

SAMPLE ACCEPTANCE FORM GUIDELINES

This guide is designed to accompany the sample acceptance form entitled ‘Record of Samples Received in Microbiology’ provided within the Commonwealth Partnerships for Antimicrobial Stewardship (CwPAMS), Microbiology Resource Toolkit.

The sample acceptance form is intended as a tool to help to track all clinical samples sent to the microbiology laboratory as well as a way of documenting samples rejected as not suitable for testing. When making the decision to accept or reject a sample please refer to local standard operating procedures (SOPs).



This guide can be adapted to suit the needs of each laboratory and can be used as an electronic record or printed out on to paper.

The document can be used as an audit tool when assessing the quality of samples received in the laboratory allowing targeted education around areas of concern e.g. transport delays, incorrect sample techniques, inappropriately labelled samples/forms etc.

How to fill in the form

- Add the date and time received plus the date and time taken and check that the transport time is within acceptance times stated in local SOPs.
- Check there are enough patient identifiers to satisfy recommendations in local sample acceptance procedures (e.g. surname, forename, date of birth, hospital number) present on both the sample and the laboratory form and complete on the sample acceptance form.
- Check that the sample type and test requested are recorded on the form and that the correct sample has been sent for the test requested.
- Check that all quality parameters for the sample type and test have been met in accordance with local SOPs and Specimen Optimal Sampling (SOS), ‘Best Practice Recommendations also included within the CwPAMS microbiology resource toolkit.
- Document whether the sample has passed all of the above and has been accepted in to the laboratory.

Example of how to document a sample **accepted** in to the laboratory

 												
Hospital:						Date Range:						
This template is intended to act as a means of recording and tracking all samples received into the Clinical Microbiology department. It can be used electronically or as a paper document and can be adjusted/adapted to suit the needs of your service/laboratory.												
Date received	Time received	Date taken	Time taken	Hospital number	Surname	Forename	DOB (Date of Birth)	Date of admission (if known)	Sample type	Test requested	Sample accepted? (Y/N) If no, why? (see code below)*	Lab no
11/11/2024	14.28	11/11/2024	6.45	K000001	S*****h	F*****d	12/01/2020	10/11/2024	Urine	M,C&S	Y	24M00001

If a decision is made to reject the sample i.e. not test the sample, **the requesting clinician should be informed as soon as possible** to allow another sample to be taken if still needed.

- Follow local SOPs for how to handle rejected samples (e.g. store sample for a stated timeframe to allow clinicians to amend, return to requesting clinician/source, and allocate a lab number and book in on Laboratory Information Management System (LIMS) to issue rejection report)

Example of a sample **rejected** and not tested

CwPAMS		Record of Samples Received in Microbiology						SOS				
Hospital:				Date Range:								
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Date received	Time received	Date taken	Time taken	Hospital number	Surname	Forename	DOB (Date of Birth)	Date of admission (if known)	Sample type	Test requested	Sample accepted? (Y/N) If no, why? (see code below)*	Lab no
11/11/2024	14.28	06/11/2024	6.45	K000001	C****e	E*****s	26/03/1978	06/11/2024	Urine	M,C&S	N - 6	24M00002

It is important to consider the type of sample before making a decision to reject. **Only repeatable samples should be rejected.**

Unrepeatable samples e.g. **CSF (cerebral spinal fluid), blood cultures, sterile/non-sterile fluids and tissues** should be processed and the requesting clinician contacted if sample/test/patient details are missing or unclear. Results should be viewed with caution if sample acceptance parameters are not met.

Reasons for Sample rejection

1. Test requested is not a microbiology test. Where possible tests should be sent to the correct laboratory
2. Missing sample/test details on the form (e.g. no test requested when there is a possibility of multiple such as with urine or no site specified for a swab/fluid received.)
3. Incorrect sample type for the test requested (e.g. EDTA/serum blood sample received for culture)
4. Sample quality parameters not met (e.g. insufficient volume for test or incorrect sample container/transport media)
5. Issue with patient demographics (e.g. patient details on the sample do not match the form, no patient details on the sample or form, not enough patient identifiers)
6. Delay with transport over time stated within local SOPs for each sample/test (e.g. 5-day old urine received)