HEALTH HOLDING

HAFER ALBATIN HEALTH CLUSTER
MATERNITY AND CHILDREN HOSPITAL

Department:	Laboratory and Blood Bank		
Document:	Multidisciplinary Policy and Procedure		
Title:	Specimen Labelling		
Applies To:	All Laboratory, Blood Bank Staff and Nursing Staff		
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1. PURPOSE:

1.1 Correct specimen labelling is very important because it has a positive impact on patient care, protects specimen quality, protect patients from adverse errors made due to improperly labelled specimens, eliminates risk of exposure to the healthcare worker and complies with all accreditation standards.

2. DEFINITONS:

N/A

3. POLICY:

3.1 Specimen container is immediately labelled after sample collection at the patient side and it is mandatory that all patient samples must be clearly identified with two positive identifiers (Patient's Full name and Patient ID or medical record number) throughout the testing process, Date and time of sample collection and Identification of the person collecting the specimen.

3.2 The patient must be consistently and accurately identified before any phlebotomy or specimen collection. Once collected, all specimens must be labelled with two positive identifiers in the presence of the patient.

3.3 Every specimen brought to the laboratory must have a label on the container in which it is held. It is not acceptable to label only the lid, transport bag, or other container used to transport the specimen.

3.4 Rejected samples must be registered in register books as well as mentioning the reason of rejection.

4. PROCEDURE:

4.1 Labelling of the specimen containers is conducted immediately after sample collection at the patient's bedside.

4.2 Two patient identifiers (Patient's Full name and Patient ID or medical record number):

4.2.1 Ask the patient to spell their full name and compare that information to the label or request order.

4.2.2 Check for the patient's medical record number on the specimen container, verify, and confirm it from the patient test request form.

4.2.3 If the information given by the patient does not match the order or label, rectify the discrepancy prior to collecting the sample in order to ensure that you are collecting the appropriate samples.

4.2.4 If the patient is wearing a hospital armband, also compare the patient name and DOB, and Medical Record Number (the information on the armband) with the specimen container label and requisition form to ensure that they are correct.

4.2.5 If the patient is unable to identify themselves (child, non-English speaking, mentally disabled), it is acceptable to have the patient identified by a family member or caregiver, again, using two types of identification.

4.2.6 If the patient is a member of a nursing facility, a staff member can provide two types of identification.

4.2.7 Do NOT rely on the patient's room number as a means of identification.

4.2.8 All patients at risk for identifying themselves in a procedure or adverse situation must have a hospital- approved armband.

4.2.9 If the armband is missing or incorrect, notify nursing staff.

4.3 Failure to properly label the tubes will require that the specimens be redrawn.

4.4 Mislabelled Specimens: Specimens received unlabelled, mislabelled, incompletely labelled or with a requisition bearing a name and/or medical record number different than what is affixed to the specimen will not be tested. The nurse in-charge and/or physician will be notified to recollect the specimen.

4.4.1 A specimen is incompletely labelled if some of the required information is missing.

4.4.2 If the name and the medical record number are missing, the specimen will be considered unlabelled and handled as such.

4.5 Specimen source in cases other than blood: Containers for tissue, aspirated fluids or swabs are labelled with the anatomical site of origin or the type of specimen.

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4.7 Identification of the person collecting the specimen: Name, ID card number and signature of the person collecting the specimen.

5. MATERIAL AND EQUIPMENT:

N/A

6. RESPONSIBILITIES:

6.1 Chief Medical Technologist

6.2 Laboratory Quality assurance officer

6.3 Phlebotomist/ Laboratory technologist

6.4 Ward Nurse collecting the specimen

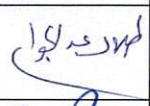
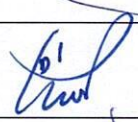
7. APPENDICES:

7.1 Rejection Form

8. REFERENCES:

8.1 Laboratory Bio-safety Manual. 3rd Edition, 2004, WHO.

9. APPROVALS:

	Name	Title	Signature	Date
Prepared by:	Dr. Talal Abdelgawad	Clinical Pathologist		January 12, 2025
Reviewed by:	Dr. Kawther M. Abdou	Consultant & Lab. Medical Director		January 14 2025
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Reviewed by:	Mr. Sabha Turayghib AlHarbi	Nursing Director		January 15, 2025
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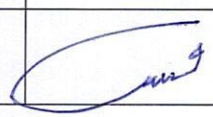
Reviewed by:	Dr. Tamer Mohamed Naguib	Medical Director		January 19, 2025
Approved by:	Mr. Fahad Hazam Alshammari	Hospital Director		January 26, 2025

Appendix 7.1 Rejection Form

Kingdom of Saudi Arabia
Hafar Al Batin Health Cluster
Maternity and Children Hospital

المملكة العربية السعودية
التجمع الصحي بحفر الباطن
مستشفى الولادة والأطفال

SPECIMEN REJECTION FORM

PATIENT INFORMATION

Patient Name		**MRN/ National ID No.**	
Test		**Department**	

THE LABORATORY IS UNABLE TO PROCESS THIS SPECIMEN FOR THE FOLLOWING REASON:

Specimen/Sample ID Illegible البيانات غير مقروء	Damaged - Contaminated عينه ملوثه
No Diagnosis لا يوجد تشخيص	Damaged - Expired Transport Media وسائط نقل منتهيه الصلاحيه
Incomplete Data البيانات غير مكتمله	Damaged - Improper Transport Media وسائط نقل غير سليمه
Wrong Labelling بيانات خاطئه	Damaged - Improper Temperature درجه الحراره غير سليمه
Wrong Request Form ركوست غير صحيح	No Sample Received ركوست بدون عينه
No Stamp/Singular لا يوجد ختم الطبيب المعالج أو القسم	Hemolysed Sample عينه متحلله
Test Not Available التحليل غير متوافر	Clotted Sample عينه متجلطه
Wrong Tube أنبوبه خاطئه	Lipeamic Sample عينه دهنيه
Quantity Not Sufficient الكميه غير كافيه	Over sample كميه العينه أكبر من الكميه المطلوبه
Damaged - Too Old عينه قديمه	Others:
Damaged - Broken or Leaked عينه مفتوحه أو مكسوره	

THE FORM COMPLETED BY:

Laboratory Staff		Department	
Date and Time		Sign/Stamp	