

# **SPECIMEN COLLECTION GUIDELINES**

### **Blood Specimen**

- 1. Follow the instructions described in the Test Directory for specimen type, collection tube type, volumes, patient preparation and handling for each test ordered.
- 2. Gently mix blood in anticoagulated collection tubes by inverting 5-8 times to ensure specimen does not clot.
- 3. Avoid exposing the specimen to excessive light or heat.
- 4. Maintain the specimen at the temperature described in the Test Directory until transport to the laboratory.
- 5. Consult the Test Directory for the volumes required for testing.
- 6. Call Sorrento Mesa Laboratory Client Services at 858-554-9552 for questions about specimen type, collection, or handling procedures.

### Clean Catch Urine Specimen from an Ambulatory Out-patient

- 1. Inform the patient that a urine specimen is required.
- 2. Instruct the patient to wash and dry hands before starting the collection procedure.
- 3. Review the following instructions with the patient to collect a clean catch midstream urine sample:
  - a. Wash hands with soap and warm water.
  - b. Unscrew the cap of the urine specimen cup. Place cap on the counter. To avoid contamination, do not touch the inside of the cup, cap or straw.
  - c. Cleanse with a clean paper towels as follows:

<u>Males</u>- Wipe the head (end) of the penis in a single motion with the first towel. Repeat this with the second towel. If not circumcised, hold the foreskin back before cleansing and continue to hold it back when collecting the urine sample.

**<u>Females</u>**- Separate the labia, which are the folds of skin on either side of the area from which you urinate. Wipe the inner folds of skin from front to back in a single motion with the first towel. Then wipe down through center of labial folds with the second towel. Make sure to keep the labia separated while collecting the urine sample.

- d. Begin voiding a small amount of urine into the toilet.
- e. Place the collection cup under the stream of urine and continue to urinate into the cup. Once the collection cup is full, finish urinating into toilet.
- f. Replace the cap on the cup, and tighten the cap securely.
- 4. Refrigerate the specimen when testing is more than 2 hours from collection.



### 24 Hour Urine Specimen from an Ambulatory Out-patient

- 1. Provide the patient with the brown specimen container containing the preservative specified in the Test Directory for the tests ordered.
- 2. Affix a hazard warning label to the container and caution the patient regarding the preservative in the container.
- 3. Affix a label to the container with the test ordered, <u>and</u> the patient's name, <u>and</u> Scripps medical record number or SSN or date of birth.
- 4. Instruct the patient to discard the first morning voiding and write the time and date on the container label
- 5. Instruct the patient to collect all the subsequent voided urine including the first morning voiding at the same time as the one on the previous day.
- 6. Instruct the patient to keep the urine refrigerated during the collection period and deliver to the laboratory as soon as possible.

# SPECIMEN IDENTIFICATION REQUIREMENTS

- 1. Label each specimen container with at least 2 unique patient-specific identifiers. The following are acceptable:
  - a. Patient complete first and last name
  - b. Scripps medical record number, social security number, or date of birth
- 2. Write the date and time of collection on the specimen container label or the accompanying paper requisition.
- 3. Write the collecting person's name or identity code on the specimen container label or the accompanying paper requisition.
- 4. For specimens where the site of origin is critical to the analysis (for example, site specific cultures, surgical and cytology specimens) write the site of origin and the laterality of the specimen (right versus left) on <u>each</u> specimen container.
- 5. Providers will be notified of inappropriately identified specimens.

# **SPECIMEN SUBMISSION REQUIREMENTS**

- 1. Collect the appropriate specimen as described in the Test Directory for each of the tests ordered.
- 2. Clearly identify each specimen container as described above.
- 3. Place the specimen container in a plastic, zip-lock, biohazard, transport bag.
- 4. Place the specimens for **only one patient per bag**.
- 5. Place the paper requisition in the pouch on the side of the transport bag.
  - a. DO NOT put the requisition inside the zip-lock bag.



- b. DO NOT staple or paper clip the requisition to the zip-lock bag.
- 6. Transport the requisition and specimen to the laboratory within the time limits indicated. Many specimens deteriorate quickly and need to be tested promptly.
- 7. Transport specimens to the laboratory at the temperature requirements listed in the Test Directory for the tests ordered.

# AMBULATORY PATIENT SPECIMEN TRANSPORT

Call Sorrento Mesa Laboratory Client Services at 858-554-9552 to arrange for routinely scheduled transport by a Scripps courier from a provider's office location to a Scripps laboratory.

