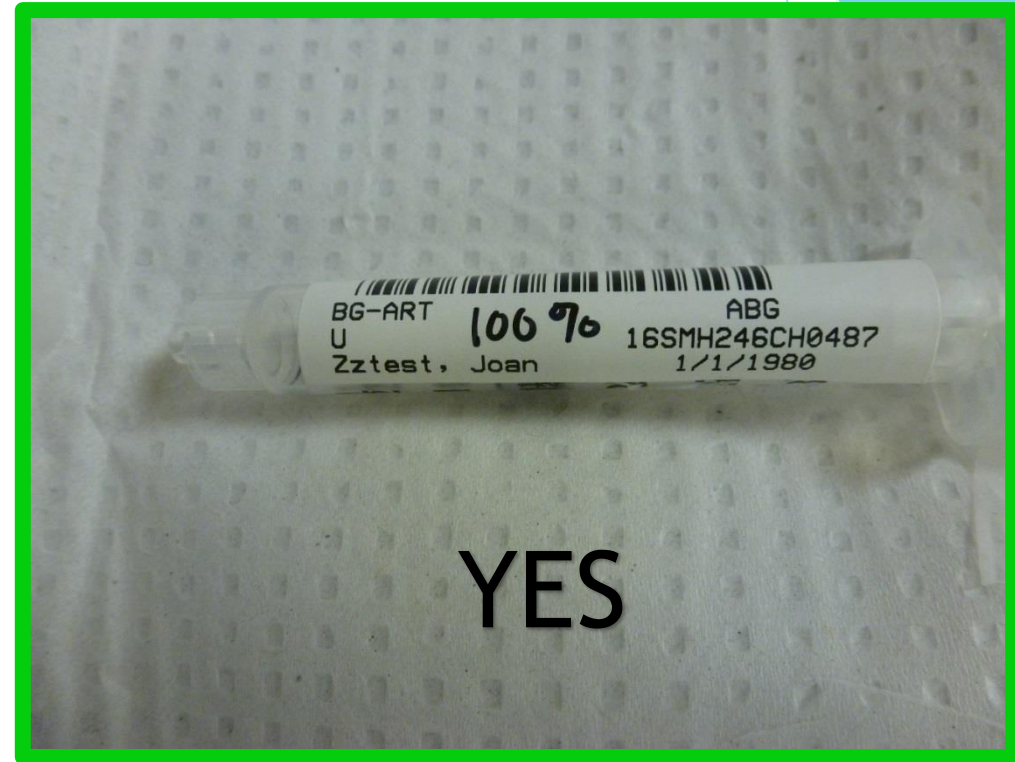
Tube extender not attached
Label squished on tube
Unable to scan



Label wrapped around tube
No tube extender attached
Unable to scan



Label is wrapped around syringe
Unable to scan



Proper Labeling of Blood Banks Specimens

Every sample must contain:

- ▶ The patient's first and last name.
- ▶ Medical record number, unique facility number, or date of birth.
- ▶ Date and time drawn (may be in LIS only).
- ▶ Collector's ID (may be in LIS only).
- ▶ A unique Blood Bank number
 - ▶ Inpatient: **Enterprise Number (E#)**
 - ▶ The barcode label will print the E number on all blood bank barcode labels. If it is missing from the label that prints, it should be handwritten on the label.
 - ▶ Clinic drawn Heme/Oncology or C-Section Patients: barcoded armband number from armband completed and placed on the patient at the time of draw.
 - ▶ Cord blood specimens do not require a separate Blood Bank number.
 - ▶ Specimens from outside clients do not require a Blood Bank number.

Why is Blood Bank E# So Important?

- What is the E#?
 - Enterprise #.
 - Every registered patient has an E# in Epic.
 - It is an unique number for the patient and it remains the same no matter what facility the patient goes to, as long as the facility is on the same instance of EPIC.
 - MRN is only specific to facility or entity. There are duplicate MRNs used between the clinics and hospitals.
- Why is it important to have the E# on the specimen label?
 - A third patient identifier (with Name and DOB) is required per laboratory accrediting agencies.
 - The E# is also available in SoftBank, the blood bank software system, whereas the MRN is not available.

