

Patient Name:

Ordering Provider:

(1) DISPATCH

Dispatched by:

Date: Time:

- Complete patient and provider boxes above.Ask caller if sample has been collected? YES or NO
- If no, fax checklist with sample collection instructions to individual collecting sample and dispatch driver to
 - to individual collecting sample and disparation of the sample.
 - If yes, complete the collection portion of the checklist with the caller. If all steps of the collection process have been successfully completed, AND the driver can return to the laboratory with the specimen within 60 minutes of collection, fax the checklist to the physician office.
 - If the courier cannot return to the laboratory within 60 minutes of collection please instruct the collection location to centrifuge the specimen and aliquot the plasma. The aliquot should be frozen and transported by the courier to the lab on dry ice. Use separate checklist for frozen plasma.

(2) COLLECTION

Collected by:

Date: Time of Collection:

- o Prechill a 3 mL green top collection tube.
- Obtain a closable container with wet ice (e.g. zip lock bag with ice cubes, instant ice pack or insulin transfer container) Do not use dry ice!
- o Collect the sample.
- Label the sample with patient's full first and last name and at least one other identifier, date and time and collector's initials or employee code. Do not centrifuge the sample.
- Place the sample in a zip lock bag. Express the air and seal the bag. Place the bag with the specimen into the container of wet ice; otherwise insert specimen into instant ice pack or insulin transfer container.

If any of the \underline{above} steps have NOT been completed, the sample is NOT viable for testing.

(3) COURIER

(You MUST answer YES or NO to the questions below) Courier Name:

Date: Time of pick up:

- Did the client give the sample to you in a chilled container? Circle YES or NO
- Was the sample maintained in the chilled container at all times during transport to the Ops Ctr? Circle YES or NO

Sample was handed off to

Name: Time:

(4) RECEIVING

Received by:

Date: Time:

- Sample was handed off on ice and remained on ice throughout the receiving/ordering process (other than verifying sample labeling).
- o Deliver sample on ice to the Technical Processing area.

Sample was handed off to

Place footer label here.

Name:

Time:

(5) PROCESSING

Processed by:

Date: Time:

 Immediately place sample in refrigerated centrifuge and set audible reminder timer. Delivery container and ice will remain at the Centrifuge station.

Centrifuge started at

Time: Tech Code:

 When centrifugation is complete, immediately remove plasma from cells. Return both aliquot and primary container to ice and deliver to the Vista workstation for analysis.

Sample was handed off to

Name:

Time:

(6) ANALYSIS

Note: If analysis cannot be immediately performed, Request TPA to place aliquot in dry ice.

- Program the sample to fail autofile using accession number modified by AMN. Program as stat.
- Set a timer for 10 minutes as a reminder that an ammonia is in progress.
- When a verifiable result is obtained, verify in LIS.
 If repeat testing is required, use the sample maintained on ice.

Result verified at

Time: Tech Code:

RETURN COMPLETED FORM TO CENTRAL RECEIVING FOR ELECTRONIC SCANNING