St. James's Hospital
Centre for Laboratory Medicine and Molecular Pathology (LabMed)

External Agency Pathology / Laboratory Service Provision Policy SJH:LabMed007

Owner: Laboratory Manager	**Approved by** Laboratory Clinical Director Dr Niamh Leonard
Reviewed by: Quality Manager	**Effective from:** June 2022
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This policy replaces all existing policies from June 2022 onwards and is due for review in June 2024. It will be reviewed during this time as necessary to reflect any changes in best practice, law, and substantial organisation, professional or academic change.

Distributed to: External Agencies using SJH Laboratory Services, SJH Laboratory Personnel
Posted SJH Website: **https://www.stjames.ie/LabMedInformation/**

1.0 Policy Statement

The Centre for Laboratory Medicine and Molecular Pathology (LabMed) Directorate of St James's Hospital (SJH) is committed to the provision of quality and safe services to External Agencies where a Service Level Agreement (SLA) is in place. SJH will deliver laboratory services to adult patients (aged 16 years and older) referred from External agencies across the Republic of Ireland and only provides specialised paediatric referrals for specialised testing services.

The SLA is agreed between both parties and the agreement defines the following:

- The parties involved in the agreement, and both the duration and renewal of the agreement
- The scope of the laboratory testing services being provided including the clinical laboratory disciplines being accessed, and any limitations in the services being offered (e.g. defined workload targets).
- Specimen delivery and transport details including packaging instructions, specimen and request form requirements and specimen tube requirements
- Where required, SJH will refer patient specimens from external agencies to relevant and approved external referral laboratories as part of laboratory testing algorithms and clinical requirements
- Results reporting methodology (electronic or manual), timelines and IT requirements
- Confidentiality and Data Protection Agreements (DPA)
- Operating hours and details on out of hours' services
- Charges and costs associated with the requested laboratory services and payment details

All external service users are required to comply in full with both SLA and LabMed User instructions as per the SJH website: https://www.stjames.ie/services/laboratorymedicinelabmed/ . External service users can access services in the following laboratories: Biochemistry, Haematology, Coagulation, Haemostasis Molecular Diagnostics (restricted services), Immunology, Histopathology (restricted services), Microbiology & Virology, Cancer Molecular Diagnostics and our Reference laboratories (National MRSA Reference laboratory, Irish Mycobacterium Reference Laboratory, Gonococcal Reference laboratory).

In order for an external agency (e.g. hospital, private/specialist clinic, occupational health provider etc.) to access SJH laboratory services, an SLA must be in place with all external public or private agencies. Please contact the Laboratory Manager to initiate SLA discussions.

Near Patient Testing (NPT) services and Blood Transfusion laboratory testing services are not offered to any external agencies outside SJH as part of an SLA agreement.

The defined timelines for delivery and receipt of External agency samples collected by their own Phlebotomy services for testing in the LabMed Directorate is Monday to Friday from 8 am to 4 pm although exceptions may occur depending on the laboratory tests ordered (see Appendix 1 for laboratory specific instructions). Please do not deliver samples after 6pm on weekdays as it places a significant burden on our on-call scientific teams and delays the processing of urgent samples. There is no routine or on-call weekend testing service available to External Agencies unless specified in the SLA.

Electronic test requesting and results reporting is the method of choice in the LabMed Directorate. From a patient safety perspective this is the preferred mode as it eliminates all the potential errors associated with the manual system, thus ensuring the correct results are reported on the correct patient in a timely manner**.** It ensures the following:

- Accurate demographic information transfer
- Accurate tests request transfer
- Sample tracking to ensure full audit trail
- Electronic test ordering and results reporting
- Potential to electronically upload results into referral laboratory's LIMS
- Avoids unnecessary follow up on outstanding reports
- Mitigates against any risk of data breaches and helps comply with the General Data Protection Regulations introduced in 2018.

2.0 Policy Aim

To provide all External Agencies with the information they require to:

2.1. To define the process for accessing the high quality, safe and comprehensive laboratory testing services provided by the LabMed Directorate via an agreed SLA

2.2. To direct External agencies who routinely refer adult patient specimens for analysis to the LabMed Directorate at St. James's Hospital in a manner that is compliant with our laboratory procedures and with ISO 15189 accreditation requirements.

