

Specimen Transport Procedure

Issue Date	Review Date	Version
October 2017	October 2020	2.3

Purpose

To describe the procedures to be followed for packaging clinical specimens and transporting them to the Pathology laboratories, Derriford Hospital.

Who should read this document?

Any person responsible for submitting clinical specimens to Pathology, e.g., medical (incl. GPs) and nursing staff, midwives, ward managers and all other Ward or Departmental staff; Community Hospital staff; Care UK staff (Peninsula Treatment Centre).

Managers responsible for the transport of clinical specimens. Couriers, Porters (Serco), Stores, Blood Bank drivers etc. should be familiar with the Code of Practice (Appendix B).

Key Messages

This procedure must be read and followed to ensure safe transport and delivery of clinical specimens to the Pathology laboratories, Derriford Hospital.

Core accountabilities		
Owner	Pathology Risk and Quality Assurance Group	
Review	Pathology Management Group	
Ratification	Pathology Service Line Director	
Dissemination	Pathology Risk and Quality Assurance Group	
Compliance	Pathology Risk and Quality Assurance Group	
Links to other policies and procedures		
<ol style="list-style-type: none"> 1. SOP 583.1 Operation of the Pneumatic Air Tube Transport System 2. Pathology Handbook (on-line) 3. Phlebotomy procedures 		
Version History		
1.0	Pathology Specimen Transport Procedure	31/07/2007
1.1	Pathology Specimen Transport Procedure	30/11/2010
1.2	Pathology Specimen Transport Procedure	24/02/2011
1.3	Pathology Specimen Transport Procedure	19/04/2013
2.0	Pathology Specimen Transport Procedure	February 2014
2.1	Pathology Specimen Transport Procedure	March 2015
2.2	Specimen Transport Procedure	October 2017

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents on StaffNET. Larger text, Braille and Audio versions can be made available upon request.

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

AMENDMENT HISTORY

Amendment		Superseded Issue No	New Issue No	Section(s) amended	Details of amendment(s)
No.	Date				
1	26/03/2015	2.0	2.1	8.2 and 8.3	Formalin spillage response kit added
2	“	“	“	7.2.3	High risk samples added
3	13/07/2015	2.1	2.2	11.0	Training assurance from Devon and Cornwall Freewheelers added.
4	17/08/2017	2.2	2.3	Throughout 10.7 12 Appendix 1 Appendix 2	Adapted to new Trust format Links updated Corrected Histo contact details. Added details on audit. Added (telephone numbers) Formalin spillage kit added to para. 11.

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Specimen Transport Procedure

1 Introduction - Purpose and Scope

The Pathology Service Line comprises:

- **Derriford Combined Laboratory** (DCL) on levels 6 and 7, including Clinical Chemistry, Haematology, Blood Transfusion, Coagulation, Immunology and Molecular Biology.
- **Microbiology** and the **Infection Prevention and Control Team** on level 5
- **Cellular and Anatomical Pathology** on level 4, including Histopathology, Cytopathology, Neuropathology, and Anatomical Pathology.

Pathology is committed to ensuring the health, safety and welfare of all those who handle and transport specimens. This procedure sets out the safe working practices that will minimise any risk encountered.

The procedure covers the transportation of all specimens to the Pathology laboratories, including blood and blood products, from:

- wards and departments in Derriford Hospital
- outlying hospitals and health care providers
- GP surgeries, Health Centres and community services (incl. out-of-hours GP services)

It does not include specimens and biological agents sent from the Laboratories for investigation by reference facilities.

2 Definitions

Terms used are defined in the body of the text.

See Section 6 for classification of infectious substances.

3 Regulatory Background

Standards for the transport of infectious material by road, rail or air are drawn from the *UN Model Regulations on the transport of Dangerous goods (2008)*.

The United Kingdom regulations covering transport by road are *The Carriage of Dangerous Goods and Use of Transportable Pressure Receptacles Regulations (as amended 2011)*.

The UK enforcing agency is the Health & Safety Executive.

In addition:

- European Agreement concerning the International Carriage of Dangerous Good by Road (ADR2011).
- The Health and Safety at Work Act (1974), places a duty of care on all staff toward themselves and to one another. It requires the Trust to introduce safe working policies and procedures that minimise the risk to Trust staff and any others that may be affected by the work activity.
- The Control of Substances Hazardous to Health Regulations (2002), requires risk assessment prior to use of a hazardous substance, such as formalin and biological agents.
- Safe working and the prevention of infection in clinical laboratories and similar facilities, HSE (2003).
- ISO15189:2012 *Medical laboratories – Requirements for quality and competence*.