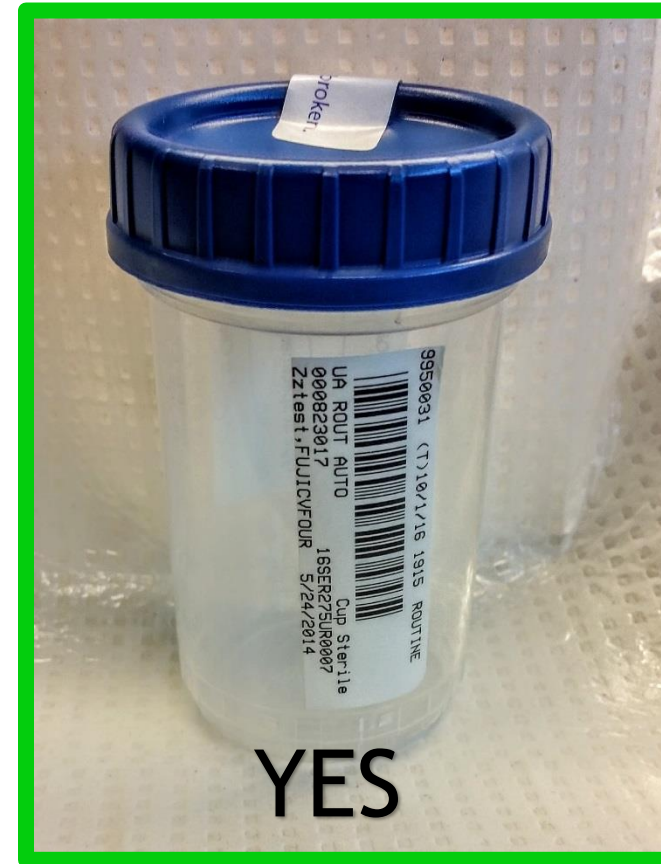
Urine Containers

Label should not go around the container.