2.3. To direct External agencies who refer paediatric specimens for specialised and restricted testing services provided by designated laboratory disciplines in the LabMed Directorate in a manner that is compliant with our laboratory procedures and with ISO 15189 accreditation requirements.

3.0 Standard Requirements to be followed by External Agencies

3.1. Provision of emergency contact details (mobile phone) for reporting of "critical" results outside normal laboratory hours.

3.5.1. **All External Agencies** are responsible for developing a system whereby test results returned from the SJH testing laboratories are examined and appropriate action taken in a timely manner.

3.5.2. It is recognised that occasionally, unexpected critically abnormal results are found on analysis, such that laboratory staff become aware of a potential emergency before the treating External agency personnel. In these circumstances, laboratory staff must follow procedures to contact the requesting External agency to relay the result. Critical results will only be phoned to the referring External agency (e.g. hospital) upon which the patient request form is received. Laboratory teams will not communicate results to any other external parties.

3.5.3. **All External Agencies must have a system** in place whereby appropriately trained staff receive patient results, and communicate same within the timeframe indicated. Most diagnostic laboratories within the LabMed Directorate operate a normal service between 8am and 8pm with additional on-call services 24/7 restricted to the Biochemistry, Haematology including Coagulation, Blood Transfusion and Microbiology laboratories. In additional to these laboratories, Histopathology services are available on Saturdays from 9am to 1pm. External agency patient samples are frequently analysed outside routine hours.

3.5.4. All External agencies must provide up-to-date 24/7 contact information for the reporting of 'critical' patient results outside normal laboratory hours. **This is a mandatory requirement for access to SJH LabMed laboratory services.**

3.2. Patient Identification

The practice phlebotomy/nursing staff must have in place a system to positively identify the patient before taking specimens and labelling them. Responsibility to ensure that pre-collection requirements have been met (e.g. fasting) also lies with practice phlebotomy/nursing staff.

3.3. Criteria required for labelling Patient samples (specimens)

3.3.1 The use of printed labels produced by the External agency IT system that are suited to the sample container size are the preferred labelling method as it improves the transfer of accurate and legible information.

3.3.2 Addressograph/patient labels must clearly distinguish between patient Surname and patient Forename.

3.3.3 All patient samples i.e. the sample container, **must** be labelled with a minimum dataset which consists of the following:

- Patient's Full Name (Surname and Forename must be clearly identified)
- Patient's Date of Birth.
- The date of collection of the specimen (where delayed analysis may lead to erroneous results, this may be required).
- Time of collection of the specimen. In certain cases, information relating to the timing of specimens is required, for example, in dynamic function testing, to identify peak and trough or pre- and post-treatment specimens or where diurnal variation and circadian rhythms are important for interpreting the result.

3.3.4 Samples that fail to meet these minimum criteria will be rejected for analysis and will not be processed.

3.4. Additional specimen labelling information

The following additional information is desirable to have on the specimen, to assist in processing the request and interpreting the results.

3.4.1 Gender of the patient (this is particularly important where requested investigations have gender-related reference ranges).

3.4.2 All other (non-blood) samples must, in addition to the above, have the sample type or site, as appropriate, recorded on the sample container (e.g. MSU, Ear Swab).

3.5. Criteria Required for Patient Request Forms

All external agencies are required to Complete and submit a Laboratory Request Form (unless ordered electronically where a hard copy request card is not required but an electronic generated request slip is required for scanning in our Specimen Reception areas).

Note: Blank or incomplete request forms are not acceptable and will result in specimen rejection. A repeat sample will be required which inconveniences your patients and delays test results.

