

# APPROPRIATE AND VALUE-BASED CARE CONFERENCE 2025

Maximising Value for All

16-17 OCTOBER 2025 AVBC  
Appropriate and Value-Based Care

## Specimen Rejection from Inpatient Wards

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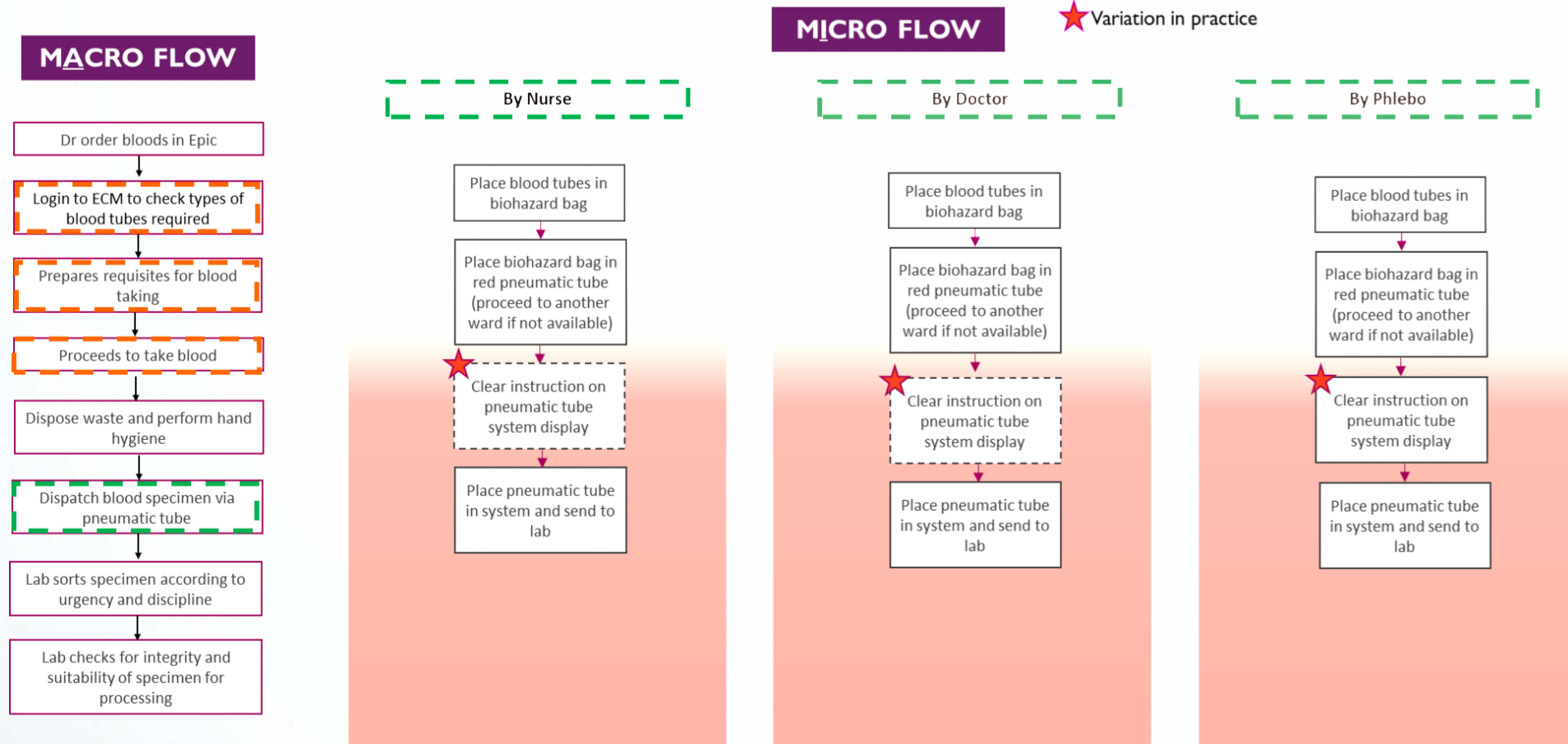
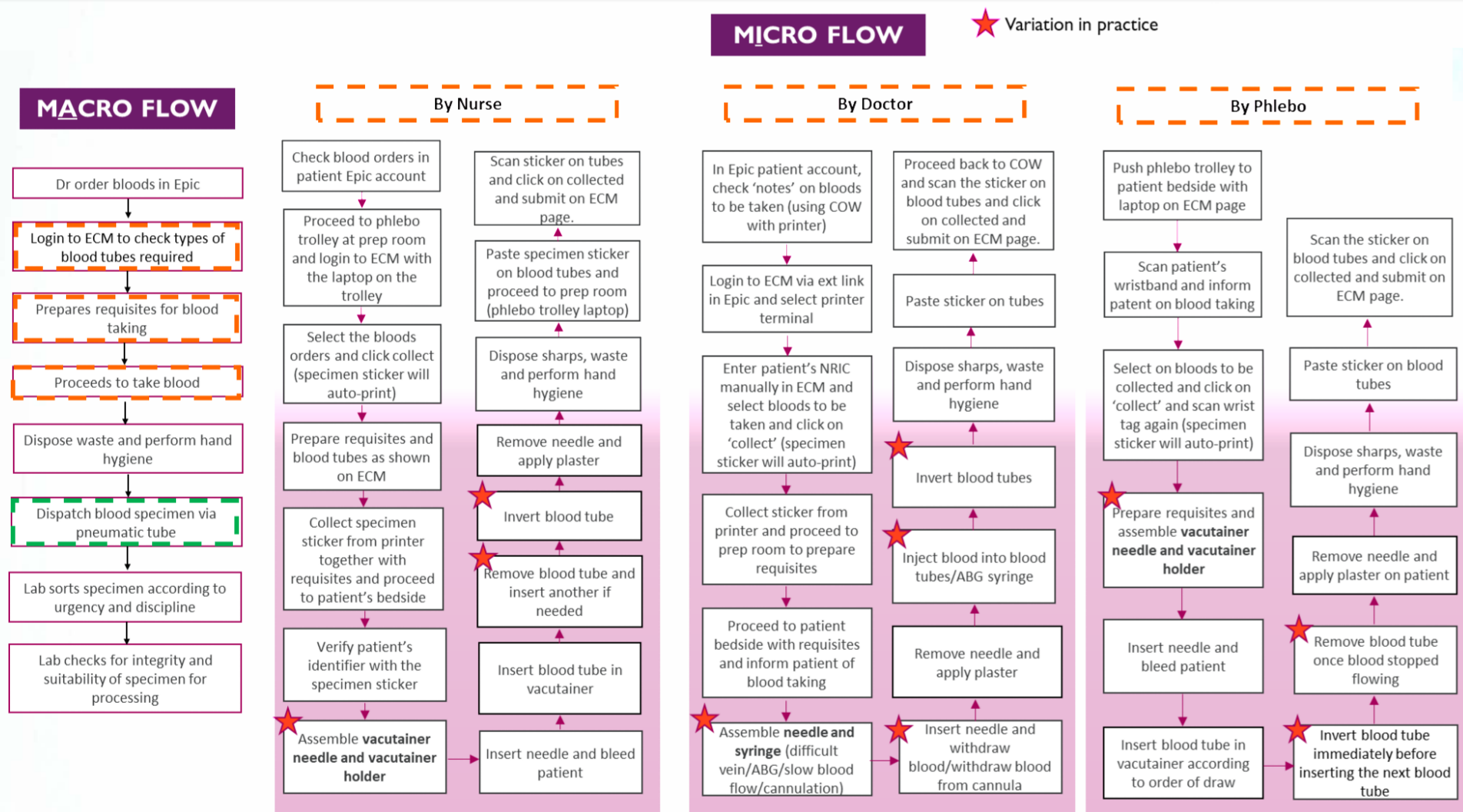
### MISSION STATEMENT