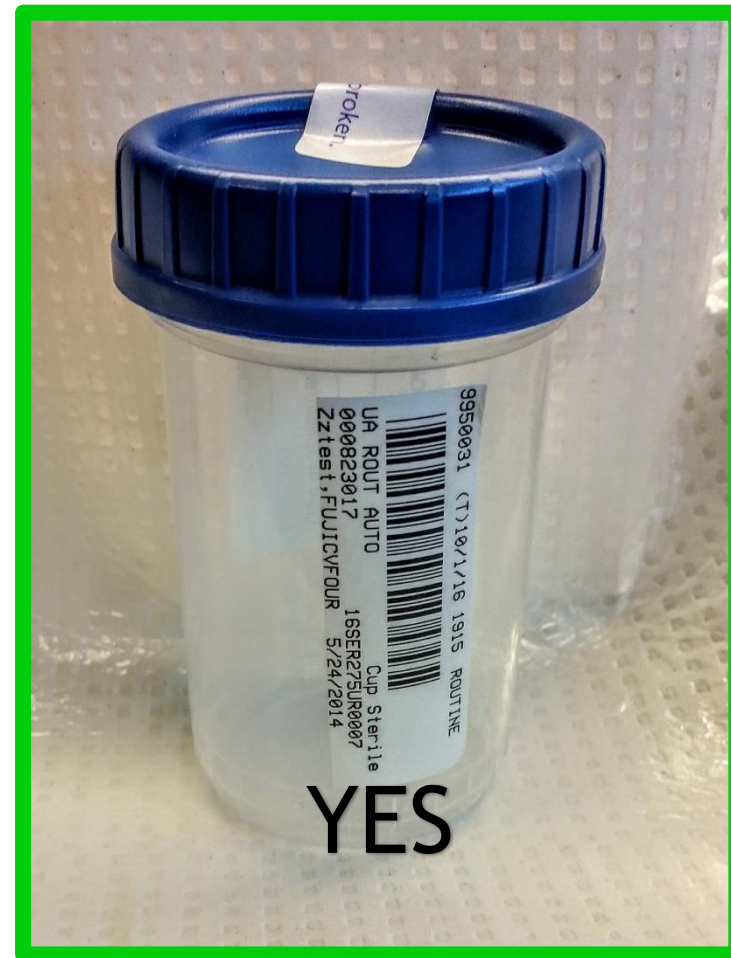
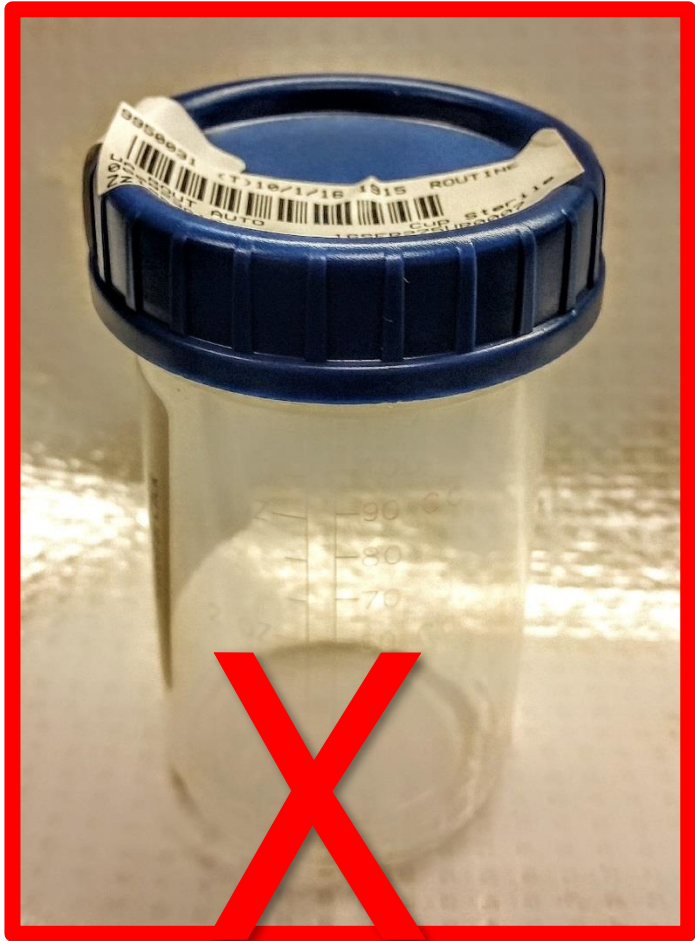
Unable to scan barcode



Position labels along the container vertically.



If cap is removed-
specimen is unlabeled



To Reiterate

Correct Labeling

- Label is completely vertical
- Test, test number and patient name are at the top of the tube
- Label covers label on tube
- Clear space visible to evaluate sample



PEDIATRIC TUBES

Correct Labeling

- Test name, patient name and test number at top of tube
- Tube extender attached