The laboratory accepts both manual and electronic request forms with the following requirements to be met for all request forms received:

3.5.1. The Request Form accompanying the sample/specimen must be legibly written. The legibility of the manual request form is vital to ensure all patient details are accurate. A clearly typed or printed (use of block capitals) request form must be sent to reduce the risk of errors in patient identification, test selection or location. **Original hospital forms with tests added manually and other tests crossed out are not acceptable.**

3.5.2. The Request form must include a minimum dataset which consists of:

- Patient's Full Name (Forename and Surname only; no middle names)
- Patient's Address
- Patient's Date of Birth

- Gender
- Patient's Clinical details and relevant history
- Laboratory Investigation(s) required
- Requesting Doctor's name and address and unique SJH GP Code number
- Sample type/site recorded on the form (e.g. MSU, Sputum, Ear Swab), if a non-blood sample
- Any patient preparation conditions, such as, fasting
- The date of collection of the specimen (where delayed analysis may lead to erroneous results, this may be required).
- Time of collection of the specimen. In certain cases, information relating to the timing of specimens is required, for example, in dynamic function testing, to identify peak and trough or pre- and post-treatment specimens or where diurnal variation and circadian rhythms are important for interpreting the result.
- The patient's clinical details must be provided where possible (including any drug, anticoagulant therapy or antibiotic therapy) to help in interpretation of results.
- Order number / external laboratory sample number for processing of the test order

3.5.3. Request forms that fail to meet these minimum criteria will be rejected for analysis and will not be processed.
Do not handwrite any additional tests at the bottom of the electronic request form after printing as these tests will not be processed by laboratory teams and testing will not be performed.

3.6. Additional request form information

The following additional information is strongly recommended on the request form, to assist in processing the request and interpreting the results.

3.6.1 Non-blood samples must, in addition to the above, have the sample type or site, as appropriate, recorded on the request form (e.g. MSU, EAR SWAB).

3.6.2 Please ensure that the required number of specimens/aliquots are sent as per Appendix 1. All analyses may not be completed if there is an insufficient number of specimens provided.

3.6.3 Additional information that might assist with the analysis and reporting should also be included.

3.6.4 Where requests are being sent on one or both of a pair of twins, please highlight this on the request form(s). There is an increased risk of data entry errors where the surname, date of birth, gender and address are identical for both twins. Highlighting this will ensure extra checking by laboratory staff when entering these requests.

3.6.5 Where available a patient addressograph label and the External agency stamp must be used on all sheets of the request form as it improves the transfer of accurate clear information.

3.6.6 Where GP patient samples are being referred to the External agency (e.g. hospital) prior to arrival at the LabMed Directorate, the results will only be reported back to the referring external agency/hospital, not the GP. GPs are asked to refer specimens directly to SJH LabMed if they wish to receive results directly (Refer to GP Services Policy SJHLabMed:0006).

3.6.7 Certain investigations may require additional information (including evident of patient consent for test analysis) on the specimen or request form. These are detailed in each department's section of the LabMed User Guide at www.stjames.ie (click on the Lab Services tab) or by clicking on this link **Lab User Manual**

3.6.8 Request forms/cards coming from external laboratories must have their laboratory accession number attached

3.7. Specimen Transport

3.7.1. The packaging used for samples for transport to the laboratory must be in accordance with current "Agrement Dangereux Routier" (ADR 2019) Safety Legislation and in accordance with SJH laboratory policy available at Laboratory Specimen Transport Policy Advice should be sought from the Laboratory if required. Transport timelines must prevent deterioration of the specimen.

3.7.2. The main safety principle of packing and labelling all specimens in such a manner so that they present no threat to those sending, transporting or receiving them must be observed

3.7.3. Samples should be sent to the laboratory as quickly as possible after they are obtained in order to avoid sample deterioration which can cause subsequent inaccurate and possibly misleading results. Of particular risk is falsely elevated potassium.

3.8 Results Management and Communication

3.8.1. External Agencies should where possible avail of electronic requesting and reporting system, such as, DMF (MediBRIDGE) system which uses an encrypted technology

3.8.2. Communication and collaboration on accessing laboratory services offered by the LabMed Directorate to the External agencies will be through the Laboratory Manager or Chief Medical Scientists.