4 Key Duties

The responsibility for safe collection and packaging of specimens will rest entirely with the sender.

All staff involved in specimen transport must comply with legislation and local procedures, and use the equipment provided.

Care must be taken when collecting and handling clinical samples to ensure that the risk of infection to staff, private contractors and members of the public is kept to an absolute minimum. This includes the provision of relevant information and the prevention of leaks and spillages.

All specimens and accompanying paperwork must be transported in such a way as to maintain patient confidentiality at all times. They must never be left unattended in a public area.

The laboratories are responsible for monitoring the transport of samples to ensure they are transported:

- a. In a time frame appropriate to the nature of the requested examinations and the laboratory discipline concerned;
- b. Within a temperature interval specified for sample collection and handling and with the designated preservatives to ensure the integrity of samples;
- c. In a manner that ensures the integrity of the sample and safety of the courier, general public and receiving laboratory, in compliance with established requirements.

This monitoring is conducted by means of audit (see section 13).

5 Labelling

Correct labelling of specimens is of paramount importance - for the safety of patients and laboratory staff.

Inaccurate labelling causes delays, misdiagnosis, inappropriate treatment, wastage, and can endanger laboratory staff.

For further details on specimen labelling and completion of test requests, whether paper, ICM or ICE, see the Pathology Handbook at

<https://www.plymouthhospitals.nhs.uk/pathology>

Samples with fewer than 3 points of patient identification are likely to be rejected.

6 Classification of Infectious Substances

6.1 For the purposes of transportation, infectious substances are divided into two categories.

6.1.1 **Category A:**

An infectious substance in a form capable of causing permanent disability or life-threatening or fatal disease in otherwise healthy humans or animals when exposure occurs.

E.g. a specimen likely to contain an agent causing viral haemorrhagic fever. The Indicative List of Category A Infectious Substances can be found on pages 125-6 of the UN Model Regulations for the Transport of Dangerous Goods at:

http://www.unece.org/fileadmin/DAM/trans/danger/publi/unrec/rev17/English/Rev17_Volume1.pdf

Viral haemorrhagic fevers

- Whenever a diagnosis of viral haemorrhagic fever is entertained, the clinician must discuss the case with the on-call Consultant Microbiologist before submitting clinical samples to the laboratory.
- Any samples must be packaged and transported to the laboratory **in person** according to the procedure in the current issue of *Guidelines for Viral Haemorrhagic Fevers* in the Infection Control folder at:

<http://staffnet.plymouth.nhs.uk/Portals/1/Documents/Trust%20Documents/Infection%20Control/Guidelines%20Viral%20Haemorrhagic%20Fever.pdf>

6.1.2 **Category B:**

Any infectious substance that does not meet the criteria for Category A.

This includes most diagnostic specimens likely to be sent to the laboratories.

6.2 Substances **not** subject to the regulations include:

- blood and blood components for transfusion or transplant
- tissues or organs for transplant
- samples with low probability of infectious substances, e.g. environmental samples
- decontaminated clinical waste.

6.3 If there is any doubt over the correct classification of a sample, consult staff at the relevant laboratory before sending.

7 Transport of Specimens Within Derriford Hospital

7.1 Clinical samples must normally be placed in self-sealing plastic specimen bags and carried with care to the laboratory.

Exceptions include 24hr urines for DCL and large histology samples. For full details see the Pathology Handbook.

- Samples should be sent **promptly** to the correct laboratory. This is particularly important for samples from **ED, MAU, SAU** and **theatres**.

7.2 The hospital has a pneumatic tube system for transporting samples to the laboratories. Only **RED** carriers may be used for pathology samples. For further information on use of the system and the types of samples that may be sent by it, see the **Pathology Handbook** at

<https://www.plymouthhospitals.nhs.uk/pathology>

and **SOP 583.1 Operation of the Pneumatic Air Tube Transport System** at

<http://staffnet.plymouth.nhs.uk/Portals/1/Documents/Trust%20Documents/Clinical/Operation%20of%20the%20Pneumatic%20Air%20Tube%20Transport%20System.pdf>

7.3 When use of the air tube system is inappropriate, the Post Room provides a single daily collection of specimens from all areas of the hospital. This service is provided between 08.30 and 16.30 Monday – Friday with a limited round on Saturday mornings between 08.30 and 12.00. Outside of these times, any requests should be made to the Serco Helpdesk on 32300.

