

LAB Dept MEETING – Huddles

Date of Meeting: 5/24/2018

Attendees: Jocelyn Ybarra, Alan Dandridge, Raquel Lecaro, Lourdes Maniago, Maria (Mhae) Villafuerte, Greg Johnson, Bill Craig, Michelle Trammell, Mark Gomez, Eilliott Faure, Melanie Magee, Janet Gerges, Juanita Fernandez, Melinna Ayala, Marissa Calilung, Marie Rutledge, Theda Bryant

Topic	Details	Action Item, responsible person, date due, or informational only
KUDOS SAFETY TIP	<ul style="list-style-type: none"> • Thank you everyone for a successful CAP inspection! 	Informational
	<ul style="list-style-type: none"> • Update contact information: Let Theda or management know if there has been a change on your personal contact information- phone #, e-mail address or mailing address. This is necessary to update records on file. • CAP inspection- We had 6 total deficiencies- 3 lab, 3 respiratory of which 4 were corrected on site. The 2 deficiencies that stood out - one for lab and one for respiratory to which both involved record retention for downtime results. What nursing/provider does with the faxed downtime documents. • Some learnings from recent CAP inspection: <ul style="list-style-type: none"> ➢ Continue to perform documentation- QC corrective action documentation, PM logs, Blood Bank charts, etc. She noticed a huge improvement from 2016. ➢ No use of white outs in the lab- she found 2 (not recent). Please refer to P&P pertaining to changing documentation. ➢ We cannot store vacutainer tubes in the rest room. These require a storage temperature that's being monitored daily. ➢ Expiration dates- if reagent doesn't have an expiration date, contact manufacturer. ➢ New lot reagent parallel study- Use of patient's samples when available with QC is highly recommended. ➢ Collecting, copying raw data for CLS competency no longer required. Will discuss this further. • Continue to read and acknowledge/ sign all policies and procedure manuals 	ALL STAFF

	<ul style="list-style-type: none"> • Osmolality gap – Na, BUN and Glucose are now reported. Osmolality serum is activated and can be ordered separately. See Technical Bulletins. • DXH 800 service is now thru Beckman Coulter till 4/30/19. See details sent to all CLSs on 5/14/18. 	CLS
	<ul style="list-style-type: none"> • Code stroke- Lab needs to respond to all code strokes, ED and on the floors. For floor code stroke, lab responds and if no lab orders needed, document on the phlebotomy shift report the patient's name, MRN, location, code stroke time, RN/provider's name and reason if any for no lab orders. ED code stroke- lab responds and wait for patient if CT is being performed first. • Manual requisitions ordered. When we get paper results, attach a copy with manual requisition before sending for scanning. • Always document on KPPI for every draw missed and the name of the RN/provider notified. Don't just put "notified charge nurse or doctor" Name is needed for full documentation. 	Phlebotomist
UBT	UBT is working on improving People Pulse question #5: KP provides the resources necessary for me to work effectively. Raquel had put a survey form in your mailboxes. We need your help by responding to this survey. This is due by June 8,2018.	

This concludes the Minutes of the __May 24,2018____ Lab Staff Meeting.

Prepared by: _Marissa Calilung/Theda Bryant_ Date: _5/29/2018_____

Lab Informatics Announcement

SCPMG Laboratory System – Laboratory Informatics Department

EFFECTIVE 05/16/2018

KPHC Order Updates

Announcement: The KPHC Order Codes will be updated for three (3) orders as part of KPHC's Order (EAP) Database Enhancement project and one (1) order to be inactivated due to test discontinuation by outside reference lab.

Changes: Below is the list of KPHC Orders impacted and the reason for change.

KPHC Order Code Replacement		
Old Order	New Order	Reason for Change
ELECTROLYTE PANEL (CO ₂ , CL, K, NA), URINE [80051A]	ELECTROLYTE PANEL (NA, K, CL), URINE [251066]	CPT code to be updated Old = 80051 New = 84300, 84133, 82436
IMMUNOFIXATION ELECTROPHORESIS, SERUM. [86334N]	IMMUNOFIXATION, SERUM [86334K]	KPHC CMT Order Enhancement project – removing duplicate orders
INFLUENZA A/B, RAPID. [208463]	INFLUENZA A AND B ANTIGENS, RAPID IMMUNOASSAY W VISUAL READ [252266]	KPHC CMT Order Enhancement project - correct CPT coding for Billing Compliance

KPHC Order Code INACTIVATION		
Order to be Inactivated	Alternate Replacement Order	Reason for Change
CHROMIUM, BLOOD, DEPUY ASR RECALL [82495G]	CHROMIUM, BLOOD [82495B]	Quest Test Code: 95088 DPY Cobalt, Blood - Discontinued by Quest

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Technical Bulletin

Laboratory Care Delivery System – Regional Reference Laboratories

OSMOLALITY GAP WITH ADDITIONAL RESULTS

Effective **May 16, 2018**, the osmolality gap order, **OSMOLALITY GAP [247022]**, will be reported with additional result fields for sodium, BUN and glucose. Sodium, BUN, and glucose are used together to create the calculated osmolality. The calculated osmolality, measured osmolality, and the osmol gap will continue to be reported as previously. There are no changes to the order code or sample requirements.

