Sanford Policy ENTERPRISE Laboratory Safety:	Specimen Labeling, Laboratory- Enterprise
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DATE REVIEWED/REVISED: 06/02/2026	**FORMULATED BY:** Head of Enterprise Laboratory Quality

Reference Policies:
Handling and Rejecting Suboptimal Specimens, Laboratory- Enterprise

SCOPE:
Enterprise- All employees, All entities

PURPOSE
Standard specimen labeling is critical for correct patient identification. This policy is to ensure all specimens submitted to a Sanford laboratory are labeled following all regulations and best practice.

Definitions
Primary specimen container – is the inner most container that holds the original specimen prior to processing and testing. This may be in the form of a specimen collection tube, cup, syringe, swab, slide, data file or other form of specimen storage.

POLICY
1. The individual(s) collecting and/or labeling the specimen must positively identify the patient before collecting and/or labeling the specimen.
2. All primary specimen containers are labeled in the presence of the patient with:
    A. At least two patient-specific identifiers. Specimens collected for transfusion purposes require at least 3 identifiers. In some labs the third identifier is required to be the blood bank armband number. Refer to Appendix B for a list of labs that require blood bank armbands. A location such as patient room number is not considered a patient-specific identifier.
        1) Examples of acceptable identifiers include:
            a. Patient Name

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   b. Date of Birth
   c. Medical Record Number
   d. Social Security Number – The social security number should only be used as a last resort and should have Medical Director approval.
   e. Unique Random Number

3. All primary specimen containers should include the following information. If it is not on the label when it is sent to the lab, staff may call the sender and obtain this information at the time of receipt if the information is not available in the computer system.
   A. Collection Date
   B. Collection Time (as appropriate).
   C. Method to identify the individual who collected the specimen.
   D. For specimens where site of origin is critical to the analysis (eg. Site specific cultures, surgical and cytology specimens), the primary specimen container must clearly identify the site of origin, and as appropriate, the laterality of the specimen (right versus left).
   E. Additional information may be needed to correctly identify the patient in special circumstances. For example: Two patients with same name and date of birth.
4. Labels must be permanently and securely applied to specimen containers in a manner that ensures all the information is visible and allows for viewing the specimen's suitability.
5. Labels must be applied to the body of the collection container, not to the lid.
6. If the patient is appropriately able to respond, show them the labeled tube/container and have them confirm their name and date of birth. If the patient is unable to confirm the name and date of birth, verify the labeled tubes a second time against the patient's armband or by other means to ensure identity following Patient Identification and Wrist Band Identification-Enterprise .
7. Best practice is to only have one label per specimen. If more than one label is used on a container, each additional label placed on the specimen must overlap the previous label such that the newest label **does not cover** the name and second identifier on the original label. If only the name is visible on the original label, staff need to peel the top label back to verify the second identifier. See Appendix C for examples.
8. When using printed lab labels the label should be checked to make sure information printed correctly and that the two patient identifiers are not cut off.
9. All specimens must be checked for labeling accuracy when received in the lab.
10. Specimens not meeting labeling standards will be rejected unless they are deemed non-recollectable. Refer to Handling and Rejecting Suboptimal Specimens, Laboratory- Enterprise for more information on specimen