3.8.3. Additional communication is facilitated through the SJH website and by direct contact with the laboratory.

3.8.4. In the event an urgent report is required, the User must alert the laboratory by telephone to clearly state the nature of the urgency and must ensure it is clearly indicated on the Request Form. The laboratory and administration teams are not resourced to issue routine laboratory results by phone except in emergency situations or systems failures (e.g. IT system downtime).

3.8.5. The Laboratory Manager, Mrs Fiona Kearney, can be contacted at fikearney@stjames.ie for further information or via Ms Aisling O'Gorman, Head of Administration team at aogorman@stjames.ie

3.8.6. Phoning the laboratory for results: Please contact the Blood Sciences office at 01 4162051, the Microbiology office at 01 4162966 and the Histology office at 01 416 2992.

3.9 Referral of Paediatric Specimens

The referral of paediatric specimens must be received from a Paediatric Hospital via the HSE approved courier service and is specific to each laboratory discipline as follows:

3.9.1. Immunology: Paediatric specimens are accepted from External hospitals with SLAs in place

3.9.2. Biochemistry: Paediatric specimens not routinely accepted with the exception of restricted services including our Porphyria and molecular services as well as specific test requests.

3.9.3. Haematology: Paediatric specimens are accepted from External hospitals with SLAs in place

3.9.4. Coagulation: Paediatric samples are not routinely tested in the Coagulation laboratory. In exceptional circumstances a sample may be referred from a hospital in the CHI Ireland group where an urgent analysis is required for a specialised test not available within the CHI Ireland group.

3.9.5. Histopathology: Paediatric specimens are accepted from External agencies with SLAs in place

3.9.6. Microbiology: Paediatric specimens are not routinely tested in the Microbiology laboratory.

3.9.7. Haemostasis Molecular Diagnostics: Paediatric specimens are accepted from a limited number of External hospitals with SLAs in place

3.9.8. Blood Transfusion: Paediatric specimens are not accepted under any circumstance

3.9.9. Near Patient Testing: Paediatric specimens are not accepted under any circumstance

Appendix 1: Procedure for receipt of specimens from External agencies/laboratories

Bibliography

1. The communication of critical and unexpected pathology results, Royal College of Pathologists (UK), 2017
2. ISO 15189 (2018): Medical Laboratories-Requirements for Quality and Competence.

Appendix 1:
Sample and Request form details for External agencies/laboratories

Please consult Phlebotomy information (Ref CF-PHL-0009; see our website https://www.stjames.ie/media/CFPHL0009.pdf) for specimen tube information.

Biochemistry and Immunology Laboratory Aliquot Sample type from External laboratories

In order to streamline the handling of all specimens in Biochemistry and Immunology we are aiming to standardise the tube type used by all our users both within St. James's Hospital laboratory and received from external users. We are now using the Hitachi pre-analytical system to help us prepare samples for analysis. This instrument has been designed to handle tubes which adhere to certain size characteristics. In our case this demands tubes with dimensions of **13 x 75mm or 13 x 100mm only**. Tubes that don't meet these dimensions cannot be handled automatically and must be processed manually adding significant work for us and delaying the analyses and this can also lead to errors in further aliquots being made for other areas. A further requirement is that whole-blood sample tubes must contain a **GEL** barrier which prevents erroneous sampling on our chemistry analysers. The latter is required if whole blood is received

To achieve these objectives all our users are requested to only send us samples that fulfil the above criteria. This can be achieved by the following methods.

Aliquot Serum samples

1. Centrifuge blood-sample locally and transfer serum/plasma to a fully labelled 13mm tube (preferred type is the Sarstedt 13 x 75mm 5mL PP. part no. 55.525 and corresponding cap part no. 65.806). This is a polypropylene tube which is much stronger than the standard polystyrene tube which we have found can crack during sample transport.
2. Please note for any of the following endocrine tests one additional aliquot of serum/plasma is required:
    - Androstendione /Testosterone/DHEAS/17-OHP 700µl serum minimum.
    - Aldosterone 500µl (spun and frozen EDTA sample)
    - Gastrin 500µl (spun and frozen)
    - Renin 600µl (spun and frozen EDTA sample)
    - Thyroglobulin/TgAbs 500µl
    - TRAB 400µl
    - CGA 200µl
3. Please note SHBG requires **a separate** sample from steroids.

