

Relabeled Documentation



GEN801.08

Clinical Lab

800 Rose Street; Lexington, KY 40536

RELABEL - Relabeling permitted in accordance with policy LAB111

① Blood and Urine specimens are NOT allowed to be relabeled.

② Cytology Specimens are not to be relabeled, forward specimen to Cytology Lab.

In extreme circumstances, blood and urine specimens may be approved for relabel by a Medical Director.

Medical Director approving relabel: _____

Date of approval: _____

Time of approval: _____

Section Completed by Lab

Specimen Type / Site / Source: _____

Collection Date: _____ Collection Time: _____

Original Specimen Label:

Place Label Here

If Label in Bag, but not affixed to specimen container: Check here

Problem with Original Label: _____

Section Completed by Collector

Relabeling can only be completed by the actual collector or person(s) assisting in the collection.

RELABELED:

Correct Patient Name: _____ Location: _____

Correct Patient MRN: _____ Date & Time: _____

Corrected By: _____ Title: _____

Print Legibly

Signature Required: I, _____, verify that this specimen belongs to the patient listed above, and I accept full responsibility for the relabeling of this specimen.

Tech Completing Form: _____
First & Last Name

Lab Section: _____

Client Services Section

Online Incident Completed

SI-

SI Completed By: _____

Date Completed: _____

Collector: _____

Lab Section: _____