Syringes



- Label is straight on syringe

MICROBIOLOGY SPECIMEN LABELING

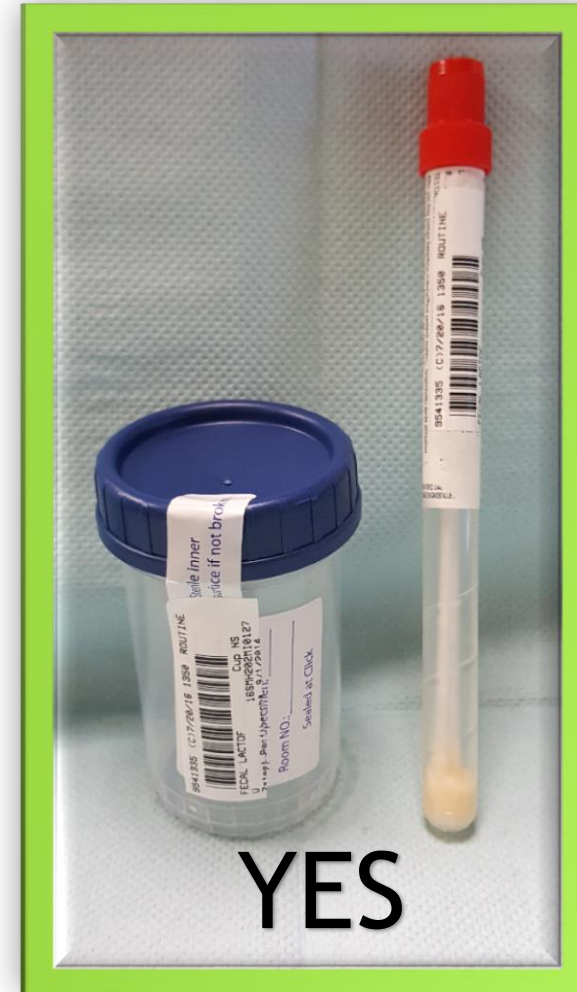


Never attach to biohazard bag
or leave them loose in biohazard bag.



Position Labels To Be “Scanner Friendly”

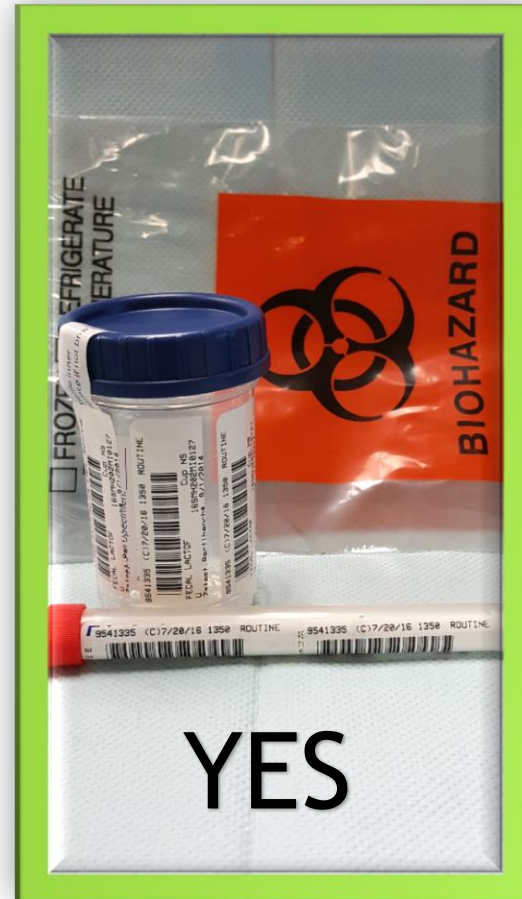
Curved barcodes cannot be scanned.



Position labels along the container vertically.

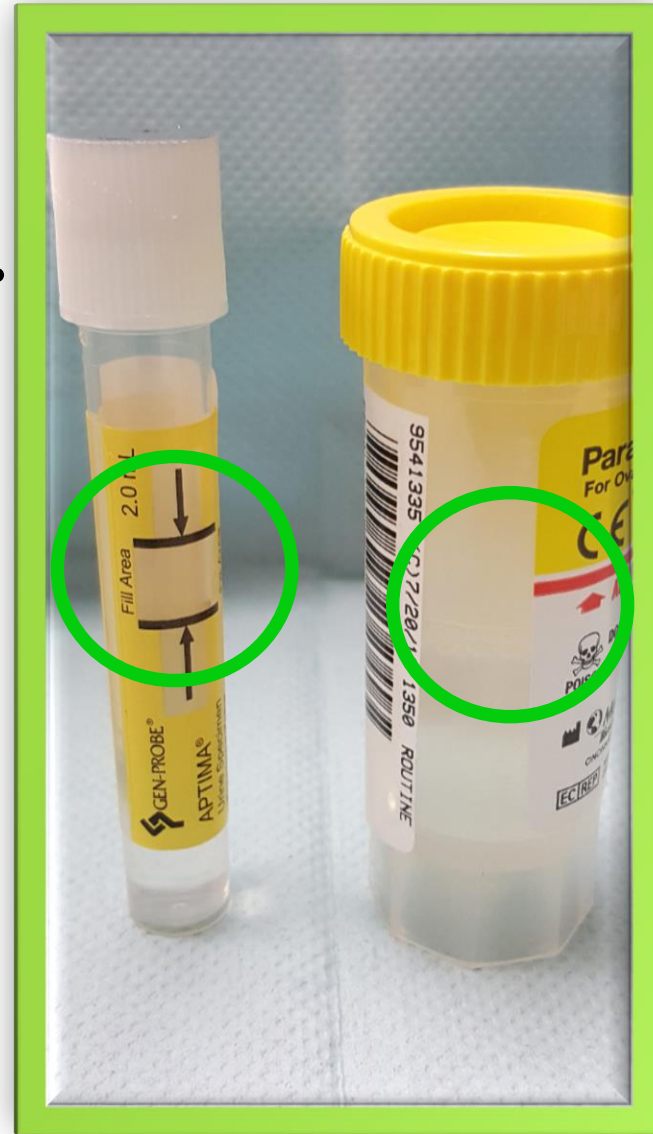
All orders for the specimen should be attached to the specimen Not loose in the bag