Whole blood samples

1. Take blood sample into **13mm** evacuated tube (plastic not glass) containing **GEL** barrier (preferred type Greiner 13 x 100mm Red capped plain serum Gel tube part no. 456071. Blood samples taken into appropriate GEL tubes can be centrifuged locally for 10 minutes prior to transporting to our laboratory. Samples taken into Sarstedt Monovette blood-collection tubes are not suitable.

Aliquot plasma samples (Tri-Sodium Citrate) for Coagulation testing at the National Coagulation Laboratory

- Transport of samples

  Samples can be received in the Coagulation laboratory between 8:30am and 4pm Monday to Friday. Samples should only be sent outside these hours by prior arrangement with the coagulation laboratory.

- Separated samples
    - If samples are not sent on the day of phlebotomy to St James's Hospital, these must be separated and frozen until the following day for transport.
    - All plasma samples must be separated by a double centrifugation procedure according to the following instructions in order to prepare platelet poor plasma (Platelet count $<10x10^9$/L).
    - Check all samples prior to centrifugation for clots.
    - Centrifuge samples at 3000g for 10 minutes at room temperature.

- Pool plasma from all samples into a non-activating centrifugation tube and centrifuge for a second time at 3000g for 10 minutes.
- Aliquot samples into microtubes to a volume of 750µl. The microtubes should not be overfilled, it is important that an adequate number of microtubes are received in order to perform all tests requested. The minimum number of microtubes required is 6 x 750µl (depending on the number of tests requested).
- Label microtubes with a permanent marker detailed with name and medical record number for the patient. If samples are from different time points clearly label the samples with full details of time taken and if pre / post treatment.
- The separated sample should be sent in capped microtubes only (2ml capacity). Microtubes such as those provided by Sarstedt (product code for the tube is 72.609.001 and the cap is 65.716.) or equivalent tubes with the same specification from an alternative supplier should be used for sample separation.
- State the type of separated sample on the request form (Serum / Plasma).
- If samples are not being sent to the laboratory immediately, freeze overnight at a minimum temperature of –30ºC for transfer to the coagulation laboratory the following day. Frozen samples must be sent to the laboratory in appropriate frozen sample transport containers. All samples must remain in the frozen sample container for the duration of the transport and must not be removed from this container into a freezer in the courier van.

Transport of samples to the National Coagulation Laboratory

Samples can be received in the Coagulation Laboratory between 8:30am and 4pm Monday to Friday. When sending samples to the laboratory; the transport time from the referral laboratory should be taken into account in order that samples are received within these hours. Samples can only be sent outside these hours by prior arrangement with the Coagulation Laboratory.
When sending requests for Heparin Induced Thrombocytopenia (HIT) test and Thrombophilia Screen / Lupus Anticoagulant Screen, the specific laboratory request form with full clinical details must be sent with the samples. Samples for prothrombotic molecular analysis and APCR tests require confirmation of patient consent to be recorded on the SJH thrombophilia screen request form. It is not necessary to send the consent form with the request; this should be kept with the patient record. Request forms can be found at https://www.stjames.ie/LabMedInformation/gpexternalrequestforms/

Separated samples

- Samples which are not sent on the day of phlebotomy to St James's Hospital should be separated and frozen in the requesting laboratory until the following day for transport.
- All plasma samples must be separated by a double centrifugation procedure according to the following instructions in order to prepare platelet poor plasma (Platelet count $<10x10^9$/L).
- Check all Coagulation samples prior to centrifugation for clots.
- Centrifuge samples at 3000g for 10 minutes at room temperature.
- Pool plasma from all samples into a non-activating centrifugation tube and centrifuge for a second time at 3000g for 10 minutes.
- Aliquot samples into microtubes to a volume of 750µl. The microtubes should not be overfilled, it is important that an adequate number of microtubes are received in order to perform all tests requested. The minimum number of microtubes required is 6 x 750µl (depending on the number of tests requested).
- Label microtubes with a permanent marker detailed with name and medical record number for the patient. If samples are from different time points clearly label the samples with full details of time taken and if pre / post treatment.