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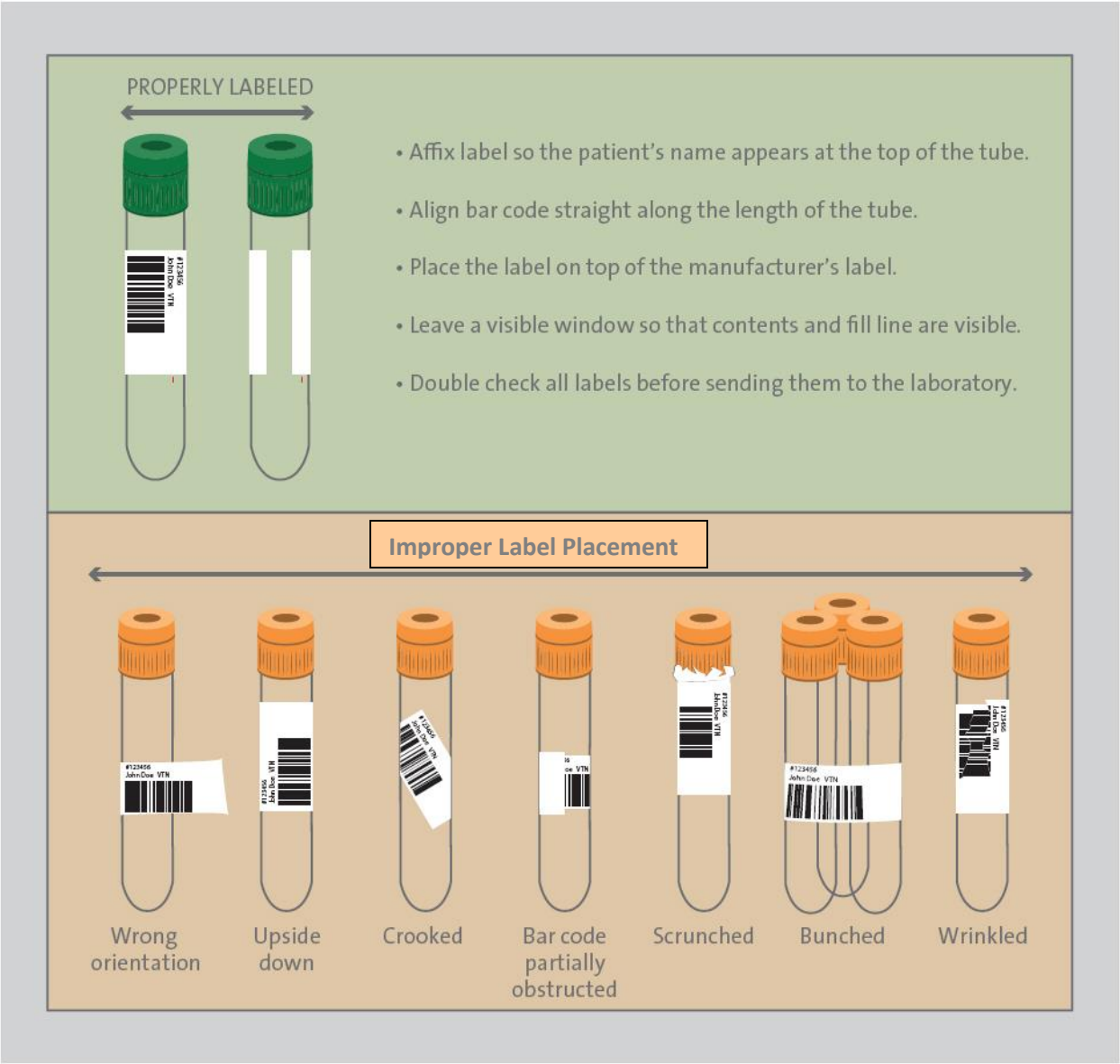
acceptability and rejection. Samples with a discrepancy will be held until discrepancy is resolved. If discrepancy cannot be resolved by the time the specimen stability is exceeded, the sample will be rejected.

11. Secondary/Aliquot Specimens:
    A. Specimen Identification is maintained on specimen containers throughout all phases of testing, including, but not limited to aliquots, dilutions, tubes, slides, blocks, culture plates, reaction units, nucleic acids and other extracts, data extract files, images, and other secondary specimen created during the processing or testing of a specimen.
    B. Two patient identifiers will be used whenever possible. A single, unique identifier may be used to label materials too small for a label as long as the single unique identifier can be traced back to the patient.
    C. Aliquot specimens:
        1) Aliquot tubes must be labeled with a LIS label whenever possible. When not possible, hand label with at least two patient identifiers.
        2) Write the specimen type (EDTA, Heparin, Serum, Etc.) on the label.
        3) Include initials or ID number of person aliquoting the sample or assure this information is documented in LIS.
        4) Visually verify that the primary specimen label matches the aliquot tube prior to transferring the sample.
        5) Never aliquot into an unlabeled tube.
        6) Transfer the sample into the aliquot tube per instructions in the test catalog.
        7) Check the aliquot tubes against primary tubes for a second time.
        8) The aliquot tube will be taken to the appropriate testing area or storage area.
        9) Aliquoted specimens should never be returned to the original container.

