



Specimen Handling, Packaging & Transport

From collection point to centrifuge — and how send-out specimens are packed.

A · TRANSPORT WITHIN TCH — \$5.2

- Check for **special transport requirements** before dispatch; secure lids for a **complete, leak-proof seal**.
- Carry in **trays or racks**. Requisition folded in thirds (label face up) in the **rear pocket** of the zip-lock biohazard bag; specimen in the main pouch.
- Bring specimens to the laboratory **promptly** — improper transport or storage may invalidate results.
- Specimens in a **syringe are unacceptable** unless the test's method specifically indicates it.
- **Cracked, damaged or leaking** containers are a biologic hazard — discard and notify the unit to submit a new specimen.

B · RECEIVING & PREPARING — \$5.5

- Accept only with: **two identifiers** (name, MRN, order no.), legible diagnosis where applicable, adequate tube fill, no contamination, correct bag packaging. **If any check fails, the specimen is not received.**
- Log **date/time of receipt**; assign a unique accession number; re-check details against requisition and label.
- Transit over **120 minutes**? Evaluate against the specific test's stability requirements (not automatic rejection).
- Clot-activator tubes: allow **5–30 minutes** to clot. Anticoagulated specimens may be spun immediately. Specimens for **unseparated whole blood** (e.g. HbA1c) are **not centrifuged**. Chilled specimens stay at **2–8 °C** until spinning.

SEND-OUT — TRIPLE PACKAGING (\$5.12)

Every send-out: watertight primary container → watertight secondary container with enough absorbent to absorb the full contents → rigid outer container (cardboard/wood strength; bags/envelopes are not acceptable). Refrigerant goes **outside** the secondary container — cold bricks/gel packs preferred over ice; dry ice also outside the secondary, with a **vented** outer package.

Over 50 mL total: add shock-absorbent material at least equal in volume to the absorbent · single primary container ≤ **1000 mL** · total per outer container ≤ **4000 mL**. Notifiable-disease referrals follow LAB-QM-PRE-002.

C · CENTRIFUGE & STORAGE — \$5.8

1000–1300 ×g
CHEMISTRY SERUM/PLASMA · ~10 MIN

400 ×g · 5 min
URINE SEDIMENT · 10–12 ML

- Tubes stay **capped, vertical, closure-up** at all times. Protect photosensitive tests (e.g. bilirubin) from light.
- Remove serum from the clot **as soon as possible** (max 2 hours for red-top tubes without a separator barrier).
- **Never re-centrifuge** SST or red-top tubes — and never re-spin tubes for **potassium** (falsely increased).
- **Storage of separated serum/plasma:** room temperature **no longer than 8 hours** — refrigerate if testing is not completed in time; **freeze at ≤ –20 °C** if storage exceeds 48 hours. Thaw **once only**, at room temperature, invert 10–20 times.

FLAG — TWO REFRIGERATION TRIGGERS: §5.8 item 13 states the 8-hour room-temperature limit, and in the same sentence says serum/plasma “is refrigerated if testing is not complete within **5 HOURS**”. Both are printed in the Index as written — the policy does not resolve which governs. **ALSO:** centrifuge values above are the policy's approximate ranges; equipment-specific settings must be verified against the actual centrifuge before use (§5.8 item 11).