- The separated sample should be sent in capped microtubes only (2ml capacity). Microtubes such as those provided by Sarstedt (product code for the tube is 72.609.001 and the cap is 65.716.) or equivalent tubes with the same specification from an alternative supplier should be used for sample separation.

- Multiple aliquots of samples for testing must be sent. This is to facilitate testing on more than one occasion as not all tests are analysed on the same day and may require reanalysis for verification of abnormal results; therefore, a number of aliquots are needed to complete a full test profile. The ability to complete analysis for all requested tests will depend on the number of aliquots received in the laboratory.

- State the type of separated sample on the request form (Serum / Plasma).

- If samples are not being sent to the laboratory immediately, they should be frozen overnight at a minimum temperature of –30ºC for transfer to the coagulation laboratory the following day.

- Frozen samples must be sent to the laboratory in appropriate frozen sample transport containers. **All samples must remain in the frozen sample container for the duration of the transport and must not be removed from this container into a freezer in the courier van**. Aliquoted samples received which have not been stored in the appropriate frozen container may not be suitable for testing and may be rejected.

- **NOTE: The Coagulation laboratory can no longer store separated samples in freezer vials other than those detailed above or with the same specification. This is due to freezer storage capacity and indexing requirements. All samples must be stored in microtubes (750µl) prior to freezing for transport.**

Histopathology Laboratory Sample identification from External laboratories

Any **wet sample** for processing and reporting should be accompanied by a chain of custody form (HLF16 Chain of Custody Log, or a local version) detailing the number of specimens and date and time sent. Specimen request forms must be provided. Specimen request forms should include clear demographic information including but not limited to:

- Patients' forename and surname,
- Date of birth,
- Patient's gender,
- Specification of 1) self-pay or 2) insured and include insurer and insurance no. for these patients
- MRN/Hospital number
- Reporting address
- Specimen collection time & date,
- Patients' physician/clinician,
- Relevant clinical details,
- Specimen type sent/site

In addition to the request form and chain of custody log, any **sample pot(s)** should contain the following information:

- Patients' forename and surname,
- Date of birth,
- Specimen collection time & date
- Specimen Type / Site

Any **slide cases for reporting or unstained slide cases for staining and reporting** should be

accompanied by

- HLF16 Chain of Custody Log or a local version

- Specimen request form
- Gross report
- Previous history where possible
- Clear identification of case number on slide

Any **unstained slide cases for staining only** should be accompanied by

- HLF64 Blocks and Slides Chain of Custody Log and Request Form
- Clear identification of case number on slide

Any **block cases for microtomy, staining and reporting** should be accompanied by

- Specimen request form
- Gross report
- Previous history where possible
- HLF64 Blocks and Slides Chain of Custody Log and Request Form
- Clear identification of case number on block

Any **block cases for microtomy and / or staining only** should be accompanied by

- HLF64 Blocks and Slides Chain of Custody Log and Request Form
- Clear identification of case number on block

Microbiology and Molecular Virology Laboratories – information to users

- Testing for SARS-CoV-2 is not offered to external agencies except where a memorandum of understanding for a backup service with SJH is in place.
- Samples for Beta D Glucan are tested twice weekly on Monday and Thursday, therefore samples should arrive no later than 9am on the morning of testing or otherwise will be held until the next run.
- Referrals to National Virus Reference Laboratory (NVRL) must be sent directly by the requesting agency to the NVRL and not to St James's for referral onto NVRL. Any specimens referred in error to SJH will be returned to the external agency for direct referral to the NVRL.

