

Policy

Delayed, Misplaced and Lost Specimen Management Policy

NSWHP_PD_027



Health
Pathology

1. Purpose

1.1. The aim of this Policy is to:

- develop a consistent approach to what constitutes a delayed, misplaced or lost specimen and
- provide guidance to staff about the management and reporting requirements when a delayed, misplaced or lost specimen event occurs.

2. Background

- 2.1. Specimen delay and/or loss can have significant implications for patient management, a significant impact on patients, their families and carers and/or individuals and families seeking answers through the criminal justice system, and lead to adverse outcomes. Legacy processes for the management of delayed, misplaced or lost samples tend to be inconsistent and highly dependent on local factors and arrangements.
- 2.2. A consistent statewide approach is needed to support the integrity of pathology, forensic and analytical science testing and ensure NSW Health Pathology staff consistently identify what constitutes a delayed, misplaced or lost specimen and implement timely notification and management action when a delayed, misplaced or lost specimen occurs. It will also inform the reporting requirements for the planned implementation of an Electronic Specimen Tracking System by NSW Health Pathology.

3. Scope

- 3.1. This policy applies to all NSW Health Pathology staff, irrespective of role and department the staff are located in.

4. Definitions

Delayed Specimen A Specimen:

- in transit from a laboratory or location but which has not reached its expected destination (e.g. receiving laboratory or location) within 30 minutes after the expected time of arrival, or
- a Precious Specimen that is in transit from a laboratory or location, but which has not reached its expected destination (e.g. receiving laboratory or location) within 15 minutes after the expected time of arrival, or
- received at a laboratory site or location where the contents cannot be completely reconciled against the dispatch advice.

For example: A courier delivery due at 3:00pm that has been held up due to a traffic accident.

IIMS The NSW Health Electronic Incident Information Management System (IIMS) and its replacement system IMS+.

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Lost Specimen	<p>A Specimen that has left the referring laboratory or location and:</p> <ul style="list-style-type: none">• more than 24 hours has elapsed since the Specimen was identified as Misplaced, and the Specimen has not been located during the investigation, or• investigation has confirmed the Specimen cannot be located, or• investigation has confirmed that the Specimen has been compromised e.g. due to incorrect packaging and transportation, and as a result, the Specimen is no longer viable for testing.
Misplaced Specimen	<p>A Specimen in transit from a referring laboratory or location that has been identified as Delayed and its location is unknown after initial investigation or the investigation has established its presence at the incorrect recipient laboratory or location.</p> <p><i>For example: A specimen due for delivery to the John Hunter Hospital Laboratory at 3:00pm has not been received by 3.15pm (for Precious Specimens) or 3.30pm (all other Specimens) and cannot be located.</i></p>
Patient:	<p>A person (living or deceased) from whom a specimen(s) is collected.</p>
Precious Specimen	<p>A Specimen:</p> <ul style="list-style-type: none">(i) collected using an invasive or surgical procedure, including but not limited to:<ul style="list-style-type: none">○ Any surgical, forensic or post-mortem procedure, for example tissue or biopsies○ Amniotic fluid/ Chorionic villus sampling (CVS)/ fibroblasts○ Body or aspirated fluids, for example, joint, pleural, peritoneal, ascitic, Cerebrospinal fluid intraoperative fluids/pus/swabs, FNA smears and Bone marrow aspiration○ Bronchial washing/lavage○ Corneal scrapings or vitreous fluids○ Endoscopic brushings○ Sexual assault samples○ Supra-pubic bladder collection, or(ii) Unable to be re-collected due to a passage of time which is critical to patient care, including but not limited to:<ul style="list-style-type: none">○ Neonatal blood glucose○ Specimens from patients treated with antibiotics or other drugs including:<ul style="list-style-type: none">○ B12/Folate (if a transfusion or B12 has been administered)○ Interfering drugs for example N-acetylcysteine (NAC) for paracetamol○ Procedural samples for example Glucose Tolerance Test (GTT), Synacthen tests and Dynamic Function Tests○ Time dependent drug levels.
Specimen:	<p>Tissue or substances extracted from, or from a part of, the human body (including, but not limited to, excreta, secreta, blood and its components, tissue and tissue fluid swabs, and body parts) for purposes such as research, diagnosis, investigations, disease treatment and prevention.</p>

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5. Policy Statement

5.1. This policy sets out the notification requirements and management action to be taken by NSW Health Pathology staff once a Specimen is identified to be delayed, misplaced or lost. A flow chart setting out responsibilities and requirements is shown in **Appendix A**.

