Procedure · SPC-SOP-002 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 19.5

At a glance

- Reject a specimen that is mislabelled, leaking or delayed, and do not test it.
- Record the reason on SPC-REG-002.
- Tell the requester the same day, and record how they were told.
- Arrange a new specimen where it can be collected.
- Stop and get help straight away if: a leaking specimen is tested anyway.

1. Purpose

To make sure unsuitable specimens are rejected, recorded and the requester is told (19.5).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

A specimen that is mislabelled, leaking or too old must not be tested, because the result would be wrong or unsafe. Rejecting it and recording the reason is what keeps bad results out of the chart.

5. Responsibilities

Role	Responsibility	Competence
Collecting staff	Reject, record and notify	Staff

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Reject.

- Reject the unsuitable specimen and do not send it for testing.

Key point: Rejected.

Step 2. Record.

- Record the reason on SPC-REG-002.

Key point: Recorded.

Step 3. Notify.

- Tell the requester the same day and record how.

Key point: Notified.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Rejected specimens with reason and requester told	100%	Monthly	Collection point lead	Escalate to medical director

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
SPC-REG-002	Specimen rejection log	Register

17. Evidence

Reference	Note
E-009	
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- **Incident Reporting, Just Culture and Open Disclosure** (T-09)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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