

#### SRI NATHELLA SAMPATHU CHETTY CLINICAL LABORATORY, SANKARA NETHRALAYA (UNIT OF MEDICAL RESEARCH FOUNDATION)

(UNIT OF MEDICAL RESEARCH FOUNDATION)

2025

## **DIRECTORY OF SERVICES**

# **DEPARTMENT OF MOLECULAR DIAGNOSTICS LABORATORY**



Dr.A.R.Anand, Ph.D Professor and Head Microbiology & Serology



Dr.L.Dhanurekha, Ph.D Senior Scientist Molecular Diagnostics Lab



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LOCATION OF MOLECULAR DIAGNOSTICS LABORATORY

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Prepared by:		Approved & Issued by:		
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Senior Scientist, Molecular Diagnostic Laboratory		Professor & Head, Molecular Diagnostic Laboratory		

## SN Main Campus, Venugopal Block (VG Block) 1st Floor



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## PATIENT REGISTRATION:

- The patient reports to the "Reception" counter with requisition form. For SN OPD/OT patients, the amount to be paid, the bill number and the receipt numbers are handled at the billing counter situated in the respective OPD sections.
- For external patients the secretary at MDL checks the prescription form referred by the concerned consultant, receives the required testing amount from the patients/patient's attendee.
- The secretary fills up the required details in the Chronology data record book for specimen entry (R/SNSC/MDL/CDRSE): The following details are entered into the record:

## Unique identification of the patient.

- Name or other unique identifier of physician or other person legally authorized to request examinations or use medical information together with the destination for the report. The requesting clinician's address is provided as part of the request form information when it is different from that of the receiving laboratory.
- Type of primary sample and the anatomic site of origin, where appropriate;
- Examinations requested;
- Clinical information relevant to the patient, which should include gender and date of birth etc for interpretation purposes;
- Date and time of primary sample collection;
- Date and time of receipt of samples to the laboratory.
- The laboratory will not receive specimen based on verbal request.
- Instructions on sample collection are provided to the patients / attendant and when required suitable containers are provided for the sample collection upon request.
- Finally the bill amount of the tests requested is collected and the receipt is handed over to the personnel stating the details of reports collection along with the lab contact number and lab id of the patient.

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## **General Instruction on Sample Collection**

- 1. Properly label the specimen (a minimum two patient identifiers are required) and complete the test request form. The requisition will include the patient name, hospital number, hospital/ doctor contact number, date and time of collection, specimen type and tests requested. A requisition needs to accompany each different specimen type. The specific source of specimen is required. Example: wound, left leg.
- 2. Maintain an appropriate environment between collection of specimens and delivery to the laboratory (E.g. Specimens for PCR must be transported to the laboratory immediately on wet/dry ice. Blood should be collected in EDTA (purple cap tubes), body fluids and transported in wet ice. Tissue must be snap frozen and transported on dry ice). The specimen should be collected in sterile containers
- 3. Specimens may be hand delivered to the laboratory or through courier adhering to proper guidelines.
- 4. If appropriate, decontaminate the skin surface. Use 70-95% alcohol and 2% chlorhexidine or 1-2% tincture of iodine (TIO) to prepare the site. Allow a contact time of two minutes to maximize the antiseptic effect.
- 5. For the requests with more than one test, ensure that the proper transport is utilized and volume is appropriate.

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#### INSTRUCTION ON TRANSPORTATION OF CLINICAL SPECIMENS:

Package of clinical specimens after collection procedure from various hospitals / institutions to Molecular Diagnostics Laboratory:

**Primary Package**: The clinical samples should be placed in a sealed container, for example a sealed Vacutainer<sup>TM</sup> or a sterile specimen container.

**Secondary Package**: If the sample is liquid, then the sealed primary container should be placed inside a sealed leak proof secondary package such as a sealed plastic bag or another watertight container which would be sufficient to contain all of the liquid content if the primary container breaks. One bag per patient is advisable. Request form must be separately kept in a compartment/pouch/pocket such that, it was not put together with the sample in same pouch

**Tertiary Package:** A rigid sealed/secured outer container (polystyrene box to house the secondary package. The pack should contain a biohazard label.

