

LAB Dept MEETING – Huddles

Date of Meeting: 4/26/18

Attendees: Alan Dandridge, Juliet Garlejo, Priscila Dar, Lourdes Maniago, Maria (Mhae) Villafuerte, Greg Johnson, Michelle Trammell, Mark Gomez, Elliot Faure, Marissa Calilung, Marie Rutledge, Theda Bryant

Topic	Details	Action Item, responsible person, date due, or informational only
KUDOS SAFETY TIP	<p><i>Safety Message: Please use proper body mechanics and team work anytime you have to move a patient or a heavy object. Take the time to review the helpful attachments e-mailed to you.</i></p> <ul style="list-style-type: none"> • Always make sure to put trash in trash cans. Pick up your trash if it did not make it to the trash can and put in appropriate trash cans. • No PHI in regular trash cans. All written post it notes, etc. need to be discarded in PHI bins. <ul style="list-style-type: none"> ▪ Please remember that even dry blood on a wood stick should be placed In the Biohazard sharps container. Also, dry blood on non-sharps should go into the Biohazard container. • Happy Lab Week! Thank you for all your hard work- it's greatly appreciated! 	Informational
	<ul style="list-style-type: none"> • CAP inspection open window starts Monday, 4/30/18. • Continue to check expired reagents and supplies in your areas. Dispose expired items appropriately, ask how to dispose if not sure. • Service champion criteria. Someone asked about the selection process for service champion. Anybody can nominate, then it goes to a selection committee who selects the service champion awardees. • Personal cell phone usage is not allowed when you are working and you are in your work area. Other departments see this and it's a bad reflection of our department This was communicated in multiple huddles already. • Keep reading and acknowledging the lab policies and procedures. There will be some binders for phlebotomists to read and acknowledge as well. • RMS downtime procedure attached. (Discussed 	ALL STAFF

	<p>process). This process was followed on the most recent extended RMS downtime. The feedback was it went well.</p>	
	<ul style="list-style-type: none"> • Gram stain needs to be performed on Q score orders if parameters are met. The policy was e-mailed to CLS on 4/13/18. • Complete all PM logs. There are still missing initials on 2017 PM binders. Take the time to check these binders and fill them up as soon as possible. • A lot of discrepancies found in the Body Fluid worksheets. Use the formula in Hematology P&P for cell count calculation. Read and understand this policy, acceptable specimens, etc. 	CLS
	<ul style="list-style-type: none"> • Log all urines received in blue capped vacutainer urine containers. We will monitor this until further notice. • MV Lab achieved 96% on sending Blood Cultures on 1st available courier. Great job! Keep sending those blood cultures on 1st available courier run. • Congratulations to MV Lab Phlebotomy team! Zero misdirected specimens thru March 2018. • Effective Monday, May 7, 2018, transport of CT/GC screen to the Regional Reference Lab will change. They will be placed on blue racks in place of using biohazard bags. See attached flyer. 	Phlebotomist
UBT		

This concludes the Minutes of the 4/26/18 Lab Staff Meeting.

Prepared by: Theda Bryant Date: 4/30/18

Inpatient RMS Downtime – (ED, Inpatient STATS)