Loose label can be lost and
orders missed.



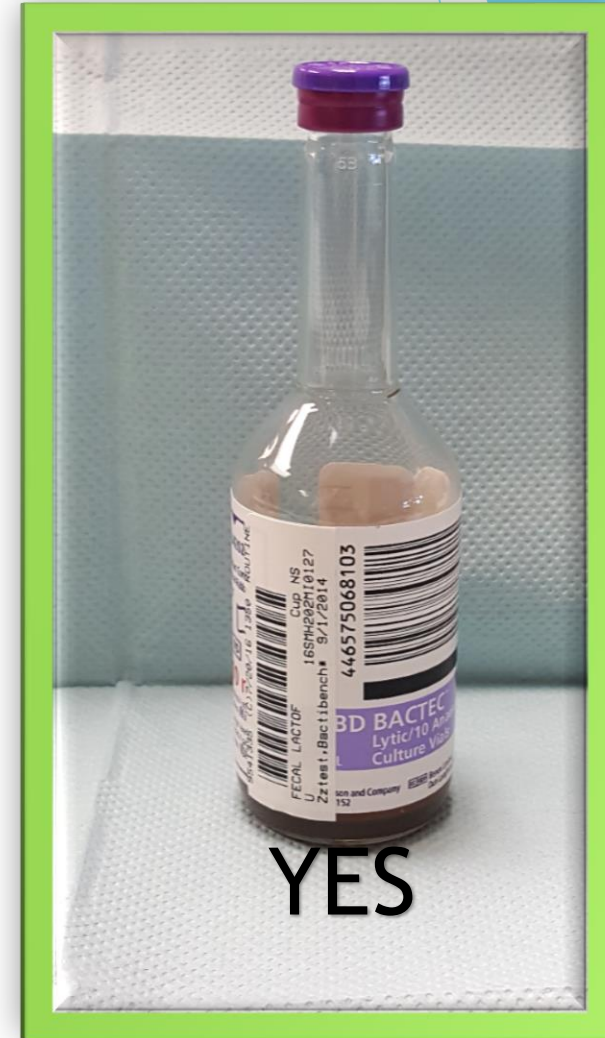
Multiple orders on a
single specimen should
be attached to the
specimen.

Be aware of fill windows.
Do not overfill or cover
window with label.



Be aware of container barcodes.

Do not
position labels
over barcodes.



Blood culture bottles should be labeled with the **total volume** of the **set**.