**Special Requirement for Frozen Samples:** For temperature sensitive samples the outer container may also be a polystyrene box containing wet/dry ice. The box should be sealed with tape with proper labeling. In the final package box to be dispatched, laboratory address should be clearly labeled and transported.

#### Procedure for mailing of samples

- Name of the patient
- Age of the patient
- The type of material (specimen with site specification)
- Proper container- sterile, leak proof
- Date and time of collection

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- Doctor's name/ contact details (phone/mail id)
- Adequate clinical summary and clinical diagnosis with antibiotic history if relevant.
- Note: If the specimens are sent for both microbiological as well as for histopathological in addition to molecular diagnostic investigation, the specimen would be received in unfixed condition without formalin.
- The outer container should have a bio-hazard label stuck on it.
- The specimen should be mailed to,

## MOLECULAR DIAGNOSTICS LABORATORY

#### Venugopal Block, First Floor,

NO.41, College Road, Nungambakkam, Chennai – 600006 Phone: 044- 42201987/ 42271500 Extn No: 1153/1154 E-mail: <u>moleculardiagnostics@snmail.org</u>

## Stipulated time frame for receiving the clinical specimens from other hospitals/Institutions:

It is advisable to transport the clinical specimens immediately after collection procedure. The stipulated time for transportation of samples from other hospitals/Institutions to our Laboratory should be within 24-72 hours in cold chain, in order to maintain the integrity of the clinical specimens to provide quality reports to the patients.

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# Detailed instructions for collection and transportation of clinical specimens from other laboratories and hospitals

- Use of appropriate packaging material, of suitable and well insulated container of coolants (4-8°C) and dry ice (for ultra-cold temperature) must be maintained for the stability of the samples.
- Any body fluid / fresh tissue shall be chilled immediately and transported on wet ice to the laboratory for DNA studies.
- Any body fluid for RNA studies shall be chilled immediately on wet ice and the RNA to be extracted within 1 to 4 hours of collection.
- If RNA is to be extracted from a tissue sample, it shall be either snap frozen prior to storage at -70°C or lower, placed in a stabilizing solution, or processed for RNA extraction within 1 hour of collection.

#### Transport of clinical Samples from SNSC to the Laboratory:

Please follow instruction as for Primary Package and should be transported within 1hr 15 minutes from time of collection. If in case the specimen collected after working hours, the sample should be stored at 4-8°C at the respective OT and transported next day morning to the Laboratory.

## Transport of clinical Samples from JKCN OPD/OT to the Laboratory:

Please follow instruction as for Primary and secondary package. Samples should be transported within 2hr 30 minutes. Transport sheet is to be duly filled by the technician before sending the sample. Samples are sent during the scheduled trips to our laboratory, if unable to send it, they are stored at 4-8°C at collection centre and transport the clinical specimens to the Laboratory next day morning before 9AM.

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## MOLECULAR DIAGNOSTICS LABORATORY TEST MASTER LIST

S. No	Tes t Cod e	Name of Test	Sample to be collected	Volume Criteria	Turn aroun d time*	Temperature of Storage	Sched ule of report ing/ testin g	Tariff
1.	461 #	Real-time PCR for Cytomegalo Virus (CMV)*#	EDTA blood, Urine, body fluids, tissue, biopsy, corneal scrappings, swabs	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate - 0.1 - 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Friday	8000
2.	422 #	Real-time PCR for Herpes Simplex Virus (HSV) (Qualitative)*#	Body fluids, tissue, biopsy, corneal scrappings, swabs	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate - 0.1 - 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2-8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Tuesd ay & Friday	4500
3.	420	PCR for Mycobacterium tuberculosis (M. tb) – MPB64 & IS6110 Gene	Ocular specimens, CSF, BAL, Amniotic fluid, Sputum, other body fluids and biopsy.	CSF, BAL, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24-48 hrs	Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	4500