TEST INFORMATION

KPHC TEST NAME [KPHC ORDER CODE]	OSMOLALITY GAP [247022]
LRR NAME [CID]	<ul style="list-style-type: none"> • BUN [120484] *new* • SODIUM [1202829] *new* • GLUCOSE, RANDOM [1201382] *new* • CALCULATED OSMOLALITY [12012303] • MEASURED OSMOLALITY [12425852] • OSMOL GAP [12125954]
CPT CODES	84520 84295 82947 83930

QUESTIONS?

- Client Service Center: 1-888-4LAB NFO, or tie line 8-397-7077
- JiYeon Kim, MD, MPH; Physician Director, Esoteric Chemistry & Immunology, Special Coagulation: 818-503-6710 or tie line 8-397-6710
- Vincent Dizon; Director of Operations, Chemistry: 818-503-7050 or tie line 8-397-7050

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SPECIALIZED THYROID FUNCTION TESTS

In the next few weeks, several changes will be made to the KPHC menu of **specialized thyroid function tests** (Table). The common thyroid function tests (TSH, free T4, and total T3) will not be affected.

Table – Specialized Thyroid Function Tests Being Added to or Removed from KPHC Preference Lists

TEST INFORMATION		
Test	Availability	Indication
T4, FREE, EQUILIBRIUM DIALYSIS	Restricted to Endocrinologists and Pediatric Endocrinologists	Immunoassay interference or binding protein abnormalities
T4, TOTAL	Restricted to Endocrinologists and Obstetricians	Pregnant patients with thyroid disorders (controversial*)
T3, FREE, TRACER DIALYSIS	Restricted to Endocrinologists and Pediatric Endocrinologists	Hyperthyroid patients with immunoassay interference or binding protein abnormalities
T3, REVERSE	Restricted to Pediatric Cardiologists	Amiodarone toxicity in kids

*The American Thyroid Association recommends using TSH and either free T4 or Total T4 during pregnancy with trimester-specific reference ranges [Thyroid 2017; 27(3):315]. Published trimester-specific reference ranges for our TSH and free T4 assays will soon be listed in LabNet.

QUESTIONS?

- Client Service Center: 1-888-4LAB NFO, or tie line 8-397-7077
- Darryl E. Palmer-Toy, MD, PhD, Physician Director, SCPMG Regional Reference Core Laboratories: 818-503-7028, tie-line 397

Technical Bulletin

Laboratory Care Delivery System – Regional Reference Laboratories

SERUM OSMOLALITY ORDERABLE

Effective **May 16, 2018**, serum osmolality will be available in the test menu as a separate order, under **OSMOLALITY, SERUM [83930B]**. Serum osmolality reflects the measured concentration of dissolved particles in the blood, and can be influenced by the presence of drugs or toxins, such as aspirin, methanol, or mannitol. Serum osmolality normally increases with dehydration, and decreases with overhydration.

Providers interested in the osmol gap, which includes both the measured osmolality and the calculated osmolality, can order "OSMOLALITY GAP [247022]" instead.

TEST INFORMATION

KPHC TEST NAME [KPHC ORDER CODE]	OSMOLALITY, SERUM [83930B]
LRR NAME [CID]	MEASURED OSMOLALITY [12425852]
CPT CODE	83930

QUESTIONS?

- Client Service Center: 1-888-4LAB NFO, or tie line 8-397-7077
- JiYeon Kim, MD, MPH; Physician Director, Esoteric Chemistry & Immunology, Special Coagulation: 818-503-6710 or tie line 8-397-6710
- Vincent Dizon; Director of Operations, Chemistry: 818-503-7050 or tie line 8-397-7050

Laboratory Care Delivery System Regional Reference Laboratory System

NEW STOOL TESTING ORDERABLE. TRANSITIONING FROM STOOL CULTURE (C STOOL) TO MOLECULAR TESTING (ENTERICPCR).

THERE WILL BE **NO CHANGE** IN THE PREANALYTICAL PROCESSING,
TRANSITIONING FROM C STOOL TO ENTERICPCR.

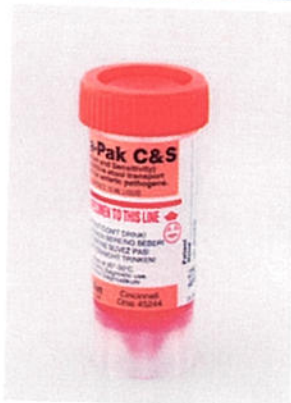
Stool specimens will be collected in the sterile container and then transferred to the Para-PAK C&S (see below) at the collection site.

INSTRUCTIONS:

- Collect the stool specimen in a sterile container.
- Transfer stool to a Para-Pak C&S (orange cap) container for transport to the regional reference laboratories.
- Para-Pak C&S is required for testing.

S C P M G
LABNET
Pathology & Laboratory Medicine

Specimen Container Library



Para-Pak C&S

Type of Container/Media

Liquid Bacteriology Transport

Description:

Para-Pak C&S
(Culture and Sensitivity -
Stool)



REGION REFERENCE LABORATORIES
CHINO HILLS/SHERMAN WAY
Microbiology Departments
1-888-4LAB NFO, or tie line 397-7077