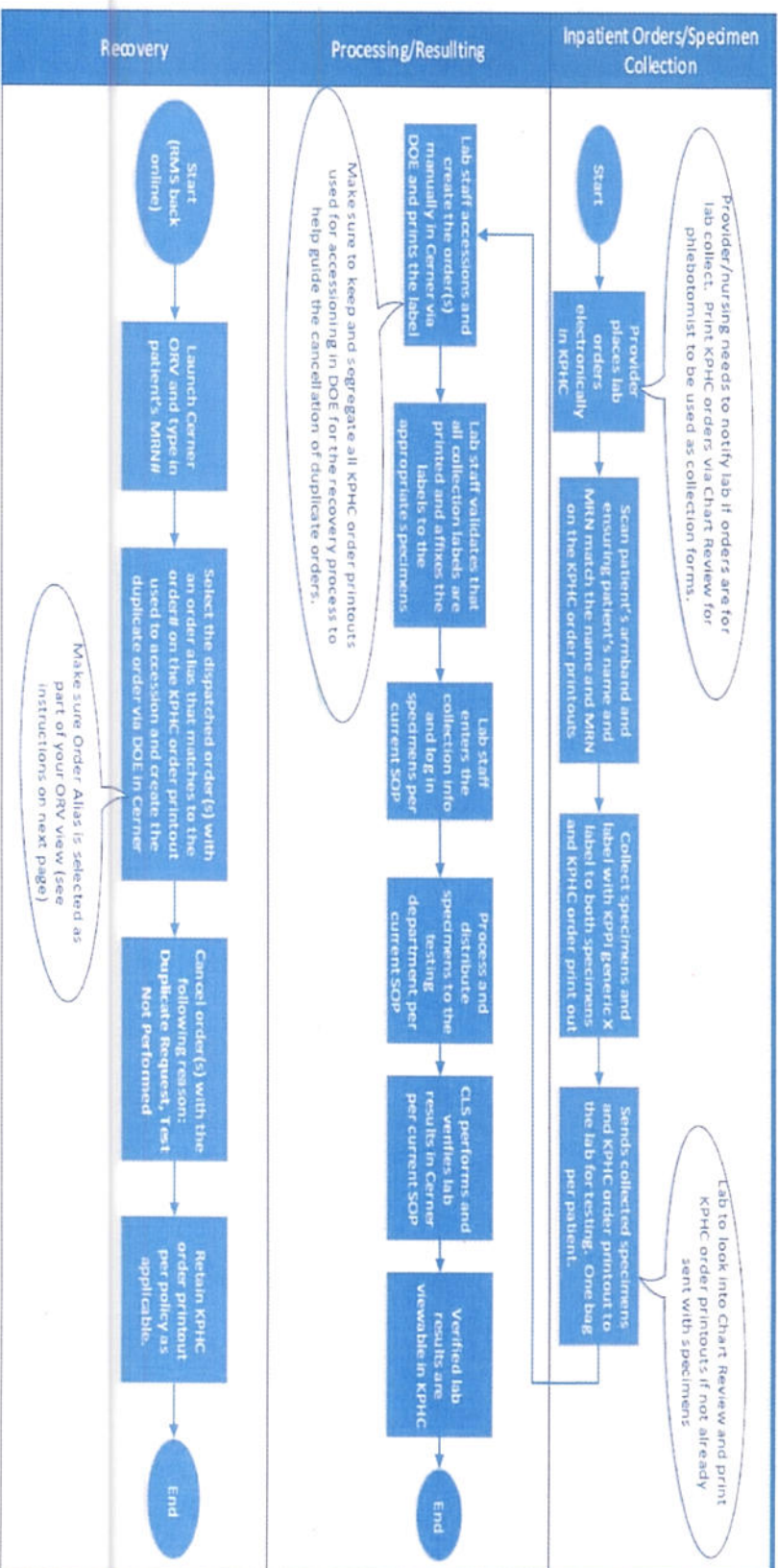
Purpose This process describes the stages that comprise the RMS downtime workflow.

Scope This process is intended for all users.

Process Refer to the diagram on Page 2 of this document to view the RMS downtime workflow.

Continued on next page

Inpatient RMS Downtime – (ED, Inpatient STATS), Continued

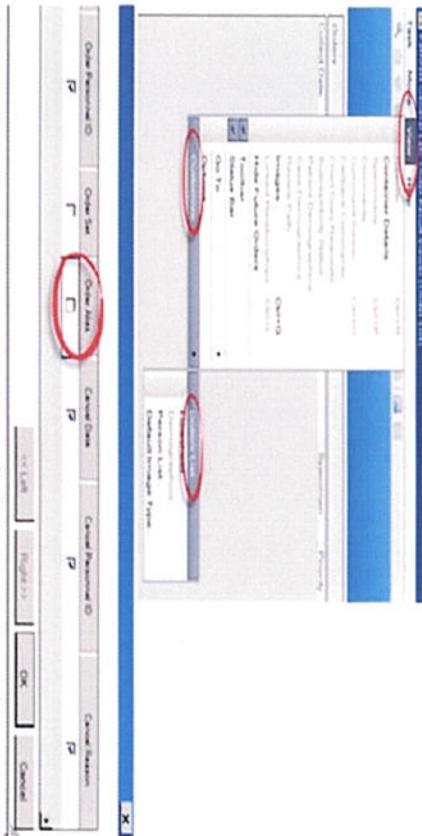


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Inpatient RMS Downtime – (ED, Inpatient STATS), Continued

Select Order
 Alias as Part of
 the ORV View:

- Ensure Order Alias is selected as one of the view options in ORV in Cerner. To select Order Alias as a view option, go to:
ORV > View > Customize > Orders List > Check the box for Order Alias



- When selecting the dispatched order(s) to cancel, make sure the Order Alias displayed in Cerner matches to the order number on the KPHC order printout that the staff used to accession and create the duplicate order via DOE in Cerner.