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4.	421	PCR for Cytomegalovirus	EDTA blood, Urine, AC Tap, CSF, BAL,	EDTA blood, CSF, BAL, Amniotic	24-48 hrs	Blood (Plasma) – transported in 2-8°C and	Daily	4500
			Ac Tap, CSF, BAL, Amniotic fluid, ,	Fluid, Aspirate, Body		stored at -20°C		
		(CMV)	other body fluids,	fluids - 2-3 ml		Body fluid/ Tissue –		
			Vitreous aspirate & other ocular	AC Tap, Vitreous		transported in wet ice and		
			specimens.	Aspirate - 0.1 – 0.3		stored at 2-8°C		
				ml				
5.	423	PCR for Varicella	EDTA blood, Urine,	EDTA blood, CSF,	24-48	Blood (Plasma) –	Daily	4500
		Zoster Virus(VZV)	AC Tap, CSF, BAL,	BAL, Amniotic	hrs	transported in 2-8°C and		
			Amniotic fluid, , other body fluids,	Fluid, Aspirate, Body fluids - 2-3 ml		stored at -20°C		
			Vitreous aspirate &	nuius - 2-5 nn		Body fluid/ Tissue –		
			other ocular	AC Tap, Vitreous		transported in wet ice and		
			specimens.	Aspirate– 0. –0.3 ml		stored at 2-8°C		
6.	424	PCR for	EDTA blood,	2-3 ml	24-48	Blood (Plasma) –	Daily	4000
		Adenovirus	conjunctival swab,		hrs	transported in 2-8°C and		
			Throat swab,			stored at -20°C		
			Nasopharyngeal aspirate,urine,			Body fluid/ Tissue –		
			Sputum, BAL			transported in wet ice and		
			-r,			stored at 2-8°C		
7.	425	PCR for	EDTA blood,	EDTA blood: 2-3 ml	24-48	Blood (Plasma) –	Daily	3500
		Chlamydia	Conjunctival swab/		hrs	transported in 2-8°C and		
		trachomatis	scraping,			stored at -20°C		
			Pharyngeal aspirate, Endocervical swab,			Body fluid/ Tissue – transported in wet ice and		
			Urethral swab			stored at 2-8°C		
8	426	PCR for	Any ocular & extra	EDTA blood, CSF,	24-48	Blood (Plasma) –	Daily	3500
o	420	Eubacterial	ocular specimens	BAL, Amniotic	24-48 hrs	transported in 2-8°C and		3300
		genome	-	Fluid, Aspirate, Body		stored at -20°C		
			Blood & Body fluids	fluids - 2-3 ml				
				AC Ter M'		Body fluid/ Tissue –		
			Biopsy / Tissue	AC Tap, Vitreous Aspirate–0.1–0.3 ml		transported in wet ice and stored at 2-8°C		

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9. 427 PCR for Pan EDTA blood, CSF, Blood (Plasma) -Daily 3500 Any ocular & extra 24-48 ocular specimens fungal genome BAL, Amniotic hrs transported in 2-8°C and Fluid, Aspirate, Body stored at -20°C Blood & Body fluids - 2-3 ml fluids Body fluid/ Tissue -AC Tap, Vitreous transported in wet ice Biopsy / Tissue Aspirate -0.1 - 0.3and stored at 2-8°C ml 24 - 48 10. 428 PCR for Any ocular & extra EDTA blood, CSF, Blood (Plasma) -3500 Daily ocular specimens Propionibacteriu BAL, Amniotic hrs transported in 2-8°C and stored at -20°C m acnes(current Fluid, Aspirate, Body Blood & Body namefluids - 2-3 ml fluids Body fluid/ Tissue -Cutibacterium transported in wet ice AC Tap, Vitreous Biopsy / Tissue acnes) Aspirate -0.1 - 0.3and stored at 2-8°C ml 429 24-48 11 3500 PCR for Any ocular EDTA blood, CSF, Blood (Plasma) -Daily Toxoplasma specimens, Blood & Amniotic Fluid, Body transported in 2-8°C and hrs fluids - 2-3 ml stored at -20°C gondii Body fluids, Subretinal abscess AC Tap, Vitreous Body fluid/ Tissue -Aspirate -0.1 - 0.3transported in wet ice and stored at 2-8°C ml PCR for Non-Any clinical CSF, BAL, Amniotic 24-48 Blood (Plasma) -3500 12. 491 Daily Tuberculous Specimen Fluid, Aspirate, Body transported in 2-8°C and hrs fluids - 2-3 ml Mycobacteria stored at -20°C targeting hsp65 AC Tap, Vitreous Body fluid/ Tissue gene Aspirate-0.1 - 0.3 ml transported in wet ice and stored at 2-8°C PCR for AC Tap, Vitreous Body fluid/ Tissue -13. 275 Corneal scraping, 24-48 Daily 3500 Acanthamoeba Aspirate -0.1 - 0.3transported in wet ice and hrs Vitreous aspirate, Sps ml stored at 2-8°C AC Tap & other ocular specimens.