To reduce the percentage of blood specimens which are rejected from 0.69% to 0.3% (stretch goal 0.1%), among the samples collected by non-phlebotomists on wards 7A (TTSH) within a 6 - month period.

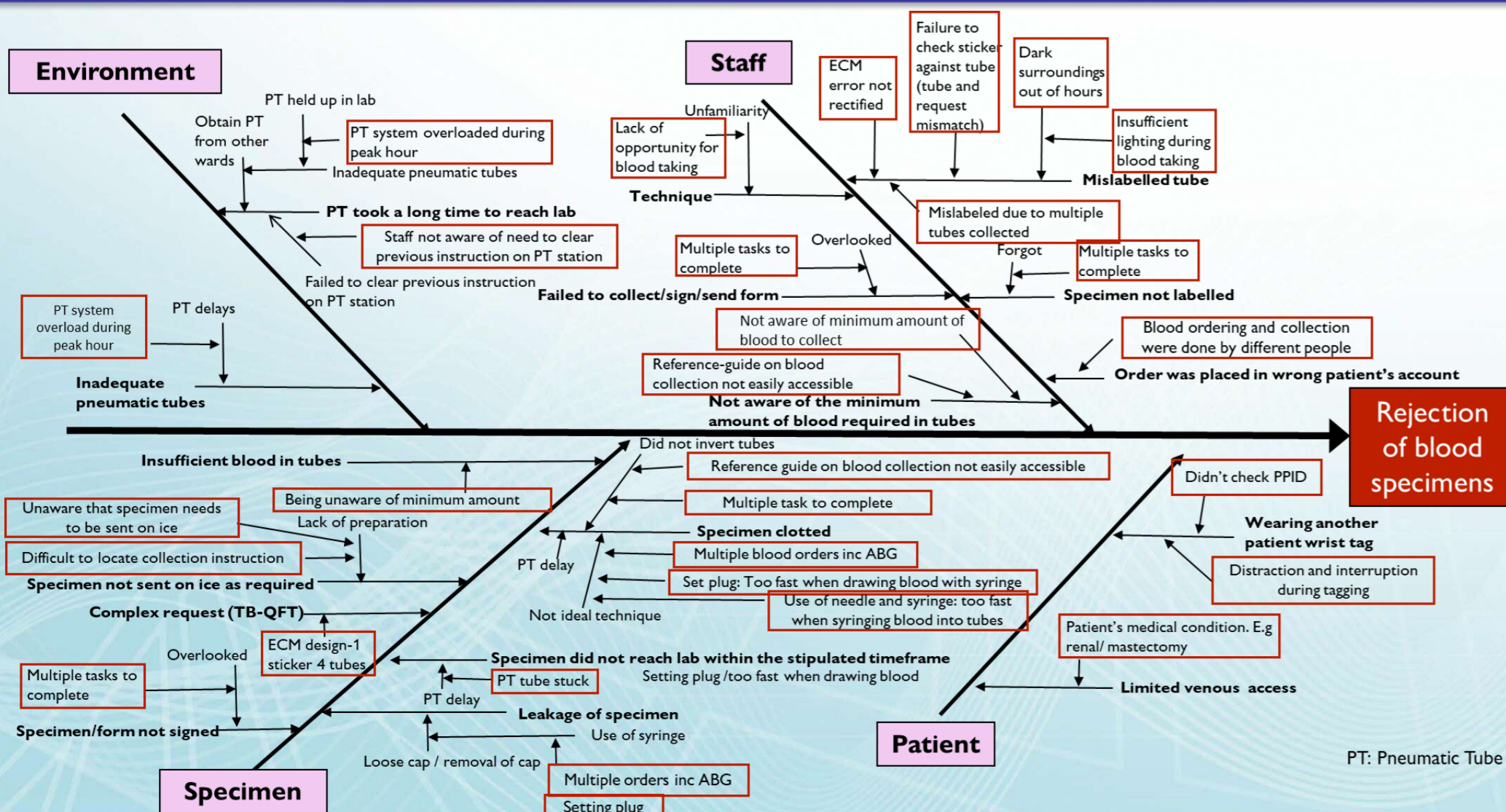
### EVIDENCE FOR A PROBLEM WORTH SOLVING

- Unacceptable Specimen → Specimen Rejection
- 1,200 specimens rejected per month
- Variation among wards: 6-32 per month and 0.3% to 0.95% of specimens
- Consequences for patients and their clinical management
- Repeat specimen collection - resulting in inconvenience, discomfort, iatrogenic blood loss
- Delay in specimen analysis, abandonment of the test(s) requested
- Delay in results – subsequent management / discharges
- Potential negative impact on patient safety and treatment
- Increase healthcare costs

