



STEM CELL LABORATORY (STCL)



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Instructions for Tests in External Reference Labs

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Author: WATE02

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STCL-SOP-034

INSTRUCTIONS FOR TESTS IN EXTERNAL REFERENCE LABS

1. PURPOSE

- 1.1. To provide instructions for sending out test samples directly from the Stem Cell Laboratory (STCL) to external reference laboratories instead of going through the Referral Laboratory when requested due to time constraints, etc.

2. INTRODUCTION

- 2.1. Parameters of rare diseases often must be tested in unique laboratories that are too specialized and or expensive to duplicate at multiple testing sites. Samples for tests of this nature are sent to reference laboratories. The shipment of samples is routinely handled by Duke's Referral Laboratory but sometimes, due to time constraints, the STCL is asked to ship those samples directly to the designated reference laboratory instead of routing the specimen to the Referral Laboratory located at the Ben Franklin site. The specific instructions for sample type, handling, packaging and shipping are unique to each test. The instructions for tests commonly sent to reference labs are available in the Electronic Laboratory Manual (ELM).

3. SCOPE AND RESPONSIBILITIES

- 3.1. Nurses on the inpatient units and clinics, nurse clinicians, nurse practitioners, and physicians may order these tests as deemed necessary. HUCs are responsible for ensuring that the appropriate testing is ordered. Designated personnel who pack and ship these samples are responsible for ensuring that the requirements are successfully met in accordance to the instructions provided in the ELM.

4. DEFINITIONS/ACRONYMS

- | | |
|-----------|-------------------------------|
| 4.1. STCL | Stem Cell Laboratory |
| 4.2. ELM | Electronic Lab Manual |
| 4.3. HUC | Health Unit Coordinator |
| 4.4. DUHS | Duke University Health System |
| 4.5. N/A | Not Applicable |

5. MATERIALS

- 5.1. See specific tests as attached.

6. EQUIPMENT

- 6.1. N/A

7. SAFETY

- 7.1. Wear all appropriate personal protective equipment when handling potentially hazardous blood and body fluids to include, but not limited to, gloves, lab coat, goggles, etc.

8. PROCEDURE

- 8.1. Duke University Health System Clinical Laboratories Reference Lab Procedure # 332 "Direct Specimen Shipping by DUHS Remote Locations (LTR36861)" attached.

DukeMedicine Clinical Laboratories Reference Lab	Last Reviewed By: Winston, Kathryn (2/20/2014 11:57:49 AM)
332.Direct Specimen Shipping by DUHS Remote Locations (LTR36861)	

Approved by Director: Mary Smith Annual
Review: 11/8/09, 11/1/10
Revision Date: 1/26/2009, 2/18/2010

Purpose:

Remote locations within DUHS occasionally need to ship specimens directly to an external reference lab (i.e. Genzyme Genetics, LabCorp). The following procedure will ensure that the ordering, resulting, and billing of the test is done in a timely manner. Currently, the following locations are using the process:

DUHS Clinical Microbiology Laboratory – Freda Kohan
DUHS Stem Cell Laboratory – Barbara Waters-Pick
Transplant Immunology – Dr. Louise Markert (Transplant Immunology)
Raleigh Perinatal – Krista Wilson
Greensboro Perinatal – Krista Wilson
Duke Children's Cardiology – Dr. Stephen Miller
DRH Laboratory

Procedure:

1. The remote location will place the test order in DHIS, complete the Duke Referral Lab coversheet (see attached), and complete the external lab's requisition.
2. The remote location will call the Clinical Labs Client Service Department to inform them that the Completed Coversheet, DHIS order, and Performing Lab Requisition are being faxed to the Duke Referral Lab's fax.

The FAX should include a contact name, phone number and fax number for the remote location.

Clinical Labs Client Service Phone Number: 919-613-8400
Referral Lab Fax Number: 919-681-7056

3. The remote location will send a copy of the completed coversheet and performing lab requisition along with the specimen to be shipped to the performing laboratory.
4. The Referral Lab will process the paperwork following SOP for receiving the order, submitting for billing, and filing the paperwork.

**332.Direct Specimen Shipping by DUHS Remote
Locations (LTR36861)**

Last Reviewed By: Winston, Kathryn
(2/20/2014 11:57:49 AM)



DUKE UNIVERSITY HEALTH SYSTEM

Duke Referral Laboratory Services
4425 Ben Franklin Blvd.
Durham, NC 27704

919-613-8400 (phone)
919-681-7056 (fax)

FAX RESULTS TO:

DUKE REFERRAL LAB 919-681-7056

MAIL HARD COPY RESULT TO:

DUKE REFERRAL LABORATORY SERVICES
4425 BEN FRANKLIN BLVD.
DURHAM, NC 27704

SEND INVOICE TO:

DUKE UNIVERSITY HEALTH SYSTEM or FAX 919-681-7479
ACCOUNTS PAYABLE
325 BLACKWELL STREET DUMC # 104131
DURHAM, NC 27708 (Client Billing – Do not process as 3rd Party Billing)

PATIENT NAME: _____

MEDICAL RECORD #: _____
(please include MRN on report)

D.O.B. _____ **AGE:** _____ **GENDER:** ☐ MALE ☐ FEMALE

PHYSICIAN: _____
(please include physician name on report)

TEST REQUESTED: _____

CLINICAL INFORMATION: _____

COLLECTION DATE: _____ **COLLECTION TIME:** _____

SPECIMEN TYPE / SOURCE: _____

PERFORMING LABORATORY: _____

PERFORMING LAB TELEPHONE #: _____

DATE SENT: _____

SHIPPING REQUIREMENTS (circle one): FROZEN REFRIG AMBIENT

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Stem Cell Laboratory, DUMC
Durham, NC

9. RELATED FORMS

9.1. See form provided by Duke Client Services Referral Laboratory.

10. REFERENCES

10.1. Duke Clinical Laboratories Referral Laboratory "Direct Specimen Shipping by DUHS Remote Locations" procedure.

11. REVISION HISTORY

Revision No.	Author	Description of Change(s)
02	Barbara Waters-Pick	<ul style="list-style-type: none">• Changed section 8.1 to read "Duke University Health System Clinical Laboratories Reference Lab Procedure # 332 "Direct Specimen Shipping by DUHS Remote Locations (LTR36861)" attached".• To-date, Clinical Laboratories has not updated this procedure since the last review period.• Updated format.

Signature Manifest**Document Number:** STCL-SOP-034**Revision:** 02**Title:** Instructions for Tests in External Reference Labs

All dates and times are in Eastern Time.

STCL-SOP-034 Instructions for Tests in External Reference Labs**Author**

Name/Signature	Title	Date	Meaning/Reason
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Manager

Name/Signature	Title	Date	Meaning/Reason
Barbara Waters-Pick (WATE02)		13 Jan 2015, 08:24:26 AM	Approved

Medical Director

Name/Signature	Title	Date	Meaning/Reason
Joanne Kurtzberg (KURTZ001)		16 Jan 2015, 02:53:26 PM	Approved

Quality

Name/Signature	Title	Date	Meaning/Reason
John Carpenter (JPC27)		20 Jan 2015, 01:56:29 PM	Approved

Document Release

Name/Signature	Title	Date	Meaning/Reason
Sandy Mulligan (MULLI026)		28 Jan 2015, 01:09:45 PM	Approved