CLINICAL POLICY
Pathology Specimen Transport

A. EFFECTIVE DATE:
June 30, 2020

B. PURPOSE:
To establish a process for the transportation and handling of pathology specimens with chain of control for Anatomic Pathology and Dermatopathology processing.

C. POLICY:
Specimens will be delivered to the departments using the procedures in Section G below.

D. SCOPE:
This policy applies to all areas that collect and transport patient specimens intended for analysis by the Anatomic Pathology department and Dermatopathology department.

E. DEFINITIONS:
1. Frozen Section Room: TG830
2. Accessioning area in Anatomic Pathology: CG054
3. Specimen Refrigerator in Anatomic Pathology: CG048

F. MATERIAL(S) NEEDED:
None

G. PROCEDURE:
All specimens for Anatomic Pathology (AP) and Dermatopathology (DP) will be transported from the area of collection according to the following workflow:

1. Operating Rooms - Specimens collected in the Operating Room (OR) will be delivered to the frozen section room by the OR staff. AP staff will transport the specimen from the frozen section room to AP during daytime hours. Any specimen collected after 5PM or on off shifts (except for fresh specimens) will remain in the OR pathology room to be picked up on the next business day, unless specific arrangements have been made with AP. All fresh specimens (lymph node, breast, muscle biopsies, frozen sections, cytology, etc.) require immediate notification of the AP lab via the front office (x2980) during normal business hours, and notification of the on-call pathologist during off-hours prior to obtaining the specimen.
The OR staff notifies Anatomic Pathology for STAT pickup of fresh cytology specimens (i.e. pelvic wash) M-F (8-5 p.m.). Fresh cytology specimens after hours and on weekends/holidays are transported to Central Processing area in Laboratory Medicine by the transport staff to be refrigerated and placed in the green bag until the morning of the next business day. Pathology staff are on call through the page operator for any cases requiring immediate handling during the off hours.

2. **Interventional Radiology (IR)** - In the Cytology Laboratory (M-F), a cytopreparation tech/cytotechnologist looks up the “Lab IR Status Board” in Epic, for the time and site of fine needle aspiration (FNA) procedures scheduled for the day. At the time of the FNA procedures performed in IR, the cytotechnologists is notified and is in attendance to handle specimens and assess adequacy if requested by the clinician. The cytotechnologists will transport the specimen/s to the Cytology Laboratory. The transport staff will transport all other specimens (specimens triaged for flow, microbiology) to Central Processing area in Laboratory Medicine. Fluids obtained in IR (pleural, ascites) are transported by the transport staff to the Central Processing area in Laboratory Medicine and/Cytology Lab as required.

3. **GI Procedure Room** - The cytotechnologist is notified of the time and EUS FNA site on the day of the procedure. The cytotechnologist is in attendance during the procedure, provides assessment of adequacy if requested by the clinician, handles the specimen and transports the specimen to the Cytology Laboratory.

4. **Breast Imaging (mammography, ultrasound and MRI)** – Specimens will be collected and placed in the bin for transport staff to deliver STAT to AP. A schedule of biopsies will be emailed to AP once per week. Cancellations and additions will be communicated with AP staff on a daily basis by the lead tech/designee in each area. AP staff will call Breast Imaging if specimens have not been received after the scheduled procedure time.

5. **Cancer Center**: Fine needle aspirations performed in the Cancer Center are delivered to Cytology and/or Central Processing area in Laboratory Medicine.

6. **Dermatology clinic** – All specimens collected in the Dermatology clinic will be transported by the histotechnologist/medical assistant to the Dermatopathology Laboratory. Any specimens collected after hours will be held in the dirty utility room in a bin until transported next business day.

7. **Off SITE but UCHC (UMG clinics, Farmington Surgery Center, Storrs, CARS)** – Specimen will be picked up from the off-site location, transported, and delivered to the Central Processing area in Laboratory Medicine. The transport staff will deliver the specimens to both AP and DP on the next scheduled run.

8. **OFF SITE/non UCHC** – Specimen will be delivered by courier to the Central Processing area in Laboratory Medicine and transported to AP by the Transportation Department unless other arrangements have been made by the sending institution.

9. **Monday – Friday after 5 pm and before 8 am; Saturdays, Sundays and holidays** - During the above hours, all specimens with the exception of placentas and specimens obtained in the JDH Operating Rooms will be delivered to the Laboratory Central Processing area. Cytology specimens will be held in the refrigerator. At the beginning the next business day or on Monday, the Transportation Department will transport the specimen from Central Processing Laboratory to AP. Placentas should be delivered directly to the specimen refrigerator outside of the morgue, with all applicable paperwork left with the specimen.

10. All specimens to be delivered to AP or DP must be in a sealed specimen transport bag.
11. All specimens transported to AP must be accompanied by a completed order placed in Epic by the provider.

12. Whenever possible, specimens should not be shared between AP/DP and lab medicine. Every effort must be made by the collector to obtain two distinct specimens. However, if unable to collect two specimens and the specimen must be shared, it is the responsibility of the collector to prioritize what test should be done in which order and determine where the specimen should be delivered first.

13. Variations to the established procedure will trigger a quality assurance review.

H. ATTACHMENTS:
None

I. REFERENCES:
None

J. SEARCH WORDS:
Specimen transport

K. ENFORCEMENT:
Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS:
On File

M. COMMITTEE APPROVALS:
None

N. FINAL APPROVAL:

1. Andrew Agwunobi, MD (Signed) 07/28/2020
   Andrew Agwunobi, MD, MBA
   UConn Health Chief Executive Officer

2. Anne D. Horbatuck, RN, BSN, MBA (Signed) 08/13/2020
   Anne D. Horbatuck, RN, BSN, MBA
   Clinical Policy Committee Co-Chair

3. Scott Allen, MD (Signed) 08/13/2020
   Scott Allen, MD
   Clinical Policy Committee Co-Chair

4. Caryl Ryan, MS, RN (Signed) 08/14/2020
   Caryl Ryan, MS, BSN, RN
   VP Quality and Patient Service & Chief Nursing Officer

O. REVISION HISTORY:
Issued: February 2000
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