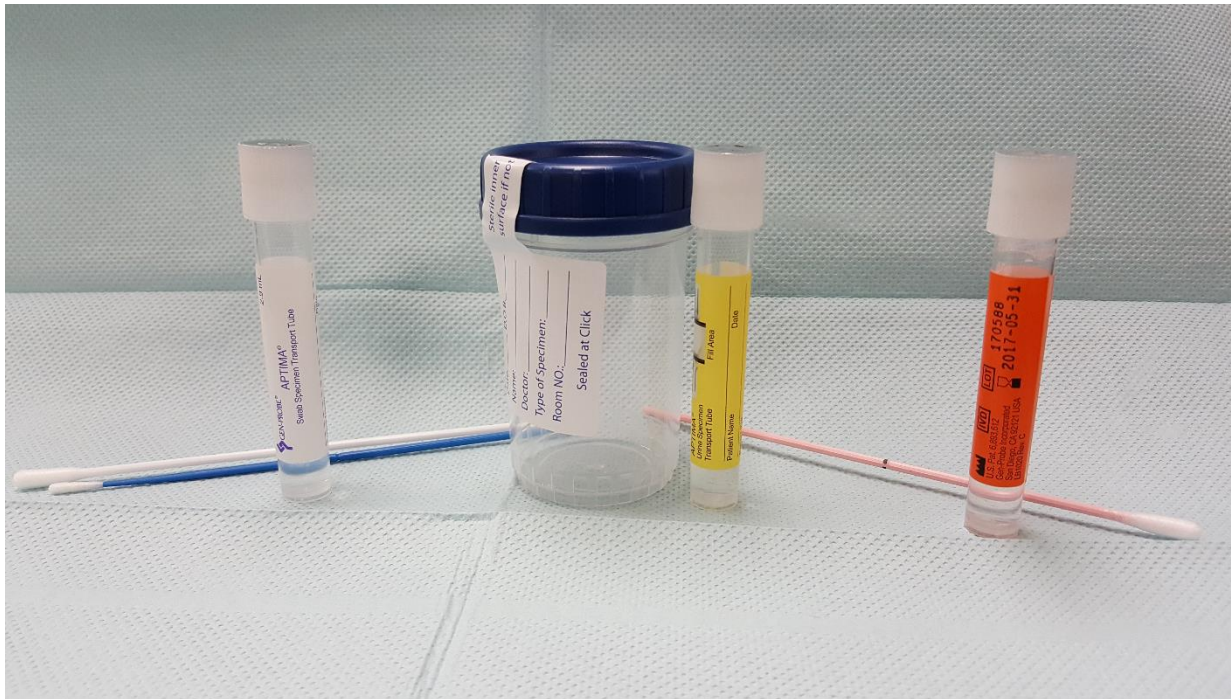
There is 10 mL in each bottle but the total volume of the set is 20 mL.



Remember to write the source of the draw and the identification of collector.

Chlamydia, Gonorrhea, and Trichomonas vaginalis by NAA

Collection Acceptability Guidelines

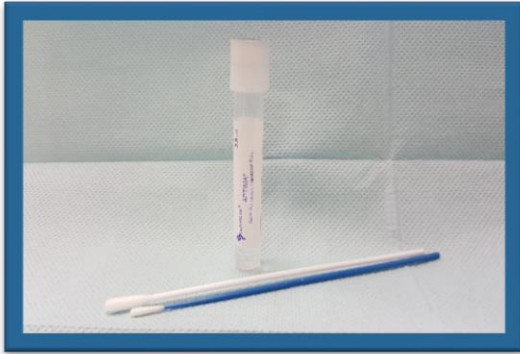


Female Specimen containers



Vaginal Swab

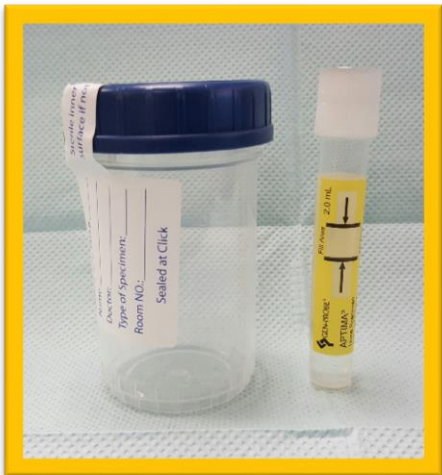
- Kit includes orange specimen container and pink swab.



Endocervical Swab

- Kit includes white/purple specimen container, white swab, and blue swab.

