


<b>Name of Policy:</b> <a href="#">Labeling Criteria</a> <b>Policy Number:</b> 3364-136-CBGL-04 <b>Approving Officer:</b> Medical Director, Blood Bank Program <b>Responsible Agent:</b> Director, Respiratory Care Services <b>Scope:</b> The University of Toledo Medical Center Respiratory Care Services Department		 <b>Effective date:</b> 2/3/2025 <b>Original effective date:</b> 4/2003	
Key words: Labeling Criteria, Blood Gas, Lab, Two patient identifiers, Patient label			
<input type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input checked="" type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

The Blood Gas Lab will establish guidelines for appropriate information needed for labeling blood gas samples.

(B) Purpose of policy

To describe how to label samples for proper identification and to provide appropriate information to describe patient conditions under which samples are drawn (collected).

(C) Procedure

1. The specimen must be labeled with a patient ID sticker, using 2 (two) patient identifiers, as according to Hospital policy 3364-100-01-16. To ensure proper labeling and identification, this sticker must be placed on the syringe, in the patient's room (not out of the room). The patient identification sticker must include the patient's name, identification number, the date, and collection time, and the inspired oxygen. For patients on mechanical ventilation, the mode of ventilation, and minute ventilation will also be included on another sticker. In order for the sticker to remain legible, it may also be placed on the outside of the same ice bag as the syringe. Reasonable efforts will be made to obtain all required information regarding ventilator settings and supplemental oxygen delivered.
2. The initials of the person that obtained the sample must also be included on the label.
3. The Laboratory must have electronic or written confirmation of all orders prior to testing.

4. If any of the above-described labeling procedures are not followed, the sample will not be analyzed. The person drawing the sample will be notified so that proper procedure may be followed for other samples.

<p>Approved by:</p> <p>/s/</p> <hr/> <p>Melissa Kukiela BSRC, RRT Director, Respiratory Care Services</p> <p>2/3/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Lauren Stanoszek, MD Medical Director</p> <p>2/3/2025</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by:</i> Director, Respiratory Care Services</p>	<p><b>Policies Superseded by This Policy:</b></p> <ul style="list-style-type: none"> <li>• <i>n/a</i></li> </ul> <p>Initial effective date: 04/2003</p> <p>Review/Revision Date:</p> <p>12/15/2004 11/17/2005 12/06/2006 04/17/2007 02/25/2008 02/12/2009 04/28/2010 02/23/2011 04/11/2012 03/01/2014 03/01/2017 02/12/2019 03/01/2021 03/15/2023 02/03/2025</p> <p>Next review date: 02/3/2027</p>
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