

Transcript-Chlamydia/Gonorrhea Specimen Labeling Video

Brenda Walker: Hi, I'm Brenda Walker, Director of the Bureau of Disease Control and Prevention for the Kansas Department of Health and Environment. Since you're watching this video, you may have experienced delays in receiving your test results from the lab. We know this because of your concerns that you sent to the STD Program. While investigating those concerns, we found that some of the packaging and labeling were done incorrectly at our sites. So we put together this quick video to show you, rather than just tell you, how to properly package and label your specimen. We'd like to thank you for your patience while the lab converts to its new equipment, and also for your attention to this video.

Narrator: This is my good friend, Kelly McPhail. Kelly is one of the skilled, laboratory technicians that routinely run the chlamydia and gonorrhea specimens at our state lab. The object the size of a small car that Kelly is standing next to is the new Tigress, the instrument that processes our chlamydia and gonorrhea specimens.

Each day when the lab receives specimens, they are unpacked and placed into the blue racks, seen on the right. As the lab techs prepare to run the Tigress, they take each specimen collection tube and place it in the black rack, seen directly in front of Kelly. The black rack is then placed directly into the Tigress for processing. Before the techs place the tubes into the rack, they must check the expiration date on each and every specimen collection device. For urine specimens, they must also verify that the appropriate amount of specimen has been placed in the device. Most importantly, the techs **must** ensure that the specimen's barcode label is in the correct position to be scanned by the instrument. As you can see in this photo, there is a very narrow window for the barcode of each specimen to be read by the instrument. If the barcode is wrapped around the specimen, rather than lengthwise, too high or too low on the tube, or if it's too crooked, the instrument cannot scan the barcode. If the barcode cannot be read, the instrument will not allow processing to continue. Once the specimens have been loaded into the Tigress, the tech signals the instrument that the specimens are ready for processing. The instrument then attempts to read the barcode labels on each tube. If a tube (or tubes) cannot be read or there is too much or too little urine specimen in a tube, the Tigress displays an error message and the collection devices that could not be read must be removed from the instrument. The devices then have to be individually removed from the rack and re-labeled so that they can be properly processed. Each specimen that requires re-labeling slows down the process of completing the specimens.

This is Milroy Moses, another of our friendly lab techs...and he is re-labeling specimens from the morning's run that the instrument could not read. He must scan each specimen, print a new label, remove the old label, and affix the new label. If everything goes smoothly, and the techs do not have to replace multiple barcode labels, the Tigress can be started in the morning and results will be ready to be mailed out the same afternoon. If there are too many delays, the results will likely not be ready to be mailed out until the following day.

You can help ensure that everyone, including your facility, receives their results in a timely fashion by ensuring that your specimens are correctly labeled.

Here are some examples of problems that we routinely see:

The specimens Kelly is pointing to have labels affixed too low, and then too high to be read by the instrument.

This next specimen has a patient label wrapped on the underside of the specimen collection tube, which can cause ripping of both labels as it is inserted into the rack

This tube has a label too crooked to be read by the Tigress.

This tube actually has a cleaning swab rather than the collection swab and is invalid.

This next specimen has been sealed with paraffin. In instances where the tubes are sealed with wax or tape, the techs must carefully cut the wax with a knife (taking care not to puncture the tube)in order to free the device. The barcode must then be removed and replaced.

Each urine specimen collection tube comes with a solution in it that mixes with the urine to create a specific concentration that's needed to get a correct result. Too much or too little urine in the tube would cause an incorrect concentration which would ultimately cause an invalid result if the test was run. All three of these specimens have been filled far beyond the maximum fill line and cannot be run. Even if the excess urine was removed from the tube before processing, the concentration would be wrong and could give a false positive, or a false negative, result.

Please help us quickly return correct results to your facility by ensuring that you affix the barcode label on the specimen collection tubes so that they are straight and centered on the tube. Please avoid putting patient labels over the end of tubes, or covering the expiration date on them. With urine specimens, please make sure the minimum/maximum fill lines can be seen. And finally, please do not attempt to seal the tubes with wax or tape.

Taking a few extra moments to ensure that each specimen collection device is properly labeled will help reduce delays in reporting results, which is something we all want.

As always, if you have any questions or concerns, or if you need any assistance, please do not hesitate to contact us at your convenience. Thank You.