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Appendix A: Common Problems Encountered With Blood Collection Tube Labels.



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Appendix B: Labs Utilizing Blood Bank Armbands for Specimens used for Transfusion

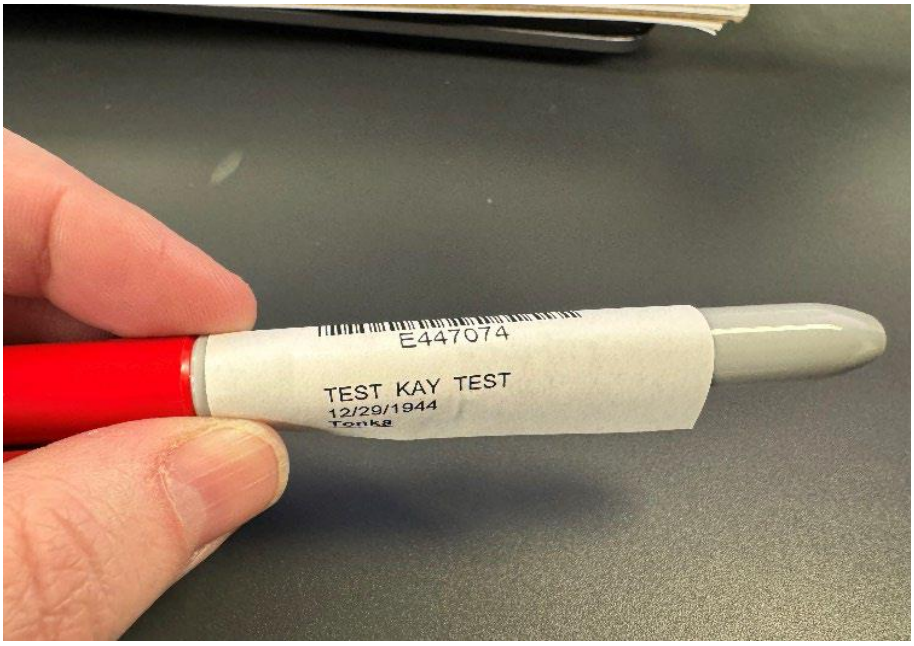
Site	BBID REQ
Aberdeen	Y
Bagley	Y
Bemidji	Y
Bismarck SMC	Outpatients only
Canby	Y
Canton	Y
Chamberlain	Y
Clear Lake	Y
Hillsboro	Outpatients only
Fargo SMC/BWY	Outpatients & ER only
Jackson	Y
Luverne	Y
Marshfield	N
Mayville	Outpatients only
Rapid City Surgical	Y
Rock Rapids	Y
Sheldon	Y
Sioux Falls SMC	N
Thief River Falls	Outpatients only
Tracy	Y
Vermillion	Y
Vibra	Y
Webster	Y
Westbrook	Y
Wheaton	Outpatients only
Worthington	Y

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Appendix C: Instructions for Double Labeling Specimens