*** White Swab for Cleaning ONLY***



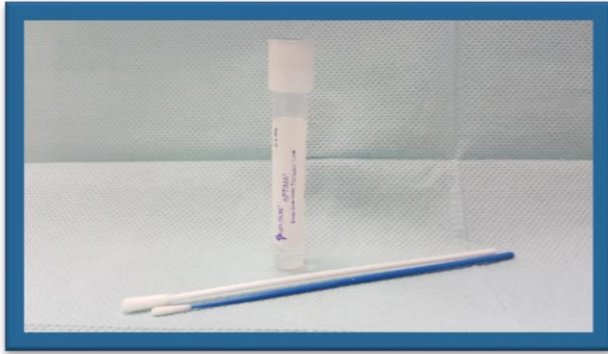
Urine Collection

• Urine First Catch

Min volume 2 mL, Maximum volume 50 mL.

- The Lab generally transfers specimen from specimen cup to Aptima container.
- Not acceptable for *Trichomonas vaginalis* test.

Male Collection Containers



Urethral Swab

- Kit includes white/purple specimen container, white swab (only used for female collection), and blue swab.

***** Do Not Use the WHITE Swab for Male Collection*****



Urine Collection

- **Urine First Catch**
Min volume 2 mL Maximum volume 50 mL.
- The Lab generally transfers specimen from specimen cup to Aptima container

❖ Trichomonas vaginalis is sent to Mayo for testing.

Urine Collection Guidelines

- **First-catch** urine.
- Patient should not void within one hour of collection.
- Female patients should not cleanse labial area prior to collection.
- Min volume 2mL, Max volume 50 mL. Collection of larger volumes may result in specimen dilution that may reduce test sensitivity.
- This test cannot be added-on to a clean-catch sample provided for other tests such as urinalysis or urine culture.

Most Common Specimen Rejections

- Urine volume exceeding 50 mL.
 - Tests added-on to clean catch samples.
 - White cleaning swab submitted.
 - Cap insecure causing reagent/specimen to leak into biohazard bag.
 - Low volume of reagent (swab collections), possibly spilled during collection.
-
- ❖ A detailed collection guide is located in the **Lab Test Catalog** under “Chlamydia Gonorrhea Trichomonas Aptima Collection Guide.”



<http://clinical-laboratory.blogspot.com/2016/01/interpretive-diagnostic-error-reduction.html>

Anatomical Pathology (AP) Specimen Labeling

AP Specimens Must Be Accompanied with A Requisition

Bacon Zztest									
MRN: 000644845					Log ID: 454266				
General Information									
Date: 10/20/2016			Time: 1230			Status: Unposted			
Location: SMH MAIN ORS			Room: OR 01			Service: General			
Patient class: Surgery Day Care			Case classification: Elective			Case type:			
Trauma case?:									
Patient DOB									
DOB									
5/10/1980									
Panel Information									
Panel 1									
Surgeon		Role		Procedure		Laterality		Anesthesia	
Zzjrm,		Primary		BIOPSY BREAST		Right		General	
Physician,									
MD									
Patient Diagnosis									
None									
Diagnosis Information									
Diagnoses									
Malignant neoplasm of lower-inner quadrant of right male breast									
Specimens									
ID	Source	Tests Ordered	Lat	Frozen?	Transport Inst	Time in Formalin	Collected by	Collected at	Instructions
A	Breast	BIOPSY TISSUE PANEL	Right		Fixed in Formalin	10/20/16 1226	Zzjrm, Physician, MD	10/20/16 1226	
Description: Right Breast									
Operative Findings/Comments									
ID	Operative Findings/Comments:								
A									
GI/Bronch Clinical History and Impressions									
ID	Clinical History				Impressions				
A									
Insurance as of 10/20/2016									
Payor	Plan	Group	Member	Effective Dates					
WORKERS COMP	WEST BEND MUTUAL INSURANCE COMPANY [2317]								
Subscriber: WOODMANS EAST									
WORKERS COMP	WEST BEND MUTUAL INSURANCE COMPANY [2317]								
Subscriber: WOODMANS WEST									
WORKERS COMP	CCMSI CANNON COCHRAN MGT								

