COLA

FAST FACTS 35[10]

COLA PATIENT SAFETY PROGRAM 2010:

SPECIMEN IDENTIFICATION THROUGHOUT THE PATH OF WORKFLOW

COLA began the COLA Patient Safety Program in 2008. This program focuses on areas in laboratory medicine that are found to have high error rates and significant impact on patient safety. Through this program, COLA will identify an existing COLA criterion or create a new COLA criterion as the patient safety goal for each year, and provide education on good laboratory practices for implementation of that criterion. The program has been integrated into the COLA survey process.

The COLA Patient Safety Goal for 2010 addresses:

> PRE 19: Are all specimens uniquely identified through all phases of testing?

Proper patient identification (the Patient Safety Goal for 2008) followed by proper specimen identification and labeling (the Patient Safety Goal for 2009) that continues throughout the path of workflow (the Patient Safety Goal for 2010) are essential parts of a safe testing process. Laboratory personnel need to be aware of the emphasis in the medical community to reduce medical errors due to mislabeled specimens.

According to CLIA (Sec. 493.1232), "The laboratory must establish and follow written policies and procedures that ensure positive identification and optimum integrity of a patient's specimen from the time of collection or receipt of the specimen through completion of testing and reporting of results."

This means going further than just labeling the specimen immediately after collection using at least two identifiers. You must ensure that the specimen is uniquely identified through all phases of testing.

Verify that the same identifiers are present on all of the following that are applicable:

- Requisition (order)
- Patient wristband
- Patient chart
- Barcodes
- Sample labels
- Sample aliquots
- Test devices or cartridges
- Test results / reports

At times, it is difficult to use two identifiers throughout the entire testing process, especially on smaller aliquot cups. A single identifier can be used on these smaller sample cups but it should be referenced to a chart, map, or list that contains other patient and/or sample identification. This paperwork (the chart, map, or list) should be kept as part of the testing records and retained according to CLIA guidelines.

Correct specimen identification across the path of workflow is critical. Test results performed on mislabeled specimens will be linked to the wrong patients and may put the health of these patients at risk.

Think about this important patient safety goal and take steps to ensure compliance in your laboratory.