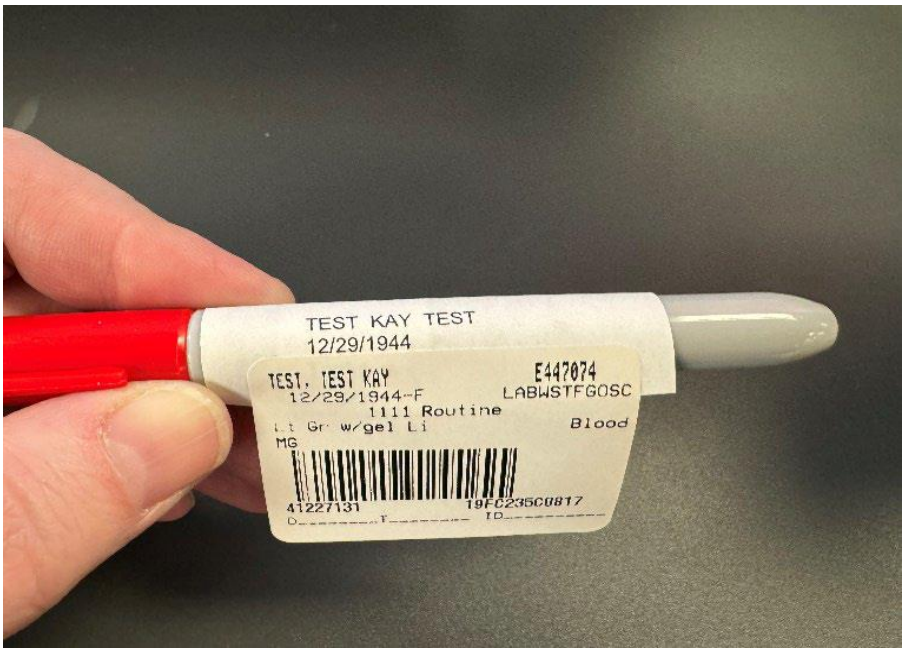
Generic patient label:



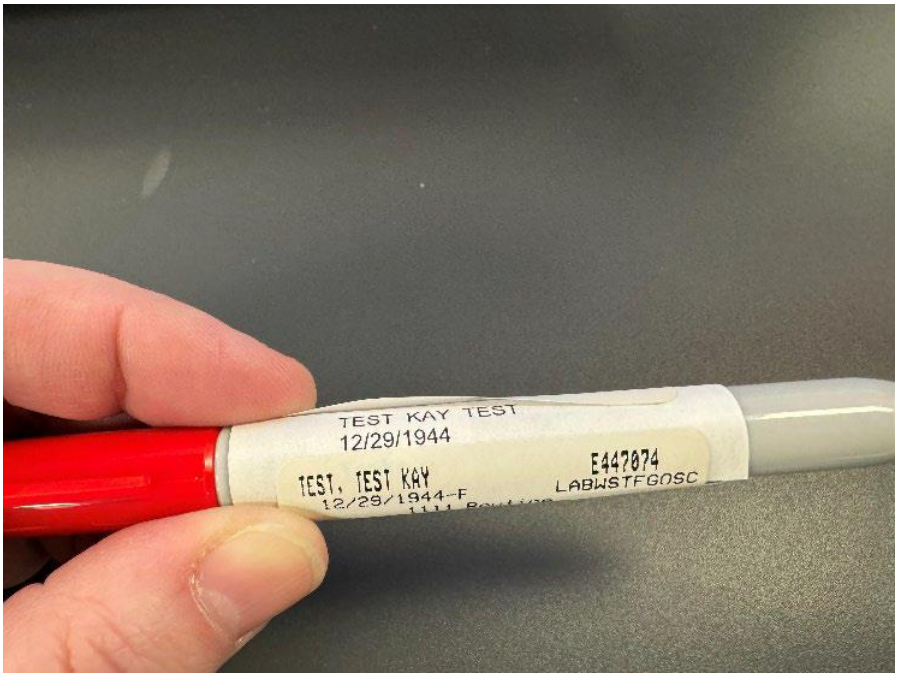
Match up patient identifiers:

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Attach Beaker label to the container.



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References:

CLSI. *Accuracy in Patient and Specimen Identification*. 2nd ed. CLSI standard GP33. Wayne, PA: Clinical and Laboratory Standards Institute, 2019.

CLSI. *Specimen Labels: Content and Location, Fonts and label Orientation*; Approved Standard CLSI document AUTO12-A. Wayne, PA: Clinical and Laboratory Standards Institute, 2011.

College of American Pathologist Accreditation Checklists. Current edition.

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