

LAB Dept MEETING – Huddles

Date of Meeting: 4/11/2018

Attendees: Jocelyn Ybarra, Juliet Garlejo, Priscila Dar, Tammy Rantung, Quang Trinh, Teresita Strickland, Greg Johnson, Bill Craig, Michelle Trammell, Mark Gomez, Janet Gerges, Juanita Fernandez, Marissa Calilung, Marie Rutledge, Theda Bryant

| Topic | Details | Action Item, responsible person, date due, or informational only |
|-----------------------------|---|--|
| <p>KUDOS SAFETY TIP</p> | <ul style="list-style-type: none"> • Kudos: Congratulations to our Department Service Award recipients: CLS: Myrna Ocab - 10 yrs., Jocelyn Ybarra – 10 yrs., Alan Dandridge – 10 yrs., Priscila Dar – 10 yrs., Lourdes Maniago – 5 yrs. Phlebotomist: Gregory Johnson – 10yrs., Teresita Strickland – 10yrs., William Craig – 10yrs., Leticia Fajardo – 10 yrs., Melanie Magee – 5 yrs. Managers: Marissa Calilung – 10 yrs., Marie Rutledge – 5 yrs. • Safety: Be very careful when handling the blue capped vacutainer urine containers from ED. There was a recent needlestick injury involving these containers. ED will be switching to regular containers soon but until then, please be very careful. | <p>Informational</p> |
| | <ul style="list-style-type: none"> • New sterile containers for send out specimens are now located in the Bio-hood in the back. • Please complete the regional electronic attestation for all staff CLS, Phleb, Managers, Asst. Admin. • Make sure to check all expired reagents and supplies in your areas. Let us know if you found expired items so we can dispose properly and order as needed. • Bright orange “Biohazard No Food or Drink to be stored” stickers will be posted on refrigerators and freezers to be compliant. | <p>ALL STAFF</p> |

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| | <ul style="list-style-type: none"> • .0.1NSodium Hydroxide NaoH used for the Ortho Vision, and 5GM,10GM Sodium Carbonate these are bases now located in the phlebotomist cabinet with the flowers on the outside. • iSED <1 results don't transmit to Cerner anymore. It will result as blank, check the instrument print out and perform necessary action. Out of linear results need to be investigated and repeated if necessary. • iSED QC needs to be ran daily +/-20 0530 on analyzer in use (as per iSED P&P). Follow this for now; *will need to clarify if it needs to be ran every 8 hours of patient testing. *This was changed on P&P. Follow the process of running iSED QC daily at +/-20 mins 0530 on analyzer in use. This was emailed to all CLSs and is effective 4/7/18. • Body Fluid Cell Count control (Streck)- Be sure to follow precision guidelines; Precision between 2 counts- 20% if <100 cells counted and 10% >=100 cells counted. QC needs to be acceptable and within precision range. | CLS |
| | <ul style="list-style-type: none"> • | Phlebotomist |
| UBT | | |

This concludes the Minutes of the __4/11/18_____ Lab Staff Meeting.

Prepared by: _Theda Bryant_____ Date: __4/12/18_____