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14.	492	DNA sequencing for Amplified products*	PCR amplified products		72-96 hrs	2-8°C	4 working days	4000
15.	498	PCR for sequencing for MYD88 L265 Mutation*	AC Tap, Vitreous aspirate Sub retinal biopsy	AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	72-96 hrs	Body fluid/ Tissue – transported in wet ice and stored at 2- 8°C	4 working days from the day of PCR completion	7500
16.	497	Product for DNA sequencing loading*	PCR product		72-96 hrs	2-8°C	4 working days	500
17.	462	Quantitative real time PCR for HSV	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, Vitreous aspirate, Nasopharyngeal aspirate and other body fluids	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48hrs	Blood (Plasma) – transported in 2- 8°C and stored at - 20°C Body fluid/ Tissue – transported in wet ice and stored at 2- 8°C	Daily	7000
18.	452	RT - PCR for Rubella Virus	Ocular specimens,EDTA Blood, Urine, CSF, Amniotic fluid	EDTA blood, CSF, Amniotic Fluid - 2-3 ml AC Tap, Vitreous Aspirate - 0.1 - 0.3 ml	24- 48hrs	Transported in Dry ice and stored at - 70°C or lower	Daily	6000

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19. 273 Real Time EDTA blood, 24-Blood (Plasma) -Daily 6000 Any ocular PCR for specimens, EDTA CSF, Amniotic 48hrs transported in 2-Toxoplasma 8°C and stored at -Blood & Body Fluid, Body fluids gondii 20°C fluids, Subretinal - 2-3 ml abscess AC Tap, Vitreous Body fluid/ Aspirate -0.1 – Tissue -0.3 ml transported in wet ice and stored at 2-8°C 20. 453 # PCR for HLA EDTA blood 2-3 ml Same Blood -Tuesday, 4000 B27^\*# day of transported & Thursday & stored in 2-8°C Saturday testing 459 Real-time PCR EDTA blood, 2-3ml 24-9000 21. Transported in Daily for HIV-1 Amniotic 48hrs Dry ice and stored membrane at -70°C or lower. Real time PCR 24-22. 460 EDTA Blood, 2-3 ml Transported in Daily 5000 for CSF 48hrs Dry ice and stored at -70°C or lower. Chikungunya virus Real-time PCR EDTA blood/ Blood (Plasma) -23. 463 EDTA blood, Same Wednesday 8500 CSF, Amniotic transported in 2for day of Ac tap/ Vitreous 8°C and stored at -M.tuberculosis\* Fluid, Body fluids testing aspirate 20°C - 2-3 ml Body fluid/ Any clinical AC Tap, Vitreous Tissuespecimen Aspirate - 0.1 transported in wet 0.3 ml ice and stored at 2-8°C Real-time PCR 24-9000 24. 464 EDTA blood, 2-3 ml Blood -Daily for Hepatitis B Amniotic 48hrs transported & Virus membrane stored in 2-8°C

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25.	465	Real time PCR for Hepatitis C virus	EDTA blood, Amniotic membrane	2-3 ml	24- 48hrs	Transported in Dry ice and stored at -70°C or lower.	Daily	9000
26.	467	PCR based DNA Sequencing*	Any unidentifiable bacteria/ fungi for the identification of species level from clinical specimens/ isolates		Same day of testing	2-8°C	4 working days from the completion of PCR	7000
27.	474	PCR for Salmonella typhi	EDTA blood , Ocular specimens	EDTA blood, - 2- 3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48hrs	Blood (Plasma) – transported in 2- 8°C and stored at - 20°C Body fluid/ Tissue – transported in wet ice and stored at 2- 8°C	Daily	3500
28.	486	PCR for Pneumocystis jirovecii	Broncho alveolar lavage / Respiratory secretions Ocular & extra ocular specimens	2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48hrs	Body fluid/ Tissue – transported in wet ice and stored at 2- 8°C	Daily	4000
29.	489	Real-time PCR for Dengue Virus	Blood , CSF, ocular specimens	2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48hrs	Transported in Dry ice and stored at -70°C or lower.	Daily	5000