7.4 Other groups of staff within the hospital that may on occasion transport samples include General Support Assistants and Theatre staff.

7.5 Urgent specimens

- These are the responsibility of ward staff and should always be delivered as soon as possible to the laboratory, either in person or using the pod system.
- The urgency must be communicated to laboratory staff.

- DCL operates a 24 hour service and urgent samples may be delivered at any time.
- Microbiology and Histopathology/Cytopathology operate an on-call service out of hours. The on-call BMS must be contacted via Switchboard of any specimen requiring attention.
- Any untoward incident during transportation should be reported to the laboratory immediately.

7.6 Large numbers of samples should be transported in suitable UN 3373 compliant containers (see below). Carrier bags and large domestic waste bags should not be used. Containers must be disinfected weekly and after a spillage. They must not be used for any other purpose.

7.7 Cytology cervical screening samples

These must be 'blue-bagged' and sent to Stores on level 2 for collection by Community NHS couriers. (See para. 8.4 below)

7.8 Samples in formalin

See Section 11 below.

7.9 Always wash hands thoroughly immediately after delivering samples.

7.10 Spillages

No samples should be collected or transported if there is visible breakage or leakage. Bring it to the attention of staff in the ward or department.

If a sample is found to be broken or leaking in transit, **do not touch it**. Report it to laboratory staff on delivery.

For formalin spills, see Section 11.7 below.

8 Preparation of Samples for transport by Road

8.1 The responsibility for safe collection and packing rests entirely with the sender. All samples must be presented to the person undertaking the transport in a safe and suitable manner that complies with all necessary regulations.

8.2 Packaging

The packaging required will depend on which of the two categories, A or B, the infectious substance belongs to.

8.2.1 Transport of **Category A** materials requires specially qualified staff, pressure tested transport containers, and a specialist courier. It will not be addressed further here. If advice is needed on the classification of infectious substances the Microbiology laboratory should be contacted. See Appendix A for telephone numbers.

8.2.2 **Category B** materials must be packaged following the guidance in Packing Instruction 650.

This adopts a triple packaging system –

1. Primary container

- The sample must be placed into a correctly labelled, water tight and leak proof specimen container. For the correct container to use, refer to the Pathology Handbook at <https://www.plymouthhospitals.nhs.uk/pathology>
- This container must then go into a purpose-designed plastic specimen bag to separate multiple samples.

2. Secondary packaging

- The primary containers, in their specimen bags, must be placed in a clear, durable plastic bag.
- The bag must contain sufficient absorbent material to absorb the contents of the primary container(s).

3. Outer packaging

The secondary packaging must be placed in a compliant carrier. This must be maintained in a good condition.

The outside of the carrier must be clearly labelled

Biological substance, Category B

AND display the diamond shaped UN 3373 badge:



Refer to the Pathology Handbook at <https://www.plymouthhospitals.nhs.uk/pathology>

or contact the relevant laboratory for advice. See Appendix A for telephone numbers.

8.2.3 High risk samples

For samples that are judged to be of high risk, local rules may require further measures to be taken to protect laboratory staff:

Cellular and Anatomical Pathology

If the specimen is from a patient who is known or suspected to be an infection hazard a Danger of Infection label MUST be affixed to both the request form and

sample. Danger of Infection specimens must be placed inside TWO plastic specimen bags.

Microbiology

All samples are regarded as a potential infection hazard but HIV and Hepatitis C viral load bloods from GUM are particularly hazardous and should be double-bagged.

Combined Laboratories

All samples are regarded equally as potential infection hazards.

8.3 Delays

Delay may cause deterioration in sample quality. This could render samples unsuitable for testing or invalidate the results of investigations.

If delay is likely, please use the link below to refer to the Pathology Handbook for guidance on specimen storage, or contact the relevant laboratory (See Appendix A for telephone numbers).

