SPECIMEN COLLECTION AND TEST REQUESTING GUIDELINES

SCOPE

This procedure applies to all personnel responsible for submitting specimens to Marshfield Labs for testing.

PURPOSE

The purpose of this document is to provide general specimen collection and test requesting guidelines intended as a reference document within the Laboratory Test Reference Manual.

PROCEDURE

To ensure quality testing and compliance with regulatory requirements, Marshfield Labs follows standard procedures when handling specimens as described below.

A. Specimen Identification:
All specimens must be labeled at the time of collection with at least 2 patient identifiers, including:
- Patient's name (full last name, full first name) or a unique ID code (research, vet accounts).
- The second patient identifier may be one of the following:
  - Marshfield Clinic Medical History Number (required for all Marshfield Clinic patients)
  - Date of birth (month/date/year)
  - Marshfield Labs requisition number

NOTE: Location-based identifiers are NOT acceptable (e.g. hospital room number or street address).

B. Specimen Labeling:
- All specimen containers must have a securely affixed label. Include the following information:
  - Two patient identifier's (as described above)
  - Date and Time of Collection
  - Specimen source, as applicable:
    - Blood samples: If sending an aliquot, must specify Plasma or Serum
    - All other body fluids
  - Specimen site, as applicable:
    - Applies to specimens where site of origin is critical to the analysis (e.g. site specific cultures and surgical/cytology samples).
    - If only one specimen submitted, the site must be on the container and/or the requisition, including, as applicable, the laterality of the specimen (right vs left).
    - If multiple specimens with one requisition, each container must be labeled in a manner to ensure linkage of the specimen to the site and laterality.
- Slides must be labeled with patient's full name and date using a pencil. Do not use ballpoint ink, as identifier will wash off during staining process.

C. Requisition:

- A requisition, paper or electronic is required for all specimens submitted to the laboratory.
- The requisition, at a minimum, must include the following information:
  - Patient identification
  - Patient gender
  - Patient date of birth
  - Requesting providers name, and for outreach samples, client/facility information.
  - Tests requested
  - Date and time of specimen collection
  - Specimen source, as applicable, per test specific information.
  - Clinical information, as applicable, per test specific information.
- Refer to "Instructions for Completing Requisitions" on the main page of the Human Test Reference Manual for specific instructions on completing paper-based requisitions.

D. Test Ordering Priorities

The following table defines the specimen collection ordering priorities for ordering within the Marshfield Clinic Health System:

Ordering Priority	**Ordering Priority Code and definition**	**Collection Time**		**Testing Time Refer to the Laboratory Test Reference Manual for availability of tests.**
		Hospital Sites (In-patient)	Clinic Sites (Out-patient)	
Routine AM	"E" Early morning	Start by 0530	N/A	Results to patient chart by 0730 Or Next scheduled run.
Stat	"S" Life threatening	Within 15 minutes of ordering.	Within 15 minutes of ordering.	Results available within 60 minutes from arrival or next scheduled run.
ASAP	"A" As soon as possible	Collected within 45 minutes	Collected within 45 minutes	Results available within 60 minutes from arrival or next scheduled run.
Timed	"T" Must be collected at a specific time	Within 15 minutes on either side of the requested time (i.e. 30 min window).	Within 15 minutes.	Next scheduled run.
Will Call	"W" Specimen will be collected upon phone notification to lab	Within 30 minutes of call or at the designated time.	Within 15 minutes of call or at the designated time.	Next scheduled run.
Routine	"R" Today, Next scheduled round	MMC-Marshfield Scheduled rounds: 0830 1230 1600	Scheduled appointment	Collection day or next scheduled run.

		Regional MMC Hospitals Scheduled rounds: 1000 1500 2000 All Routine collection orders received after last scheduled rounds will be added to Early morning draw.		
Non-Lab collected	"X" Specimens collected by non-lab personnel	N/A	N/A	Next scheduled run.
U-Have	"U" Testing performed on specimen already in lab.	N/A	N/A	Run per the selected ordering priority.

E. Fasting Status:
- Fasting is defined as no consumption of food or beverage, other than water for 9 to 12 hours before testing, unless otherwise noted in the test information for a specific test.

F. Collecting and Submitting CSF:
- Collect CSF fluid aseptically into 3 or 4 tubes (or one sterile sage container, if drawing from a shunt), preferably with 3-5 ml per tube.
- Each tube must be collected in the order on the sample tube (e.g. #1 is the first tube collected, #4 is the last tube collected).
- Specimens must be received in the laboratory within 30 minutes of collection.
- Specify tests requested per tube, e.g:
  - Tube 1 – Chemistries
  - Tube 2 – Microbiology
  - Tube 3 – Hematology/Cytology
  - Tube 4 – Molecular/Genetic
- Label all tubes following proper labeling guidelines as stated in step "B" above. Record the tube number on the label.

G. Collecting and Submitting Body Fluid Specimens (Other than CSF, Blood, or Urine):
- A fresh specimen is the preferred specimen for all laboratory tests.
- DO NOT send specimen in syringes with needle attached as this is a safety concern and the laboratory may reject the sample.
- Cytology tests require an entire bag or bottle be submitted. Do not aliquot from this bottle/bag for other tests and do not send more than one bag/bottle per collection for Cytology testing.
- Non-cytology tests – submit an aliquot from the bottle/bag. Do not send the entire bottle/bag or the entire collection. To remove an aliquot, perform the following:

- Mix the fluid in the bottle/ bag by repeated inversion to assure an even distribution of cells and microorganisms.
- Swab the outlet port and allow to air dry to assure that fluid can be withdrawn aseptically.
- Withdraw fluid with a large syringe using a large bore needle. Refer to individual tests for volumes, but an acceptable guideline:
  - Cultures – 10-20 mls
  - Cell Count and Differential – 2 mls
  - pH – 3 mls (submit in a separate syringe without air bubbles. Remove needle and cap firmly with syringe cap. Sent to lab immediately on ice or cold pack).
  - Chemistry tests – 10-15 mls total fluid volume for all routine tests, i.e. glucose, amylase, total protein, LDH, etc.
- Label following labeling guidelines above, including source of fluid or fluid type.

H. Specimen Transport:

- Prior to sending to laboratory, ensure the following:
  - Specimen transport container is not beyond its stated expiration date.
  - No visible leakage from the specimen container.
  - No visible contamination outside the specimen container
  - No needles or other sharps in the package that could cause injury or pathogenic exposure to anyone handling or opening the package.
  - Samples are transported at the appropriate temperature as described in the Test Reference Manual for the applicable test.
- Package specimens in biohazard bags for transport.

I. Specimen Rejection and Redraw:

- Every attempt will be made to perform testing on a sample. However, to ensure accurate results, there are circumstances where a sample must be rejected as described in the specific test's rejection criteria in the Test Reference Manual.
- The provider or designee will be notified if the laboratory must reject. The laboratory will also ask for permission to initiate a redraw, as applicable.

J. Cancelling tests:

- Cancellation request received prior to test setup will be honored.
  - Marshfield Clinic Health System staff call the applicable laboratory
  - Outreach Clients: Contact Customer Service Department at 1-6700 or 1-800-222-5835.
- Cancellation requests received after test have been setup cannot be honored. A lab report will be issued and tests will be charged appropriately. Exceptions require approval from Marshfield Clinic Health System (MCHS) Patient Experience department. MCHS staff must complete a Marshfield Clinic patient experience incident report.

RELATED DOCUMENTS

Document Title	Link