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30.	496 #	Real-time PCR for Varicella Zoster Virus (VZV)*#	EDTA blood, body fluids, tissue, biopsy, corneal scrappings, swabs	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2- 8°C and stored at - 20°C Body fluid/ Tissue– transported in wet ice and stored at 2-8°C	Wednesday & Saturday	6000
31.	499	PCR for Pythium insidiosum	Corneal scraping, Vitreous aspirate, AC Tap & other ocular specimens.	AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	24- 48hrs	Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	3500
32	278	Urgent Real Time Quantitative PCR for CMV	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, Vitreous aspirate, Nasopharyngeal aspirate and other body fluids	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same of testing	Blood (Plasma) – transported in 2- 8°C and stored at -20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	13000
33	279	Urgent Real Time Quantitative PCR for HSV	EDTA blood, Urine, AC Tap, CSF, BAL, Amniotic fluid, Vitreous aspirate, Nasopharyngeal aspirate and other body fluids	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate-0.1- 0.3 ml	24- 48hrs	Blood (Plasma) – transported in 2- 8°C and stored at - 20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	12000

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34	280	Urgent Real Time Quantitative PCR for VZV	EDTA blood, Urine, AC Tap, CSF, Amniotic fluid, , other body fluids, Vitreous	EDTA blood, CSF, BAL, Amniotic Fluid, Aspirate, Body fluids - 2-3 ml	Same day of testing	Blood (Plasma) – transported in 2- 8°C and stored at - 20°C Body fluid/	Daily	11000
			aspirate & other ocular specimens.	AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml		Tissue – transported in wet ice and stored at 2- 8°C		
35	281	Urgent Real Time Quantitative PCR for MTB	EDTA blood/ Ac tap/ Vitreous aspirate Any clinical specimen	EDTA blood, CSF, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2- 8°C and stored at - 20°C Body fluid/ Tissue – transported in wet ice and stored at 2-8°C	Daily	13500
36	284	Real time Qualitative PCR for <i>Treponema</i> <i>Pallidum</i>	EDTA blood/ Ac tap/ Vitreous aspirate Any clinical specimen	EDTA blood, CSF, Amniotic Fluid, Body fluids - 2-3 ml AC Tap, Vitreous Aspirate – 0.1 – 0.3 ml	Same day of testing	Blood (Plasma) – transported in 2- 8°C and stored at - 20°C Body fluid – transported in wet ice and stored at 2-8°C	Daily	5000
37	286	HLAB51 Real time PCR	EDTA blood	2- 3 ml	Same day of testing	Blood – transported & stored in 2-8°C	Daily	5500

#### \* - BATCH TEST PERFORMED IN MDL

#### **#** Tests under NABL scope

**NOTE:** Time limit for the additional tests for a given sample, if requested by the clinician, will be accepted, is as follows:

Samples received in molecular diagnostic section :10 days After this time period, the request to perform additional tests for a given sample will not be accepted

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## **ACCEPTANCE / REJECTION CRITERIA FOR RECEIVING SPECIMEN**

S.No	Acceptance Criteria	Rejection Criteria
1.	Properly labeled specimens.	Improperly labeled specimens:
	1. Full patient name, age, sex	1. Specimens not labeled
	2. Patient identification number.	2. Specimens labeled with the incorrect patient
	3. Date and time of collection	identification
		3. Specimens, that do not match the patient information on
		the laboratory requisition.
2.	<b>Correct Specimen Collection</b>	Improper Collection:
	1. All clinical specimen collected in sterile	1. Specimen for culture received in unsterile containers/
	container	non-laboratory containers as evidenced by contamination
	2. Specimens collected with proper	of containers.
	preservative or anticoagulant.	2.Specimens collected with the improper
	3. Correct volume	preservative or anticoagulant
	4. Collected specimen without any	3. Quantity of specimens insufficient to
	hemolysis or particulate matter	perform testing
	5. Specimen without any contamination	4. Specimens which are hemolyzed, or contain particulate
	6. Specimen sent in normal saline, without	matter.
	formalin	5. Specimens which are obviously or subsequently prove to
	7. Specimens collected from proper	be contaminated.
	venipuncture site	6. Samples sent in formalin
		<ol> <li>Specimens collected from intravenous tubing and specimens collected in heparin tubes for PCR.</li> <li>Formalin fixed paraffin embedded block/sections for PCR</li> </ol>