ZZZPHC/AMBULATORY
 AMBVA/ONESCAL

Order Alias: ZZZPHC/AMBULATORY
 Order Number: 271995739
 Date Order: 2/27/2014
 Order Entered: 1040 ACOR 5/6/2014
 Dispatching Provider: ORKMER - 1831
 Age: 23 years
 Facility: Oakland/PA Area
 The name: ZZZPHC/AMBULATORY
 Order: 1 results
 Location: BPC DMG 1 P1

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Inpatient RMS Downtime – (ED, Inpatient STATS), Continued

Author(s):

Marian Azuma, CLS
Stephanie J. Prien MS, MT(ASCP), CLS

Inpatient RMS Downtime – (ED, Inpatient STATs), Continued

Reviewed and approved by (for Medical Center Area Approval Only):

SIGNATURE	DATE
Name: _____ Operations Director, Area Laboratory	
Name: _____ CLIA Laboratory Director	

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Inpatient RMS Downtime – (ED, Inpatient STATS), Continued

HISTORY PAGE

Type of Change: New Major, Minor	Description of Change(s)	Quality Systems Leader/Date	Operations Director, Area Laboratory Review/Date	CLIA Laboratory Director Review/Date	Date Change Implemented

Signature Manifest

Document Number: SCPMG-PPP-0154

Revision: 01

Title: Inpatient RMS Downtime – (ED, Inpatient STATs)

All dates and times are in Pacific Standard Time.

Inpatient RMS Downtime – (ED, Inpat

Collaboration

Name/Signature	Title	Date	Meaning/Reason
Marian Azuma (K122230)	Systems Integration Manager	03 May 2017, 04:55:40 PM	Complete

Initial Approval

Name/Signature	Title	Date	Meaning/Reason
Ji Yeon Kim (B727360)	Physician-In-Charge, Chem Svcs	09 May 2017, 12:18:10 PM	Approved

Final Approval

Name/Signature	Title	Date	Meaning/Reason
David Quam (P092597)	Rgnl Mg Admn-Pmg Executive	12 May 2017, 02:24:49 PM	Approved

Set Effective Date

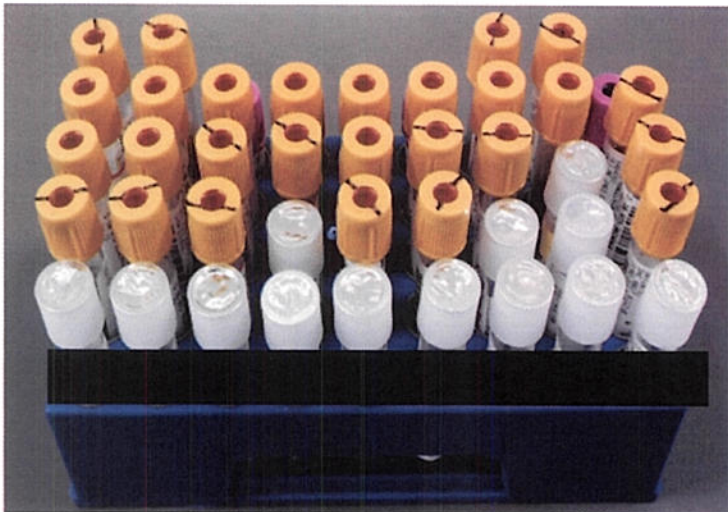
Name/Signature	Title	Date	Meaning/Reason
Laura Perry (S533438)	Admin Spec II		
Marian Azuma (K122230)	Systems Integration Manager	15 May 2017, 01:38:07 PM	Approved

Laboratory Care Delivery System Regional Reference Laboratory System

To ensure patient safety, reduce the possibility of contamination, and prevent test cancellations

EFFECTIVE, MONDAY, MAY 7, 2018
TRANSPORT OF CT/GC SCREEN
(CHLAMYDIA TRACHOMATIS/NEISSERIA GONORRHOEAE)
TO THE REGIONAL REFERENCE LABORATORY WILL CHANGE

CT/GC Genprobe Aptima collection tubes (urine/swab) will be placed on blue Labotix racks for transportation to the Regional Labs, in place of using biohazard bags currently in use. Please view example below



INSTRUCTIONS:

- Place CT/GC Genprobe Aptima collection tubes with blood tubes and urine Grenier tubes on the same blue Labotix rack
- Transport may either be ambient or refrigerated but not frozen