

CONWAY MEDICAL CENTER

PROCEDURE

When in hard copy form, refer to Policy Manager to validate this as the most current revision.

TITLE:	LAB-SPC-02.07 Transportation of Patient Samples-PRO		
ISSUED BY:	Administrative Lab Director	REFERENCE #:	LAB-SPC-02.07-PRO
APPROVED BY:	Lab Director	EFFECTIVE DATE:	2010-08-06

SCOPE: All clinical areas of the hospital and external customers of the laboratory that may submit samples for testing.

NOTE: Patient samples transported in private vehicles are NOT subject to the US Federal regulations for transportation of hazardous substances. However, we recognize that for the protection and safety of the transporter and the sample itself certain standards should be met when transporting patient samples.

PROCEDURE:

I. TRANSPORTERS

- **A.** HOSPITAL STAFF: Initial, annual hospital wide and departmental training on precautions is given to employees.
- B. OUTSIDE SOURCES OF SAMPLE DELIVERY: It will be assumed that outside services (ie Home Health) will train staff on the appropriate handling and delivery of samples. Specimen requirements for transportation are in the general dictionary that is available to all outside submitters on the hospital website.

II. BASIC GUIDELINES:

- A. Appropriate PPE should always be worn when handling biohazardous material.
- B. Consideration of container types:
 - 1. Urine, fluid submissions should be tightly sealed and labeled and enclosed within a container (biohazard bag, or designed container)
 - 2. Special fluid precautions: due to the nature and irretrievability of body fluid samples, such as CSF, or knee fluids, it is suggested that parafilm be used as an extra precaution to secure the lid of the container. This is not required if the container has a locking feature.
 - 3. Glass containers are prohibited.
 - 4. Biohazard stickers should be appropriately placed on all external containers
 - 5. Refrigerated samples: appropriate us and packaging of ice as required.
 - 6. Dry ice: When sample require immediate freezing, dry ice can be used.

 The handling of dry ice is addressed in the safety manual and should only be handled by staff that are knowledgeable about handling. It is kept under the chemical hood.
 - 7. ALL samples must be free of needles before leaving the patient bedside. Needles Should be discarded appropriately. Samples with syringes may be rejected.

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III. SAMPLE REJECTION DUE TO TRANSPORTATION ISSUES:

- A. Rejected if any transportation issue effected the quality of the sample
 - 1. Temperature variance.
 - 2. Leakage.
 - 3. Contamination.
 - 4. Inappropriate time lapse from collection to receipt.
 - 5. Visual evidence indicates sample integrity issue.

IV. PNEUMATIC TUBE SYSTEM:

- **A.** Urines and Stools: *ONLY HOSPITAL ISSUED SCREW TOP CONTAINERS CAN BE SENT THROUGH THE SYSTEM.*
 - Non authorized containers should be hand delivered.
 - 2. Loose, Watery stools should be hand delivered.
- **B.** Routine Blood Submission:
 - Biohazard bag: All vacutainer tubes should be placed carefully into a biohazard bag.
 If necessary secondary bagging may be required.
 - 2. Tube Insert: Place foam insert in tube with each delivery.
- **C.** Sample on Ice: Double bag sample and secure top. Tape may be required.
- **D.** Microbiology Samples: Double bag
- **E.** <u>All</u> samples should always be sandwiched between two tube carrier foam cushions to protect the sample from the turbidity that may occur on the trip through the system.

V. MUST BE HAND DELIVERED TO THE LABORATORY:

- A. Body Fluids
- B. CSF
- C. Loose stools
- D. 24 hour urines
- E. Any samples in a syringe (Attached needles are unacceptable)
- F. All pathology and cytology samples

VI. SAFE HANDLING OF SAMPLE PACKAGING FOR DELIVERY TO OUTSIDE SOURCES

Packaging of all biohazardous materials can be performed only by personnel that have been trained on the appropriate procedures and safeguards. The laboratory has a reference lab employee that is trained by them who meets those standards. Laboratory staff that prepare for send out of samples are also trained using the DHEC standard training tools.

RECORDS: NA

REFERENCE STANDARDS: CAP GEN.40100

REVISION/REVIEW HISTORY:



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Date	Affected Section(s)	Summary of Changes ('Reviewed' or details of change)
05/05/2011	none	Reviewed/revised electronically in lab G drive.
lds		
10/28/2011	Format	Placed in format for MCN.
lds		
2/25/2013lds	Format	Roman numeral and new MCN
10/16/13lds	IV:E	Added note about using foam cushions to protect sample
04/03/14lds	V	Removed testing RSV, Flu from hand delivery (new method)
03/12/15lds	All	Annual mth for review. No changes
02/12/16lds	VI	Added section for packaging samples. Reviewed no other changes
01/15/18	REFERENCE	Removed CAP checklists that no longer apply.