Acceptance of Laboratory Samples and Test Requests Policy

Applicability
This document applies to all personnel of AHS Laboratories, the Lamont Health Centre, laboratories administered by Covenant Health, DynaLIFE Medical Labs and Canadian Blood Services Diagnostic Services Laboratory which will be referred to collectively as “Laboratory Services” or the Laboratory.

Purpose
This policy outlines the minimum sample and test request acceptance requirements required by Laboratory Services and the follow-up actions required when clinical, non-clinical and environmental samples and tests requests do not meet these minimum requirements.

Background
Quality and accuracy of laboratory results can only be assured when samples and requests meet specific acceptability criteria. Proper sample identification and preparation, complete and legible test request information along with proper sample collection, handling and labeling are essential for client safety and valid laboratory results.

Policy
Laboratory Services accepts samples and test requests and performs testing in accordance with all legislative, accreditation, legal and regulatory requirements, and recognized standards of laboratory practice. All samples and test requests received in the laboratory must be accessioned and a report issued.

Samples delivered to the Laboratory must meet all sample labelling minimum requirements and sample acceptance criteria in order to be accepted, processed and tested (as outlined in Appendix A). Clinical trials, research, and certain clinical patient samples where confidentiality is considered very sensitive must meet the same acceptance criteria as other clinical samples. Blinded or coded samples must be submitted with test request identifier(s) matching the sample. Of special note, only ABO blood grouping can be performed on intraosseous blood sample. These samples are not acceptable for chemistry and hematology analysis.

Tests requests must meet all test request minimum requirements in a format approved for use by Laboratory Services (either paper or LIS-generated electronic format) prior to sample acceptance and/or collection (as outlined in Appendix A). Non-standard abbreviations which could lead to errors in test or examination results, such as those used in the sample description, or on the sample label should be written out in full.

All major sample and/or test request deficiencies are documented on a Laboratory Deficiency Resolution Request Form (AHS Form 18025 or 18026) and are recorded as a non-conforming event.

Rejection
Samples with known significant personnel safety risks and health hazards are rejected unless an approved exception applies. Testing is not performed if there is any concern about patient safety as a result of unsatisfactory or sub-optimal, mislabeled or unlabeled samples or tests requisitions are received. It is strongly recommended samples and test requests for only one patient are included in each re-sealable, plastic bag with external pocket.
Samples exempt from submission to the laboratory such as those on the *Exempt Tissue List* (Operation of approved Hospitals Regulation AR247/90 s23) are not required to be tested or examined.

**Exceptions**

Cases with minor discrepancies or deficiencies may be accepted if the test request and sample have a minimum of two acceptable identifiers that match exactly. **Note:** environmental samples require only one identifier on both the sample and test request.

Cases with major discrepancies or deficiencies are rejected unless an approved exception applies (refer to Acceptance of Laboratory Samples and Test Requests Policy - Appendix A).

Samples received with truncated names on the labels will be accepted as long as two other identifiers are present that match the requisitions exactly _except for Transfusion Medicine samples._

**Samples and/or test requests with discrepancies or deficiencies of any type are _not_ accepted when testing is for the purpose of transfusing a patient.**

**Deficiency Resolution**

Where an approved exception applies, corrections to information on samples or accompanying test requests are documented using the appropriate “Laboratory Deficiency Resolution Request Form” (AHS Form 18025 or 18026). **Note:** The policy statements related to approved exceptions and the use of the Laboratory Deficiency Resolution Form (Non-Clinical) is _not_ applicable to environmental samples.

All exceptions authorized by the requester must receive Laboratory approval.

All original information submitted on the sample and/or test request is legibly retained. If changes are required, the original information is marked with a strike through and includes the date and initials of the person making the change.

Whenever possible, sample and original test requests are maintained in the Laboratory during deficiency resolution. The Laboratory takes measures to maintain sample integrity during problem resolution. This includes retention, possible “off line” testing and appropriate storage in the laboratory.

Samples and test requests, as well as any documentation including the “Laboratory Deficiency Resolution Request Form” will be retained following the appropriate retention schedules and guidelines.

**Laboratory Reports**

A report is sent to the requester and “copy to” recipient(s) where appropriate for all samples and test requests or requisitions that do not meet acceptance criteria, which includes a statement that identifies the problem and action taken.
Whenever possible, the laboratory will contact the requester or patient when samples are rejected or not tested and recollection may be required.

Documentation

All occurrences where samples or test requests did not meet acceptance criteria are documented using the appropriate mechanism. Adverse events resulting from deficiencies related to sample and/or test request acceptance are reported in compliance with all AHS policies.

Initial Acceptance

When samples have undergone acceptance at the initial laboratory and have laboratory labels applied, and then are referred to another laboratory, these samples are not required to be reassessed for acceptance and rejection criteria by the subsequent receiving laboratory. **Note:** If changes are required on the reference laboratory requisition, the original information is marked with a strike through and includes the date and initials of the person making the change or a copy of the Laboratory Deficiency Resolution Request Form will be submitted.

Tracking of Acceptance Data

Tracking and analysis of sample and test request acceptance indicator data is performed. Trends identified through tracking and analysis will be used to identify and prioritize opportunities for improvement.

Responsibility

The requester (or designate) is responsible for:

- Ensuring the sample has met all acceptance criteria before submission to the Laboratory, and
- Authorizing correction of information for all samples where a major deficiency or discrepancy has been identified and an approved exception applies.