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3.	Appropriate transportation of the clinical	Delay in Transportation to the laboratory:
	specimens to the Laboratory	1.Specimens not in compliance with universal precaution,
	1. Specimen sent within the time limit	(e.g. Not Bagged)
	prescribed by the laboratory. Specimen	2. Specimens leaking or grossly contaminated on the
	transportation with appropriate packing.	exterior portion of container. Note: Irretrievable specimens,
	2. Transportation of Specimens in 3 tier	such as Cerebrospinal fluid (CSF), operating room
	packing system.	specimen, biopsy specimens will not be discarded.
	3. Clinical specimen transported in	3. Samples which are not sufficient/ single swab submitted
	appropriate transport medium for tests	for multiple requests (for e.g. direct smear study and
	requested	culture for aerobic and anaerobic bacteria, fungus and
		Mycobacterium tuberculosis/ isolation of viruses etc )
4.	Mid-stream urine samples for PCR collected	Urine specimens left at room temperature for more than
	with aseptic precautions and transported	one hour.
	within one hour to laboratory.	
5.	Sputum sample should be collected with	Sputum sample with saliva
	mucus.	
5.	within one hour to laboratory. Sputum sample should be collected with	

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Dr.Dhanurekha Ph.D		Dr.A.R.Anand Ph.D	
Senior Scientist, Molecular Diagnostic Laboratory		Professor & Head, Molecular Diagnostic Laboratory	



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Reasons for rejection of these samples and action to be taken:

Rejection Criteria	Action to be taken
No specimen received / No request form	User (sender hospital or lab) to be informed of the
provided with specimen	event by telephone. Requested to send
	specimen/request form
Inadequate or incorrect patient identifiers in	User (sender hospital or lab) to be informed of the
specimen label or in requisition form	event by telephone. Requested to send a second
	specimen.
Time of specimen collection is not indicated	The user/sender to be asked to provide specimen
in requisition form or specimen label.	collection time.
Leaking container	Inform the sender/user about the event, and reject the
	sample.
Specimen not transported under appropriate	Inform the sender/user about the event, and reject the
conditions	sample
Wrong specimen container used	Inform the sender/user about the event. Verify the
	possibility of processing the sample (depending on the
	test). Reject the sample if inevitable.

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# <u>Handling of Feedback forms / Suggestions received at SNSC Molecular Diagnostics Laboratory</u> (MDL)

Patients / Customers can give their suggestions / feedback / complaints to the SNSC Molecular Diagnostics Laboratory, Sankara Nethralaya through:

- (a) Feedback form at the Laboratory registration counter,
- (b) Complaint box in the laboratory registration counter,
- (c) Through e-mail (moleculardiagnostics@snmail.org).
- (d) If verbal it shall be documented in the respective departments of the laboratory.

A suitable response will be ensured on complaints and suggestions after discussion at the fortnightly laboratory services meeting. Feed backs are reviewed by the management through periodic meetings and yearly Management Review meeting. Actions are ensured relevantly until settled. The feedback is one of the "Quality Indicator" of the lab service and shall be analyzed statistically for management information so as to ensure quality system in patient service at laboratory

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#### Laboratory policy on patient's confidentiality:

- Patient confidentiality is in respecting the privacy of the patient
- Maintaining the entire patient related details and the patient health condition as closely guarded information.
- SNSC Clinical Laboratory, SN ensures that the test results of patients under insurance claims are sent directly to the employer concerned.
- SNSC Clinical Laboratory, SN do not disclose patient's personal and medical information to others unless the patient concerned has given specific permission for such release.

#### Laboratory complaint procedure:

Any complaints/suggestions regarding our Laboratory activity can be communicated through following modes:

Mail ids: <u>moleculardiagnostics@snmail.org</u>, <u>drdhanu@snmail.org</u> Contact numbers: 044-28271616 Extn no: 1153/1154 Direct Land line number: 044-42271987

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