

STANDARD OPERATING PROCEDURE

# Laboratory Sample Receipt and Handling

Procedure for receiving, labelling, storing and tracking patient samples

DOCUMENT NO.

VERSION

EFFECTIVE DATE

SOP-LAB-012

3.0

15 March 2026

# DOCUMENT CONTROL

|                 |                                             |
|-----------------|---------------------------------------------|
| Document title  | Laboratory Sample Receipt and Handling      |
| Document number | SOP-LAB-012                                 |
| Version         | 3.0                                         |
| Effective date  | 15 March 2026                               |
| Owner           | Quality Manager                             |
| Approved by     | Laboratory Director                         |
| Review cycle    | Every 12 months or when the process changes |

## Revision History

| Version | Date        | Description of change      | Approved by  |
|---------|-------------|----------------------------|--------------|
| 1.0     | 2 Feb 2023  | First issue                | Lab Director |
| 2.0     | 10 Jun 2024 | Added cold-chain checks    | Lab Director |
| 3.0     | 15 Mar 2026 | Revised rejection criteria | Lab Director |

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## 01 PURPOSE

To ensure that all samples received by the laboratory are correctly identified, transported, stored and tracked so that test results are reliable and traceable.

## 02 SCOPE

Applies to all blood, urine and other clinical samples received at the central laboratory from collection centres and home collection.

## 03 DEFINITIONS

| Term                 | Definition                                                   |
|----------------------|--------------------------------------------------------------|
| LIMS                 | Laboratory information management system                     |
| Pre-analytical error | An error that occurs before testing, such as wrong labelling |
| Rejection            | Refusal of a sample that does not meet acceptance criteria   |
| Cold chain           | Maintaining samples within the required temperature range    |

## 04 ROLES AND RESPONSIBILITIES

| Role                   | Responsibilities                                |
|------------------------|-------------------------------------------------|
| Sample reception staff | Receive, check, register and distribute samples |
| Phlebotomist           | Collect and label samples correctly             |
| Section in-charge      | Accept samples into the department              |
| Quality manager        | Monitor rejection rates and train staff         |

## 05 PROCEDURE

### Receipt and Checking

Check every sample against the request form before accepting it.

1. Verify patient name, ID and test requested on the label and form.
2. Check sample type, container, volume and condition.
3. Check transport temperature for temperature-sensitive samples.
4. Record time of receipt in LIMS.

### Safety

Wear gloves and a lab coat. Treat every sample as potentially infectious.

### Rejection Criteria

Samples that do not meet criteria must be rejected and recollection requested.

5. Unlabelled or mislabelled sample
6. Haemolysed sample for tests affected by haemolysis
7. Insufficient volume
8. Wrong container or anticoagulant
9. Transport temperature outside range

### Registration and Distribution

10. Register accepted samples in LIMS and print barcodes.
11. Sort samples by department.
12. Deliver to departments within 15 minutes.
13. Store samples waiting for testing at the required temperature.

### Storage After Testing

14. Store tested samples for the defined retention period.
15. Label storage racks with date.
16. Dispose of expired samples as biomedical waste.

## 06 RECORDS AND FORMS

| Record / form                  | Kept by         | Retention |
|--------------------------------|-----------------|-----------|
| Sample receipt register (LIMS) | Reception       | 2 years   |
| Rejection log                  | Quality manager | 2 years   |
| Temperature log                | Reception       | 1 year    |

## 07 PERFORMANCE INDICATORS

| Indicator                  | Target | Frequency |
|----------------------------|--------|-----------|
| Sample rejection rate      | < 1%   | Monthly   |
| Registration within 10 min | 95%    | Weekly    |
| Labelling errors           | 0      | Monthly   |

## 08 APPENDIX A: SAMPLE REJECTION FORM

|                              |  |
|------------------------------|--|
| Date and time                |  |
| Patient ID                   |  |
| Sample type                  |  |
| Reason for rejection         |  |
| Informed to                  |  |
| Recollection requested (Y/N) |  |

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# 09 APPENDIX B: DAILY TEMPERATURE LOG

| # | Check                      | Yes                      | No                       | Remarks |
|---|----------------------------|--------------------------|--------------------------|---------|
| 1 | Morning reading recorded   | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 2 | Afternoon reading recorded | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 3 | Evening reading recorded   | <input type="checkbox"/> | <input type="checkbox"/> |         |
| 4 | Deviations reported        | <input type="checkbox"/> | <input type="checkbox"/> |         |

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Prepared by

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Checked by

# 10 ACKNOWLEDGEMENT

I confirm that I have read and understood this document and will follow it.

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Name and signature

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Date