<https://www.plymouthhospitals.nhs.uk/pathology>

8.4 Cytology screening samples

Since April 2013 cervical LBC (liquid based cytology) samples from the catchment areas of Plymouth Hospital (PHNT) and Royal Cornwall Hospital (RCHT) are processed at the RCHT Central Site.

A dedicated daily RCHT-courier service between the two sites ensures the timely transport of samples and slides.

Health Centres and GP Surgeries are supplied with blue transport bags for these samples. Supplies can be ordered from plh-tr.lbc-order@net.nhs

The image shows a screenshot of a computer screen displaying a form for a 'Transport Bag for CERVICAL CYTOLOGY (LBC) ONLY'. The form is divided into several sections:

- Top Section:** 'Transport Bag for CERVICAL CYTOLOGY (LBC) ONLY'
- Form Fields:** 'Please complete before dispatch' with fields for 'SOURCE' and 'DISPATCH DATE'; 'For lab use:'.
- Hazard Information:** 'METHODS BASED, BUFFERED PRESERVATIVE' with icons for 'Biohazard', 'Flammable', and 'Corrosive'. Below this is a 'HAZARDS' section with the text 'Toxic by inhalation, eye contact & ingestion'.
- Destination:** 'For delivery to: Cytology Screening Unit, Clinical Microbiology Building, Royal Cornwall Hospital, Truro, TR1 3LQ'.
- Packaging Instructions:** A box containing four numbered instructions:
 1. Ensure the seal is labelled and request form is completed
 2. Screw shut the seal cap correctly to avoid leakage
 3. Place the seal into a specimen bag and attach the form
 4. Collectively place all specimen bags into this transport bag and seal - to be collected by courier daily

Place LBC samples and request forms into an individual specimen bag and the specimen bags from each day into a blue transport bag. These will be collected from GP surgeries by Devon NHS Couriers and taken to the Burrington Way (Honicknowle) sorting office. From there they will be collected by Cornwall NHS Couriers for transporting to the laboratory at Truro.

8.5 Urgent samples

An urgent sample is one requiring results for the immediate management of the patient. It should be clearly identified to transport staff, who will ensure that it is delivered in person to laboratory staff and **not** left at the Derriford Main Reception.

Urgent requests are regularly audited.

9 Transport of Specimens by Road: **Courier; Blood Bank driver; Nuffield courier**

9.1 All drivers must be conversant with the Code of Practice (**Appendix B**).

9.2 All courier vehicles must be equipped with:

- a copy of the Code of Practice for Persons Transporting Specimens (**Appendix B**)
- compliant carriers (see 8.2.2 above)
- an in-date **Spill Pack**.
- a **formalin spillage response kit**, provided by Histology

9.3 Spillages

Spillages may be of blood, other potentially infected clinical material, or formalin.

In the event of a **formalin** spillage, follow instructions in the formalin spillage response kit.

If the vehicle has been contaminated, decontaminate using the Spill Pack provided. **Wear gloves.**

Report the spillage to a senior member of the relevant Laboratory immediately on arrival.

9.4 **Note: It is illegal to carry an infectious substance, including clinical samples, on public transport.**

10 Transport of Specimens by Road: Taxi; Devon Freewheelers; Cornwall Freewheelers

Taxis: Contracts have been set up with *Crownhill Taxis* to transport clinical samples from the Peninsula Treatment Centre, and with *Taxi Fast* to transport samples from Plymouth Dialysis Unit and Mount Gould Hospital & Local Care Centre.

Devon Freewheelers, a charitable organisation, is used regularly by the Dialysis Unit and organ transplant teams.

Cornwall Freewheelers, transport samples to the Pathology laboratories from the East Cornwall hospitals and District Nurses out of hours.

Specimens must be packaged according to PI 650 outlined in 7.2.2 above.

Taxis will not normally be equipped with a Spill Kit, nor will drivers be trained in specimen handling or dealing with spillages.

All taxi drivers must be given a copy of the **Code of Practice for Persons Transporting Specimens**, published by the Trust (Appendix B)

If the vehicle becomes contaminated, **do not touch the spillage**. It must be reported to a senior member of the relevant Laboratory immediately on arrival. A member of laboratory staff will attend to decontaminate the vehicle.

Members of the public must not be allowed access to the vehicle until decontamination has been completed.

11 Samples in Formalin

11.1 The lid of the primary container must be securely fastened

- If transport staff find that a lid is not correctly fitted and sealed, they must alert laboratory staff and **not** touch it.

