PROTOCOL FOR THE COLLECTION, HANDLING AND LABELLING OF SPECIMENS

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**Named Responsible Officer:**

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<th>Approved by</th>
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NHS Wirral

Collection, handling and labelling of specimens protocol

Introduction

Specimens if not handled safely, can pose a risk of infection to all people involved, including healthcare workers, patients, transport personnel and laboratory workers. Accurate analysis is crucial in determining the correct diagnosis, or detecting an infectious agent, so that appropriate and timely treatment can be given. To support this, factors such as the correct collection method, storage conditions, transportation times, supporting information and patient details should be observed.

All specimens should be considered a potential infection risk and handled following universal precautions; however some specimens are suspected or known to be infected with highly infectious agents. In these circumstances staff have a responsibility to bring this to the attention to laboratory staff without breaking confidentiality.

Aim

The aim of this protocol is to set out the standard for the collection, handling and labelling of microbiological specimens including those known or suspected of containing a ‘high risk’ pathogen.

Legal obligations

The Trust acknowledges its responsibility to comply with current Health & Safety at Work and Control of Substances Hazardous to Health (C.O.S.H.H.) legislation.

The Carriage of Dangerous Substances by Road and Rail (Classification of Packaging and Labelling) Regulations 1994

The Health and Safety (Dangerous Pathogens) Regulations 1981

Target group

- PCT salaried staff
- Shared as best practice with Independent General Practice staff and General Dental staff
Managers Responsibility

It is the responsibility of managers to ensure that staff have read this protocol on the management microbiological specimens and that staff have access to biohazard or danger of infection stickers.

Staff Responsibility

It is the responsibility of staff to ensure they follow the advice in this protocol to ensure the health and safety of those handling the specimens after they have been dispatched to the laboratory.

Cross reference related PCT policies

Risk Assessment for the Prevention and Control of Healthcare Associated Infections (HCAI) Guidance
Use of Personal Protective Equipment
Prevention and Management of Health Care Associated Infections (Including Hepatitis B&C) Policy
Procedure for obtaining sputum specimens
Procedure for collecting catheter specimens of urine
Procedure for taking a wound swab
Procedure for the Transport of Microbiology Specimens by Community Nursing Staff.
Control of Substances Hazardous to Health (COSHH) Policy

Background

Specimens containing or suspected of containing high risk micro-organisms require handling and processing differently in the laboratory in order to protect laboratory staff and reduce the risk of infection.

Collection of specimens

- Always follow standard precautions when handling specimens
- Write details on the container immediately after taking the specimen, then place into the transport bag with the request form attached.
- Wherever possible take the specimen prior to commencing antibiotics.
- Where appropriate collect the specimen using sterile equipment and place in sterile containers. Ensure the outside of the container is free from contamination with body fluids.
- When taking swabs from a dry area i.e. nasal screening, the tip should be moistened in sterile normal saline.
- Do not over fill containers.
- Ensure the lid is immediately secured to prevent spillage in transport.
Labelling

Specimens must be labelled correctly to prevent misdiagnosis and wastage.

All specimens and microbiology forms must be clearly labelled with the correct patient details which include, if there are not two identifiers e.g. full name and date of birth then the specimen will be discarded:

- Patients full name
- Patients address
- Patients sex
- Date of birth
- NHS number
- Relevant clinical details e.g. type of specimen, any clinical symptoms, description of a wound, medical conditions e.g. diabetes
- Date and time of specimen collection
- Signature (unless electronic)
- Destination for report
- Relevant medication history e.g. antibiotic history

High risk ‘biohazard’ specimens

High risk micro-organisms in hazard group 3 include:

- Tuberculosis (TB)
- Human Immuno-Deficiency Virus (HIV)
- Hepatitis B Virus (HBV)
- Hepatitis C Virus (HCV)
- Hepatitis E
- E-Coli 0157
- Salmonella Typhi/paratyphi (typhoid/Paratyphoid)
- Rabies
- Anthrax
- Prions
- Avian influenza e.g. SARS

This list is not exhaustive, the list contain those organisms most likely to be encountered. A full list of all group 3 pathogens can be found in the Health and Safety Executive document: The approved list of biological agents (2004).

MRSA is not a high risk micro-organism.

Labelling of high risk specimens

Specimens identified as high risk and the request form/s must have a yellow biohazard/danger of infection sticker attached prior to placing in the transport bag.
Archiving

Hard and/or electronic copies of previous versions of this document will be held by the Infection Prevention & Control Team for the retention period required under current NHS guidance.

Risk Assessment

Included in service risk assessment, clinic and procedure risk assessment.

References


Department of Health (June 2007) Transport of Infectious Substances-Best Practice Guidance for Microbiology Laboratories. DH. Crown Copyright.

Health and Safety Executive (2005) Biological Agents: Managing the risks in laboratories and healthcare premises. Advisory Committee on Dangerous Pathogens. HSE. Crown Copyright.


Glossary of terms

Hazard Group 3 pathogen – The Advisory Committee on Dangerous Pathogens (ACDP) classification on a pathogen’s ability to infect a health human based on its pathogenicity, hazard, transmission and available treatment or prophylaxis.

List of those consulted in drafting process

Infection Control Committee
Medical Microbiology – Wirral University Teaching Hospital