

<b>Name of Policy:</b> Care of Specimens <b>Policy Number:</b> 3364-124-04 <b>Approving Officer:</b> Chief Executive Officer <b>Responsible Agent:</b> Chief Nursing Officer <b>Scope:</b> The University of Toledo Medical Center Operating Room (OR)/Perioperative Services		 <b>Effective date:</b> 2/2026 <b>Original effective date:</b> April 1981	
Key words: Specimens, Surgical Intervention, Laboratory Forms, Labeling, Identifiers			
	<input type="checkbox"/> New policy proposal	<input checked="" type="checkbox"/>	<input type="checkbox"/> Minor/technical revision of existing policy
	<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/>	<input type="checkbox"/> Reaffirmation of existing policy

(A) Policy statement

Specimens obtained during surgical intervention will be sent to the proper laboratory accompanied by the proper laboratory forms.

(B) Purpose of policy

To ensure proper care, handling, and labeling of all specimens obtained. To provide protection of all persons encountering the specimens.

(C) Procedure

(1) Histological and microbiological specimen obtained from a patient during a procedure in the Operating Room (OR) will be documented by the RN circulator in Electronic Medical Record (EMR) and on the pathology paper form(s) when appropriate (i.e., during downtime).

(a) Frozen section and cytology forms will be completed along with the documentation in EMR.

(b) In situations where the EMR is offline, the RN circulator will document and verify all required information is on the specimen label and appropriate paper pathology form(s).

- (2) Proper documentation information for specimens includes: the identifying number or letter of the specimen, specimen name, identifying characteristics (description), patient name and medical record number (MRN), and test being requested.
- (a) Specimen labels printed via EMR will have a barcode label affixed to container in an appropriate manner.
  - (b) Specimen will be placed in a closed container with a well-fitting cap or snap-on lid.
  - (c) Amputated limbs that require disposition to the morgue will be labeled according to policy and placed in additional biohazard bag, to reduce the chance of patient information being separated from the specimen.
  - (d) Foreign bodies will be handled according to policy, except for bullets and other “evidentiary material.”

Evidentiary materials will be handled according to policy [3364-124-51 Chain of Custody](#). Document evidentiary material in EMR specimen tab, choose appropriate source, choose type “foreign body,” and choose “held in OR” as the test.

- (3) Transporting specimens.  
OR staff or designee will take specimen to lab or frozen section room.
- (a) The runner will take the specimen to the destination, log into EMR and document specimen as delivered.
  - (b) In the frozen section room only, specimens must be hand-delivered directly to pathology staff or assure pathology department is notified and on their way. Specimen(s) removed from the patient will be sent to pathology at the discretion of the attending surgeon.
  - (c) Specimen disposition will be confirmed with the attending physician during the procedure sign-out at the end of the case.

<p><b>Approved by:</b></p> <p><u>/s/</u> Daniel Barbee, MBA, BSN, RN, FACHE Chief Executive Officer</p> <p><u>2/16/2026</u> Date</p> <p><u>/s/</u> Kurt Kless, MSN, MBA, RN, NE-BC Chief Nursing Officer</p> <p><u>2/16/2026</u> Date</p>  <p><i>Review/Revision Completed by: Operating Room Management</i></p>	<p><b>Policies Superseded by this Policy:</b></p> <ul style="list-style-type: none"><li>• 4-04</li></ul> <p>Initial effective date: April 1981</p> <p>Review/Revision Date:</p> <p>1982 1983 1984 1985 1986 1987 1988 1989 August 1990 March 1993 February 1995 June 1996 March 1999 July 2002 July 2005 November 2007 June 10, 2008 September 2011 October 2014 February 1, 2016 August 1, 2019 December 2, 2022 February 2026</p> <p>Next review date: 2/2029</p>
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