11.2 Where possible place the primary container into a sample bag but for larger specimens use a polythene bag.

11.3 Place the bag into the transport carrier, ensuring that the sample remains **upright**, and close the lid.

11.4 Transport carriers must not be over-filled.

11.5 A trolley is to be used at all times to hold transport carriers. This reduces the risk spillage.

11.6 Large white specimen pots must be transported in a separate carrier to other bottles and pots and **MUST** be kept upright at all times, from collection to delivery.

11.7 In the event of a formalin spillage on Trust premises, immediately report it to the Histology laboratory.

Contact details: Normal working hours – 792362

Outside normal working hours – contact on call person through switchboard.

Do not leave the spill unattended. Do not touch it. Keep other staff and members of the public well away.

11.8 **Samples in formalin may NOT be transported in the postal system.**

12 Training

All organisations and individuals responsible for specimen transport have access to this document on-line and should read the attached Code of Practice (Appendix 1).

Trust staff are also able to access it in Trust Documents through Staff Net.

Devon and Cornwall Freewheelers have their own training programme which is reviewed by the Pathology Risk and Quality Assurance Group at audit (see below). Both organisations are required to provide at audit evidence of training and provision of spill kits.

Where significant risk is identified, local training is provided, e.g. for courier drivers.

13 Audit

Audits of specimen transport, both external and internal, are carried out by the Pathology Risk and Quality Assurance Group every three years, in conjunction with the review of this document.

The audit will comprise:

- Health & Safety checklist
- Quality checklist
- Audit of internal specimen transport, including pod system
- Audit of courier van and driver
- Audit of time taken in transit
- Audit of temperature in transit
- Audit of specimen packaging
- Audit of spill kits and spill kit training

- Audit of taxis and motorcycle couriers
- Review of this SOP
- Review of code of practice (Appendix B)

A 'Specimen Transport' sub-group of the Risk and Quality Assurance Group representing each department will meet regularly with the Courier Transport Manager to monitor progress of the audit. The meetings are minuted.

The audit, with all attendant findings, non-conformances, root cause analyses, remedial and corrective actions, etc., will be recorded on the Pathology document management system (Q-pulse) in compliance with ISO15189:2012.

In addition sample turnaround times, including the time between collection and reception in the laboratory are audited regularly by the laboratories.

14 Document Ratification Process and Document Control

The design and process of review and revision of this procedural document will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be reviewed by the Pathology Risk and Quality Group and ratified by the Pathology Service Line Director.

Non-significant amendments to this document may be made, under delegated authority from the Pathology Service Line Director, by the nominated author. These must be ratified by the Pathology Service Line Director and should be reported, retrospectively, to the Pathology Risk and Quality Group.

Five or more minor amendments will constitute significant revision and trigger a review of the document.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

All previous versions of the document will be retained electronically on the Pathology document management system (Q-pulse).

Following revision, hard copies of the new versions will be distributed to the three departments named above and their previous copies removed and destroyed.

15 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Hard copies will be held by Combined Laboratories, Histopathology, Microbiology.

Document control arrangements will be in accordance with The Development and Management of Formal Documents and will conform to ISO15189:2012 *Medical laboratories – Requirements for quality and competence*.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the Pathology Service Line Director and for working with the Trust's training function, if required, to arrange for the required training to be delivered (see section 12 above).

16 Monitoring and Assurance

See section 13.

17 Reference Material

In addition to the documents listed in section 3, see:

- Transport of Infectious Substances: Best Practice Guidance for Microbiology Laboratories, Department of Health (2007).

DCL		
Operations Manager	Simeon Green	01752 792025
Quality Manager	Marion Tozer	01752 431099
Reception		01752 792401
Microbiology		
Quality & Safety Manager	John Hooper	01752 792369
Reception		01752 792387
Histopathology		
Histopathology Services Manager	Mike Biscombe	01752 792364
Services and Quality Manager	Steve Blunden	01752 792364
Reception		01752 792355
Plymouth Hospitals NHS Trust		
Facilities and Environmental Services Manager	Andrew Davies	01752 439738
Courier Services Manager	Matt Grieve	01752 435460

Document Headlines & Code of Practice



Specimen Transport Procedure v. 2.2 Oct. 2017

FOR PERSONS TRANSPORTING SPECIMENS:

1. You may be transporting material which, although safely contained, could cause illness if the approved safety measures are not maintained. It is important that you follow these instructions. This will minimise any risk to you and will prevent any accidental transmission of infection both within the hospital, outside the hospital, and into your home.
2. Any cuts or open wounds must be covered by a waterproof dressing before you start work.
3. Never eat, drink, smoke or apply cosmetics when you are carrying specimens.
4. Wash your hands frequently and always before meal breaks and at the end of a collection round.
5. If you have been provided with protective clothing, always ensure that it is worn in accordance with instructions. Do not hang protective clothing in a place where it can contaminate other clothing. Never wear protective clothing in the staff canteen or in a staff room.
6. You are advised to wear disposable gloves. Wash your hands or use the alcohol rub immediately after discarding the gloves in a clinical waste container.
7. With the exception of 24hr urine samples and large histology specimens, clinical samples will be placed in self-sealing plastic specimen bags. These will be placed in a secondary container that is UN 3373 compliant for transport to the laboratory. If you are presented with specimens that are not in a suitable container, you must refuse to accept them. Carrier bags or domestic waste bags are not suitable.
8. Use the carriers provided - never place specimens in your pockets or carry them unprotected in your hands. Always handle specimens carefully as rough handling may cause breakages. Any untoward incident during transportation (e.g. dropping the container) should be reported to the receiving laboratory.
9. If you notice that a specimen is leaking into its bag or has contaminated other specimens in the container, do not touch anything inside the container or add further specimens. Take the container to the appropriate laboratory and bring the incident to the attention of a member of staff. They will take any further action required.
10. If you drop or break a specimen do not touch it or try to clear up the spillage. If at all possible, stay with the specimen to prevent non-NHS staff from touching it and contact

the relevant laboratory for advice from a senior member of staff. If you cut or prick yourself, however small, the wound must be encouraged to bleed by washing it with running water immediately. Do not scrub the wound as this may encourage infection to enter the blood stream. Your supervisor must be informed of the incident as soon as possible. They will then advise you of any further action and ensure that the appropriate documentation is completed. Advice may be sought from the relevant pathology department.

- 11. Histology specimens - Formalin** is a hazardous substance and specimens containing this fluid must be handled carefully. To prevent leakage, specimen pots without a screw lid and those not contained within a plastic bag **MUST** be kept upright at all times and every effort made to transport the screw topped containers in the same way.

If a spillage involving formalin occurs, the Histology Department must be informed immediately on 01752 793534. Do not leave the spillage unattended. Do not touch it. Keep other members of staff and members of the public well away.

If you spill formalin on yourself wash it off immediately with cold water and report the incident to your supervisor. Contact the laboratory as soon as possible.

Couriers: you have been provided with a formalin spillage kit to deal with spillages safely. Please refer to the spillage guide included in the kit.

- 12. Clinical Chemistry - 24 hour urine specimens** must be transported upright to prevent leakage. These specimens should be placed in sealable plastic bags to reduce the risk of leakage.
- 13. Courier Drivers:** In the event of a spillage in your vehicle follow your procedure for sample spillage. **Wear gloves.** Inform laboratory staff as soon as possible so that they can take any further measures as appropriate. For accidents or any untoward incident, please complete a DATIX incident report.
- 14. Taxi Drivers:** In the event of a spillage report it to a senior member of the relevant Laboratory immediately on arrival. A member of laboratory staff will attend to decontaminate the vehicle. Do not allow members of the public access to the vehicle until this has been completed. If you have a breakdown or accident, do not let anyone touch the specimen box unless they come from the Hospital. Contact the Derriford Switchboard (0845 1558155) who will transfer you to a laboratory for advice.
- 15.** All samples should be transported promptly to the relevant laboratory. Test results can be affected by time and temperature and are needed for patient treatment. **Urgent samples should always be taken straight to the laboratory.**
- 16.** Any information you see during your work must be considered confidential and must not be disclosed to others. Disclosure of confidential information is a disciplinary offence. Never leave samples unattended in a public area.

Following these safety rules will minimise any risk to you and those who work around you. They are for your protection. Please ensure that you comply with them.

Further information on Health and Safety is available from the Pathology Directorate. Do not be afraid to ask, they will give you any guidance that you require.