## **SPECIMEN REJECTION CRITERIA**

- 1. Specimen containers with no patient identification affixed.
- 2. The Scripps Transfusion Service absolutely requires a new specimen and order on any blood specimen that is unlabeled, mislabeled, or missing the unique blood bank arm band identification number, submitted for compatibility testing without exception under any circumstances.
- 3. Specimens where the container identification and the requisition do not match (the specimen is considered misidentified)
- 4. Specimens submitted in polystyrene tubes
- 5. Specimens in syringes with needles attached
- 6. Specimens received in expired blood collection tubes, transport containers or media
- 7. Inappropriate specimen type
- 8. Quantity of specimen is not sufficient to perform the ordered test(s)
- 9. Specimens collected in the wrong evacuated tube type, container or preservative
- 10. Specimens inappropriately or incorrectly handled with respect to preservation, temperature, timing, storage, transport, or centrifugation
- 11. Specimens exceeding stability limits for testing
- 12. Specimen has leaked in transit
- 13. Compromised specimens (e.g., hemolyzed, lipemic, or clotted specimen)
- 14. Specimens which have inappropriately dried out
- 15. Blood specimen from venipuncture collected above an IV which dilute or contaminate the specimen
- 16. Microbiology specimens are unacceptable and rejected for the following reasons:
  - a. Specimen for anaerobic culture not anaerobically transported
  - b. Unacceptable specimen source for anaerobic culture (See Table 1 below)



- c. Sputum with >10 epithelial cells or <25 neutrophils per low power field on gram stained smear for culture (the gram stain only is reported)
- d. Specimen received in fixative such as formalin
- e. Dried out swab
- f. Blood culture for gram stain. Gram stain is not performed.
- g. 24 hour urine collection for TB or fungi
- h. Stool specimen for ova and parasites with excess barium or oil
- i. Stool specimen for culture received in a diaper (rectal swab is acceptable)
- j. Transport time exceeds 2 hours post collection or the specimen is inappropriately handled with respect to temperature, timing or storage (see Table 2 below)
- k. Foley catheter tip (preferred specimen is catheterized urine)
- I. Specimen for viral culture collected with a wooden-shafted swab, or a swab not in viral transport media.
- m. The number of microbiology tests ordered exceeds the maximum acceptable (See Table 3 below).

Acceptable	Unacceptable
Aspirate (By needle and syringe)	Bronchoalveolar washing, not protected
Bartholin's Gland	Cervical
Bile	Endocervical swab, contaminated
Blood	Endotracheal aspirate
Bone Marrow	Lochia
Bronchoscopy, protected brush	Nasopharyngeal swab
Culdocentesis	Perineum
Fallopian Tube	Prostatic or seminal fluid
IUD for Actinomyces	Sputum, expectorated
Ovary	Sputum, induced
Placenta, via cesarean delivery	Stool or rectal swab
Sinus aspirate	Throat swab
Stool, for Clostridium difficile	Tracheostomy aspirate
Surgery, tissue	Urine, from bladder or catheter
Trans-tracheal aspirate	Urine, voided
Urine, suprapubic aspirate	Vaginal or vulva swab
Uterus, endometrial aspirate	-

Table 1: Suitability of specimen source for anaerobic culture



Table 2: Stability limitations for set-up or testing
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Specimen	Room Temperature	Refrigerated	Comment
Body Fluids (other than CSF)	<2 Hours	<24 Hours	
Bronchial	<2 Hours	<24 Hours	
Catheter Tip	<2 Hours	<24 Hours	
CSF	Set Up Immediately	-	DO NOT REFRIGERATE
Culturette	<2 Hours	<24 Hours	DO NOT REFRIGERATE if <i>Neisseria</i> is suspected
Genital	<2 Hours		Specimens in transport holding may be held up to 24 hours at room temperature. DO NOT REFRIGERATE
Sputum	<2 Hours	<24 Hours	
Sputum for AFB	<2 Hours	≤7 days	
Stool (unpreserved) C. diff Ag/Toxin Para-Pak Cary-Blair Para-Pak Ecofix	<2 Hours <1 hour <7 days	<u>&lt; 24 hours</u> <u>&lt; 96 hours</u>	Stools with ≥ 2 hr delay: Put in Para-Pak Cary-Blair for culture and into Para-Pak Ecofix for OVAP.
Urine	<2 Hours	<24 Hours	

## Table 3: Limitations on the number of microbiology tests that can be ordered

Specimen	Number per day
Sputum for AFB or routine culture	1*
Blood Cultures	3
Stool Culture	1
Stool for Ova & Parasites	1
Urine for Culture	1