Q When we receive a hemolyzed or otherwise unacceptable specimen, we discard it. Occasionally, a physician will call and ask us to run tests on it anyway. What is our responsibility — and our liability — if we do run a test on an unacceptable specimen?

A The simplest way to answer this question is to focus on the first principles of laboratory testing. The job of the lab is to produce accurate results in a timely fashion so that patients can be appropriately treated and managed.

The problem with running a test on an inappropriate specimen is that the lab is turning out a number it knows to be inaccurate, because it has already defined the specimen as inappropriate for the test being run. You have to ask yourself why you would want to do that and of what possible utility it would be to the patient.

Adhere to first principles

Of course, in the day-to-day work of a lab, adhering to first principles can be difficult when faced with a demanding physician, a difficult draw, and a sick patient. Of course, that is also when first principles are most important.

From a legal standpoint, the lab that runs a test on an unacceptable specimen is setting itself up for a lawsuit precisely because it has run the test. All labs have specimen-rejection criteria, which are in place to ensure that the specimen is minimally appropriate for rendering accurate results. Running a test on a sample that should have been rejected violates the lab’s own standard of practice and, in effect, admits negligence in the performance of the test.

Some institutions, in an attempt to mollify a demanding physician, will issue results with a disclaimer that the specimen was inappropriate. Although this is done with the intent of insulating the laboratory from liability, it probably will not do so if an adverse patient-care incident results from treatment or management based on the test.

In issuing results, the laboratory is, in effect, endorsing them. From the technologist to the medical director, laboratory personnel — not ordering physicians — are the experts in testing and issuing results, and they will ultimately be held responsible for errors.

Formulate a specimen-rejection policy

Because giving orders to physicians can seem aggressive (and sometimes impolite), it is imperative to have a clear policy on rejecting specimens in place.

Some institutions, in an attempt to mollify a demanding physician, will issue results with a disclaimer that the specimen was inappropriate. Although this is done with the intent of insulating the laboratory from liability, it probably will not do so if an adverse patient-care incident results from treatment or management based on the test.

In issuing results, the laboratory is, in effect, endorsing them. From the technologist to the medical director, laboratory personnel — not ordering physicians — are the experts in testing and issuing results, and they will ultimately be held responsible for errors.

There is no legally reliable way to “unload” responsibility for an inaccurate result on the physician who asks for an unacceptable specimen to be used, in part because the patient is independently entitled to rely on the laboratory and its staff to implement appropriate safeguards for patient protection. This includes issuing only results in which the lab has reasonable confidence of accuracy.