Medical, Scientific or Professional personnel (or designate) are responsible for approval of sample and test request or requisition exceptions when unusual circumstances not defined in this policy are identified.

Laboratory Personnel are responsible for:

- Accepting samples and tests requests only when defined criteria are met,
- Approval of sample and test requests exceptions when defined criteria are met,
- Contacting requesters and/or patients when samples and test requests are not acceptable and advising of next steps,
- Bringing concerns or unusual circumstances not identified in this policy to the attention of Medical, Scientific or Professional personnel for direction, and
• Documenting any sample acceptance nonconformances according to laboratory procedures.

Definitions

**Approved exception** means a sample that does not meet acceptance criteria upon arrival at the Laboratory but falls within the exception criteria defined by this policy or has been approved for processing by clinical/medical/scientific staff.

**Blinded or Coded Sample** is a sample submitted to the laboratory from clinical trials, research or clinical areas where patient confidentiality is considered very sensitive (e.g. sexual health) or unknown patient identity. These samples have unique identifiers such as an alphanumeric codes assigned known only to the submitters and will have no individually identifiable information. The identifying information on the test request submitted with the samples must match the sample labelling.

**Client** means individuals, agencies, organizations or groups who receive or have requested laboratory services. The term patient or resident may be used interchangeably for clinical clients dependent on the AHS setting.

**Clinical sample** means a patient or client sample submitted to the laboratory for analysis or examination where a patient result report is generated and the result report is used for the purposes of diagnosis, treatment or monitoring.

**Environmental sample** means water, ice or biological indicator.

**Hazardous sample packaging** means a sample that arrives in a way that poses a safety risk to laboratory personnel such as:
- broken or leaking containers or contaminated by breakage or leakage of other samples
- samples received in inappropriate containers (e.g. fluids in bags), or
- samples in syringes with needle attached.

**Laboratory approval** means acceptance of corrected sample label and/or test request/requisition information provided and authorization for testing to continue:
- For situations that meet defined criteria this means front line personnel, or
- For situations where unusual circumstances exist this means Medical, Scientific or Professional personnel or designate.

**Major Discrepancy or Deficiency** means samples or test requests with deficiencies or discrepancies in defined acceptance criteria:
- Name and unique identifier missing (e.g. sample unlabeled),
- Name identifier incomplete (e.g. first or last name missing, initials only),
- Name or unique identifier completely different between sample and test request,
- Significant misspelling where more than 2 letters are transposed or missing/added, letters that changes the interpretation of the name. i.e. Olliver vs. Over,
- Numbers incorrect or missing from the unique identifier,
- Identifier Information on sample and test request do not match
- Test request received without a corresponding sample or vice versa, or
- “Standard Requirements” defined for test request and sample labelling and/or acceptance criteria not met.

**Minor Discrepancy or Deficiency** means samples or test requests where deficiencies or discrepancies are considered not significant and information provided adequately identifies the sample or test request/requisition:
- Use of recognized nicknames, abbreviations, derivative names, middle name,
- Insignificant spelling where there is a simple transposition of letters, one letter added or missing that does not change the interpretation of the name. i.e. Michael vs. Micheal,
- Spelling is correct, but order of names is inconsistent,
- Apostrophe or space discrepancy (e.g. Obrien vs. O’Brien or Saddleback vs. Saddle Back),
- Maiden vs. married last name as long as names can be reconciled,
- “Other Requested Information” defined for test request not met (e.g. requester location not provided, gender incorrect etc.) or discrepant between test request and sample or between test request/requisition and LIS,
- Temporary baby name or identifier changed to permanent name, or
- Time of collection missing on sample and not deemed necessary for accurate test reporting.

**Non-clinical sample** means a sample derived from sources other than human beings such as animal or pharmaceutical, exclusive of environmental samples.

**Off-line testing** means testing that is performed but orders are not entered into the LIS and/or results are not released.

**Personnel** means all individuals who are employed or contracted within Laboratory Services.

**Recipient** means the physician or health care provider and/or program or individual authorized to receive results.

**Requester** for clinical and non-clinical samples means the individuals authorized by CPSA to request laboratory testing; for environmental samples means the authorized submitting individual or agency utilizing environmental laboratory services.

**Research sample** means a sample obtained for the purpose of investigation or experimentation aimed at the discovery of new information, the advancement of scientific theories and development of practical applications. A patient result report is not generated and included in the patient’s medical record.
**Test Request** means a request for testing of a laboratory sample made in either electronic (e.g. order/entry) or paper format (e.g. Laboratory requisition, physician office requisition) that is legible with clear orders (no undefined mnemonics or phone orders).

**Transfusion Service Identification Number (TSIN)** – assigned number used for identification of patient and blood component as this number is utilized throughout the transfusion process, from collection to transfusion. It is displayed on the patient armband, requisition, collected samples and blood components to be transfused. This number is referred to differently dependent upon the blood services provider, e.g., RTSIS (Regional Transfusion Service Identification System), BBIN (Blood Bank Identification Number), TMID (Transfusion Medicine Identification).

**Reference**

**Related Documents**
- Acceptance of Laboratory Samples and Test Requests Policy – Appendix A - PQMPMJ00004A
- Acceptance of Laboratory Samples and Test Requests Process- PQMPMX00004A