Reference Laboratories

External Agencies utilising the services of the reference laboratories at SJHLMD can access individual laboratory access information, user guides and sample request forms on our website www.stjames.ie via the Healthcare Professionals section, then click on the LabMed User Guide option for individual services:

- Irish Mycobacteria Reference Laboratory (IMRL): users must comply with the guidelines as described in the Irish Mycobacteria Reference Laboratory user guide available on the IMRL section of the LabMed User Guide: how to access the service: http://www.stjames.ie/services/laboratorymedicinelabmed/irishmycobacteriareferencelab and request form (LF-IMRL-0195).
- Gonococcal Reference Laboratory (GCRL): users must comply with the guidelines as described in the National Gonococcal Reference Laboratory user guide available on the National Gonococcal Reference Laboratory section of the Lab Med User Guide: how to access the service: http://www.stjames.ie/services/laboratorymedicinelabmed/NationalGonococcalReferenceLaboratory/and request form (LF-MICRO-0504).
- National Methicillin Resistant Reference Laboratory (NMRSARL): users must comply with the guidelines as described in NMRSARL user guide available on the NMRSAL section of the LabMEd User Guide: how to access the service: http://www.stjames.ie/services/laboratorymedicinelabmed/nationalmrsareferencelab and request form (LF-MRSA-0049)

Request form requirements

The legibility of the manual request form is vital in ensuring that all patient details etc are accurately entered into our computer system. On many occasions it is very difficult to decipher this information. This can be due to the fact that "back copies" of NCR request forms are used which can be of very poor quality. Also poor quality photocopied forms make it difficult to accurately read the details. St. James's is promoting the use of electronic requesting which will avoid errors in transcription and includes a sample tracking system. Further details can be got from the Laboratory Manager.

In the absence of an electronic request a clearly typed or printed request forms should be sent to reduce the risk of errors in patient identification, test selection or location error. Such a request form must include the following:

- Patient's Full Name
- Patient's address
- Date of Birth
- Patient Gender
- Clinical details
- Doctor's name and address
- Company Name and address
- Date and time of sample collection
- Tests required clearly and legibly laid out

However, electronic requesting is the method of choice as it ensures the following:

- ❖ Accurate demographic information transfer
- ❖ Accurate tests requests transfer
- ❖ Sample tracking to ensure full audit trail
- ❖ Electronic results reporting
- ❖ Potential to electronically upload results into referrer's LIMS.

Note: From a patient safety perspective this is the preferred mode as it eliminates potential errors with the manual system, this ensuring the correct results are reported on the correct patient in a timely manner.

Document Log

Document Title	External Agency Pathology / Laboratory Service Provision Policy		
Document Number:	SJH:LabMed007 (Previous Number SJH: LabMed(P):012)		
Document Status i.e. New, Revision, replaced etc	**Version Number**	**Revision Date**	**Description of Changes**
Revision	2	January 2008	Request for agencies to provide emergency contact numbers Criteria for minimum dataset on samples and request forms expanded to include patient initial, DOB and a unique patient identifier
Revision	3	January 2012	Appendix 1 included Electronic results and reporting information updated
Revision	4	January 2014	No changes to procedure New number allocated (Duplicate identified)
Revision	5	April 2016	3.1.1 Essential to have a SLA 3.1.2 Removed term accreditation and inserted quality and safety 3.3 Additional desirable specimen labelling information 3.3.1 Add diurnal variation and circadian rhythms 3.4 Add "Unless ordered electronically and Hard Copies not required)" 3.5 Additional desirable request form labelling information Appendix 1 Remove reference to Sarstedt tubes for whole blood
Revision	6	June 2018	New Document Number assigned to reflect updated SJH PPG Register 3.4 Add "but an electronic generated request slip is provided for scanning" Move gender as a requirement from section 3.5.1 to 3.4.1 3.6 Add in compliance with ADR regulations for Specimen transport. 3.6 Add in "in a manner and within a timeframe to prevent deterioration of the sample" 3.8 Introduced the GDPR Regulations and the value of electronic requesting and reporting to mitigate potential data breaches. Bibliography: Update reference on Communication of results to RCPath 2017 guidelines Appendix 1. Update aliquot requirements and volumes to current guidelines.
Revision	7	June 2022	• Update section 1 with additional information on SLA content and delivery details • Update section 2 to clearly define the aims of this policy document • Update section 3 (including 3.1 to 3.8.) to keep in line with our GP policy on specimens, patient identification, request forms, results management and additional information for users • New section 3.9 on Paediatric services • Add new Appendix 1 to the policy from our SLA template