AP Incorrect Placement of Label



AP Incorrectly Printed Label



AP Hand Written Label

All specimens must have the following labeled:

- Name
- Date of service
- Date of Birth and/or MRN#
- Specimen Source
- laterality
- Physicians Name

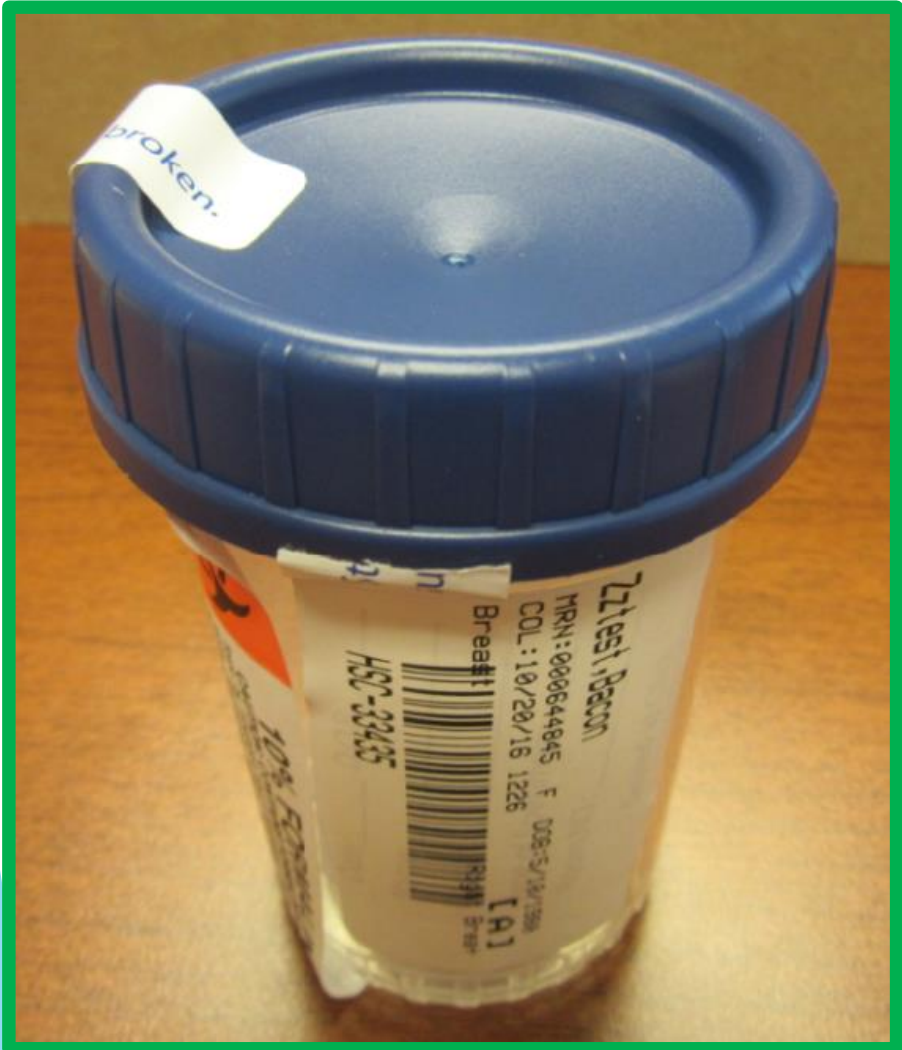


Incorrectly labeled missing the specimen source but had the following correct:

- Name
- Date of service
- Date of Birth and/or MRN#
- Physicians Name



AP Correct Labeling



A correct printed label shows:

- Patient Name
- MRN
- DOB
- Collection Date
- Source
- Laterality
- Full-readable Barcode
- Full HSC#

No part of label is cut off or unreadable



AP Correct Labeling Including Hand Written Specimen Source



A correct Hand written label shows:

- Patient Name
- MRN
- DOB
- Collection Date
- Source
- Laterality

No part of label is cut off or unreadable