5.2. Delayed Specimens

5.2.1. When a Specimen is identified as *Delayed*, as defined in section 4, it is the responsibility of the person who has identified the *Delayed Specimen* to immediately:

Specimen management

- attempt to confirm the location of the Delayed Specimen
- take and document appropriate action to follow up whether the Specimen is subsequently received
- action any tracking alert received from any specimen tracking system, if available, and/or
- make arrangement for another delivery method to ensure Specimen integrity and

Notification

- notify the appropriate line manager or delegate of the Delayed Specimen
- handover to another NSW Health Pathology staff member if investigation is incomplete at end of shift.

5.2.2. If a *Delayed Specimen* has not been received at the expected destination in the next arranged courier delivery, or otherwise within 2 hours after the expected time of arrival, the Specimen must be treated as a *Misplaced Specimen*.

5.3. Misplaced Specimens

5.3.1. When a Specimen is identified as *Misplaced*, as defined in section 4, it is the responsibility of the person who has identified the *Misplaced Specimen* to immediately:

Specimen management

- commence an investigation to establish the whereabouts of the Specimen and

Notification

- notify the appropriate line manager or delegate at the location or laboratory where the Specimen was to be received, of the Misplaced Specimen (note that a Misplaced Specimen includes a Specimen with a known but incorrect location), and
- as a minimum, notify the relevant Head of Department or delegate at shift handover of the status of investigation
- in addition, if a Specimen is received at a site other than the intended location or laboratory, all efforts must be made to notify the original dispatch site.

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5.3.2. If a *Misplaced Specimen* has not been located within 24 hours of the commencement of an investigation or within 8 hours after the expected time of arrival, the Specimen must be treated as a *Lost Specimen*.

5.4. Lost specimens

5.4.1. When a Specimen is identified as *Lost*, as defined in section 4, it is the responsibility of the person who has identified the *Lost Specimen* to immediately:

Specimen management

- commence further investigations to establish the whereabouts of, and circumstances leading to, the Lost Specimen.

Notification

- complete an incident report in the NSW Health IIMS. This report must be lodged before the end of the shift in which the Specimen was confirmed to be lost.
- notify the appropriate manager and/or operations team of the Lost Specimen and steps taken to locate it e.g. status and outcome of the investigation.

5.4.2. It is the responsibility of the manager who received the incident notification report for a *Lost Specimen* to:

- ensure a full investigation is carried out regardless of where the investigation is carried out.
- include all findings, recommendations and lessons learnt in the NSW Health IIMS/ims+.
- liaise with Quality and Patient Safety staff to ascertain the level of investigation required.
- notify Corporate Governance staff via NSWPATH-InsurableRiskNSWHP@health.nsw.gov.au of the potential for a Treasury Managed Fund claim and complete associated notification documents
- action the recommendations or refer to the appropriate staff within NSW Health Pathology and
- disseminate the learnings with relevant staff as appropriate.

6. Roles and Responsibilities

6.1. Any NSW Health Pathology staff member who identifies a specimen as delayed, misplaced or lost must comply with this policy.

7. Policy, Procedures, Related Legislation and Supporting Documents

- [NSW Health Pathology Clinical Governance Framework NSWHP CG 009](#)
- [NSW Health Enterprise-Wide Risk Management Policy and Framework PD2015 043](#)
- [NSW Health Pathology Enterprise Risk Management Procedure NSWHP PR 026](#)
- [NSW Health Open Disclosure Policy PD2014 028](#)
- [Labelling Requirement for Pathology and Forensic Specimens NSWHP PD 023](#)
- [Transport of Pathology Specimens to Laboratories NSW Health PD 2018 020](#)

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- Requirements for the Packaging and Transport of Pathology Specimens and Associated Materials (Fourth Edition 2013)
- AS ISO 15189 Medical Laboratories – Requirements for Quality and Competence
- Australian Commission for Safety and Quality in Healthcare (ACSQHC) National Standards

8. Review

This policy will be reviewed by 03/06/2021 (to be reviewed annually).

9. Risk

Risk Statement	To reduce the risk of harm to our staff, partners, consumers and clients due to delayed, misplaced or lost specimens. NSWHP has adopted a uniform technology-supported specimen transport and tracking process to deliver improved safety, efficiency and reliability that protects all our samples and drivers.
Risk Category	Clinical Care and Patient Safety

10. Further Information

For further information, please contact:

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11. Version History

The approval and amendment history for this document must be listed in the following table.

Version No	Effective Date	Approved By	Approval Date	Procedure Author	Risk Rating	Sections Modified
V1.0	04/06/2020	SLT	02/06/2020	Judith Kempton-Webb	High	New policy

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Appendix A – Management of Delayed, Misplaced and Lost Specimens