### FLOW CHART OF PROCESS



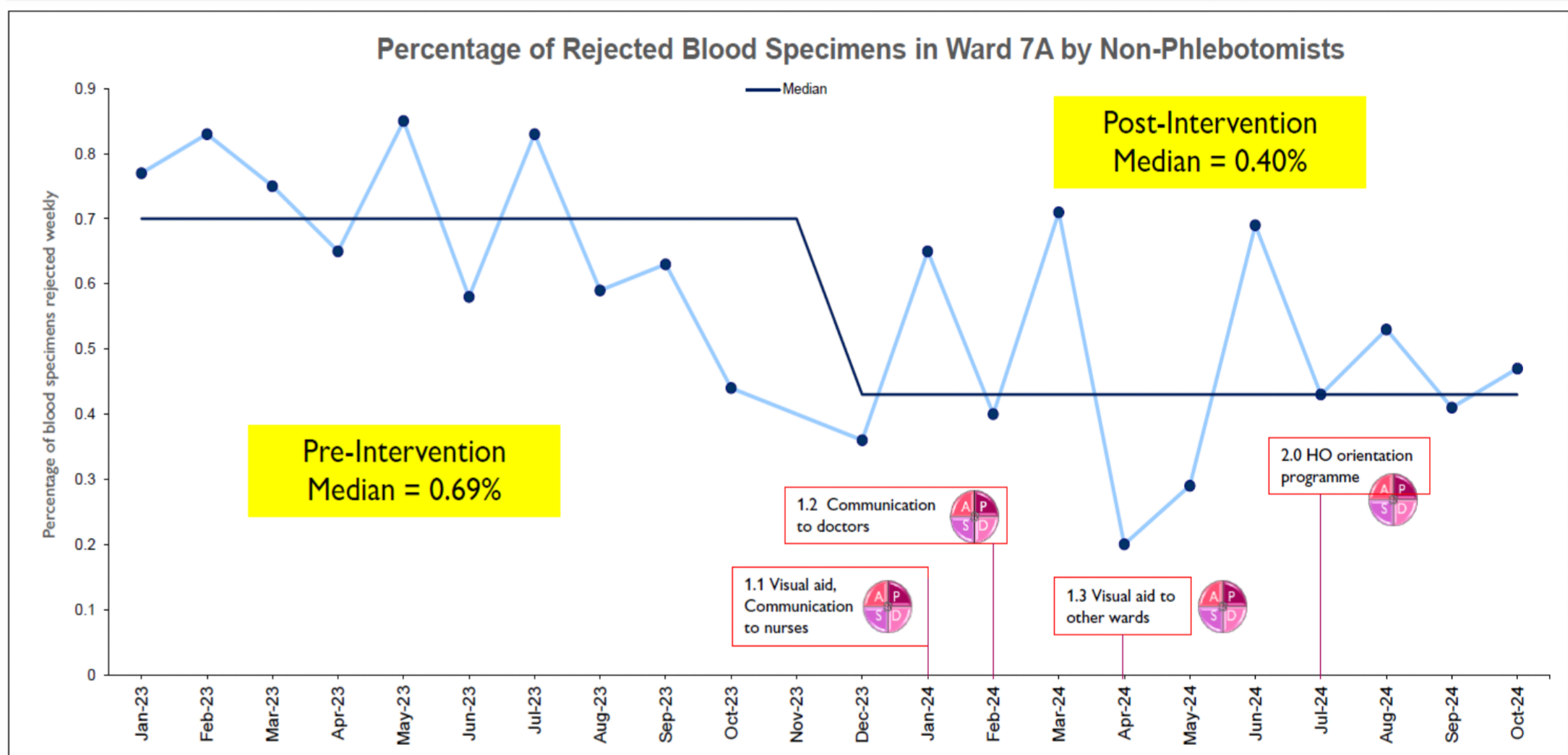
### CAUSE AND EFFECT DIAGRAM



### IMPLEMENTATION

Root Cause	Intervention	Implementation Date
<b>Cause 1:</b> Not aware of minimum amount of blood to collect	<b>PDSA 1.1:</b> Continue with current visual aid • Minimum blood volume • Number of inversions • Top 3 reasons for rejection To engage doctors across specialties (HOs, MOs, Residents)	15 January 2024
<b>Cause 3:</b> Reference guide on blood collection not easily accessible	<b>PDSA 1.2:</b> To improve awareness of minimum acceptance criteria for blood specimens and need for inversion and mixing of blood in tubes Communicate to HOs / MOs on the medical roster to create awareness. Prediction: Creating awareness amongst junior doctors will reduce specimen rejection rates by a further 20%	19 February 2024

### RESULTS



### COST SAVINGS

Costs of repeated blood draws

- Manpower costs – laboratory staff, clinical staff (\$25 / blood draw)
- Costs of consumables

Cost of delays to testing

- Average samples from 7A in 1 month – 2200
- Reduction from 0.69% to 0.3% = 9 samples / month in 1 ward. (Annual savings / ward = \$2,700)
- Improves patient experience, improves quality of samples received for analysis, Improves resource utilisation in the healthcare ecosystem and reduces friction in the system.
- All contributes to adding value to patient care.

### LESSONS LEARNT

- Asking the right questions to focus the data required
- Be agile – to be prepared for changes
- Observe practices on the ground
- Involve and listen to the different team members – we all play a part!

### STRATEGIES TO SUSTAIN

To continue with further interventions

- Incorporate in Junior doctor's orientation
- Incorporate in new nurse orientation

To continue with visual aid on the ward

To continue monitoring specimen rejection rates and reasons for rejection